



Crisis Cafe Kilkenny Feasibility Study

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crisis



1 Introduction

The Crisis Cafe Kilkenny Feasibility Study explores aspects of developing a self-referral, non-clinical out of hours service and support for people presenting with a mental health crisis in Kilkenny and its surrounding area. The feasibility study is led by an understanding and articulation of the needs of people experiencing a mental health crisis and the existing services and supports available.

Workhouse Union, a public engagement organisation, delivered the Feasibility Study on behalf of Lifelinkk with funding by Kilkenny LEADER Partnership and the HSE Mental Health Engagement.

Lifelinkk is an umbrella group for all organisations in County Kilkenny - State, Voluntary and Community, with a mental health remit. They aim to forge and strengthen relationships between community and statutory organisations and to be a collaborative voice on issues relating to suicide, mental health and wellbeing. Membership comprises of community and voluntary organisations including The Samaritans, Teac Tom and GROW; HSE organisations including the Mental Health Local Forum; the Area Lead for Mental Health Engagement and Recovery South East Community Healthcare; individuals working within HSE mental health projects at The Recovery College and The Involvement Centre; and local agencies such as An Garda Síochána, The Kilkenny Library Service and Kilkenny LEADER Partnership.

The development towards a Crisis Cafe in Kilkenny has involved researching similar projects in the UK; partnering with a pilot project in Galway city; working with Waterford Institute of Technology on a literature review and embarking on a feasibility study in partnership with Workhouse Union. Lifelinkk commissioned the feasibility study with funding support from Kilkenny LEADER Partnership and the HSE Mental Health Engagement.

A Steering Committee guided the overall process, members include Paul Fallon (Area Lead for Mental Health Engagement and Recovery South East Community Healthcare), Trish Finegan (Lifelinkk, Chairperson), Anne Buggy (Area Director of Nursing, Carlow-Kilkenny/South Tipperary Mental Health Services), Andrei Markewitz (Involvement Centre), Dr Mike Watts (Mental Health Local Forum, and independent recovery consultant), Millie Ryan (Mental Health Local Forum, Samaritans, Family Carers Ireland), Angela Hayes (Teac Tom), Fergus Horgan (Kilkenny LEADER Partnership), Mary Walsh (GROW) and Michael Norton (Peer Support Worker).

This feasibility study report is a companion piece of work to the literature review entitled 'Crisis Intervention Cafes: A Review' carried out by the School of Health Sciences, Waterford Institute of Technology and led by Professor John S.G. Wells; Dr Michael Bergin; Dr Suzanne Denieffe and Dr Deirdre Byrne. 'Crisis Intervention Cafes: A Review' is a comprehensive review of a Crisis Cafe from a regional, national and international perspective. Read alongside WIT's quantitative piece of research, the feasibility study provides a person-centred response from both people with a lived experience and organisations and community groups in mental health service and

support roles. The process allowed for user experience feedback and the possibility for a wide-stakeholder engagement in the first stages of service design of an innovative new approach to self-referral, out of hours crisis support.

There were five distinct stages to the engagement and feasibility study process. The first stage was a process of meeting key people, organisations and community groups providing mental health support in Kilkenny to get a broad picture of the needs and gaps. The second stage focused on understanding national and international precedents - including a site visit to Aldershot in the UK and a visit to Galway to meet key people involved in a similar pilot scheme. The third stage included smaller focused groups with members culminating in two large stakeholder visioning workshops. The visioning workshops took place in St. Canice's Neighbourhood Hall. Fifty-two people participated in the workshops from across a diverse range of organisations, community groups and people with lived experience and user experience of mental health supports. The feasibility study explored the key themes of:

- What is a Crisis? • Space and Place • Support • Governance and Collaboration

The public engagement process engaged directly with a total of 105 people and 39 organisations and community and voluntary groups.

Public Engagement Summary

16	Conversation sessions
2	Site Visits
1	Feedback Session
2	Focus Groups
2	Visioning Workshops

Please refer directly to 'Crisis Intervention Cafes: A Review' carried out by School of Health Sciences, Waterford Institute of Technology for a comprehensive overview of:

- Local Context
- Rationale for Crisis Service
- Examples of community service available in a time of crisis within CH05
- Alternative services provided in other countries
- Models of Crisis Cafes

A clear finding of the public engagement process is the need for developing a self-referral, non-clinical out of hours service and support for people presenting with a mental health crisis in Kilkenny. This finding was evident from both a person-centred and a service perspective. A Crisis Cafe aims to provide a calm and friendly environment for secondary mental health interventions. It is not intended to provide primary acute interventions. Building on the community-led supports already available, Kilkenny has the assets and knowledge to develop a flag-ship non-clinical Crisis Cafe model. The feasibility of a Crisis Cafe in Kilkenny will rely on an accountable governance structure that is still representative of who it serves and one that can traverse the remit of health-focused accountability and community grounded practice founded on empathy and kindness.

2 Background: where the idea came from

The idea of a Crisis Cafe in Kilkenny, as an alternative model for a self-referral out of hours support, was first shared in January 2018 within the Consumer Panel and was brought to Lifelinkk by Mike Watts. Through engaging Lifelinkk, there was the hope to gain support from the current mental health stakeholders and organisations in Kilkenny. The Crisis Cafe concept builds on the recovery and person-centred model and was well-received. Mike was supported to explore the idea further. Through research, Mike presented the Aldershot Safe Haven Service (UK) as an example to study. Towards the end of 2018, a group from Lifelinkk along with colleagues from the Galway Pilot visited the Safehaven project in Aldershot and met with Stanley Masawi (Service Manager) and others to experience the day to day running of the centre.

The motivation to explore this model was in response to the high demand on current services, the inadequate out of hours support and the negative experiences encountered by people accessing mental health supports through A&E. There is recognition of existing online and phone support, but also the awareness that this is not always sufficient for everyone. All stakeholders widely understand that presenting to A&E may exacerbate an individual's situation, and in many cases, A&E does not have adequate resources to meet needs. Through the Consumer Panel, an initiative was developed in 2017 to provide weekend support led by volunteers at St. Lukes A&E. As part of this scheme, 25 volunteers were trained with 12 actively involved. This resource was underutilised, and in some cases, staff were not aware of this resource. A Nurse Liaison team replaced this support.

space



3 Public Engagement Approach

The engagement process was built around the concept of co-production and how service user experience can influence change in our services and supports. Co-Production¹ is an approach for citizens to participate in and meaningfully contribute to the design, development and ongoing care and maintenance of the services we need and the spaces and places we live.

The process set out to understand the need for a Crisis Cafe from the perspective of those who will avail of the supports and the stakeholders who will collaborate and support this new service. Each stage developed with ongoing feedback and advice from Lifelinkk's sub-committee and broader stakeholders. The primary objective was to engage a broad constituency of people; build credibility and trust; and to make sure that the needs of stakeholders were taken into account in the decision-making and design process as the public engagement process developed. Creative approaches included facilitated workshops, group discussions, structured interviews and focus groups: alongside observational research, site visits and a variety of collaborative formal and informal conversations with groups and individuals. These different approaches are briefly outlined below:

Conversation Sessions

Conversational meetings with the various stakeholders working within the remit of mental health in Kilkenny broadened the contextual understanding of the consultation process. Conversations focused on issues of service provision and visioning what a Crisis Cafe in the context of mental health supports in Kilkenny could be.

Steering Committee Meetings

Throughout the delivery, the steering committee members guided the shape and scope of the consultation process. Members shared their concerns during frequent feedback meetings to oversee the development and outcomes of the public engagement process.

Site Visits: Aldershot and Galway

Workhouse Union and members of Lifelinkk conducted site visits to the Safe Haven in Aldershot (UK) and to Galway - where a Crisis Cafe pilot feasibility is ongoing in the city - meeting staff and initiators of these two models.

Feedback Session

On returning from the Aldershot Safe Haven site-visit those who visited gathered for a feedback session to share impressions and learning.

Focus Groups

Two small focus groups were held with members of TASK and GROW. These focus groups allowed for a deeper understanding of the needs of people experiencing a mental health crisis, and the reality of out-of-hour supports.

¹ Co-Production in Practice Guidance Document: 2018 - 2020, HSE, 2018

Visioning Workshops

The two visioning workshops took an interactive, co-design approach. The workshops took place in St. Canice's Neighbourhood Hall. Fifty-two people participated in the workshops from across a diverse range of organisations and community groups as well as people with lived experience. These workshops were central to the overall process providing a facilitated space to vision a Crisis Cafe in Kilkenny exploring the key themes of What is a Crisis?; Space and Place; Support; and Governance and Collaboration. The workshop gathered voices and perspectives through smaller group activities exploring each theme through the lens of Assets and Opportunities; Value and Expression; Need and Obstacle. A transcriber recorded the discussion on coloured hexagonal notes with a nominated spokesperson feeding back the findings to the broader group. The hexagonal coloured notes were placed on a large A0 sheet with the four themes set out in a wheel design.

A large graphic featuring the word "support" in white lowercase letters, centered over a dense cluster of colorful circular images. The circles contain various abstract and nature-themed patterns, including flames, clouds, leaves, and geometric shapes. Thin black lines connect the letters of "support" to specific circular images.

4 Public Engagement: Perspectives and Voices

The voices and perspectives of participants were recorded in various ways depending on the consultation activity. The stakeholder conversations and steering committee meetings gleaned a perspective from key people, organisations and community groups providing mental health supports and advocacy in Kilkenny to get a broad picture of the needs and gaps.

The visioning workshops gathered accounts from a wider group of stakeholders, including people with lived experience in Kilkenny. Lived experience is the knowledge and understanding you get when you have lived through something. In the context of people with mental health lived experience, this refers to people living with mental health issues and family or friends supporting someone living with mental health issues (sometimes called carers). Through the collaborative workshops participants explored people's sense of the supports needed and the gaps experienced.

Together the consultation activities gave an understanding of the necessary spatial and health and well-being principles of the need for a Crisis Cafe both from the perspective of those who will avail of the supports and the stakeholders and services who will support it.

Offering a snapshot of the rich and diverse discussions - this section is a compilation of the participants voiced concerns, issues, suggestions and experience of mental health crisis and supports. The quotes were gathered throughout the public engagement process, recorded through note-taking, and written question prompts during workshops.

4.1

What is a Crisis?

Mental wellbeing sources in the literature review² point to fragile coping mechanisms if someone is struggling with mental health issues; a mental health crisis is described as feeling unable to cope or control a situation. The definition of a mental health crisis given in the literature review above is an informative place to start understanding what support people may need. The public engagement carried out for this report sought a definition from those with direct experience of crises. Together, their voices make a start towards a shared definition of a crisis. Participants furthermore made suggestions as to what they need when they are experiencing a crisis.

Personal, different for each individual

When someone experiences a crisis, nothing else matters. Overwhelming feelings of inability to cope. Intense, personal, immediate

Each crisis is different and personal and has to be seen in a wider context

A crisis can be different each time and can be very confusing to the individual

It's where a person is at, at that moment

Unable to cope

Tizzy- can't think or act straight. Can't do the ordinary things, shopping, or even going to work. It becomes disrupted

Not able to function. Stay under the duvet where it's safe. How does that look from the outside?

A crisis can arise as a relapse into addiction

Overwhelmed. Burden, not coping. Confused

A crisis occurs when someone is vulnerable to demands of life. Stresses outweigh the ability to cope

A situation that you can't handle/ feeling of loss of control

Soul Screaming

A crisis can be underpinned by despair

Physical symptoms include fear, sickness

Feeling like a bomb has blown off in your head/ or is about to

A call for healing, for contact or a solution

Suicidal Ideation

Feeling overwhelmed not in control, suicidal

Suicide/self-harm

Hopelessness

Effects of relationships, wider environment and society

Poverty is a factor in stress leading to a crisis

Isolation and loneliness can contribute and lead to a crisis

Can have a trigger, e.g. family row, loss of a job, relationship break down, bullying, abuse, lack of protection, homelessness, drugs

Research on long-term loneliness- is that it's more damaging than smoking

People used to live in extended families in overcrowded houses – now more people living alone-

what do you do. Basic in mental health is somewhere to live, someone to love and something to do

Perhaps, a pet? It's not rocket science!

Dark evenings- isolation is more pronounced

When I don't receive the support I need

When "supporters" don't get it. Need for peer involvement - an interpreter

Sometimes I can't deal with problems alone

A crisis can be compounded by the feeling of affecting others around us

Individuals in crisis find it hard to gain access to supports and services, often being "turned away" and "sent back to the GP"

Family members and peer-to-peer are often the best referral pathway for individuals, yet many families/peers find it hard to gain the information needed to support individuals in crisis

IN A CRISIS I NEED:

EMPATHY

A good listening ear and information to point in a direction that will nurture and support us in our time of troubles, Someone to talk to -someone to listen -someone to calm me and point me in the right direction. To feel reassured.

SUPPORT

Support to chat to see things clearer, someone who understands, to be loved, to love ourselves, to feel okay.

SOCIAL INTERACTION

Friendly social interaction. Intervention must meet our needs rather than being bureaucratic or coercive.

WARM WELCOME

A place to go to where even if I can't say anything, people will know I need help. Not having to sit in a doctor's surgery. I don't always want or need a tablet.

HELP

A voice, a place to feel welcome and safe. Friendly good help and advice. Somebody to help me.

Welcome was a frequent word of choice during the public engagement process. The wish and need for a place of welcome when experiencing a crisis became evident as well as the absence of a feeling of welcome in primary healthcare facilities. Hospitals and clinics are perceived as sterile and bureaucratic environments. The literature review suggests that a busy A&E can be a pressured and frightening environment for somebody experiencing significant mental health distress, that it could be argued that it is not an appropriate place for someone experiencing a mental health crisis. Participants proposed a space that provided a calm and friendly environment both through its infrastructure and the approach of personnel. Indeed, a place of welcome.

Sanctuary

A welcoming, safe space

Calming lightning/ music/ paint scheme/ smells → Aromatherapy

Garden sanctuary: plants/ nature. Outdoor space

Place to retreat

Spaces like a snug in a bar

Good/ comfortable seating

Location

Visible, (yet discreet), independent space, central in the town

Accessibility

Central- easy to access, walking distance from central Kilkenny.

Parking and space to linger

Accessible, central

More than one hub

The Crisis Cafe must be accessible to everybody

How can rural people access - the possibility of linking in with Ring A Link

Develop of rural hubs such as Billy's Tea Rooms, Balyhale; Windgap Tea Rooms; Fennelly's of Callan; The Hub and The Watergarden in Thomastown - linked to the Crisis Cafe

Consideration for disabilities, wheelchairs, autism, mobility

Access, barriers, eg. Travellers, Refugees (language barriers)

Cultural issues

Not always accepting people with addiction issues etc.

Hospitality

Opportunities to linger and chat, like a cafe

Tea & Coffee

Activities

Community cafe with other activities within

Pulling in people from different walks of life

A wide range of activities to attract all sorts

Similar to The Watergarden (Thomastown)

Wellbeing activities, mindfulness meditation, art therapy

Board games

A cup of tea is okay, but I may ask myself, what am I doing here? Have a schedule of activities organised to do

Welcoming

Effective communication open door

Learn from the threshold/welcome of Teac Tom and Recovery College - Open Door

Need for “private welcome room”

Learn from community gardens; men’s shed, community shops

Open door policy

Community model

Non-judgemental, non-stigmatised environment

Atmosphere

Bright, modern

Attract people - a place where people want to go to

Safe

Secure, safe space, welcome all

Safe fit for purpose

Shared Space

Group space

Private Space

1-1 space

Dignity retained/ privacy

Access to other supports space where people don’t need to be seen → back door

Flexible

Interactive, personable

Need to be flexible, open to change

Vision needs to be flexible so that it adapts to the needs of its users

Support needs will vary from person to person. Mental- health supports whether from a service or through peer-to-peer support, should come from a person-centred approach. There is a need to clearly define and understand peer-to-peer and professional supports and how they relate to each other. Participants emphasised the need to map all services and foster links between services so that the individual can take the lead within their recovery process. Participants also emphasised the importance of relationship-based values within the recovery and the need for advocacy from friends and family with empathy at the centre of support.

Responsive Pathways

Could have elements that are an extension of the current medical model assessment

Process when needed to allow for fast-tracking of the ED department

Opportunities for clinical assessment through processes such as an informal interview but also the option to opt-out of this process

Ideally 24 hr

Multidisciplinary/integrated support

Need to map all services and Foster links between services

Knowledge of current pathways, primary care services, ED, Caredoc, Garda

Wrap around through linking in with services and relevant stakeholders

Recovery Focused & Tools

Promoting recovery/ formulating recovery plans/ funding/ recovery map

Opportunity for leadership roles within the recovery process, ownership of the process involving those with lived experience

Willingness and interest, Openness, Inclusivity, Equality, Continuity,

Offering hope through overcoming a crisis

Linking into other services when an individual is in crisis offering signposting but also acting as a wraparound holding and supporting the individual within the recovery journey

Linking into existing groups, i.e. WRAP and Hearing Voices

Options for individual and group supports

Crisis prevention care

Tool for peoples recovery

Different from mainstream

A place to provide impartial, free information

Pathway into other services, wraparound supports

Relationship-based values

Open human interaction → making cups of tea

People power

Family-Supports

Offering family members information and signposting pathways and services

Family members could also go for signposting and support

Families need support but also need help to support you

Recognise peer-to-peer and professional support

Crisis team with peer-to-peer staff with training in crisis support (drawing on existing organisations and individuals with experience and relevant skillset)

Clinical/professional → layered ← peer/ relational
Peer-to-peer support with the back up of MH training
Clinic element psychologist, counselling, nursing staff
Have choices: talk; trained in how to assess; option for assessment; peer support
Blended supports peer-to-peer and clinical/ professional
Access to talking therapies if needed

Co-Produced

Participation, collaboration
Ethical values/ ethos
Rights-Based

Empathy

Seeing a person, not a person in crisis
Someone to listen - to be acknowledged, understood and heard
Hope - to meet people who have come through the other side

Progressive training and feedback

Supporting staff to get appropriate training
Ongoing training for volunteers
Regular supervision for all staff
Teambuilding
Peer support workers and volunteers
Appreciated and appropriate volunteers
Relevant linkages and support
Support and encouragement for staff - self-care and wellbeing promoted and supported
Drawing on related areas of expertise
Recovery college: more peer support training opportunities to train up more people

Realistic Ambition

Professional delivery on what's needed

Reduce Admissions to Acute Services

An alternative route
Reduce dependency on acute services
Transform approach to mental health
Reduction of the medicalisation of emotional distress

Empowerment

Advocacy- support from a trusted individual known to the person in crisis
Autonomy and control over my needs
Equal relationship
No wrong door - treating everyone

Collaboration

Handover/ reporting end of day
Regular feedback to stakeholders and Board
Support staff responding to a crisis
Negotiate potential risk through clear strategies, not risk averse

The Literature Review shows that more needs to be done for effective and efficient support and care to be provided for people experiencing and living with mental health issues. During the public engagement process, participants often commented on the 'top down' method of governance. They gave many suggestions as to create a more collaborative way of deciding and developing mental health care services for the proposed Crisis Cafe. More inclusive lateral governance can be achieved by having service users on committees and boards, ensuring clear and transparent dialogue between those using services and those providing them, and that policies and planning should always put the individual first.

Oversight

Board, key stakeholders and experienced others

Steering group- board answerable, inclusive, variety of backgrounds,

Boundaries: clinical governance/ stakeholder governance. Who owns it? Who runs it? flexibility re transfer of governance

Steering group

Co-produced steering group/ board

Answerable, Open and Transparent

Set up

Home Care Team

HSE/ Community and volunteers

Peer-led/ medical model could coexist

Need for clarity on what service provides

Clear roles and responsibilities,

Match the needs of the person in crises with appropriate supports

Relevant staffing/ Time Resources

Funding stream

Time: opening hours

Mission

Clear mission and objectives in what the café does and doesn't do

Compliance

GDPR guidelines

Health and safety manual, policy procedures, complaints procedure

Built-in evaluation mechanisms

Bureaucracy

Policy

HSE

Café - HACCP - Money

Confidentiality

Supervision for staff/volunteers

Collaboration

Centre has its own identity rather than drawing on existing or established centres or services

Lifelinkk - Umbrella group of all active organisations working in mental health

Within this experience, a wealth of social capital, existing collaborations, and cross over offering an

excellent foundation to build upon

Bring services/ people together

Offer of premises

A cohort of individuals depth of experience in supporting individuals in crisis need to consolidate and create clear staff skill set requirements

Linking/Accessing Clinical Mental Health Services

Ease of access for mental health services if required

Collaborative teams

24-hour services

Hand over/ reporting at the end of the day

Clear staff handover within daily support

Skillset to manage who presents

Ownership of space that is not risk-averse

Supported/ supportive staff

Opportunity to get it right from the start

Awareness of the need to support volunteers, i.e. supervision

Transparency and/or lack of

Lack of information and awareness Re: Services Available

Location/ Transport

Information needs to be signposted for hard to reach communities

People having a fear of services

Judgement around addiction issues - non-acceptance

Follow up

Linking in to follow up within primary care where appropriate

Consistency in care

Establish a protocol for referrals

Challenge/Risks

Clarity on exactly what this cafe is - who it serves

A crisis is too big of a concept. Could be anything. Different things to different people

Staffing

Funding

The line between peer-to-peer support and clinical governance/ oversight needs to be managed effectively

Potential clinical risk

Too clinical

Lack of capacity for volunteers to cope/ deal with what/ who comes through the door

Stigma to attending

Who owns the actual building

Restrictive - people attending have to be a service user

Presumptions/ Language/ Expression



collaboration

5

Site Visits: Aldershot and Galway

As part of the public engagement activities, members of the steering committee and two members of the Workhouse Union team made two site visits, one in Ireland and one in the UK. This group met key people involved in an exemplar project in Aldershot in the UK and a pilot project Galway City. This was done to give national and international precedence to the consultation.

For the feasibility study a third precedent project in Melbourne, Australia has been added as the model there is located within a hospital environment and gives another perspective.

5.1 Safe Haven: Aldershot Model

The Safe Haven model in Aldershot UK has a clear remit - “If you’re experiencing a mental health crisis and you are looking for urgent mental health support outside normal working hours, Safe Haven is here for you”.

The Safe Haven Project pilot phase was funded by the North East Hampshire and Farnham Clinical Commissioning Group. The Safe Haven service developed from an initial three-month pilot in 2014 to its current status with ongoing funding. It now has five sites in Surrey and Borders, along with a number of young peoples Safe Haven models and international replication.

The model is built on a partnership model of service delivery, with different local community partners co-delivering the service in each location. In Aldershot, the service is delivered in partnership with Surrey and Borders Partnership Foundation NHS Trust (SABPF), Andover Mind (a local mental health charity) and Catalyst (a non-profit organisation who specialises in mental health and drug and alcohol misuse services). Staffing load is shared between the organisations while responsibility for clinical governance remains with the Service Manager, Stanley Masawi.

The model blends preventive, social and community functions as a ‘Wellness Centre’ (similar to an Involvement Centre/Recovery College) with activities and signposting to support, along with a backroom crisis / pre-crisis service pathway with assessment by a psychiatric nurse. It was notable that peer support in Safe Haven, though core support, remains at an informal level.

The Safe Haven is open 6 pm to 11 pm Monday to Friday and 12.30 pm to 11 pm on weekends and bank holidays. The Aldershot site averages 15-25 clients per evening session and is open 365 days a year for people in potential distress or their carers. The importance of access during holiday periods was emphasised as being of particular importance to clients.

It was noted that the model is currently not configured to support more complex or ‘dual diagnosis’ presentations while maintaining a safe space for clients. Appropriate support pathways for such persons remain a challenge.

What can we learn?

Evaluation

The evaluation has been vital and makes the service compelling to all stakeholders.

Leadership

Stanley Masawi, as the Service Manager, has clinical oversight of the service.

Collaboration

The service is delivered as a collaboration between the NHS, Catalyst and Andover Mind. However, the peer-led approach is not as active as expected.

Linked in services

Aldershot model has the ability and terms of reference to fast track care - connected to emergency services and hospital admissions.

Space and Place

From the outside, it looks like a typical building, the location is central with easy access and it is very much part of the town centre. Inside the space felt like a waiting room - too clinical.

Operational Policy

A clear operational policy allows the collaborating agencies to understand their role and remit in delivering the service.

5.2 Galway Model

The need for appropriate out of hours support is a nationwide experience and Galway City is at an advanced stage of piloting a Crisis Cafe. This initiative is a partnership between the Galway Mental Health Forum and CHO2 Community Mental Health, receiving Service Reform Fund³ funding in September 2019 to pilot the project.

The Galway pilot is working within the context of a large urban centre, with a high student population. The project is developing within the broader context of Galway University Hospital - a 'third space', and a threshold between the city and the hospital supports.

A commercial cafe, located directly beside the hospital, is partnering on the project offering the location as a venue for the out-of-hours service.

A co-produced Working Group including the Liaison Psychiatry Team is in the process to scope, plan, implement and evaluate the initiative - this will be in line with national guidance and agreement of staff working out of hours. It is envisaged that the Cafe will provide an informal atmosphere and people visiting will be given a 'menu' from which they can choose what supports they need.

Work is ongoing around establishing the most effective working relationship with the acute unit in University Hospital Galway in terms of pathways to assessment and admission if necessary.

³ The Service Reform Fund (SRF) is a partnership between the Department of Health; the Department of Housing, Planning, and Local Government; the Health Service Executive Ireland (HSE); Local Authorities; and the Atlantic Philanthropies, in collaboration with Genio, to implement service reform in Ireland in mental health, disability and homelessness.

What can we learn?

Working Group and Terms of Reference

The Working Group includes members from the University College Hospital Galway and the MidWest Community Healthcare team - this ensures that all stakeholders understand the project, and there is buy-in at a clinical governance level.

Funding

Funding has been successfully received for the pilot phase of the project through the Service Reform Fund.

5.3 Safe Haven Cafe - Melbourne Model

The Safe Haven Cafe is co-located at St Vincent's Hospital Melbourne, Australia opening in May 2018. Its development and implementation were supported by the Better Care Victoria Innovation Fund. The Cafe sits within the broader Mental Health Service and is governed by a Steering Committee.

Its purpose is to support individuals to develop self-management skills and explore available support options. It caters specifically to people seeking mental health support after hours, opening Friday's 6-8 pm, Saturdays and Sundays 2-8 pm.

The cafe is run by clinicians, peer support workers and volunteers with lived experience of mental health illness. Each evening it is staffed by a clinician, a peer worker and an A&E peer worker. It does not assist those who are intoxicated and substance-affected.

The cafe has shown to improve patient experiences and social connections within the local community. It demonstrated cost savings due to reduced mental health-related emergency presentation at the St Vincent's Hospital.

What we can learn?

Co-design

Combining the wisdom of lived experience with the expertise of professionals to maximise benefits ensured that the project could be delivered on time and with the right outcomes.

Connection to the Community

Improved feelings of social connections to the local community.

Finances

The cost-efficacy of the Safe Haven has been demonstrated with fewer mental health-related Emergency Department presentations.

Location

The Cafe is located within St Vincent's Hospital, with coffee and tea, cushions, plants and rugs set up by staff each evening.

A clear finding of the public engagement process is the need for a self-referral, non-clinical service and support for people presenting with mental health crises in Kilkenny. This comes from both a person and service-centred perspective and needs to be on an out of hours basis. A Crisis Cafe aims to provide a calm and friendly environment for secondary mental health interventions. It is not intended to provide primary acute interventions. Building on the community-led supports, Kilkenny has the assets and knowledge to develop a flag-ship non-clinical Crisis Cafe model.

6 Recommendations

This section sets out a series of recommendations and viewed in context with the voices and perspectives (above) builds a picture of the feasibility for a Crisis Cafe in Kilkenny. This is followed by a conclusion and set of clear actions.

6.1 Space and Place

An enormous asset in Kilkenny is the wealth of community-led support and the existing spaces in the city that provide mental health support, which associate and collaborate through their Lifelinkk membership. As Kilkenny is a relatively compact city, many of these buildings are within walking distance of the city centre. The newly established bus routes bring public transport connectivity from the outskirts of the city. The two bus routes run till after 11 pm (times vary on routes and across days).

From a funding and building management perspective (building insurance; heat and light; rental/lease/licence; rates), it would make prudent sense to utilise existing buildings that provide day-time supports - opening the Crisis Cafe out-of-hours when the existing services are closed in the evening and night-time.

Below is a brief scoping exercise of existing spaces that could be utilised and activated, including the Involvement Centre, Teac Tom, Recovery College South-East, the Auxiliary Hospital and GROW.

The Involvement Centre

The Involvement Centre is a peer-led drop-in facility offering free support to individuals and families with experience of mental health. Support is provided through individual and informal group chats, along with structured wellbeing and recovery-focused support groups, including SMART recovery.

Building:	Two story residential house
Location:	Collier's Lane (City Centre)
Transport links and parking:	No direct parking. 5 min walk to city bus stop
Current Building Status:	HSE managed
Facilities:	Multiple rooms for conversation, referrals, small-group discussions. Ground floor kitchen and sitting-room
Accessibility:	Ground floor is accessible
Atmosphere:	Welcoming and inclusive
Public Perception:	Peer-supports
Availability:	Currently there are evening activities
Self-Referral Service:	Yes
Outdoor Green Space:	Yes
Opportunities:	The Crisis Cafe is a logical addition of the peer-led supports

Challenges: and person-centred focus of the Involvement Centre.
The location, down an unlit alleyway, could prove difficult at night-time.



Teac Tom

Teac Tom supports individuals and families affected by suicide through warm, friendly, compassion-focused support. Teac Tom offers a variety of self-referral services, subsidised through means-based rates, such as one to one counselling, play therapy sessions, group support, community information and signposting, and a drop-in chat service and 24hr telephone line.

Building: Three-story townhouse
Location: Ormonde Road (City Centre)
Transport links and parking: On street parking, beside Ormonde Road Bus Stop (Bus Eireann, Kavanagh's, KKI)
Current Building Status: Private Rental
Facilities: Multiple rooms for conversations, referrals, small-group discussions. Ground floor kitchen and office. Second floor cafe-style room.
Accessibility: Second floor, cafe-style room only accessible by stairs
Atmosphere: Welcoming and inclusive
Public Perception: Non-clinical and a service for all
Availability: Currently there are evening activities
Self-Referral Service: Yes
Outdoor Green Space: Yes (but very small)
Opportunities: Teac Tom is an organisation well trusted by the general public and is widely known across County Kilkenny. As a self-referral and non-HSE run organisation Teac Tom has a wide demographic reach. The atmosphere of the building is very welcoming with an ideal cafe-style room on the second floor. Its city centre location beside public transport links makes the location accessible to both city and rural populations.

Challenges: Teac Tom has a busy schedule with activities happening into the early evening. Teac Tom currently doesn't receive direct funding from the HSE and a new offering such as the Crisis Cafe would need a clear funding and governance strategy that would compliment and not take from any of the existing Teac Tom services.



Recovery College South East

Recovery College South East is a community based mental health education and wellbeing centre that develops and delivers educational workshops in wellness and recovery. Courses and workshops are offered for individuals experiencing mental difficulties, issues caused by substance misuse, addiction and social inclusion.

Building: Two-story residential house
Location: Greenshill (10 min walk from City Centre)
Transport links and parking: Small residential car-park, 10 min walk to city bus stop
Current Building Status: HSE managed

Facilities:	Multiple rooms for conversation, referrals, small-group discussions. Ground floor kitchen and office.
Accessibility:	Ground floor is accessible
Atmosphere:	Welcoming and inclusive
Public Perception:	Educational and peer-supports
Availability:	Currently there are evening activities
Self-Referral Service:	Yes
Outdoor Green Space:	Yes
Opportunities:	The Recovery College South East operates out of a welcoming and well-maintained building. The concept of the Crisis Cafe builds on its existing peer-led recovery workshop focused programmes.
Challenges:	It is in a residential neighbourhood, which is not ideal for the remit of an out-of-hours Crisis Cafe with people coming and going late into the evening.

The Auxiliary Hospital

The Auxiliary Hospital on Wolfe Tone Street is home to a newly redesigned recovery garden, art studios and exhibition space. The building is run by Training and Support Kilkenny (TASK) - a full-time training programme for adults. TASK is part of the Kilkenny mental health service, with individuals attending through professional referral. Their rehabilitative programme supports individuals to improve and maintain mental wellbeing, develop coping strategies and self-care skills, and primarily regain confidence.

Building:	Large institutional building
Location:	Wolfe Tone Street (Near City Centre)
Transport links and parking:	Ample on-site parking. 5 min walk to city bus stop
Current Building Status:	HSE managed
Facilities:	Multiple rooms with possibility to re-design a bespoke space.
Accessibility:	Ground floor is accessible
Atmosphere:	Institutional building but the outdoor area has a very welcoming green space
Public Perception:	Service Led with referral training programme
Availability:	Evening/Night availability
Self-Referral Service:	No
Outdoor Green Space:	Yes
Opportunities:	Good parking and accessibility for cars. The outdoor space and gardens are creative and welcoming.
Challenges:	Building has institutional architectural quality and as it day-time supports are referral based could prove difficult to promote as an out-of-hours, non-referral service.



GROW

GROW is a national community-based organisation providing support and education around emotional and mental wellbeing. Through a 12 Step Recovery Program, GROW provides effective peer support, motivation and empowerment to enable members to take action to change their circumstances in a structured and supportive environment. GROW's weekly support meetings offer members a practical path out of mental and emotional issues. In Kilkenny GROW operates out of stand-alone premises, providing safe space for meetings and activities.

Building:	Heritage building
Location:	Barrack Street Street (Near City Centre)
Transport links and parking:	Close to John's Green public car park. 5 min walk to city bus stop
Current Building Status:	GROW managed
Facilities:	Multiple rooms with kitchen space
Accessibility:	Ground floor is accessible
Atmosphere:	Welcoming space
Public Perception:	Not too much public perception beyond GROW members
Availability:	Evening/Night availability
Self-Referral Service:	Yes
Outdoor Green Space:	No
Opportunities:	Good parking and accessibility for cars. Relatively neutral space and a Crisis Cafe would be complimentary to GROW activities.
Challenges:	A new offering such as the Crisis Cafe would need a clear funding and governance strategy that would compliment and not take from any of the existing GROW services.

6.2 Supports

A clear finding of the public engagement process is the need for self-referral, non-clinical service and support for people presenting with mental health crises in Kilkenny. This comes from both a person and service-centred perspective and needs to be on an out of hours basis. A Crisis Cafe aims to provide a calm and friendly environment for secondary mental health interventions. It is not intended to provide primary acute interventions. Building on the community-led supports, Kilkenny has the assets and knowledge to develop a flag-ship non-clinical Crisis Cafe model.

HSE statistics from the end of 2019 demonstrate an improved picture in terms of bed capacity in the Department of Psychiatry (DOP), St Luke's Hospital and a reduction in the out-of-hours presentations to A&E. The improvements in capacity at St. Lukes DOP are an outcome of supported pathways to housing for people who were in long-term stay in the DOP and a focus on supporting people in their homes and communities overseen by the Home-based nursing Team. Furthermore, the ongoing development of the Advanced Recovery Ireland approach and the Recovery College; the role of the Area Lead for Mental Health Engagement, the Peer Support Worker initiative; Peer support family educator; Lifelinkk's collaboration; and initiatives such as Teac Tom and the Involvement Centre have all led to more interconnected supports and options.

However, people with lived experience articulated in the public engagement process their reluctance to seek support out-of-hours through the A&E as this environment was unsuitable for their needs (see findings above). As an alternative to A&E people talked about finding the sanctuary of family and friends or of self-protecting overnight until getting support from their

GP, service provider or support group/organisation the following day.

A training process to upskill the highly motivated volunteer cohort attached to the existing community services can build on the A&E trained volunteers - 22 trained and 12 were active. Key to the success of the project is having a clear invitation and offer. People need to know what support they can receive and how they can access these supports. Opening times need to be precise. A key piece of work is how the non-clinical supports can quickly and reliably access clinical supports when and if required.

6.3 Governance and Collaboration

To progress the Crisis Cafe model from the feasibility and research phase to the pilot phase an operational and financial plan for a community crisis intervention service with peer-to-peer support and volunteers supported by a coordinator needs developing. To protect the peer-led, non-clinical approach of the Crisis Cafe, a governance structure that supports the cooperation of various organisations and upholds the peer-led, non-clinical approach would take careful set-up and negotiation.

Valuable experience can be gathered from established peer-led and community-based organisations, such as GROW, the Samaritans, Shine and the Irish Advocacy Network organisations, which have developed strong governance structures that meet the needs of increasingly risk-averse legislation. Kilkenny has a wealth of community-based initiatives that, while not directly aimed at and supporting mental wellness do so indirectly through opportunities for cultural and social exchange, and within the context of a Crisis Cafe could provide relevant precedent and practice.

There are positive effects of having a welcoming community shared space for creativity or to go and informally meet people, particularly in rural towns and villages. Examples include Billy's Tea Room in Ballyhale; Fennelly's of Callan and KCAT Arts Centre in Callan; The Watergarden and The HUB in Thomastown, and Open Circle in Kilkenny city. Men's Sheds are community-based inclusive spaces where men of all ages and backgrounds gather and work on projects under the objective to advance the health and wellbeing of all involved. There are ten Men's Sheds in County Kilkenny.

Research into the links of wellbeing, flourishing and towns is the focus of The Carnegie UK Trust which takes the view that wellbeing is a holistic concept that brings together a range of social, economic, environmental and democratic outcomes. There are uplifting definitions of wellbeing which reflect both the legacy and the current work of the Trust "to promote the good life: a flourishing society, where citizens are happy, healthy, capable and engaged". The Carnegie Trust has also begun focusing on exploring kindness and emotion in public policy. Their report 'Kindness, emotions and human relationships: The blind spot in public policy' argues that the significant challenges of our time demand an approach that is more centred on relationships.

The feasibility of a Crisis Cafe in Kilkenny will rely on an accountable governance structure that is still representative of who it serves and one that can traverse the remit of health-focused accountability and community grounded practice founded on empathy and kindness.

6.4 Evaluation

The Mental Health Commission in its most recent publication 'Access to Acute Mental Health Beds in Ireland' (February 2020) note that 14 years after the publication of A Vision for Change Report of the expert group on mental health policy, there is 'a dearth of crisis houses, high support hostels and rehabilitation units based in the community'. This is the context in which this feasibility study has emerged.

The growing evidence-based model for mental health supports in ordinary environments is currently being introduced into Ireland, with multiple sites nationally at a feasibility and community engagement stage of development. Galway is now the most advanced site in terms of funding and the involvement of experts-by-experience. Kilkenny has undergone an extensive public engagement process (findings here in this report), and Limerick has a DIY volunteer-led response to a community-wide crisis.

Building on existing relationships between sites (e.g. Galway and Kilkenny) there is the possibility to widen collaboration to service development. This provides the opportunity to make use of resources by avoiding duplication and focusing on:

- 1. Governance Models**
- 2. Funding and Sustainability Models**
- 3. Co-Production Methodologies**
- 4. Co-Produced Evaluation**

The robust co-produced evaluation will be essential for the sustainability and growth of the project.

7 Conclusion

The feasibility and sustainability of a Crisis Cafe in Kilkenny will rely on an accountable governance structure that remains representative of who it serves and one that can traverse the remit of health-focused accountability and community grounded practice founded on empathy and kindness.

Kilkenny has the community resources and experience to co-produce a new service that meets the needs of people experiencing a crisis out of hours within a non-clinical environment.

To progress and pilot the project, this report recommends several crucial steps.

Next Steps:

- Develop a co-produced Working Group, with an agreed Terms of Reference to further scope, plan, implement and evaluate the initiative - as a collaboration between the community and health sectors and across Lifelinkk members.

- Agree on a suitable location for the Crisis Cafe, balancing the needs of a Crisis Cafe with the day-to-day realities of the building's current activities and services, and work towards small building alterations if needed.

- Explore funding possibilities across Health and Community stakeholders. Co-operate with other pilot projects in the country to identify funding streams and generate shared evaluation approaches.

- Focus towards a six-month pilot, with Thursday to Saturday opening times of 6 - 11 pm. The Crisis Cafe needs a coordinator on-site to provide oversight, with three to four volunteers in listening and supportive roles. A clear protocol for on-call clinical supports when and if required, is vital.

- Create a space of welcome and warmth that provides people with support and safety out-of-hours, in an informal, cafe-like environment. Pay attention to creating a calm and beautiful space that has comfortable areas for conversation as well as private space for one-to-one consultation if necessary. Think about activities that allow people ways to engage with the service if they experience the threshold of seeking support as daunting - this could include offering people a menu of refreshments, activities and support.

- Secure funding for a paid coordinator to oversee the development of the Crisis Cafe. Build a sustainable peer and volunteer training and delivery programme as a collaboration between existing community organisations (Samaritans, GROW, Teac Tom, Involvement Centre and others).

- Devise a clear operational policy allowing all collaborating agencies and community groups to understand their role and remit in delivering the service.
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- Embed co-production in all levels of governance and evaluation. Evidence-based evaluation will be vital to making the pilot compelling and sustainable to all stakeholders and funders.
-
- Establish a clear invitation and offer of what supports people can expect. Define and understand peer-to-peer and professional supports and how they relate to each other. Illustrate how non-clinical supports can quickly and reliably access clinical supports when and if required.
-
- Engage with GPs and An Garda Síochána (their perspective isn't captured in the Feasibility Study) in establishing the Crisis Cafe model in Kilkenny, and encourage their representation on the Working Group.
-
- Co-explore a suitable name for the Crisis Cafe that expresses a welcoming, safe and supportive place.

8 Appendix I

Engagement Schedule

Conversations | March - June 2019

Conversational meetings with the various stakeholders working within the remit of mental health in Kilkenny broadened the contextual understanding of the consultation process. Conversations took place between March and June 2019 with the following individuals:

Trish Finegan (Chairperson, Lifelinkk), Andrei Markewitz (Involvement Centre), Dr Mike Watts (Mental Health Local Forum and independent recovery consultant), Millie Ryan (Mental Health Local Forum, Samaritans, Family Carers Ireland), Paul Fallon (Area Lead for Mental Health Engagement and Recovery South East Community Healthcare), Angela Hayes (Teac Tom), Mary Walsh (GROW), Michael Norton (Peer Support Worker), Rory Connellan (Teac Tom), Paul Clifford (Involvement Centre), Ber Brophy (Newpark Family Resource Centre), Stephen Murphy (Father McGrath Centre), Jess van Valkengoed (Droichead Family Resource Centre), Clare Fitzpatrick (Co-ordinator, Recovery College South East), Ollie Cullen (Recovery College South East) and Mary Butler (Kilkenny County Council Arts Officer).

Site Visits | Safe Haven, Aldershot, UK, 4 June 2019 / Galway Pilot, 27 June 2019

Aldershot Feedback Session | St. Canice's Community Hall, 18 June 2019

Focus Groups | TASK, 11 June 2019 and GROW, 17 September 2019

Visioning Workshops | St. Canice's Community Hall, 1 July and 10 July 2019

The two visioning workshops included participants with lived experience and individuals from the following agencies, organisations and community groups:

ALONE; Amber Kilkenny Women's Refuge; An Ait Eile (Galway); Ardú Substance Misuse Service; Carlow-Kilkenny/South Tipperary Mental Health Services; Carlow Mental Health Association; CHO5 Office for Suicide Prevention; Cosain Wellness (Galway); Father McGrath Centre; Galway Mental Health Services; GROW; HSE Addiction Counsellor Mental Health Services; HSE Clinical Nurse Specialist Liaison Psychiatry; Mental Health Engagement and Recovery South East Community Healthcare; HSE Resource Suicide Prevention; HSE Substance Misuse; Involvement Centre, Kilkenny County Council Arts Office, Kilkenny LEADER Partnership, Kilkenny Mental Health Association; Kilkenny PPN; Kilkenny Seniors Forum; Lifelinkk; Men's Development Network; Mental Health Engagement and Recovery South East Community Healthcare; Mental Health Local Forum (Kilkenny and Galway); Muiriosa Foundation; National University of Ireland Galway; Recovery College South East; Respond Support Resettlement Support Worker; South East Community Healthcare; St Canice's Neighbourhood Hall; St Luke's Department of Psychiatry; TASK; Teac Tom; The Good Shepherd Centre; The Watergarden/Camphill Community Thomastown; Traveller Mental Health Nurse; Tusla -The Child and Family Agency

Appendix II

Acknowledgements

Workhouse Union Team | Eilís Lavelle, Rosie Lynch, Hannah McCormick, Sinead Phelan, Muirne O'Connor

Graphic Design and Illustrations | Paul Bokslag

Workhouse Union would like to thank the Lifelinkk steering committee: Paul Fallon, Trish Finegan, Anne Buggy, Andrei Markewitz, Mike Watts, Millie Ryan, Angela Hayes, Rory Connellan, Fergus Horgan, Mary Walsh and Michael Norton for their support and guidance. Our sincere thanks to all who participated in the process with your vital contributions and experience. A special thank you to Jenny Cooke at St. Canice's Neighbourhood Hall for the welcome and space for workshops, and to Thom Stewart and Colette Tuohy for your generosity in sharing the Galway Pilot journey.

Workhouse Union works with artists, designers, architects and crafts-people to develop projects examining housing, civic infrastructure and the commons, engaging people with the spaces and places we live.

Crisis Cafe Feasibility Study published 10 March 2020 with a revised PDF version published online 11 March 2020.

Appendix III

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