

A briefing paper on the Serenity Integrated Mentoring and providing clarity that this is no longer used by any of the South London Mental Health and Community Partnership Trusts.

1.0 Introduction

This paper provides an update on the Serenity Integrated Mentoring (SIM) which is no longer used by any of the Trusts involved in South London Mental Health and Community Partnership.

This includes South West London and St. George's Mental Health Trust, Oxleas NHS Foundation Trust and South London and Maudsley NHS Foundation Trust.

The paper provides several responses to frequently asked questions regarding SIM.

2.0 Background to SIM

Serenity Integrated Mentoring (SIM) teams were developed by Paul Jennings, a former mental health sergeant from Hampshire Constabulary.

In 2018 Serenity Integrated Mentoring (SIM) was selected as one of the national Academic Health Science Networks (AHSN) programmes for spread and adoption. The Health Innovation Network's with the High Intensity Network (HIN) began when Paul Jennings was selected to be an NHS Innovation Accelerator (NIA) fellow in 2017.

The SIM London Pathfinders Strategic Delivery Board Meeting was responsible for driving forward the implementation of SIM across the SIM south London sites. The Strategic Delivery Board provided the platform for system partners to share and promote learning from each of the three south London sites with the view to sharing relevant learning with upcoming London and national SIM sites. The Health Innovation Network chaired and coordinated the SIM Strategic Delivery Board. The SIM London Strategic Delivery Board reported to the London Mental Health Transformation Board.

High Intensity Network Limited is a private limited company which was incorporated in November 2018 and Paul Jennings is listed a Director.

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Q. What is Serenity Integrated Mentoring?¹

SIM carefully selects and trains police officers and police staff alongside their clinical colleagues. Together they learn about the trauma and triggers that lead to high intensity behaviour, they discuss how best to manage risk and how to ensure that the service user does not keep on repeating the same high risk, high harm behaviour. It is demanding and intensive work but can bring significant breakthroughs in the lives of people whose behavioural risks are likely to result in them entering the criminal justice system or even worse, dead from accidental suicide.

Q. What was the evidence base for using the Serenity Integrated Mentoring?²

SIM intervention teams slowly reduce the pattern of high risk, high harm behaviour. Every patient is different, but the best results so far have seen crisis calls and demand reduced by up to 90%.

Health economic analysis has demonstrated that this type of intensive crisis behaviour can cost police, ambulance, emergency departments and mental health services between £20,000 and £30,000 a year per patient. It is estimated that there are around 550 people across the UK who place these repeat demands upon services.

Based on its success, in 2016 SIM was adopted by the NHS Innovation Accelerator programme, and in 2018 it was selected for national scaling and spread across the Academic Health Science Networks (AHSN).

In 2018 Serenity Integrated Mentoring (SIM) was selected as one of the national AHSN programmes for spread and adoption.

Q. What was the governance for using the Serenity Integrated Mentoring?

The SIM London Pathfinders Strategic Delivery Board Meeting was responsible for driving forward the implementation of SIM across the SIM south London sites.

The Strategic Delivery Board provided the platform for system partners to share and promote learning from each of the three south London sites with the view to sharing relevant learning with upcoming London and national SIM sites.

The Health Innovation Network chaired and coordinated the SIM Strategic Delivery Board.

The SIM London Strategic Delivery Board reported to the London Mental Health Transformation Board.

¹ Extract from Academic Health Science Networks (AHSN) website

² Extract from Academic Health Science Networks (AHSN) website

Q. Why was Serenity Integrated Mentoring reviewed by the South London Mental Health and Community Partnership?

The South London Mental Health and Community Partnership undertook a review of the development and operation of the SIM project within its Trusts to include the governance framework and data quality for the SIM model in south London Trusts.

Q. Who was involved in the Serenity Integrated Mentoring review and what did it cover?

Current and former service users of the SIM project were invited to contribute to the review which helped shape the outcome.

The review took place during early summer 2021 and covered themes such as compliance with NICE guidance, governance, data sharing arrangements, service user experience and staff experience.

Q. What was the outcome of the Serenity Integrated Mentoring review?

The review found that overall the experience of SIM by staff and service users was positive and it has provided the South London Mental Health and Community Partnership with assurance. The review also provided information on how the SIM project could be improved e.g. governance and data-sharing if it was to be continued.

After careful consideration the South London Mental Health and Community Partnership Trust unanimously agreed to no longer continue with the SIM after March 2021.

Q. What will replace Serenity Integrated Mentoring

As of March 2021, all three Trusts that form the South London Mental Health and Community Partnership have stopped using SIM and there is no direct replacement.

However, the following support continues to be available:

- Multi-disciplinary mental health support for service users
- Care co-ordinators are continuing to work with service users drawing on NICE recommended interventions
- A Psychology led Intensive Case Management team have been coordinating care drawing on detailed care plans for each partner Trust.
- Practice based on these care plans continues to support service users.
- Service users can access crisis services available at all three Trusts.

Care co-ordinators are continuing to provide support for service users.

Q. What steps will the South London Mental Health and Community Partnership take on for future joint working with partner agencies

Partnership working is essential to deliver a joined-up service for people who need help. The South London Mental Health and Community Partnership has agreed the following principles will be used for interagency working:

- All partner Trusts to contribute to any discussions which are planned about joint working between police, London Ambulance Service and Mental Health Trusts.
- Any new approach must be co-produced with our service users and carers at the heart of its design.
- Multi-agency working should be supported by adequate Data Sharing Agreements between agencies with clear processes in place.
- Any new approach to multi-agency ways of working to supporting high frequency users of services should benefit from an independent evaluation to support service improvements.