

Embedded and emerging good practice in health and social care

Aligned to the [Framework for Community Health and Social Care Integrated Services](#)

Health and Social Care Partnership: Dundee City				
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Name of good practice: The ASPEN Project: embedding specialist trauma informed care and treatment within Dundee Women's Aid				
Select (x) all areas that apply to your good practice (select more than one if applicable)				
CLIENT GROUP	Children and young people		Older adults	
	Younger adults	x		
SETTING	City	x	Remote & rural (incl islands)	
	Corporate		Urban	
SERVICE AREA	Addictions	x	Management team	
	Admission avoidance		Mental health	x
	Community care services incl care at home/care homes		Physical disabilities	
	Day services		Physical health	
	Housing incl Homelessness	x	Primary care	
	Intermediate Care incl Hospital at Home		Rehabilitation	
	Justice services	x	Social care services	
	Learning disabilities		Supported discharge	
	Other – please specify			
ELEMENTS of FRAMEWORK	Anticipatory care planning		Live independently at home or in a homely setting	
	Assets based approach		Manage own care	
	Connect with communities	x	Reablement	
	First point of contact	x	Seamless working with acute	
	Enhanced care in care homes / supported accom		Short term targeted interv to meet more complex needs	x
	Fully integrated community teams		Teams aligned with general practice	
	Other – please specify			
ENABLERS	Agile working		Information sharing	
	Aligned plans		Infrastructure	
	Clarity of vision	x	Management information	
	Clinical and care governance		Shared accountability	
	Collaborative leadership	x	Strong team ethos	x
	Culture and values	x	Technology	
	Fit for purpose premises		Well-developed lead professional roles	
	Improvement capacity		Well-developed relationships	x
	Other – please specify			

Dundee City HSCP

The ASPEN Project: Embedding specialist trauma informed care and treatment within Dundee Women's Aid

SITUATION	<p>There is a significant group of women whose level of need is prohibitive to them being able to access mainstream mental health services. The <i>Gendered Approach to Service Provision Research</i> (Lopez and Smith, 2019) and the <i>Responding to Drug Use with Kindness, Compassion and Hope</i> (Dundee Drugs Commission, 2019), demonstrate the need to design services differently for women. Both reports recognised that many women were not accessing the services that are currently available in Dundee, and where they did access the services they often disengaged. This pattern is identified in other research, both nationally and globally.</p> <p><i>Breaking Down the Barriers</i> (Agenda & AVA 2018) deals with the connections between women's experiences of domestic and sexual violence and multiple disadvantage. The findings emphasised that women experiencing multiple disadvantage will have high rates of mental health illness, addiction, homelessness and poverty. Conclusions included the recognition that the way that systems are currently designed fail to meet women's needs and that services do not respond well to women with multiple disadvantage. They are not set up to understand and address women's trauma.</p>
ACTIONS TAKEN	<p>The ASPEN (assessing and supporting psychological and emotional needs) Project was established in 2018 as a test of change. Tampon Tax funding was secured to employ a consultant clinical psychologist to develop and deliver psychological services to some of the most vulnerable women in Dundee. Women who are offered the service are homeless (or are at risk of homelessness), have experienced trauma (often multiple traumas throughout their lifespan), have a complex range of needs including mental health, risky behaviour, substance use, involvement with community justice services, and/or are victim to commercial sexual exploitation or trafficking. ASPEN is now funded as a permanent initiative through Dundee Health and Social Care Partnership.</p> <p>Importantly, the clinical psychologist is fully integrated into Dundee Women's Aid (DWA) and has close working relationships with related gendered services in the city. This takes the service to where women already are and promotes close partnership working.</p> <p>ASPEN is unique within Scotland. There is no other gender-specific psychological therapy service aimed specifically at women with complex mental health needs and multiple disadvantage, embedded within the third sector. ASPEN is a key partner in delivering the Scottish Psychological Trauma Training Plan (NES, 2019) and links with the Gendered Services Project that is also pioneering in Dundee at present (July 2021).</p> <p>Partners involved in the initiative include: NHS Tayside Psychological Therapies Service; Dundee Women's Aid; Dundee City Council; violence against women partner organisations; homeless providers; Women's Community Justice Team; Dundee Drug & Alcohol Recovery Service and third sector substance use organisations; adult support and protection, and child protection social work; Police Scotland.</p>

<p>OUTCOME / IMPACT</p>	<p>ASPEN has been operating since October 2018.</p> <p>Over 100 women have been offered either individual or group based assessment and intervention; over 80 formal case consultations have taken place (allowing staff to discuss and understand their cases through a trauma informed lens); over 100 hours of trauma training has been delivered to staff working within violence against women (VAW) partner organisations, and two trainee clinical psychologists have completed specialist training placements. Crucially, it is established that the majority of women accessing DWA services have symptoms consistent with a possible diagnosis of post-traumatic stress disorder, and distress levels categorised as <i>moderate</i> to <i>severe</i>. This directly challenges assumptions that third sector organisations respond mainly to non-clinical or sub-clinical level of need.</p> <p>Prior to the COVID-19 pandemic, “Survive and Thrive” – a group based intervention aimed at helping people who have experienced trauma achieve safety and stabilisation and better regulate their emotional state – had become established treatment option across the VAW partnership. Importantly, a range of different professionals in the VAW partnership have been trained to deliver this by the ASPEN clinical psychologist to increase access to this evidence-based psychological treatment.</p>
<p>MEASURES/ INDICATORS OF SUCCESS</p>	<p>Clinical data is routinely collected on severity of distress (CORE) and trauma symptomatology (PCL-5) for women engaging in group or individual psychological treatment. Data is also collected about onward referrals to mental health services.</p> <p>77% of women referred for psychological work had symptoms at a level where a diagnosis of post-traumatic stress disorder should be considered and 79% had clinically significant levels of distress; yet none were meaningfully engaged with mainstream mental health services.</p> <p>66% of women attended the service for at least one appointment and where referrals came from Dundee Women’s Aid, 40% completed a full episode of treatment.</p> <p>ASPEN has been influential in planning and supporting the implementation of STILT (Scottish Trauma Informed Leaders Training) within Dundee City Council and associated partners.</p>

Even better if ...

(enablers to further the principles of integration and result in even better outcomes if ...)

Current work in “increasing access to psychological therapies” has a focus on supporting services meet the 18 week referral to treatment target and, as such, additional funding is more likely to be allocated to services breaching the target. That is, supporting psychological therapies services to deliver ‘more’ treatment episodes within existing service models. It would be better if there was explicit Government support for innovation in psychological therapies, particularly that which encourages partnership working.

NATIONAL HEALTH AND WELLBEING OUTCOMES

<p>1. People are able to look after and improve their own health and wellbeing and live in good health for longer.</p>	
<p>2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.</p>	
<p>3. People who use health and social care services have positive experiences of those services, and have their dignity respected.</p>	<p>X</p>
<p>4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.</p>	<p>X</p>
<p>5. Health and social care services contribute to reducing health inequalities.</p>	<p>X</p>

6.	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	
7.	People who use health and social care services are safe from harm.	X
8.	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	X
9.	Resources are used effectively and efficiently in the provision of health and social care services.	
Health and Social Care Scotland's 5 Essential Elements (click link to listen to statement of intent)		
1.	Transforming the approach to improving health, wellbeing and independence	X
2.	Building stronger community care systems and primary care services	
3.	Establishing a new focus on mental health	X
4.	Securing a sustainable acute hospital service and specialist care service	
5.	Strengthening future partnerships to ensure a modern sustainable workforce	
Links to any published reviews/ evaluations	<p>The ASPEN project has already gained significant recognition (winner of the Integrated Care category at the NHS Event 2019) as a “<i>fresh, innovative, cross-sector joint working to deliver better outcomes for vulnerable people. This project delivers a range of desirable professional and personal outcomes for individuals and builds on cross-sector training and development capacity at the same time. Moreover it offers the possibility of learning across the Scottish system and adoption at scale</i>”.</p> <p>A further poster was accepted and presented at NHSScotland Event (June 2021)</p>	
<p>Before submitting this example of good practice please ensure approval and sign-off by your head of service / chief officer.</p>		
<p><i>Approved for online publication</i></p> <p><i>(signature and position)</i></p>	Diane McCulloch, Head of Service	
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