



Rethinking

MENTAL HEALTH

6.0

A Whole of Health Approach

Collaborative Design of Safe Spaces for Local Communities Juliet Middleton



#RTMH

Collaborative Design of Safe Spaces for Local Communities

Juliet Middleton
General Manager



Contents

Who, What, Where, Why?

The Safe Space

Outcomes



Key Messages:

- The **Safe Space** model for the Brisbane North region has evolved into a new way of approaching the issue of crisis response options for people experiencing psychological distress and suicidality.
- A **collaborative** and innovative community solution has provided a safe and welcoming clinical and non-clinical responses.
- A process of **co-design** and implementation can help build healthier communities through relevant and consumer focused responses.



Who, What, Where, Why?

The Safe Space

Lessons, Improvements, Vision



Who, What, Where

- **Aim:** Develop a regional strategy for safe space sites in communities in North Brisbane and implement trial sites
- **Safe Space:** A space specifically chosen to provide a safe, welcoming and supportive environment for people experiencing psychological distress, allowing people to:
 - Identify alternatives to presenting to ED, for low risk individuals
 - Access support from trained mental health professionals within their community, outside a clinical setting.
- **Partners:** multiagency including government, non-government, consumer, carer and community representatives co-designed and developed the initiative.

Why?

- Result of a number of scoping projects undertaken in consultation with the community
- Development of the **Brisbane North Safe Space Network Proposal** - identified community based safe spaces as alternative to ED
- The strategy recognised that wellness, recovery and wellbeing depend on a deeper and wider set of opportunities to link more with people and places that contribute to a better life, therefor looked to
 - provide safety planning and referral pathways, direct links with **local** NGOs, GPS and other services allowing for individualised support plans
 - Benefit both HHS, NGOs and the community
 - Costs - designed around ensuring each Safe Space site was adequately supplied with funds to allow the successful operation of functional and welcoming Safe Spaces,
 - **Initially excluded staff costs.**

Who, What, Where

The Safe Space

Outcomes

Safe Space, Redcliffe



Safe Space, Redcliffe



Brisbane North Safe Space Network

Welcome to

Safe Space



BRISBANE NORTH
SAFE SPACE
NETWORK

**Feeling distressed?
Need a safe space to go?**

 **wesley mission**
QUEENSLAND

Metro North
Hospital and Health Service

 **Queensland**
Government

 **rfo**
recovery initiatives

 **Aftercare**
Journeys to emotional wellbeing since 1907

 **encircle**
emotional wellbeing

Consumer Perspective

- 50 y.o. with depression, borderline personality disorder, schizophrenia presented with high levels of distress, suicide ideation, suicide attempt 8 weeks prior
- Felt worthless, wanted to die and multiple ideas on how to end her life
- Acknowledged strong family and community connections and was currently studying which was causing added stress
- Ageing mother very religious leaving client 'feeling she can not live her true life in the LGBTQI+ community'.
- Key issues included:
 - Suicide ideation, persistent suicidal thoughts
 - Self-harm
 - Anxiety from study
 - Feelings of disconnection and being 'unheard'

What was done to engage the person in Safe Spaces?

- Consumer was invited to use the sensory room
- Participant engaged with worker to set up a safety plan and wellbeing planning
- Suicide assessment undertaken
- Talking with mental health professional - validating, understanding, reframing

Continued care included:

- Community care follow ups and welfare checks
- Talking with mental health professionals
- With participant's permission, referral was made to Partners in Recovery to assist the participant to address key expressed needs.

How were things better for the consumer and what worked well?

- Consumer presented at Safe Space almost weekly, often multiple times/week on different nights
- Currently has wrap around care and recommenced study
- Self-reporting that there is now hope and is socialising again
- Reduction in suicidal thoughts and from talking to different people at the Safe Space they have gained confidence with talking to others.

What did staff learn?

- Staff learned more about sensory modality and how talk therapy can be extremely beneficial to those in crisis.

Contents

Who, What, Where

The Safe Space

Outcomes



Successes

- Adoption of a more person centred approach in delivering services to people in distress: a commitment by all partners to this philosophy
- Establishment of a community-based movement, rather than single service delivery response
- Connections, relationships and powerful support from emergency services
- Enhanced communication and understanding between HHS and NGO's
- Staff engagement and commitment to provision of non-clinical response
- Development of referral pathways including some direct referrals





Change in Distress Levels

Time	N	mean	95% CI		p-value*
By visit					
Arrival	120	5.1	4.6	5.5	<0.001
Departure		2.5	2.2	2.8	
Difference		2.6	2.2	2.9	
Arrival	29	5.5	4.8	6.3	0.006
72 hours		4.2	3.6	4.8	
Difference		1.3	0.4	2.3	
Arrival	23	5.2	4.2	6.2	0.10
10 days		4.0	3.3	4.8	
Difference		1.2	-0.2	2.6	

Mean distress levels at arrival, departure and follow up by visit.

Note: Scores were also averaged at the person-level and showed positive reduction in distress

Consumer video:



More information:

juliet.Middleton@aftercare.com.au

<https://www.mymentalhealth.org.au/page/services/self-care-and-informal-support/safe-space-network/>

My Mental Health

https://www.youtube.com/watch?v=Y_toHkF4mN0&feature=youtu.be

Safe Space Responses North Brisbane, Primary Health Network

<https://www.aftercare.com.au/new-safe-space-centre-for-north-brisbane/>

Safe Space, Aftercare

Thank you and questions...

