

East Sussex Assembly 2016
13 September 2016, International Tennis Centre, Eastbourne

CONFERENCE REPORT

RECOMMENDATIONS

The ESSP is recommended to:

1. Note the content of the presentations given to the Assembly;
2. Note the pledges made by organisations and individuals that attended the Assembly; and
3. Note the feedback and suggestions for next year's Assembly theme.

BACKGROUND

The East Sussex Assembly meets once a year and focuses on a topic that is of interest to Assembly members and wider partners. This year around 55 delegates attended from organisations across the public and voluntary and community sectors to discuss the topic of mental health. The theme of mental health was selected from a list of recommendations made by Assembly members at last year's conference.

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S1. INTRODUCTION

The East Sussex Strategic Partnership's (ESSP) Pride of Place strategy includes the priority 'to protect and improve health and wellbeing and reduce health inequalities in East Sussex'. One of the key tasks set out to deliver this priority is to: 'enable people to manage and maintain their mental health and wellbeing so that they and their carers are able to manage their condition better and maintain their physical health.'

The East Sussex Mental Health Directory of Community Support (www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory) recognises the impact that physical and mental health have on one another, and the importance of taking care of both to ensure personal wellbeing. The Directory also outlines the array of projects and services that are currently being delivered by public and voluntary and community sector organisations across East Sussex to support residents with mental health conditions and generally improve the mental health and wellbeing of residents.

The 2016 Assembly offered an opportunity for these organisations and projects to share information about the work they are doing, in particular to support vulnerable people and those with multiple and complex needs. Service providers and service users attended to learn about existing East Sussex services and consider ways that services could work more effectively in partnership.

As the ESSP membership includes major public sector employers and other leaders within their sectors the event was also felt to be a useful opportunity to examine the contribution that could be made to support those with mental health issues and combat the stigma and discrimination which are, regrettably, still associated with this issue.

S2. ASSEMBLY ITEMS

Nazeya Hussain, Director of Regeneration & Planning at Eastbourne Borough Council, opened the Assembly by welcoming attendees to the International Tennis Centre and providing an overview of planned local regeneration work. ESSP Chair Steve Manwaring then welcomed everyone to the Assembly and explained why mental health had been chosen as the 2016 Assembly theme.

2.1 Overview of East Sussex Mental Health Services

2.1.1 Sussex Partnership NHS Foundation Trust

Following Steve Manwaring's introduction, Dr Mokhtar Isaac from Sussex Partnership NHS Foundation Trust, gave a presentation which provided an overview of mental health services in East Sussex, and outlined the Trust's strategy to 2020.

Dr Isaac set out Sussex Partnership NHS Foundation Trust's:

- Vision for 2020 – 'to provide outstanding care and treatment patients can be confident in';
- Purpose for 2020 – 'to work with patients, support their recovery, and provide them with the care and treatment they need when they need it'; and
- the five Goals the Trust aims to meet by 2020 –
 1. Safe, effective, quality care
 2. Local, joined up patient care

3. Put research, innovation and learning into practice
4. Be the provider, employer and partner of choice
5. Live within our means.

Over 400 staff work for the Trust, delivering adult mental health services, children and adolescent mental health services, learning disability services and forensic services in East Sussex. The Trust also has close working relationships and service delivery arrangements with Local Authorities, community providers and the ambulance and police services.

As part of the presentation, Dr Isaac covered the make-up of the East Sussex population that the Trust delivers services to, highlighting the high proportion of residents over 65. Dr Isaac also covered GP reported prevalence of mental health disorders: across the whole of East Sussex reported prevalence of mental health disorders is 10 per 1000 population. Prevalence is highest in West Hastings where 16 per 1000 population have a reported mental health disorder.

For further information about the services provided by Sussex Partnership NHS Foundation Trust please access their website at www.sussexpartnership.nhs.uk

2.1.2 Healthwatch

Phil Hale, a volunteer for Healthwatch East Sussex (HWES), followed Dr Isaac with a presentation on patients' views and perspectives of mental health provision in East Sussex.

The first part of the presentation outlined the feedback on mental health services that Healthwatch have received from patients. HWES conducted five mental health listening events around East Sussex between December 2013 and February 2014. Findings from the listening events were published in a report in July 2014, which recommended that further reviews were undertaken to consider patients' experiences of using the Mental Healthline and Children and Adolescent Mental Health Services (CAMHs).

The results of these reviews were published in two reports in August 2015.¹ The main themes in the findings of the review were:

- consideration should be given to how CAMHs waiting times could be reduced - the overwhelming view of the CAMHs service in August 2015 was that the service was very good but waiting times were too long (on average 18 weeks);
- the Mental Healthline should work on managing expectations of the level of support that could be provided for individuals via a telephone services; and
- calls to the Mental Healthline were time limited and of variable quality.

HWES collected further feedback about mental health services in July 2016 and found that since the listening events were first conducted in 2013/14:

- fewer individuals in crisis are directly contacting HWES with concerns about local services;
- however, some individuals are still experiencing difficulties access support when in crisis;
- there are examples of individuals in the community wanting to assist fellow residents but encountering problems when trying to access professional support;

¹ All Healthwatch East Sussex reports can be accessed at (www.healthwatcheastsussex.co.uk/our-work/our-reports)

- information and education about mental health has improved; and
- concerns have emerged around older people experiencing social isolation, whether they live in the community or in care homes.

The second part of the presentation considered how HWES can work in partnership with other organisations to support and improve the lives of people with mental health problems. HWES plan to continue to gather independent views and feedback from local people, make those views known to partners to achieve service improvements, and take part in discussions through mechanisms such as the Mental Health Partnership Board, bi-monthly meetings with the Care Quality Commission and feeding into future local and national publications.

For further information about Healthwatch East Sussex's work to capture patients' experience of mental health services please contact Elizabeth Mackie at liz.mackie@escv.org.uk

2.2 Table Top Exercise

Following the introductory presentation on East Sussex Mental Health Services, attendees took part in a table-top exercise. The exercise involved attendees reading a scenario and then considering: if they, or another person from their organisation, came into contact with the scenario, what could they do to assist the person? Participants were encouraged to consider whether they would assist by referring the person to another service, or work in partnership with another organisation.

Each table considered one of the following scenarios:

Scenario 1: *M is an ex-offender who is living with his girlfriend in social housing but the relationship is breaking down and he is at risk of homelessness. He has limited qualifications and no job. He is diagnosed with schizophrenia and has problems with substance misuse. He has diabetes, which is not under control.*

Scenario 2: *S is a newly qualified social worker who often works alone and depends on her car to reach appointments. S has recently been diagnosed with epilepsy and is struggling to come to terms with the diagnosis, which is preventing her from driving and working alone. S is currently continuing to carry out the office-based aspects of her work, but is showing signs of depression.*

Scenario 3: *You come into contact with a person unknown to you who is in crisis and verbalising suicidal intentions.*

Scenario 4: *T is an 89 year old living in his own home in a small village. His wife died 3 years ago and T is becoming increasingly isolated as it was his wife who held a driving licence and organised social activities. T relies on the local shop for all of his needs. Aside from speaking to the cashier, T hasn't seen or spoken to anyone else in 5 weeks.*

Scenario 5: *D is L's line manager. D knows that L is currently experiencing money problems and is at risk of redundancy. D has spoken to L, who says she's fine but D has noticed unusual behaviour, such as missing deadlines, arriving at work late and being short tempered with colleagues and clients.*

Scenario 6: *P was attacked a year ago in a local park that she has to walk through every day to get to work. P had counselling and support after the incident but 2 months ago had a panic attack in the park and is now walking an extra 20 minutes to work every day to avoid walking through the park.*

Scenario 7: *N is a 65 year old male, who has previously experienced health anxiety. His wife S has noticed that he is becoming forgetful but is concerned about raising the issue with him for fear of triggering his health anxiety. However, P is increasingly concerned for her and N's safety following an incident where the fire service was called when N left cooking food unattended in the kitchen which caught alight.*

Scenario 8: *B is a single mother of two teenage boys. One of her sons, S, is being bullied at school and has become withdrawn. B has seen evidence that S is self-harming.*

After discussing a scenario, each table then fed-back to the Assembly how they would work to assist the person in question. All tables fed back that more than one organisation or service would interact with or assist the person in their scenario, and during the exercise many participants discovered new services they could sign-post service users to the future.

A contact list (attached as Appendix 1) was then circulated, containing details of organisations in East Sussex that could be useful to contact when dealing with the issues and situations discussed during the exercise.

2.3 Presentations

Following the Table Top Exercise, attendees had an opportunity to network and view market place stands from the following voluntary and community sector organisations delivering mental health services in East Sussex:

- Alzheimer's Society
- Counselling Partnership – Support for survivors of suicide
- East Sussex Recovery College
- HealthWatch East Sussex
- High Weald Lewes and Havens CCG
- Icepro
- i-Rock
- Mind in Brighton & Hove
- Southdown Housing
- Sussex Oakleaf Wellbeing Centres

The Assembly then received presentations from projects in East Sussex that are delivering services for vulnerable residents or those with multiple and complex needs.

2.3.1 Sussex Police

Sarah Gates from Sussex Police gave a presentation on the Street Triage initiative to support people in crisis, delivered by Sussex Police in partnership with Sussex Partnership NHS Foundation Trust.

Street Triage began as a national pilot in 2013, funded jointly by the Department of Health and the Home Office. Sussex Police was one of four forces selected to run the pilot. The project was first rolled out in Eastbourne in October 2013 and, due to the success of the pilot, funding was extended to April 2017 and the project geography was expanded to incorporate Hastings.

The Street Triage project involves clinical mental health staff accompanying police officers to emergency mental health incidents. These clinical staff help officers decide the best option for individuals in crisis by:

- offering professional advice on the spot;
- accessing health information systems;
- identifying the right kind of support required for individuals; and
- helping to liaise with and access other care services.

The aim of the project is to achieve earlier, timely intervention that can prevent future escalation, reduce Mental Health Act (1983) s136 detentions and, reduce the number of patients being detained in police custody.

The success of the project is primarily exemplified in the reduction in s136 detentions, which have reduced by over a third in East Sussex in the same period that other police forces have seen an increase in detentions. Other figures from the project include:

	Eastbourne	Hastings
People referred	2030	1021
People assessed	1421	625
People detained under s136	135	42
S136 avoided	484	124
People arrested	55	42
Busiest day	Sunday	Thursday
Gender	50/50 split	More men than women
Age range	10-92 years	10-91 years

The benefits of the project have been:

- services have been moved into the community at the point of crisis;
- focus has been places on preventing the escalation of a situation;
- GPs have been provided with the details of each patient intervention;
- partnership working between health services and police officers has improved;
- understanding of mental health by the police has improved; and
- commitments made within the Mental Health Crisis Care Concordat have been delivered.

Sarah also provided anecdotal evidence of the benefits that the project has had on individuals, such as that a suicidal male who had previously been detained up to three times a week has not been detained once since the project has been rolled out.

Street Triage is funded in Eastbourne and Hastings to the end of March 2017, and local consideration is being given to exploring ways to fill gaps where Street Triage is not able to deliver.

For further information about the Street Triage project please contact Sarah Gates at Sarah.Gates@sussex.pnn.police.uk

2.3.2 Fulfilling Lives Project

Jo Rogers and Eleanor Busby from Brighton Housing Trust gave a presentation on the Fulfilling Lives Project.

The South East Fulfilling Lives Project operates across Brighton & Hove, Eastbourne and Hastings and is one of twelve projects nationally funded for eight years by the Big Lottery Fund. The project aims to support people with multiple and complex needs (such as mental ill health, homelessness, drug and alcohol misuse and offending) and build evidence of more effective and efficient ways for designing, commissioning and delivering support services for this group.

Each local team in Brighton & Hove, Eastbourne and Hastings is made up of two frontline specialist workers and a Service Improvement Officer who focuses on systems change, overseen by an area lead. Each team undertake new interventions, pilots, or ways of working with the client group and Service Improvement Officers then review and redesign systems.

The project has three overarching outcomes it aims to achieve:

1. It will change lives

The aim is that individuals experiencing multiple and complex needs will benefit through better established partnerships and networks. So far the project has worked with 54 clients. Work with each client is characterised by three key principles:

- trauma informed care – 100% of clients have experienced trauma during childhood and an awareness of this is essential in building supportive relationships;
- assertive outreach – ensuring frequent engagement, offering clients a mobile phone, practical support, persistent and non-judgemental support; and
- case coordination of care and support – integrated and reinvigorated multi-agency working around an individual's complex needs.

Some of the outcomes that have been achieved through this work include reduced drug and alcohol use, reduced offending and re-established contact with family.

2. It will change systems

It is expected evidence will be produced showing which elements of the programme are effective, and that local and national decision-makers will then be encouraged to review and adopt these elements where appropriate. So far in the project, specialist workers working with clients have witnessed system failures which they will be able to turn into case studies to highlight and influence the need for change. The changes that are proposed are verified and tested by people with lived experiences.

To date, the System and Service Review process has led to action plans for the following improvements being agreed:

- improving access to recovery groups by providing satellites in other services in Eastbourne;
- improving awareness of services available by creating a homeless map and service directory in Eastbourne;
- reviewing the local implementation of Severe Weather Emergency protocols for rough sleepers in Hastings;
- training on multiple and complex needs for ward staff in Millview hospital Brighton; and

- information sharing and joint care planning between hostels and substance misuse services in Brighton.

3. It will involve beneficiaries

The aim is that both positive changes to individuals and system change will be underpinned by the collaborative involvement of individuals with lived experience. Project Consultants are roles within the project, open to service users, which provide a route into employment. To date, 11 Project Consultants have moved onto other employment. In addition to employment opportunities, service users are represented at all levels of governance within the project and are involved in the staff and delivery teams recruitment process. As part of the presentation, Eleanor Busby, a Project Consultant, provided an account of her experiences with Fulfilling Lives.

Finally, Jo outlined the next phase of the project. Years 1 and 2 of the project focused on building the project's local profile, implementation and service delivery. Now moving into year 3 and 4, the focus will be on building momentum for systems change and taking the model of effective service user involvement to external forums. Over the next few months, the Fulfilling Lives Project will hold a number of learning events which will be publicised locally, where they hope to work with new organisations and form new partnerships.

For further information about the Fulfilling Lives Project please contact Jo Rogers at jo.rogers@bht.org.uk

2.3.3 Sussex Recovery College

Debbie Rimmer and Karen Swain from Sussex Partnership NHS Foundation Trust gave a presentation on the Sussex Recovery College.

The Sussex Recovery College offers educational courses about mental health and recovery which are designed to increase knowledge and skills and promote self-management. The Recovery College is not a substitute for traditional assessment and treatment services, but it does compliment them, and it is also not a substitute for mainstream colleges, although it can provide a route onto mainstream education. Sussex Recovery College have campuses in East Sussex, Brighton & Hove and West Sussex and work in partnership with organisations such as Sussex Wildlife Trust and Sussex Downs College to deliver courses.

In the Recovery College setting, a service user or patient becomes a student, they make a choice of course from a prospectus instead of a referral or prescription, therapists are trainers or teachers and instead of being discharged, students graduate with a certificate to recognise achievement. Examples of courses provided by the Recovery College include Understanding Psychosis, Coping with Anxiety or Managing Depression, Finding Happiness, and Work for Wellbeing.

In 2015, 85% of Recovery College students improved their knowledge and/or skills moderately or a great deal and 97% said they were likely or extremely likely to recommend the course to others. 95% of students met personal goals and course learning outcomes. When asked about the course they undertook with the Recovery College, students said:

'I feel more able to take control of my own recovery'

'It was the equality, learning from peer trainers and professionals that helped'
'Thanks to the Recovery College I have got my sister back'
'It was helpful to learn techniques to help me manage my anxiety'
'I also made so many friends. I feel included, not alone.'

For further information about the Sussex Recovery College please contact Debbie Rimmer at Debbie.rimmer@sussexpartnership.nhs.uk

2.4 Pledge

At the end of the Assembly, attendees were asked to make two pledges to encourage the application of learning from the conference. First, attendees were asked to consider ways they could maintain and/or improve their own personal mental health. Themes in the pledges made include exercising more, spending more time in nature, battling stigma around mental health, undertaking self-care, practicing mindfulness, connecting with others and striking a work life balance.

To maintain and/or improve my personal mental health I pledge to...

- 'take time to do some exercise.'
- 'keep active.'
- 'look after my wellbeing – do more exercise.'
- 'find more time to walk in the woods and kick the leaves.'
- 'walk along the seafront at least 4 times per week.'
- 'meditate more often.'
- 'walk in the countryside. '
- 'ask for help when I need it.'
- 'make more time for me.'
- 'be kind to myself and my family more. Focus on things that are important in the bigger picture – don't sweat the small stuff!'
- 'continue to fight against stigma and value my recovery.'
- 'always be honest and open about how I'm feeling and encourage others to do the same.'
- 'share knowledge about wellbeing and reduce stigma about mental health.'
- 'practice daily mindfulness.'
- 'continue to think and reflect on mindfulness in order to balance my work and home life and ensure I stay well and happy.'
- 'investigate mindfulness more. I can live too much in the future and past and not appreciate the here and now.'
- 'practice mindfulness.'
- 'have a cut off time for checking emails and working in the evenings.'
- 'use my 'out of office' properly when I'm on annual leave.'
- 'connect more effectively.'
- 'keep getting involved with others.'
- 'be more open to new ideas from individuals.'

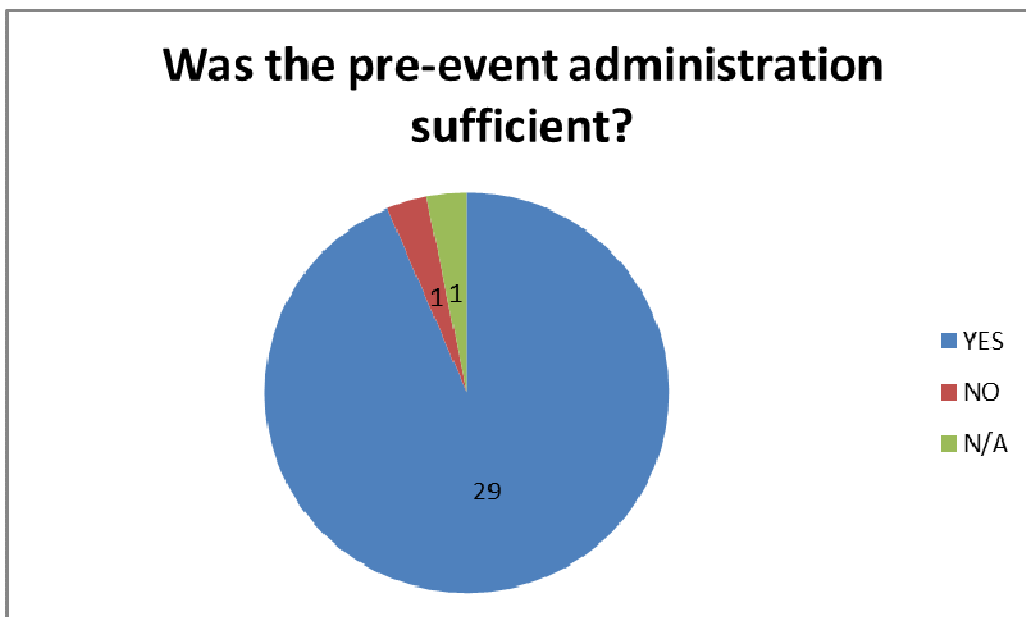
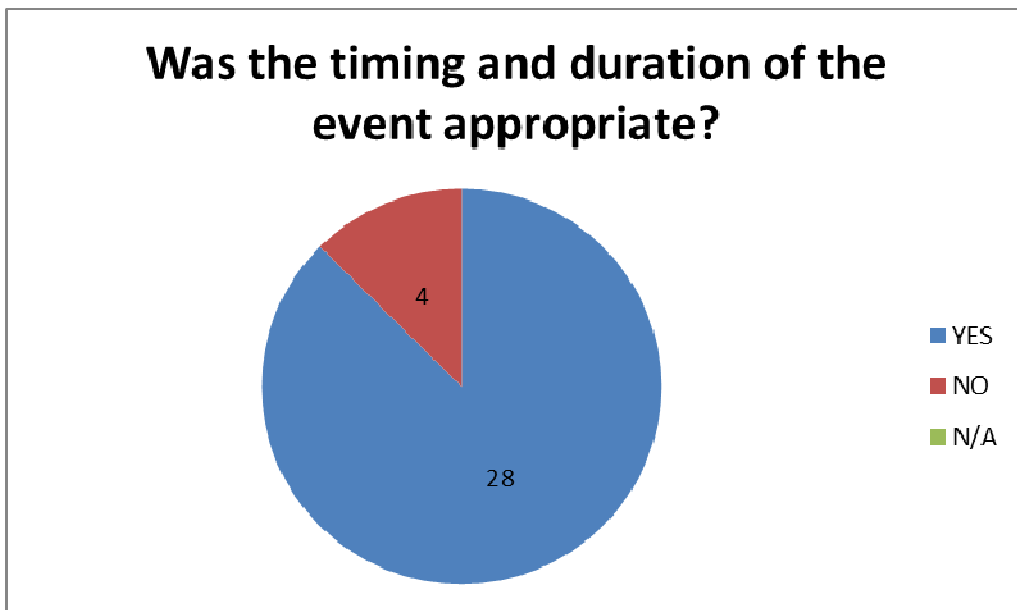
Attendees were then asked to consider things they could do in their organisation to maintain and/or improve the mental health of others. Some made pledges to help their colleagues, whereas others considered how the work their organisations were delivering could help those living in the community with mental health problems. Themes in the pledges made by attendees included working with partners, signposting to services and sharing information, and listening and talking openly about mental health with colleagues.

<i>To maintain and/or improve others' mental health within my organisation I pledge to...</i>
<p>Pledges to support colleagues</p> <ul style="list-style-type: none"> • 'develop and strengthen the staff wellbeing work we have already begun.' • 'be more open about my experiences with a mental health condition.' • 'take time to talk to colleagues and volunteers about how they are.' • 'have a cup of tea and chat to others at work.' • 'listen to my colleagues and talk through difficult cases with them.' • 'keep effective team supervision at the top of the agenda across my organisation.' • 'continue to work with others to enable all colleagues to better understand mental health generally.' • 'champion good work/life balance to support our team to care for themselves.' • 'work to deliver our wellbeing strategy to enable staff to discuss wellbeing issues.'
<p>Pledges to support service users</p> <ul style="list-style-type: none"> • 'improve signposting to the range of services and access routes I learnt about today... sharing them with our officer and Member mental health champions and contact centre staff.' • 'cascading information from today regarding support services.' • 'signpost staff and claimants to a range of East Sussex Mental Health services.' • 'ensure councillors are aware of our mental health champion and can signpost residents when needed.' • 'encourage the fuller integration of services to include mental health as part of East Sussex Better Together.' • 'build on partnerships already there to provide better linked up services.' • 'continue to list and offer support as necessary.' • 'make East Sussex Fire and Rescue Service a Dementia friendly organisation and improve the understanding of mental health more widely.' • 'improve the health, safety and wellbeing of vulnerable members of the community.' • 'learn how to access hard to reach groups to receive health and social care feedback.' • 'carry on supporting clients.' • 'continue developing Recovery College courses and supporting its progress.' • 'identify and attend mental health partnership meetings to represent dementia.' • 'ensure that leaflets on suicide prevention information are distributed more widely in East Sussex.' • 'continue to ensure that clients are central to service delivery.'

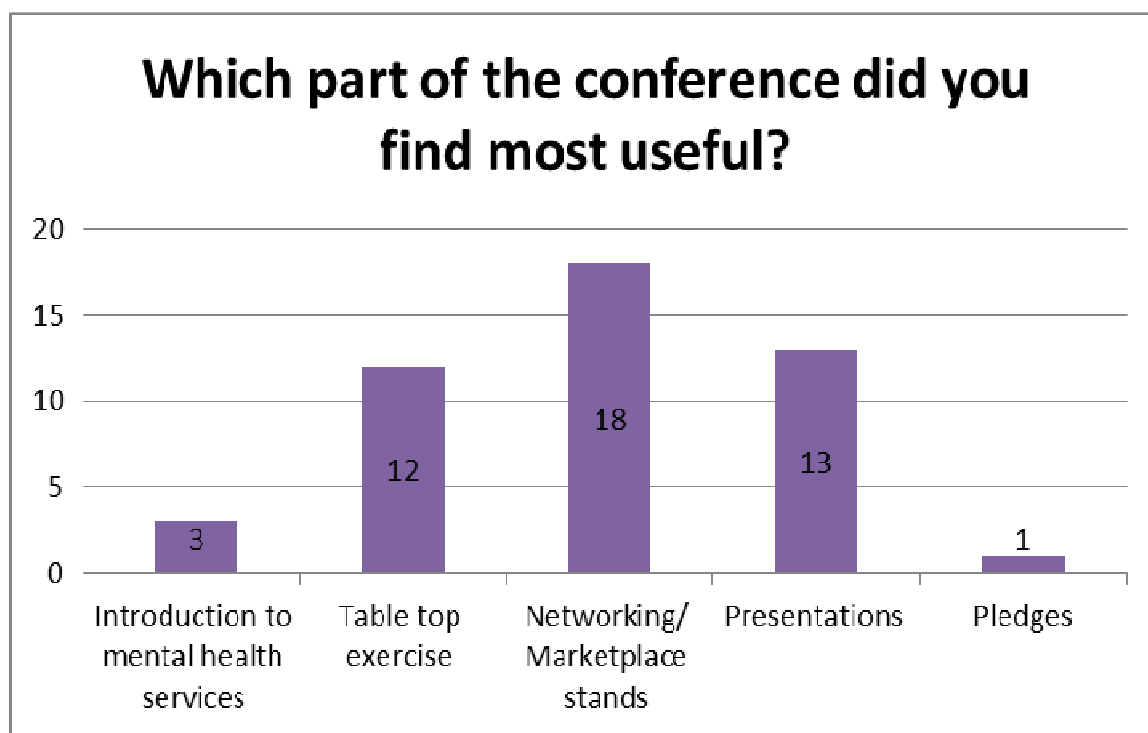
S3. FEEDBACK

At the end of the conference all delegates were provided with an event feedback form. The following results are based on the 32 completed forms returned by attendees at the Assembly.

	Yes	No
Did the conference meet your expectations?	100%	-
Was the content appropriate?	100%	-



Attendees were asked which part of the Assembly they found most useful. Most participants found the opportunity to network and view marketplace stands particularly useful. One respondent said they found the networking segment an opportunity to make good contacts and share information on the important work their organisation is doing. Others said they found the table top exercise particularly useful, especially the opportunity to learn from other providers, consider partnership working in practice and and gain a list of contacts.



Attendees were also asked which part of the conference they found least useful. The majority of respondents found the whole Assembly useful, while others gave the following suggestions for improvement:

- Shorter, less detailed presentations
- Presentations from projects that cover the entire geography of East Sussex
- More time for networking and viewing marketplace stands
- More opportunities to interact with speakers

Overall, the evaluation forms found that attendees regarded the content of the event appropriate, informative, and useful. We will continue to ensure that content is relevant to organisations invited to future events. Attendees' suggestions for next year's focus will be considered when planning the 2017 Assembly. The suggestions were:

- Loneliness
- Road Safety
- Business Opportunities
- Partnership Working
- Housing and Homelessness
- Rural Access and Service Provision

- Sustainable Funding
- Employability and Skills
- Children and Young People
- Carers
- Volunteering
- Disability
- Public Sector Funding
- Later Life Wellbeing

RECOMMENDATIONS

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2. Note the pledges made by organisations that attended the Assembly; and
3. Note the feedback and suggestions for next year's Assembly theme.

NEXT STEPS

Consider how ESSP can best support organisations delivering mental health services and support for residents of East Sussex.

Contact:

Sarah Feather

01273 335712

Sarah.Feather@eastsussex.gov.uk

C6E, County Hall, East Sussex County Council
St. Anne's Crescent, Lewes, BN71UE

Below is a list of contacts that could be useful when dealing with the issues and situations covered in this exercise.

For further information about these services, or other mental health services in East Sussex, go to www.eastsussex1space.co.uk or see the East Sussex mental health directory: www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory

Mental and Physical Health Conditions

Anyone with concerns about their physical or mental health should visit their GP to discuss treatment and further referrals. Alternatively they can visit the Eastbourne (T: 01323 726650) or Hastings (T: 01424 884410) walk in centres.

The following services provide counselling, other tailored support and recovery options for people with mental health conditions:

- **Health in Mind** T: 03000 030130 E: spnt.healthinmind@nhs.net W: www.healthinmind.org.uk
- **Sussex Oakleaf Wellbeing Centres** W: www.eastsussex1space.co.uk/Services/1408
- **Together Wellbeing Centres** W: www.eastsussex1space.co.uk/Services/1431
- **Counselling Plus** T: 01424 428300 E: admin@counsellingplus.org
- **East Sussex Recovery College** T: 0300 303 8086 E: enquiries@sussexrecoverycollege.org.uk
- **Recovery Partners** T: 07960 122525 E: l.desai@recovery-partners.co.uk

Alzheimer's Society provide information and practical and emotional support to help people living with dementia T: 01424 773687 E: east.sussex@alzheimers.org.uk

i-Rock provide a drop-in service for people aged 14-25 in Hastings that want to discuss their mental health and emotional wellbeing E: viki.ashby@sussexpartnership.nhs.uk

The **Sussex Mental Healthline** telephone service provides support and information to anyone experiencing mental health problems. The service is also available to carers and healthcare professionals T: 0300 5000 101

Mental Health Crisis and Suicide

Mind's website (www.mind.org.uk) provides a range of information on services available to resolve, or support someone in, a mental health crisis:

Crisis service	Situations where this service can help
A&E	Immediate medical help is required – if a person in crisis might act on suicidal thoughts, or is harmed and needs urgent medical attention
Emergency GP appointments	Urgent support is required but there no immediate danger to their safety or the safety of others
Listening services	<p>Helplines for people in crisis that need to talk to someone right away about how they're feeling:</p> <p>Samaritans - T: 116 123 (24 hours per day, 365 days a year)</p> <p>SANEline - T: 0300 304 7000 (6pm-11pm, 365 days a year)</p> <p>CALM - T: 0800 585858 (5pm-midnight, 365 days a year)</p> <p>Switchboard (LGBT+ helpline) – T: 0300 330 0630 (10am-11pm, 365 days a year)</p>

Mind also offer an online service for anyone experiencing a mental health crisis that can be accessed at www.mind.org.uk/i-need-urgent-help, which provides on the spot information on where to go and who to speak to in a crisis.

Grassroots Suicide Prevention provide training courses on Suicide Prevention, as well as Mental Health First Aid and Mental Health Awareness W: www.prevent-suicide.org.uk, E: office@prevent-suicide.org.uk

Counselling Plus provide support for people affected by suicide or attempted suicide, including families, carers, friends and colleagues T: 01273 519108 W: Sharon@sussexcommunity.org.uk

Debt and Money Advice

Local **Citizen's Advice Bureau's** provide advice on money and benefits, housing, and relationships. T: 03444 111444 W: www.eastsussexcab.co.uk

The Welfare Benefit Helpline provides information for people to help understand the changes to benefits and welfare reform T: 0333 344 0681 Please note that this service is only available within the Hastings and Rother Clinical Commissioning Group (CCG) area and the Eastbourne, Hailsham and Seaford CCG area.

Discretionary East Sussex Support Scheme provides emergency help in certain situations. The scheme does not provide cash or loans but may provide the food, utilities or household items that a person may need. T: 0300 330 94 94 E: dess@eastsussex.gov.uk

Offending Rehabilitation

Kent, Surrey and Sussex Community Rehabilitation Company (Seetec) deliver a range of rehabilitation services W: <http://ksscrc.co.uk/contact-us>

Sussex Pathways is a social mentoring scheme that trains volunteers to empower offenders to make positive life choices by supporting their resettlement into the community T: 01273 468160 E: sussexpathways@googlemail.com

Reaching your Potential (RYP), delivered by Sussex Central YMCA, help assist youth offenders in re-joining the community T: 01273 222550 E: website@sussexcentralymca.org.uk

Homelessness

Brighton Housing Trust provide a comprehensive range of services to meet the needs of homeless, insecurely housed and vulnerable men and women T: 01273 645400 W: www.bht.org.uk

Southdown Housing deliver HomeWorks a service for people aged 16-64 that are homeless or at risk of homelessness T: 01273 898700 E: referrals@home-works.org.uk

Eastbourne Homes deliver STEPS, which provides short term support for people 65 or over at risk of homeless, already homeless, or living in poor quality or unsuitable accommodation W: www.eastbournehomes.org.uk

Shared Lives provides accommodation-based support to enable a range of people, including ex-offenders to live their life to the full in their communities T: 01323 747415 E: matt.holmes@eastsussex.gov.uk

Substance Misuse

Support and Treatment for Adults in Recovery (STAR) – East Sussex's Drug and Alcohol Service can be used by anyone who is concerned about their or someone else's drinking or use of drugs T: 0300 303 8160 W: www.thinkdrinkdrugs.co.uk

Coastal Wellbeing offer Wellness Recovery Action Plan courses for people who are thinking about stopping their drug or alcohol use T: 07507 734 370 W: www.coastalwellbeing.co.uk

Skills

Horizons Community Learning offer a range of free vocational and non-vocational qualifications, CV advice, and volunteering and work experience opportunities for people of all ages T: 01424 204136 E: horizonscourseenquiries@gmail.com

Southdown Housing provide one-to-one support to gain and retain employment T:01273 405822 E: l.kirby@southdownhousing.org. **Southdown Housing** also provide support for people

with mental health needs and people with Autism and mental health needs to take part in community activities to develop existing and new skills T: 01273 749500 E:

c.links@southdownhousing.org

Diversity Resource International offer life coaching and mentoring to help people from migrant and culturally diverse communities develop the skills and confidence they need to achieve their goal W: www.dricic.org/contact-us

Bullying

East Sussex Czone (<https://czone.eastsussex.gov.uk>) and **Connexions 360** (www.c360.org.uk) have extensive advice on what to do if a child you know is being bullied

Social isolation

East Sussex Fire and Rescue Service provide home safety visits to vulnerable households at risk of fire T: 0800 177 7069 W: www.esfrs.org/your-safety/home-safety-visits

3VA provide Health and Wellbeing Visits to vulnerable older people that face social exclusion to reduce health inequalities and increase life expectancy T: 01323 462437

E: info@healthandwellbeingproject.org

The Links Project is a multi-agency partnership that provides a weekly drop in offering support and advice for the excluded BME population living in Hastings and Rother T: 01424 444010

E: marc@hvauk.org

Relationships

Relate Sussex provide a range of counselling services to people going through a difficult time in their relationship T: 01273 697997 E: reception@brightonrelate.org.uk

Disability and Carers

Support Empower Advocate Promote Advocacy (seAp) provide c-App, a web based app providing guidance, advice and support for people undergoing ESA and PIP medical assessments w: www.c-app.org.uk

Care for the Carers offer a range of services including specialised support for carers of people with mental health needs T: 01323 738390 E: info@cftc.org.uk

Icepro specialise in information for carers supporting someone with mental health issues T:01273 617100 E: jane.icepro@btconnect.com

Are you aware of other organisations that could provide useful support or information in these situations? Let us know at ESSP@eastsussex.gov.uk and we'll circulate an updated contact list after the Assembly.