



A Safe Place

The Neuk Mental Health Crisis Centre

INDEPENDENT EVALUATION

Prepared by: Social Research Solutions



The Neuk

ANCHOR HOUSE SUPPORT SERVICES PERTH

February 2023

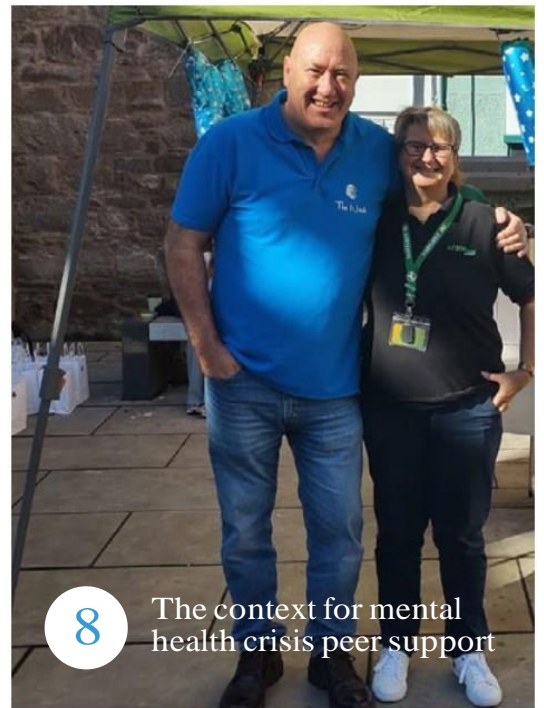
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About Social Research Solutions

Social Research Solutions (<https://www.socialrs.org/>) is an independent non-profit making, social research agency who have been commissioned to undertake an independent evaluation of the Neuk Centre, Perth, Scotland. We work with organisations to explore and analyse the outcomes that are important to them, the people and communities they support, and their funders.

Social Research Solutions is led by Dr Matthew Maycock, who along with Dr Emma Lamont, and Mr Mohammad Anwar Fetrat, conducted the evaluation and worked together to produce the final report.

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Acknowledgements

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Support

This evaluation report contains reflections on the lived experience of people who have received support from the Neuk Centre during a mental health crisis and therefore discusses the subject of suicide, which can be distressing. If you experience any distress or find the report upsetting please speak to someone you trust or contact one of the organisations below for support.



Executive Summary

The evaluation context

The Neuk Centre is a community-based peer-led service in Perthshire which supports individuals aged 16 and over experiencing distress or mental health crisis, and at risk of self-harm or suicide. Opened in June 2020 and based in Perth, the Neuk aims to provide a safe place for support to anyone reaching out for help.

The scope of this evaluation

Between January and December 2022 Social Research Solutions were commissioned to undertake an independent evaluation of the Neuk Centre, focusing on the impact it has on its service users.

Evaluation methodology

This was a mixed methods evaluation, that included the thirteen one-to-one service user interviews and six one-to-one interviews with Neuk staff. Two focus groups were conducted with a range of representatives from the Neuk's partner organisations. Additionally, an online survey was developed to enable a wider group of service users to feed into the evaluation. The analysis was undertaken thematically.

Evaluation findings

The main evaluation findings are as follows:

- Service users were particularly positive about the Neuk and the service that they provide at a very difficult time in their lives. The Neuk offered a high level of person-centred care and support to service users
- Representatives of Neuk partner organisations and staff were also uniformly positive about the Neuk, with the Neuk being a good place to work, and the Neuk staff being responsive partners

Evaluation conclusions

In conclusion, this report illustrates that the Neuk provides a unique and vital service to people experiencing a mental health crisis in Perthshire and that the centre has a significant positive impact on service users who engage with it.

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Introduction and Overview

The Neuk Centre is a community-based peer-led service in Perthshire. Locally it is referred to as '*the Neuk*' and supports people aged 16 and over experiencing distress or a mental health crisis, and at risk of suicide or self-harm.

The Neuk was developed in response to key recommendations by Sir David Strang in the Tayside, 'Trust and Respect' report (2020). This highlighted significant difficulties for people accessing urgent mental health support when experiencing emotional distress and crisis. The report recommended Crisis Intervention Centres that are open at all hours were necessary within each Scottish Health Board locality. With this, the idea of the Neuk, for Perthshire was born. Although based within Perth City Centre, the Neuk explicitly aims to operate beyond the boundaries of the building itself and promote positive mental health in the surrounding communities. In

some ways, the work of The Neuk can be seen as a form of community work. This is because they aim to promote positive mental health both within the centre and the wider community through education, participation, social interaction, inclusion and empowerment.

This chapter will introduce you to the context of crisis and peer support, give an overview of the aims and objectives of the evaluation, and the Neuk's service design, detailing what they do. It will then present an overview of the evaluation methodology and ethical underpinning of the evaluation.

“

It has long been known that people look for guidance and support from others who have had similar experiences..



People reaching a crisis point have often tried to cope with or address their problems themselves and feel emotionally overwhelmed or powerless to find a solution.

Several services currently support people experiencing mental health distress or crisis in Scotland. These include NHS mental health crisis teams, helplines, general practitioners (GPs), primary care services, crisis houses, NHS 24, and emergency services. However, suicide remains a persistent risk to life, with 753 people dying by suicide in Scotland in 2021 alone (PHO Scotland 2022). Men remain almost three times more likely to die by suicide than women, however, the number of women has increased in recent years. People living in the most deprived areas of Scotland remain more than three times more likely to die than those in the least deprived areas, highlighting socio-economic factors as a significant risk (PHO Scotland 2022).

Stigma, poor social cohesion, or pressures caused by family breakdown, insecure employment, alcohol, and substance are also

considerable risk factors. These factors, alongside the recognition that there is an insufficient focus on the prevention, identification, and assessment of needs for people at risk all contribute to the problem of suicide in Scotland. In response, recent policies have stressed the need for local partnerships and cross-sector work to support raising awareness, increasing support, and reducing the risk of suicide in Scotland (Scottish Government: Mental Health Strategy 2017-2027; Scottish Government Suicide Prevention Strategy: Creating Hope Together 2022).

Peer support has several core values vital for people experiencing mental health distress and crisis, such as building mutual and reciprocal healing relationships based on empathy, respect, and non-judgment. This means peer supporters can harness the valuable knowledge and insight that they use to support their recovery, to inspire and inform others in theirs (Gillard et al., 2017).

Peer support is widely encouraged in recovery-orientated mental health services and has grown in recognition for mental health support in recent years. Yet peer support roles and peer-led services have been slow to manifest in practice in Scotland (Gordon and



Bradstreet 2015). The evidence base for the effectiveness of peer support in clinical outcomes remains limited (Lloyd-Evans et al., 2014). However there is promising evidence for its' links to recovery outside of the medical model, in the areas of connectedness, hope, optimism, meaning and empowerment, and reducing stigma (King and Simmons, 2018).

It has long been known that people look for guidance and support from others who have had similar experiences, for example, parenting networks, or self-help groups. Likewise, in a mental health setting, patients are known to help each other, give support and share experiences. However, it has been recognised that people coping with distress and crisis at home can feel isolated and alone compared to the informal peer support already established in inpatient care settings (Carpenter and Tracy, 2015).

There are many opportunities for peer support role development within crisis service provision. However, it has been highlighted that the nature of the work can be stressful and upsetting, as well as the pressures of working in a 24/7 setting. Further, the value of peer support still needs to be recognised by many professional networks, as well as addressing issues regarding the commissioning and funding of peer roles as this can be uncertain. Additionally, support for well-being or reasonable adjustments for peer work may be necessary and requires exploration (Tattersall et al., 2020).

It is important to explore the role that the Neuk has in supporting people experiencing a mental health crisis and at risk of suicide. This evaluation will also highlight the value of peer work during a mental health crisis, while gaining an insight into what matters to people seeking help in a crisis and experiencing suicidal thoughts. To date, no Scottish studies have been undertaken that explore the experiences of service users engaging with a service like the Neuk, alongside the perspectives of staff, and partner organisations. Therefore, this is necessary to progress understanding and build the evidence base as well as evaluate the impacts that the Neuk Centre has on people in Perthshire.

This evaluation had as a central aim to collect and analyse diverse experiences of the Neuk, and to produce a report that provides rich insights into the ways the Neuk works.

- To explore the experiences of service users receiving support during times of mental health crisis and understand the impact or benefits
- To gain insight into the role of peer-to-peer support in supporting mental health distress and crisis
- To examine the perspectives of staff and partner organisations working with and within the Neuk
- To explore how service users, staff and partners perceive the Neuk service could be further developed in future

Principles of the Neuk's service design

Peer to peer support

- Wellbeing Mentors have lived experience of mental health issues
- Mutual, reciprocal, healing relationships
- Connectedness, hope, optimism, empowerment
- Reduces stigma of mental health issues

Trauma Informed

- Realising the widespread impact of trauma and the potential paths for recovery
- Recognising the signs of trauma in service users, staff and families
- Responding by fully integrating trauma informed knowledge into policies, practices and procedures

Recovery Focused

- Promoting hope for the person and their future
- Seeing skills, strengths and interests as potential solutions
- Connecting with people and offering choices
- Connecting people with others, networks and resources

The Neuk provides support to those who are often denied crisis-related NHS primary or acute mental health care due to alcohol or substance use. Removing these as barriers to accessing vital support was a recommendation identified in Strang's (2020) 'Trust and Respect' report.

The Neuk Centre service design

The Neuk is a peer-led, therapeutic space located near Perth City Centre. It aims to be a place where people can come and feel emotionally safe, supported, and receive person-centred help for their immediate mental health needs during a crisis. The service the Neuk offers follows the Social Services Scottish Council Codes of Practice and the service is registered with the Care Inspectorate.

The overarching philosophy of the Neuk is crisis support that incorporates the principles of peer-to-peer, recovery-focused, and trauma-informed approaches. The key elements are summarised in the model on the left panel.

The Neuk Centre also uses its expertise to deliver a programme of suicide intervention, prevention, and safety planning training for local community-based workers who may come into contact with distressed people, in crisis, and at risk of suicide or self-harm. This is a one-day course, endorsed by NHS Tayside and facilitated by the Neuk staff. In 2022, they delivered training to 150 community-based workers over 10, one-day courses.

There are a range of ways people can find out about the Neuk and access the services the centre provides. Their website and Facebook page feature information about what they offer and how to access it. Additionally, the Neuk uses its social media platforms to raise awareness of suicide or reduce the stigma. They hold community-based activities such as open days, football games, thera-pet events and suicide intervention and prevention training for community-based workers. As the Neuk has developed, health service providers also recommend the service as a place where people in crisis can receive immediate care and support.

- *Self-referral during times of urgent need by phoning, texting, or attending the Neuk*
- *Police officers or paramedics responding to an emergency call bring individuals experiencing suicidal thoughts, or distress to the Neuk*
- *Health service providers refer people for immediate same-day support*

The Neuk is open 24 hours a day, 365 days a year with an option for those assessed as in need to stay overnight. Currently, the Neuk employs 10 whole-time equivalent staff plus around four volunteers offering a range of therapies. The Neuk management structure is service manager and a senior practitioner. They currently have three bedrooms for service users. The Neuk work collaboratively with local organisations including, The Lighthouse, which offers crisis support to young people aged 12 to 16 at risk of self-harm or suicide. They also connect people with peer-to-peer suicide prevention support groups such as Andy's Man Club, or the Women's Wellbeing Group. In addition, they work with local health and social care services, as well as the Citizens Advice Bureau, and local authority financial and housing services. Together, these services aim to provide individuals with wrap-around support, an opportunity to de-escalate away from the situation that may be linked to their crisis, and resources to help with a resolution to their current situation.

The Neuk provides support to those who are often denied crisis-related NHS primary or acute mental health care due to alcohol or substance use. Removing these as barriers to accessing vital support was a recommendation identified in Strang's (2020) 'Trust and Respect' report.

When a person initially reaches out for help from the Neuk they are supported by peer workers with lived experience of mental health issues, known as 'Wellbeing Mentors'. They use non-judging, compassionate interpersonal skills and lived experience in a way that engenders trust and reduces distress. This initial contact aims to develop a trusting relationship that enables people to tell their stories, explore their current situation, make choices, and share decisions about the care and support they need.

Wellbeing Mentors carry out a collaborative assessment which includes assessing the risk of self-harm or suicide in the context of wider risk factors, such as the person's history of previous attempts, and other risk factors including hopelessness and substance use. Together they develop a person-centred plan that will help manage their distress and potentially their suicide risk. This will often entail a safety plan to identify coping strategies, maximise strengths, and other personal or community resources to reduce the risk of harm and involve family, friends, or carers where possible. Where risk or healthcare determines, Wellbeing Mentors will seek further intervention from NHS mental health services, or the police.

Following their initial meeting, Wellbeing Mentors can work with a person to address longer-term needs and enable supported self-management. They can offer up to six one-hourly sessions with the person to support them through their crisis time and further determine appropriate care or support interventions based on their needs and strengths. This may involve developing a Wellness Recovery Action Plan (WRAP) to prevent, recognise and respond early to a crisis, minimising stress, distress, or harm; or connecting a person to the Neuk's trauma-based counsellor, peer-to-peer support groups, financial or housing support.

When service users are leaving or being discharged from the Neuk, Wellbeing Mentors carry out discharge planning which includes ascertaining that service users have safe access to their homes. Post-discharge care also involves checking in with service users by phone to ensure they are safe and well and have phone numbers for emergency or supportive help going forward.

The evaluation was conducted between January 2022 and December 2022 and designed in collaboration with the Neuk Centre Chief Operating Officer through regular project planning meetings. The timeline with essential milestones is summarised in figure 2 below.

The evaluation questions we sought to answer were:

- What are the experiences of service users receiving support during times of mental health crisis?
- What is important, special, and unique about the Neuk?
- What is the immediate and longer-term impact for service users engaging with the Neuk?
- What are the views and perspectives of staff and stakeholder partners in providing support and working with the Neuk?
- What are service users, staff and partners' perspectives on how the Neuk might be improved or further developed?

We conducted a mixed methods study using one-to-one-semi-structured interviews, a survey, and focus groups as methods of gathering data about the experiences of service users as well as the perspectives of staff and partner organisations.

This approach was considered appropriate to collect a broad range of views and experiences of the service.

The philosophy underpinning the evaluation was essentialist/realist. In brief, research conducted from this perspective suggests a relatively straightforward relationship between experience, language and meaning. Within this, what people say is assumed to largely reflect their experience and meaning. As such, the analysis will focus on the data emanating from within individuals and be reflective of their motivation (Braun and Clarke 2006).

All participants provided consent to participate in the interviews, focus groups and survey. Participation was voluntary and they were free to withdraw at any time. All participants were given a Participant Information Sheet at least two days prior and had an opportunity to ask questions or discuss any concerns they had. At this time informed consent forms were completed and signed.

We collected information from service users in the form of anonymised demographic information about their age and gender but no identifiable information. We also gathered anonymised data from the Neuk Centre Chief Operating Officer about how many service users were supported in the last year, and how many appointments were undertaken by Wellbeing Mentors and Trauma Counsellor therapy sessions. This was to understand more about the service design, delivery and activity.

In terms of recruitment, the Neuk Centre staff co-ordinated the interviews, and focus groups, and acted as gatekeepers to potential participants by generating interest and discussing the evaluation with them. The inclusion criteria to be involved in the one-to-one service user interviews or survey was anyone who had used the service since it opened in 2020. Everyone who wanted to participate in the service user interviews was

Figure 2

Evaluation Timeline

JAN - MAR	APR - JUN	JUL - AUG	SEP	OCT - DEC
Project Planning	Service user and staff data collection	Data analysis	Partner organisation data collection	Data analysis and evaluation report write up

included, however those who were new to the service and potentially still experiencing distress and crisis were not contacted to take part. This was to prevent any likelihood of exacerbating their distress or suicide risk.

Any current staff member could be involved in the staff interviews, however for practical reasons, this was limited to six and participants were chosen on a first come first served basis. A wide range of partner organisations who work collaboratively with the Neuk Centre were also invited to participate in the two focus groups.

The interviews and focus groups were conducted by the evaluation team (MF, EL, MM). Thirteen service users participated in semi-structured one-to-one interviews, these were eight women and five men. The interviews and focus groups took place in a private room at the Neuk Centre, over the telephone or via Microsoft Teams. This was to offer a flexible approach to participants and increase accessibility. Interviews followed a topic guide and

explored: 1) service users' views and experiences of engaging with the Neuk; 2) the kinds of support they received; 3) the immediate to long-term impacts on services users; 4) areas for development or improvement to the support offered.

To reach more service users we also developed a complementary online survey in Google docs for enhanced accessibility. The survey was promoted by staff at the Neuk to service users, and through a poster displayed at the Neuk. There were four responses to the online survey, which is reflective of the challenges of undertaking data collection with mental health service users (Batterham, 2014). We have incorporated the data from the online survey that was relevant in this report.

We also conducted six interviews with the Neuk operational staff, these were five women and one man. The interviews followed a topic guide and explored: 1) their role within the Neuk; 2) examples of good practice they had participated in or observed; 3) ideas to improve or develop the service.

Two focus groups were undertaken with six representatives of Neuk partner organisations who work closely with the Neuk Centre. These included professionals from Perth and Kinross Council, NHS Scotland, Police Scotland and third sector organisations. In addition, two representatives of Neuk partner organisations who were not able to attend in person shared their views via email. Focus group sessions were facilitated through Microsoft Teams by two members of the evaluation team and followed a discussion guide. The guide focused on: 1) partners' experiences of working with the Neuk Centre; 2) viewpoints on the work they do; 3) the progress of the partnership and the associated challenges; 4) areas for development from the perspectives of partner organisations.



We conducted a mixed methods study using one-to-one-semi-structured interviews, a survey, and focus groups as methods of gathering data about the experiences of service users as well as the perspectives of staff and partner organisations.

All interviews and focus groups were digitally recorded and transcribed verbatim. Data analysis followed the six steps of thematic analysis by Braun and Clarke (2006): 1) transcripts were read repeatedly; 2) initial codes were generated; 3) codes were collated into potential themes; 4) themes were reviewed and segments with similar codes were mapped; 5) themes were defined and named through ongoing analysis to refine them; 6) a scholarly report was produced offering the final opportunity for analysis and selecting vivid compelling extracts relating to the evaluation aims and questions. The evaluation team (MM, EL, MF) undertook the analysis independently and then with an opportunity to compare and discuss codes and potential themes together. We treated the data for analysis as three separate entities, being that from service users, staff, and partners.

Between January 2022 and December 2022, the Neuk supported 475 people in crisis through 3215 appointments in total. Of these, 23 people or 4.8% of service users, stayed overnight at the Neuk to ensure their safety and well-being during a crisis. The Neuk has also provided appointments to 68 people with a trauma counsellor to support recovery.

The group of people supported by the Neuk over the last 12 months comprised, 47.8% male and 52.2% female. The age of those engaging with the Neuk is outlined in figure three below. This illustrates that the most common service user age group is between 30-50, but the figures also indicate that the Neuk is successful in attracting a diverse range of service users in age and gender (see figure 3).

Later in this evaluation, we explore the engagement between the Neuk and a range of partners. These relationships are vital in terms of referrals to the Neuk. As figure four below illustrates just under half of the referrals to the Neuk were self-referrals, with 54% of referrals coming from a range of partner organisations.

The Neuk is a relatively new service in Perthshire offering support to people experiencing distress or mental health crisis, and at risk of suicide or self-harm. Therefore, it was important to evaluate the experiences of people engaging with the service and understand the impacts or benefits of the support they offer. We conducted a mixed methods evaluation study with service users, staff, and partner organisations which will be presented next in chapter two.

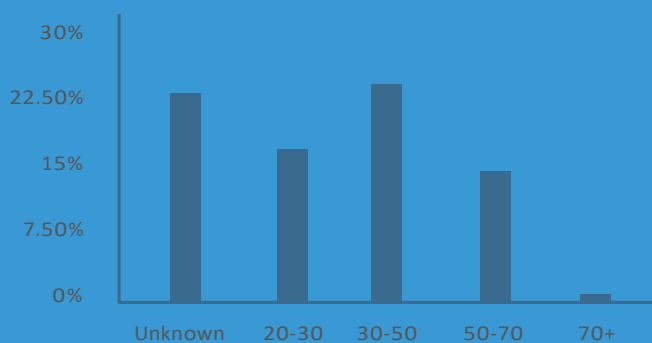


Figure 3

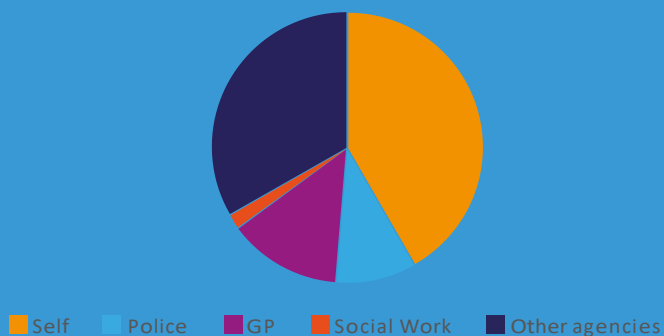


Figure 4

The Neuk is a relatively new service in Perthshire offering support to people experiencing distress or mental health crisis, and at risk of suicide or self-harm.

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Service user's experience of receiving support from the Neuk

The overall aim of this evaluation was to examine the experiences of people engaging with the Neuk, to evaluate the impact of the service and determine its value in providing mental health crisis support.

This chapter will present the evaluation's findings relating to the views and experiences of service users who have received support from the Neuk. Corresponding with the objectives of the evaluation three overarching themes were identified in the analysis of the data collected.

These were: 1) what people value most about the Neuk; 2) how the Neuk has made an impact and difference; and 3) ideas for service development or improvement.



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Participants enjoyed a sense that the Neuk was part of their community.

They liked that the Neuk received community support with food and other provisions regularly handed in for service users and peer workers by local businesses.

This reduced stigma and raised the inclusivity and nurturing ethos of the service.



What people value most about the Neuk

We asked participant service users what was important to them and how they felt the Neuk met their needs when experiencing a mental health crisis. Prominent themes were that they highly valued having a safe place to go to any time they needed it, having compassionate people who listened and supported them, and the restorative relationships they developed there.

“A safe place whenever I need it”

Some of the reasons participants said they sought help from the Neuk were suicidal thoughts or self-harm, emotional distress, family problems, trauma, dementia, or depression, as well as problems with addictions or experiencing domestic abuse. Many considered the Neuk as a safe place that was homely and welcoming for them to receive support for their emotional and physical well-being during a mental health crisis:

“I had problems with dementia and depression; things came to a crisis point and I was terribly suicidally depressed; this was a safe place where I could cry and talk about what was stressing me.”

Service User 10

For many people, experiencing a mental health crisis can be intermittent or recurring and not an isolated event. Having a supportive place to de-escalate and regulate their emotions, or escape from the causes with supportive people was vital to them:

“I’ve been there a few times and although I don’t always need it, it means a lot knowing they are always there.”

Service User 4

The immediacy of support and the doors always being open at the Neuk, were critical factors in the centre having an impact on participants:

“The door’s also open here. You don’t need to wait. That’s a big difference. That’s a big difference for somebody who’s going into crisis, who might want to take their life compared to trying to reach out to the mental health team who give you an appointment next week or scrutinise if you’re suicidal enough.”

Service User 5

Many participants valued the 24/7 nature of the services provided. They considered this, alongside the non-clinical approach to be unique to the centre, something which set it apart from other mental health services. For the participant below the accessibility of the service was central to it being special, essentially the Neuk is available when service users need it:

"I think what makes it for me special is the fact that it is open 24/7 all of the time. Even if the person I usually come to see isn't here, I can still come here."

Service User 8

Participants enjoyed a sense that the Neuk was part of their community. They liked that it received community support with food or other provisions regularly handed in for service users and peer workers by local businesses. This reduced stigma and raised the inclusivity and nurturing ethos of the service:

"It's like going home. It's like a big, massive home and just relaxing. There's coffee, money advice and they get donated cakes and food from nearby like they are welcomed, wanted."

Service User 3

The people and relationships

Participants consistently indicated that the Neuk staff were what made the centre special and unique. The qualities of the people who work there were evident in the relationships they developed through the one-to-one approach, alongside the time and care they give. This contrasted with other services they had previously engaged with:

"If I'd known about this place years ago, I'd come here, but because I was using other services, I thought I was in the right place, but this is the right place to come. I feel safe like I could open up and talk about anything."

Service User 2

How the Neuk staff engage with service users comes through as a particular strength, with the majority reflecting positively on the friendly approach of the staff:

"Everyone treats you like a human being. No one looks down on you and they're also friendly. I've never known such a friendly bunch of people."

Service User 6

Such an approach resonates with the Independent Inquiry into Mental Health Services in Tayside – Hearing the Voices of People with Lived Experience (2018). Participants particularly appreciated that they could trust the staff supporting them. They felt a connection with them and knew they were people who had been through similar experiences and real-life struggles. A number considered the relationships they built with staff were critical for them during times of crisis:

"This service here is vital. People like myself, trust people here. It's like you make a bond with them and you know they understand cos they have been there themselves and they care, without judgement or being a burden to them."

Service User 2

Peer-to-peer support was not only offered by the staff but other service users too in the centre's facilitated drop-in groups. These were clubs where they could both give and receive support within a community of people having similar experiences:

"The Monday breakfast club where you might come along... you'll come in, there might be ten other people here and we'll sit around, have a chat, and discuss our problems and the like. And there's always someone on hand to give anyone support or advice as they need it."

Service User 10

The healing and restorative nature of the relationships participants developed with the staff was recognised by all. They felt they could talk to them about anything, and talking and being with the staff in itself was calming and healing:

"Just when everything felt too difficult to cope with at the house it was somewhere to go. It was a safe space where I could just cry and talk through what was troubling me and what was stressing me and it was just a really safe place to go and unburden and they were just wonderful compassionate and healing."

Service User 13

Similar views were shared by the majority of participants, illustrating that engaging with the Neuk was an empowering process for service users in this evaluation, as summed up below:

"They make you feel like you're a human being and they take you as a person regardless of what state you're in or how your mental health is. You're not a number to them. You're a human being, and you feel that there."

Service User 8



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For many participants, the Neuk was synonymous with saving their life and preventing suicide.



Some participants recognised the Neuk as an alternative to having to seek help from the NHS and potential hospital admission.

How the Neuk has made an impact and difference

All service user participants were asked what impact engaging with the Neuk has had on them, and what difference it made in terms of their recovery. Response to these questions varied significantly, shaped by the particular issues that each service user was dealing with. Prominent themes expressed were how the Neuk had been lifesaving at the point of crisis, had led to better mental health and healing, and had given new directions and hope to the participants.

Lifesaving at the point of crisis

For many participants, the Neuk was synonymous with saving their life and preventing suicide. They considered the kindness and compassion offered by the staff who listened and supported them to have kept them afloat during some very difficult times and adversity in their lives:

“They listened to me and saved my life; they stopped me from suicide. They also gave me counselling and they worked a lot to protect me.”

Service User 4

Some participants recognised the Neuk as an alternative to having to seek help from the NHS and potential hospital admission. They saw this as a positive and felt the crisis resolved faster by using the Neuk as opposed to going to a hospital for crisis assessments:

“Sometimes you need a place of safety and hospitals have provided safety and saved my life so they fulfil that purpose. But in terms of being a human and blossoming, this provides that and it stops that thing of having to go into hospital.”

Service User 10

Longer term, some felt engaging with the Neuk had been life-changing in how they responded to emotional distress or crisis, how they perceived asking for help, and letting people see them in a vulnerable or emotional state:

“If you’ve been in a crisis and self-harmed, the next day you can feel very numb and a lot of shame or maybe embarrassment....I suppose it’s being completely in a vulnerable position and letting somebody be there when you’re in that state to help you. Yeah. Because for me, I used to struggle to reach out for help.”

Service User 5

Better mental health and healing

Further impact related to how the interventions or therapeutic approaches received from the Neuk had helped service users to achieve better mental health and healing over time. They weren't always specific about which methods they had engaged with or indeed benefitted from but they had taken what they needed from the support offered. For example, one participant described how engaging with the Neuk had changed her mindset and how she sees the world:

"For me, one massive thing. I didn't trust men. And these guys in here helped me see that not all men are bad men because all I've known all my life is bad men, violent men but I have a different mindset now. I'm thankful...and I have more trust."

Service User 9

Participants described how the counselling they received at the Neuk had led to longer-term well-being. Within the context of their description this was likely to be the weekly sessions/meetings they had with the Wellbeing Mentors. They felt the Neuk had helped them develop coping strategies for anxiety and day-to-day issues caused by social and life stressors, such as going out of the house, reflecting upon what is best for them, or dealing with child custody proceedings:

"The counselling helped me with coping strategies for my anxiety and helping me through the day-to-day issues as I'm going through the court with my ex-partner regarding our children. And helped me on a day-to-day basis when I was struggling."

Service User 3

The diversity of support offered was highly valued as people experiencing thoughts of suicide or self-harm often need a combination of emotional, psychological and practical support to enable resolution and recovery. For example, the service user below reflected on several sources of support that made a difference to them:

"The trauma counselling has been good because I have struggled quite a lot in my life and just realising the cause and triggers, that's helping me moving forward. The other lady that comes here, helps me with financial advice and helps me get stable financially. So that's been a big help in my mental health as well. Just another weight off of my shoulders."

Service User 1

While another described learning to show his emotions and talk more freely about how he is feeling as an important outcome:

"I'd say allowing myself to show my emotions, being my longer-term impact on me more than anything else, being able to now talk to people freely... That was what was holding me back in the first place and making me bottle things up. So now I don't do that. I talk to people now."

Service User 5

New directions and hope for the future

When considering how the Neuk had made a difference many service users described gaining renewed hope for the future, new directions and rekindling hobbies and interests as a direct result of the Neuk's support:

"Very positive. Moving forward compared to back then I'm more at peace with myself. I've got a new direction and hope. I've got my direction back for photography, golf, and these guys here suggested I joined the Scottish National Trust, which I did, and I've been around a few of the castles and the like since. Gets me out and about if you like."

Service User 6

The Neuk also helped service users seek help from other important resources within the community. This was empowering for people to gain support for addictions, financial issues, dementia, legal advice or reporting a crime; all issues that had contributed to their crisis. This is reflected by the service user below:

"She made an appointment with a police officer for me so that I could make a statement about something that has happened to me. So that was helpful because it's something I would have never done by myself."

Service User 3

A recurrent theme around impact for service users was knowing they could come back whenever they needed the Neuk. If they had another crisis in future they knew the Neuk would be there for them. The open-door, self-referral process was vitally empowering and gave them hope and confidence to go forward. This was summed up by the participant below:

"I can continue using it until I feel that I no longer require them to be honest. And that's their model, too. And even in a year, I get better now, and in a year, I fall, I can come back."

Service User 8

A recurrent theme around impact for service users was knowing they could come back whenever they needed the Neuk.



There is a sense from service users that it is community-led, people led and a lifeline.



Ideas for service development or improvement

A core focus for this evaluation is to support evidence-based developments and improvements in the work that the Neuk does. Consequently, we asked all participants for their views on if there was anything the Neuk could have done better or differently when supporting them, or how their services could be improved.

Firstly, it is important to state that responses to this question were uniformly positive and that service user participants generally felt there was little that could be improved. As such they wanted the Neuk to keep up the good work. They also gave some suggestions for future development of the service offered which included enhancing the visibility of the Neuk, strengthening access and reducing barriers people may have in asking for help. These are discussed in turn below.

Keep up the good work

The evaluation found that the Neuk had catered for all the needs of the service users interviewed during a particularly difficult time in their lives. Participants were largely unable to suggest anything that might have been done better and felt the Neuk had gone above and beyond to help. The quote below is reflective of these responses:

"I can't think of anything else that they could have done for me. They were wonderful, going above and beyond. Anyway, that's why I think we've got everything you would need for your mental health support here."

Service User 12

Due to the high satisfaction with the service the Neuk offers, some participants indicated they would want more. For example, more peer support groups, drop-ins and breakfast clubs. Or as shown below, longer-term counselling:

"I think the only thing that I would say is that there was sort of a time limit set on how much counselling I could have. I think it would be good to maybe consider for future service users whether that could be a longer number of sessions. I think that would maybe be something that they could look into, maybe having longer term, I suppose. I think that could be good for some people."

Service User 3

Enhance the visibility of the Neuk

Some service users suggested that the Neuk could become more visible. For example, one participant suggested that they might be located somewhere more prominent and less 'hidden' within Perth City Centre. Another wanted to improve the community's knowledge that the Neuk is available, asking for more similar facilities in the city and beyond:

"I'd like to improve the knowledge that this is here and I'd like there to be more facilities like this so that there's an increased resource for people who are suffering."

Service User 10

This participant felt that increased awareness was not only necessary amongst the local community, but also critically amongst professional groups who might refer people to the service.

Many service users also reflected on how the Neuk could raise more public awareness using more social media platforms to promote its services and do different types of outreach:

"Because my experience has been so positive, it's kind of a difficult one, but I do feel like they maybe need to work on the advertising side of things so that the word gets spread more easily because I know a lot of people who have struggled with their mental health that didn't even know that the Neuk existed."

Service User 3

Strengthen access and reduce barriers people may have in asking for help

Service user participants reported very few and minimal difficulties in engaging with the Neuk, showing that the support provided is accessible and appropriate for the needs of its service users. Some described difficulty in asking for help and overcoming some of the internal challenges they had in reaching out to the Neuk. One participant suggested that making appointments via phone was challenging due to her anxiety, although she was able to send messages via Facebook. Another reflected on the challenges she faced in initially engaging with the Neuk:

"The first couple of times I tried to come here, but found myself walking around and walking straight past the gate. And it was a big hurdle to get in the door, but I did it eventually."

Service User 5

The suggestions from service users further illustrate how the Neuk is having a positive impact, in so far as service users want to see the service grow and have a greater capacity to meet the ever-increasing need for the unique type of support that they offer.

One participant suggested that before engaging with the Neuk, service users could have an opportunity to come and see the place, and be shown around so that when they reach out in a crisis, it's not so scary or daunting. Another reflected on their apprehension on first engaging with the Neuk:

"The first time coming in was obviously nerve-racking because you didn't know what you were expecting. For that, I suppose anybody would feel nervous going somewhere they don't know. But as soon as I got through the door I felt quite at ease."

Service User 7

Further suggestions included more overnight provision and drop-in facilities and it was evident from the participants who took part in this evaluation that they are invested in the work of the Neuk. There is a sense from service users that it is community-led, people led and a lifeline, something they hope will be supported to enable permanence for its future. This is summed up below:

"I think they're working in a fantastic direction to helping so many people in this town and I hope they are supported and here for a long time to come."

Service User 1

Summary

The lived experiences and perspectives included in this chapter reflect the way that this evaluation has prioritised the views of service users, resonating with a growing body of evidence around the importance of service users shaping mental health services (Ennis and Wykes, 2013; Thornicroft and Tansella, 2005). Additionally, the Independent Inquiry into Mental Health Services in Tayside – Hearing the voices of people with lived experience (2018) further strengthens local approaches to ensuring the voices of people with lived experience influence mental health service and policy development.

Ultimately, our interviews and survey with Neuk service users illustrate that it is having a significant positive impact on the lives of those who use the Centre. There are many positive reflections in this chapter that clearly illustrate the vital and high-impact work that the Neuk is doing. In the chapter below, we move on to focus on staff and partner perspectives and views of the Neuk's work.



Staff and partners' perspectives on the role and work of the Neuk

An important aspect of this evaluation was to gain insights into staff roles and the support offered by the people working within the Neuk, alongside enabling representatives of Neuk partner organisations to share their views of the service.

Six Neuk Centre staff were interviewed, including five Well-being Mentors, and the Chief Operating Officer. Additionally, two focus groups were undertaken with eight representatives of the Neuk's partner organisations. This data is presented below.

Staff views and perspectives

Two overarching themes were identified in the analysis relating to staff views and perspectives. These were: 1) Wellbeing Mentors supporting people in crisis; 2) staff support, training and service development opportunities.

Wellbeing Mentors are considered to be at the heart of the service and the first point of contact for people in crisis looking for help either over the phone, by text, or on arrival at the Neuk.

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Central to their relationships is peer-to-peer support, where Wellbeing Mentors bring their own lived experiences to draw upon. This means that they can mentor someone from their crisis because they have been there before and have resources that may be helpful.

Wellbeing Mentors supporting people in crisis

Wellbeing Mentors, Trauma Counsellors, Volunteers, and a Service Manager are all important roles within the Neuk. However, Wellbeing Mentors are considered to be at the heart of the service. They are the first point of contact for people in crisis looking for help either over the phone, by text, or on arrival at the Neuk. They are central to the therapeutic interventions offered, empowering people with safety, skills, and tools as well as connections to other agencies of support within their community. Wellbeing Mentors are also pivotal in liaising with any relevant services required to be involved in supporting the person, such as GPs, hospitals, community mental health teams, and other agencies. They often care for people who have experienced trauma, are distressed and at risk of suicide or self-harm.

Peer-to-peer support and the individualised care

Staff described the core aspect of a Wellbeing Mentors role is to support a person safely through crisis. An important resource they use is offering six sessions of supportive counselling after the initial crisis meeting, starting as soon as the next day. Central to their relationships is peer-to-peer support, where Wellbeing Mentors bring their own lived experiences to draw upon. This means that they can mentor someone in crisis because they have been there before and have resources that may be helpful:

“A well-being mentor is mentoring somebody for their mental health crisis because you’ve been there before, and you know how it feels. So, it’s bringing that experience into the role as well, keeping people safe, keeping them going. It’s very important. It’s just keeping people safe.”

Staff 5

The Wellbeing Mentors value being able to bring their own story to their work, and share their life experiences with individuals but also stress this is within the scope of boundaries. They recognise that the therapeutic relationship is not about them but instead about the person seeking help:

“We talk about being more open with people, and it’s a good way to be. But we also draw the line because I can share experiences, but the appointments or the crisis, it’s not about me. I can say, “I’ve experienced similar, and this is what I did” but make sure I’m not taking over.”

Staff 1

The accessibility of the Neuk within the centre of Perth and the power of peer mentoring were described in the staff's stories. For example, their ability to give meaningful, compassionate, empathic responses and support:

"I worked with a man who had been sitting at the banks of the river intent on driving his van into the Tay and his wife managed to bring him in here. When they arrived both of them were in floods of tears and in real, real crisis... almost from the point where I told them that everything's okay, I've been where you are and you can get through this...and from that initial point I saw his eyes lighten a little bit. He was telling me what was going on and why he was feeling he had to end his life and I was able to empathise with that thought process as he was going through it and it was like a revelation for both of them....knowing he is not the only person who has these thoughts or thinks that way."

Staff 1

Wellbeing Mentors supporting a person in crisis emphasise the need for individualised care. It is important to them to look at an individual's needs, and where necessary find the appropriate person(s) to help them going forward. They describe the essence of their work as "mentoring", "guiding", and "encouraging people" to work out the problems that have led to the crisis but with a supportive hand. Staff perceive that they have a diverse set of skills with each having different life experiences and backgrounds. Further, the time they have with service users means they can build a relationship to understand what the person might need on what one Wellbeing Mentor calls the 'help ladder':

"So, we initially take people in their crisis, so they can either walk in, GP referred, police referrals, quite a lot of ambulance referrals, and people sent to us from NHS mental health services. So, really all the services are using the Neuk. They come in initially in their crisis, we assess exactly what they need, and a big percentage of people then go on to be seen over the six sessions we offer. So that's general counselling, general well-being. We get to know everything about them so that we know the next step on the help ladder, which could then be hypnotherapy, trauma counselling, or community peer groups."

Staff 2

Empowering with safety, skills, and tools

At the forefront of the staff's mind is providing a safe space for people either within the Neuk, virtually over the telephone, or through the texting method. Likewise, they highlight the importance of working to keep the person safe during their crisis, and several approaches are used to enable this. On entering the centre participants said they strive to put the person at ease and feel comfortable and safe by being welcoming, and sensitive, offering a warm drink and a seat in the living room:

"The well-being mentors are the first point of call for anybody. And it's just about putting people at ease and trying to make them feel comfortable and safe in the place they share their, perhaps lifetime experiences. So, I mean, really, whatever is needed for a person in that time, and then we see them again to look at building coping strategies. And then if it's felt that there's support needed beyond that, it might be trauma counselling or referral to social care for longer-term support."

Staff 5

Wellbeing Mentors described using skills to support people to regulate their emotions when distressed, offering quiet and calming spaces, such as the sensory or quiet room, with tranquil lighting, music, and peace from the world outside. They described how some people just want time on their own while others are offered support using breathing and grounding techniques; giving them a moment for anxiety, distress, or crises emotions to subside safely:

"I reflect on things like CBT [cognitive behaviour therapy] and things that I've had personally in the past. Grounding techniques, breathing techniques, all sorts of things that help when you are distressed, can't breathe properly and panicking. My first thing would be the sensory room, very quiet, and sit with them, if they want me to stay then I can help with their breathing, bring them down, or even put in a little bit of relaxation music that we've got in there. Some people just want a bit of time on their own for a minute before they speak to you so they can get themselves together and regulate themselves. So, it's all dependent on the person. But yeah, I just refer to things that I know help me and I've learned through other jobs, and I'm just constantly researching as well."

Staff 5

They strive to put the person at ease and feel comfortable and safe by being welcoming, and sensitive, offering a warm drink and a seat in the living room.



They also often involve families in the support offered and highlighted the availability of an overnight bed when they are concerned about the person's safety.

Participants also described some of the tools and skills they offer service users within the peer-to-peer relationship, such as safety planning, wellness recovery action planning, motivational interviewing, a cognitive behavioural approach, and problem-solving. They also often involve families in the support offered and highlighted the availability of an overnight bed when they are concerned about the person's safety:

"We sometimes do WRAPs [Wellness Recovery Action Planning] with people. We spend the 6 sessions with them talking about hope, support, and learning until it's finished so that at the end, they can look back on everything that they've talked about.... They have coping strategies and can keep looking back on their WRAP and say okay I feel like this, what did I say I could do in my WRAP."

Staff 3

Connectivity with other practitioners/agencies

The Neuk staff described working closely with other community agencies such as the Citizens Advice Bureau for financial or legal advice, drug and alcohol services, GPs, and mental health services. They also build connections to the local community and peer support groups or services as a resource to support people to move forward from the Neuk:

"We can offer people links to groups like the Women's Wellbeing group or connect people to what might be happening in their community, or services like the Citizens Advice Bureau. So, we've got to keep up to speed with what's out there."

Staff 3

Staff highlighted the value of the trauma counsellor who can provide longer-term counselling to service users who have experienced acute or complex trauma within the emotional safety of the Neuk.

"We have the trauma counsellor who comes here and if people want to talk about something that has happened to them like abuse or violence then once we have helped them through the initial crisis and given them some safety tools then we can ask the trauma counsellor to see them..."

Staff 2

Importantly, staff described steps they took to help service users experiencing psychosis or immediate suicide risk. In these circumstances they sought support from the NHS mental health services or the police. They were positive about the good relationship the Neuk has established with these services and the progress they have made in the last year to provide a safe and seamless service for people in distress and crisis. For example:

"We got a call from someone in distress who had used the Neuk before but had gone ... to end their

life. So my colleague who was on the phone with the person told me to phone the police.... It wasn't until we heard the police were there with the person that we were able to put the phone down because we knew she was in the care of the police. That was a moment when I thought 'that was well done, that was good. Lifesaving – and that's what we are here for.'

Staff 3

We further explore these connections from the perspective of Neuk partners later in this chapter.

Staff support, training, and service development opportunities

Participants described a range of ways they have developed the knowledge and skills they use daily, as well as the Neuk's approach to supporting staff and each other. They also discussed ideas for service developments in the future.

Staff support and training

Some staff said they had been on courses before taking up the role of Wellbeing Mentor. For example, a yearlong accredited Peer Development course provides a grounding in peer-to-peer support. Similarly, others expressed doing courses in Motivational Interviewing techniques, Cognitive Behavioural approaches, or the Mental Health First Aid course:

"The main thing is my personal experience, but I have done other training as well. I've done the Mental Health First Aid course and that really helped fill some of the gaps in my personal experience – I had my own experience but that didn't give me other people's experiences so that really helped me learn about other things that people go through, like addictions.... I was also previously a facilitator with Andy's Mans Club as well."

Staff 1

Once in the role there was a strong emphasis on in-house training responding to the varying needs of service users, and using a variety of educational methods, including a 'staff reading library', peer or team discussions, workshops, watching television documentaries around suicide, self-harm, and other free mental health courses:

"Staff have a wealth of experience themselves and so we explore a lot of that together and in supervision with them... we do have a reading library and a lot of peer discussions about what might be happening around us and in particular some documentaries that have been on the

television....they also create their wellness recovery action plan (WRAP) so that they've got the core skills training...there's loads of free training getting offered just now and we have access to the Health and Social Care Partnership programme of training..."

Staff 4

Although free courses or training via local organisations such as the Scottish Drugs Forum were quite common there was high motivation from the staff interviewed to do more courses or training. Some funded courses are available for staff but it was recognised there is little money available for education and skills development. Topics staff are interested in learning more about are suicide prevention and self-harm, workshops on trauma, drugs and alcohol, as well as understanding mental health and mental ill health more fully:

"We receive suicide prevention training but maybe another short course on that...so you can learn more...Also a mental health course, I think everybody has to know the basics on mental health and about diagnoses."

Staff 2

More informally, training around pathways of care and clarity of staff roles was suggested to ensure consistency and understanding. For example, completing benefits forms:

"We have an induction and there are handbooks but I'm not sure of pathways, like what exactly we are meant to do to help and what we're not, how far we're meant to go, some staff complete benefits forms while others say we should connect service users to citizens advice."

Staff 3

Staff participants described support is received through regular supervision and meetings with the Neuk managers who they described as approachable and supportive. Importantly, staff said they could talk to them if they were struggling with the role and acknowledged it could be a stressful job. Two described working part-time as a helpful strategy to negate stress, they also felt that working within the mental health field had built their resilience and highlighted to them the need for self-care:

"Sometimes it is hard to shut off when you go home. And I think that's normal because we all care, but we do have supervision, and there's always someone there to support you. Staff are really supportive, management is supportive. So, if you do feel like you aren't coping, you can talk to them personally. Myself, I only work part-time for that reason, because I feel that it would be too much for me to do full-time."

Staff 6

There is a consensus that the peer-to-peer element of the Neuk is especially valuable and somewhat unique for people in distress and crisis, therefore developing this going forward is important.



I haven't heard anybody say a bad word about them. I've heard lots of comments from service users telling us how positive they've been with their experience.

Neuk staff service development recommendations

As part of the evaluation, we asked staff for their views on how the service might develop or grow. Service development opportunities were considered based on why the Neuk was created in Perth, what the identified needs are, and what they consider they do well and makes a difference. For example:

The service continues to grow with what people say that they're needing and what they're looking for."

Staff 4

There was a consensus that the peer-to-peer element of the Neuk was especially valuable and somewhat unique for people in distress and crisis, therefore developing this going forward is important:

"The peer-to-peer support aspect is quite unique and I think it's important going forward that we build on that and don't lose that speciality."

Staff 5

But that outreach and co-working with communities or other organisations such as the police and NHS services are also good growth opportunities:

"The growth for me would be about the ability to support people in the community a bit more. Last week the police asked if we could go to a visit with them but we aren't staffed for that kind of outreach. So it's just whether there would be scope for that going forward."

Staff 4

"Last week the NHS was looking at a test of change to enable us to refer directly for mental health assessments so that we won't have to go through intensive home treatment teams or GPs, so we're going to be working on that as well."

Staff 4

Further, potential developments suggested are outreach to schools, colleges, and workplaces to raise awareness of the Neuk and the support available for people in crisis; also sharing the Neuk model with other towns and cities interested in adopting a similar approach:

"I'm hoping that we can encourage other places, I know there is interest in other towns and cities to get somewhere similar rolled out. I think that's the longer-term goal. I'd like to see more Neuk's in other cities."

Staff 4

Partner Representative Focus Groups

Four key themes were identified from the focus groups. These were: Experiences of partnership with the Neuk; partner views about the work of the Neuk; what makes the Neuk special; and partner recommendations for future development.

Experiences of partnership with the Neuk

The first question that was posed to representatives of Neuk partner organisations was related to their experiences of partnership with the Neuk. Overall, respondents in both focus groups had a positive perception of the Neuk, not only about the range and types of support the centre offers but also about their service delivery model. These reflections are included in the quotes below:

“They provide emotional support as well as counselling, as well as mental health, as well as signposting to several services. So, I think the range of what they do is quite significant, and they provide it at really significant times in people’s lives.”

Partner 4

“So, they can make more informed decisions about what support that person may need at the time. It is the gold standard for me, and better sitting in a community setting rather than in a hospital setting.”

Partner 5

Another feature from the partners’ perspective was the way the Neuk Centre conducted its service. This was considered a principle-based organisation rather than a process-based system of delivering services often experienced in statutory organisations. Besides a high level of satisfaction, representatives of partner organisations appreciated the hard work and approach that the Neuk staff took. For example, this partner indicates that there is a strong ethos of teamwork and collaboration among the Neuk staff:

“I think they have got brilliant principles. It’s a principle-based organisation, as opposed to a process based or a regulatory-based organisation which we all live within, they need to maintain those principles.”

Partner 2

Focus group participants also stressed the significance of the Neuk to the local community and one partner highlighted they had nominated them for a National Partnership Award. This highlights the positive view of the Neuk as a partner organisation:

“They are really supportive of us, and I think they provide a vital role in keeping the public confidence in our services, as they are mitigating the public stigma that exists. We’ve got well-being in the community which we’ve never had before. We’ve always been very crime focused and we’ve found the Neuk an exemplary service. We’ve nominated them for a National Partnership Award so that gives you an indication of how strongly I feel about the benefit they’ve been to us locally.”

Partner 5

Partner representative views about the work of the Neuk

Partners consistently recognised that the Neuk has a growing reputation within the local area for providing safe and seamless support for people in a mental health crisis. For example, one of the partners below highlights the strong local reputation that the Neuk has:

“I haven’t heard anybody say a bad word about them [the Neuk]. I’ve heard lots of comments from service users telling us how positive they’ve been with their experience of the Neuk.”

Partner 1

Alongside a high level of satisfaction from the Neuk service users, partners also reflected positively on the level of care and services that the Neuk provides. There was a recurring sense that the Neuk staff go above and beyond in their support of service users:

“Really nothing is too big or too small. So, if someone just needs to go and have a safe space to go and have a conversation because they’re worried about someone in their family, that’s the Neuk... I mean, they don’t offer [long-term] residential placements, but they’ll certainly hold someone in a safe space until they feel that period of crisis or period of danger or is over.”

Partner 2

Additionally, there was a consensus amongst the Neuk partners regarding the quality of service they provide, with all in agreement about the high reputation of the Neuk:

"I think just mirroring what [another focus group participant] said, the reputation is fantastic throughout Perth and Kinross. Anybody you speak to that's used it as a service user or as a partner agency speaks very highly because they're quite often the only place that's left open in times of crisis. So they have an excellent reputation, and I don't really think we need to elaborate on that."

Partner 4

Related to this, another respondent spoke about their concerns regarding ongoing funding for the Neuk, given the importance of the service it provides:

"I would agree that I haven't heard any negatives about the interaction with the individual service users or partners. My concern is the continuity of their funding model because it's been so important."

Partner 5

Ultimately, the partner organisations who participated had a consistently positive perception of the Neuk and acknowledged they were very satisfied with the work that they do.

What makes the Neuk special

In the focus groups, the Neuk partners were asked about the specific characteristics that made the Neuk special or different from other agencies and services. There were different factors discussed in this part of the focus groups, among which, the majority of respondents agreed that the Neuk is unique in providing a safe and secure place for people in a mental health crisis, 365 days a year.

"There are very little to no community-based mental health services that operate 24 hours, resulting in one of the only crisis based out of hours services besides the medical model offered by the NHS. The Neuk is unique and important as it provides an alternative option."

Partner 6

One of the most prominent features from the partners' perspectives was the internal environment of the Neuk Centre. They discussed that the non-clinical setting of the centre with a homely-based environment is particularly unique and important:

"This is really important from our perspective, that it takes it out of that clinical environment. So obviously the Neuk and the whole environment that function within it seems to be much more from a homely environment, a homely setting and a much more welcoming environment. Whereas we have to take patients down into a clinical environment. They have to sit in a cold clinical setting and be seen through a variety of different experts and professionals, and I think that actually in turn puts up barriers."

Partner 3

Partners also focused on the importance of the Neuk services as a one-stop-shop model in which many services and sources of support are available within one setting:

"What is really interesting and attractive to me about what they do is they offer one-stop-shop services. So, if they receive someone and they can't do it themselves they signpost to others that can, and within their building, they have other services that use it for."

Partner 5

One of the partners indicated that the Neuk model was responsive and less constrained by the bureaucracy within the NHS:

"The Neuk it's more localised, it seems to be much more flexible. It seems to be much more responsive, whereas, coming to the NHS we can get bogged down in a lot of bureaucracy, a lot of processes, a lot of protocols, and I'm not saying that the Neuk doesn't have processes and protocols, but they don't seem to have to navigate through them as rigidly as what we [in the NHS] do, which I think is much more beneficial to the individual client group."

Partner 3

A different partner went on to reflect further on the flexibility of the Neuk's model, and their independence from statutory services as a further strength of their work. This made service provision in some ways easier and less constrained:

"They also don't have all the restrictions that statutory services must handle.... In the sense of we are constantly bombarded almost daily at this moment in time by local and national governments wanting reports, wanting corporate plans, wanting action plans, wanting budgetary statements. Now I know that they will have to have their governance procedures, but I don't think that they are as demanding."

Partner 2

Five attributes of the Neuk that makes it unique

1

A safe and secure place that offers peer led support

2

Functioning as a one-stop-shop model

3

In some ways independent of the government statutory

4

Non-clinical and homely-based environment

5

A separate entity but more responsive and professional



The Neuk

ANCHOR HOUSE SUPPORT SERVICES PERTH



Recommendations and Conclusions

There are six overarching recommendations emerging from this evaluation, that will support the ongoing growth and development of the Neuk:

- To continue to build, develop and grow the service within the communities of Perthshire, raising awareness of the service to reach and support as many people as possible.
- To secure long-term funding, including developing new income streams (such as developing the Neuk suicide prevention training offer) to expand service capacity.
- To develop a robust governance and reporting structure for the service with performance indicators to ensure sustainability, value for money and evidence of outcomes for service users, funders and partner organisations.
- To devise a staff development, support and training plan for all staff to ensure they have the necessary knowledge and skills, and support for the role.
- Develop an ongoing evaluation model, emerging from this evaluation to capture and enable the analysis of the long-term and ongoing impacts of the Neuk.
- To explore the possibilities of the Neuk model being replicated in other parts of Scotland.

The analysis of service user interviews illustrates the often profound and meaningful impact that the Neuk has had on its service users. It is important to recognise the context of their engagement as being in mental health crisis at that time.

Using a mixed methodology this evaluation of the Neuk was undertaken between January to December 2022 by Social Research Solutions. The evaluation entailed collating and analysing the views and experiences of Neuk service users, staff and partner organisations.

This provided rich insights into the service that the Neuk provides to people in mental health crises across Perthshire. All of the different participant groups in this evaluation generously shared their time with the evaluation team, and the insights that were shared, illustrate the importance of the service that the Neuk provides.

The evaluation entailed thirteen interviews and an online survey with service users. Service user interviews were thematically analysed, which forms the principal focus of this report. The analysis of service user interviews illustrates the often profound and meaningful impact that the Neuk has had on its service users. It is important to realise the context of their engagement as being in mental health crisis. In this challenging context, the Neuk provides a range of unique services and support focused on what the service user needs at their time of personal crisis. The non-medical, peer-led approach to support that the Neuk provides, within a homely setting that is open every day of the year was a consistently important aspect of the service, to service users.

Additionally, six Neuk staff took part in one-to-one interviews as part of this evaluation. These interviews illustrate the staff's

strong commitment to the peer-led support model which is a core strength of the Neuk. The Well-being Mentor role that the Neuk has developed is something that the Neuk staff seem particularly engaged with. This provides a meaningful role through which to draw on their own experiences and put service users at the core of their work.

The two focus groups held with representatives of Neuk partner organisations illustrate that the Neuk has developed positive and productive partnerships with a range of local partners. The representatives from each of the Neuk partners were all positive about the growing reputation of the Neuk. They were consistently impressed by the work that they do and the strong commitment of the Neuk staff. The partner perspectives included in this evaluation indicate that the Neuk can grow from a strong foundation of support from local partners.

To conclude, this evaluation report illustrates the important impact that the Neuk is having in the lives of people in Perthshire. The evaluation intentionally prioritises the perspectives and experiences of the Neuk service users; these are the most important perspectives to include in this report. The evaluation team hope that this report gives rich insights into the Neuk with a focus on service user perspectives. Finally, we hope that this report will raise awareness of the work of the Neuk and provide inspiration for other similar centres across Scotland. This will enable innovative peer-to-peer approaches such as the Neuk to have a wider impact across Scotland.

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