



Hospital avoidance and step-down services

Nurse-led services that reduce hospital admission and provide solutions for facilitating timely, inpatient discharge.



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The hospital avoidance pathway

Our services:

Pre and post hospital

Admission avoidance



Community behaviour support service

Dementia assessment beds

Mental health crisis beds

Hospital discharge



Clinical case management

Step-down



24-hour residential mental health beds

Dementia assessment and extended stay beds

Community rehabilitation transition service

Right care, right time

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Our hospital avoidance and step-down services

In 1986, Tom Carpenter founded Mental Health Concern as a single dementia care home. Today, as Everyturn Mental Health, we're carrying on his legacy providing person-centred care to people and their families.

Our hospital avoidance and step-down services are here to help people with complex mental health issues to live well and independently in the community.

Our specialist teams across our nurse-led services are committed to empowering people to regain independence, and live a fulfilling and satisfying life.



Our clinical case management service

We provide case management support to help people move from specialist inpatient hospitals into alternative community settings.

We help people with complex support needs who are in NHS or independent hospital settings, supporting them to transition to community placements. The people we work with are clinically ready to leave hospital and are referred to our service by the Integrated Care Board (ICB) or system partners.



From hospital to independence - James's story





What we do and how we help



Holistic assessment and formulation of the person's difficulties and support needs.



Finding suitable community providers to meet the person's needs.



Navigating ICB decision-making processes to secure funding.



Collaboratively planning and delivering the person's transition to the new service.



Supporting the person and their new provider for 12 weeks after they leave hospital.

Our impact in numbers

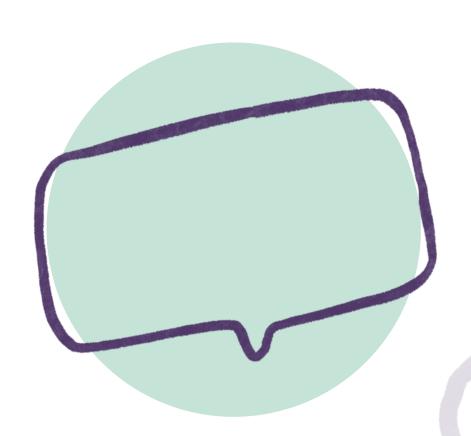


42

people moved to more appropriate community settings in our service's first 11 months.

The community services for all these people cost £5.2 million less than the inpatient services they were discharged from.

The programme has improved individual outcomes, freed up vital hospital capacity, and shown the benefits of coordinated discharge planning, rooted in person-centred care and system partnership.



Thank you, I love my apartment. I'm happy I'm home.

David, who moved back into the North East and North Cumbria ICB area, after 20 years in a London hospital

Our community rehabilitation transition service

We provide nurse led support to support people to move on from 24/7 care homes to independent accommodation.

Our support enables people with ongoing needs to live independently when they're ready. Our specialist nursing teams help people stay safe and well in the community and prepare to progress to mainstream housing.

We work closely with people to create a personalised support plan, focusing on helping them to become more independent.



8

people admitted,

freeing up space within our 24/7 services to help people move out of hospital.

What we do and how we help

- We work closely with people to create a support plan, focusing on helping them to become more independent.
- We provide practical support and education about living safely and well in the community.
- We can increase or decrease a person's support as needed to keep them independent and avoid them having to go to hospital.
- When we support someone, we'll work with them,
 their family or carer, and their multidisciplinary
 team.
- We also support people if they're moving up from community based support, or out of hospital into 24/7 care, with clear plans for support.

Our 24-hour residential services

We're here to help people with complex mental health issues to live well and independently in the community.

Our 24-hour residential services are often the first step into community support for people coming out of hospital.

We work with people to understand and manage their mental health by developing and practising the skills they need to live independently.

Our support focuses on person-centred recovery, wellbeing, and good physical health



37

people

37 people admitted into our 24/7 beds, helping free up much needed capacity in specialist inpatient hospitals.

What we do and how we help

The NHS and local authorities pay for our services, with a mixture of block and spot contract arrangements. We have high numbers of experienced mental health nurses and trained support staff on duty 24 hours a day.

This means that we can help people with very complex needs, which are sometimes compounded by other things such as substance misuse. We help them to move from hospital and secure service settings back into their local communities.

We work with people to understand and manage their mental health condition, as well as to develop and practise the skills which are important to live a satisfying life.



Our crisis houses



Our crisis houses provide intensive, short-term support within a 24 hour nurse led service. They're homely environments for people experiencing mental health crisis or distress, particularly those at high risk of suicide.

Our crisis houses act as an alternative to hospital, with just enough clinical intervention to support the person to reduce the impact of their crisis.

We deliver our crisis houses in partnership with NHS Crisis Teams, who manage access to our beds and co-deliver residents' home-based treatment plans.



30

admissions to hospital prevented.

Through our crisis beds provided in partnership with Cumbria, Northumberland, Tyne and Wear NHS Trust, for people who need short-term intensive support.

What we do and how we help

NHS crisis teams assess the person's needs, to see if our crisis houses are the right support for them.

We'll work with the crisis team to agree our shared treatment plan, based on the person's needs. This includes medical reviews and joint home-based treatment appointments at the crisis house.

Once the person is in our care, we work with them to develop a care plan and a risk management strategy. We provide one-on-one support and work with the person to develop coping strategies and help them manage their risk of mental health crisis. We're also able to support with:



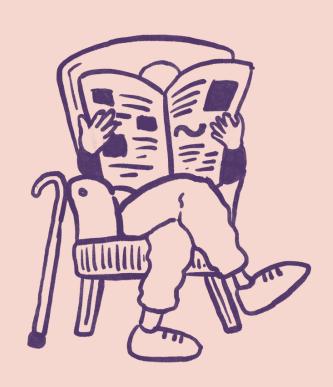
- Medication management.
- Alcohol management and community detox, if needed.
- Physical health management.
- Practical support with housing, benefits, and connections to community resources.
- Support for families and carers.
- Communication with other services, such as the crisis team, community treatment team (CTT), their GP, and their social worker.
- Pathway planning.

Our dementia \heartsuit care services

We believe passionately in providing good care to people with dementia and their families.

Everyone has their own story and experiences. Our teams take the time to listen to families about how the person can feel safe and at home, while always being treated with dignity and respect.

We know there is no 'one size fits all', so we work closely with each person and family to make sure everyone's needs are met. We offer a variety of services, each allowing for a person-centred approach.



What we offer

2

Assessments and extended stays

We offer 12-week residential assessments for people whose dementia has caused challenging behaviours that mean they can't be supported in a mainstream care home. We assess the person's needs and make support plans to reduce and manage their behaviours, so the person can return to mainstream care or to their homes, with new support to meet their needs. We also offer extended stays to people who need more support before returning home.

24-hour nursing care

We care for people whose dementia can mean that they behave in ways that can be challenging or hard to understand. With a dedicated team of highly qualified nursing staff available round the clock, alongside experienced support workers, we make sure that our residents receive the specialised care they need.

Respite care

We know that caring for someone with dementia can sometimes be very demanding and tiring; it's a 24-hour job. Everyone deserves a rest from time to time, and people who care for someone with dementia certainly do. We offer flexible packages of respite care, so that people who care for someone with dementia can rest and relax, knowing that their loved one is being well looked after.

Community behaviour support service

Our outreach team of dementia specialists work with families and caregivers of people whose diagnosed dementia is causing them to behave in ways that their carers find challenging. Our team works in people's own homes or care homes, supporting families and care home staff to manage behaviours and avoid hospital admissions.

Our impact in numbers



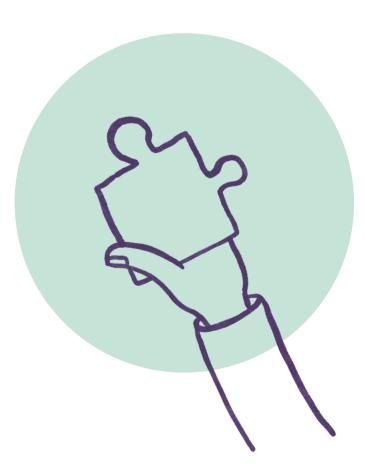
94

people admitted into dementia beds.

32

people successfully returning home or moving to the place they call home following support in Everyturn dementia beds.





194

Community behaviour support service referrals.

96% of people referred were able to enjoy a significantly longer period in the place where they're most comfortable and happy: their home.

Harry's journey

Harry* is in his early 40s and he first became known to mental health services in 2009, when he was diagnosed with paranoid schizophrenia.

As a child, Harry had been the victim of emotional, physical, and sexual abuse, while living with his family and in children's homes. Harry also reported being sexually assaulted on more than one occasion by patients when he was staying on secure wards and also when living on the streets.

Harry's had several inpatient admissions to hospitals, community inpatient placements, and has lived in hostels since his diagnosis. He'd also been evicted from hostels after behaving violently or aggressively.

^{*}Name changed for privacy

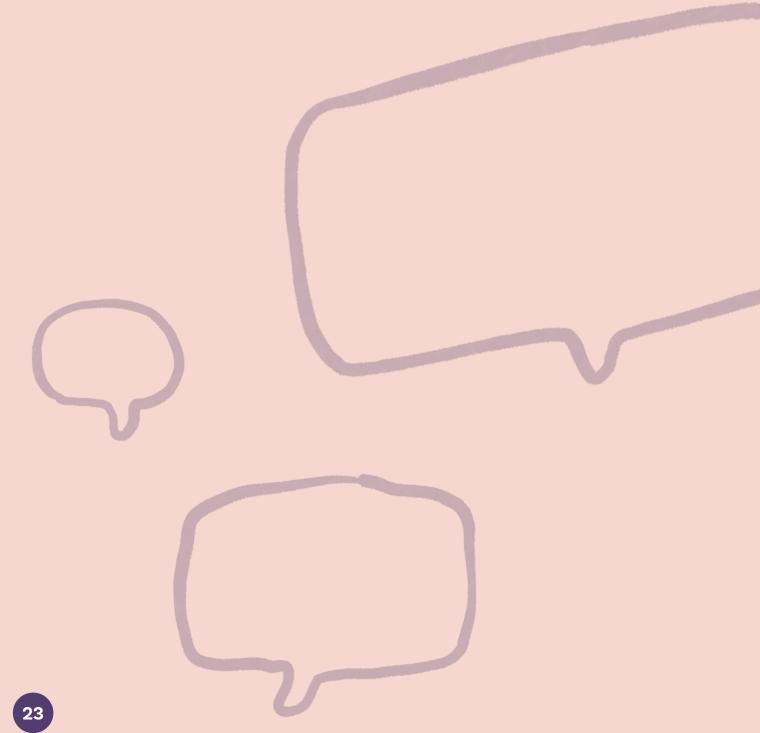
Harry was referred to Everyturn's services in 2019 from an acute mental health hospital, where he was detained under section 3 of the Mental Health Act.

Harry's multidisciplinary team had referred to him as 'feral' and held little hope that he'd stay with Everyturn, as they believed he'd go back to living on the streets. Prior to his referral to Everyturn, Harry had lived on the streets in Newcastle, where he slept in a cemetery for a number of years.

Our team worked with Harry for a number of years, gaining his trust and respect, with Harry eventually engaging with the rehabilitation program. Harry didn't go back to living on the streets, instead he moved into his own flat in the community in 2024. His new life is going well and he calls his flat his 'home'.







Feedback from our partners

"I found Everyturn's support paramount in ensuring the safe and effective discharge of my patient from hospital.

Their care and compassion was brilliant"

Ellie Community Psychiatric Nurse



Working together

Our goal is for you to get all the benefits of working with a large, experienced NHS and social carealigned organisation, but with the flexibility and creativeness of a charity.

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Scan me!

Get in touch:



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