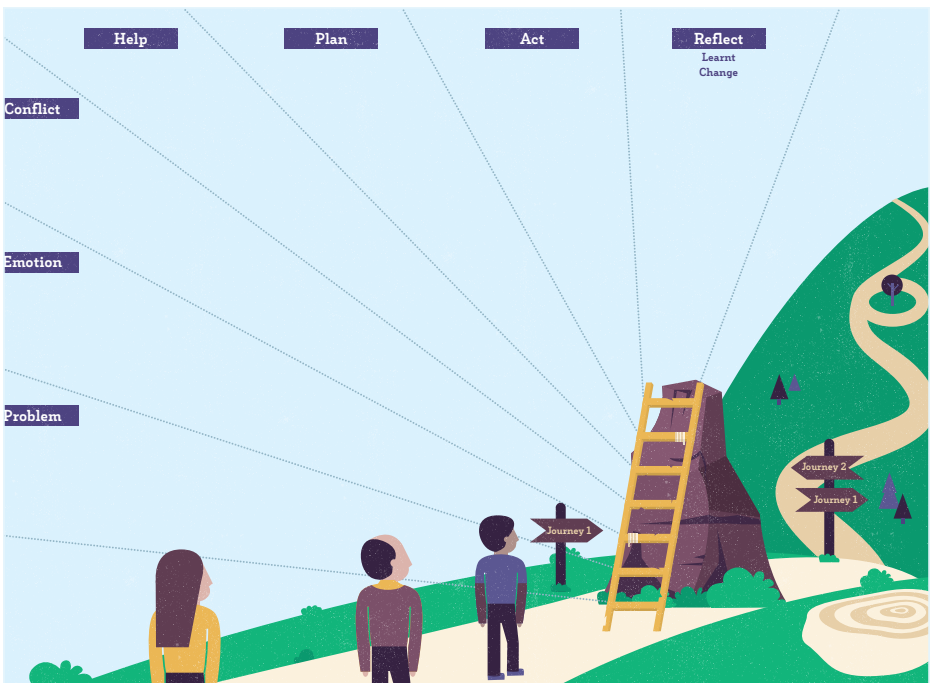


# FULFILLING LIVES

Newcastle & Gateshead

## Evaluation of a Dialogical Psychologically Informed Environment (PIE) Pilot



**CHANGING LIVES**

# WHAT IS A PIE?

**P** psychologically Informed Environments, or PIE, describes an innovative approach with five key elements which staff teams can develop to better meet the needs of people with complex trauma histories (such as homelessness, mental health, addiction and offending).

Often people with complex needs do engage with accommodation based services. PIE helps staff and clients to reflect on their practice and increase their understanding of the thoughts, emotions and stories which underlie challenging behaviour and difficulties forming relationships. Relationships are valued as the principle vehicle for change.

The five elements of PIE are;

1. Reflective Practice (Staff Training and Support)
2. A Psychological Framework
3. Focus on Relationships,
4. The physical spaces,
5. Evidence generating practice.

Westminster City Council have produced PIE guidance,<sup>1</sup> and a Film interview<sup>2</sup> with the originator of PIE, Robin Johnson can be seen on You Tube.

---

<sup>1</sup> <http://meam.org.uk/new-resource-on-psychologically-informed-environments/>

<sup>2</sup> <https://www.youtube.com/watch?v=NKrFI5Bvndg&feature=youtu.be>

“

**They were more open in a setting where they could say what they wanted to say, without fear of any repercussion**

”

“

**We've given ourselves permission to have time, to think and talk about things, and that makes us a bit more proactive.**

”

“

**There's not always answers at the end of the rainbow, but it's about discussing it, you've got more chance of finding the answers the more people you've got involved. And even if they're not answers, it's new approaches, new ideas that you can try to solve a problem.**

”

## SUMMARY

**The Fulfilling Lives Programme is seeking to help people with multiple and complex needs to better manage their lives, by ensuring that services, across Newcastle and Gateshead, are more tailored and better connected to each other. The focus of the programme is on those people who often spiral around the system(s), are excluded from the support they need and experience a combination of at least three of the following four problems; homelessness; re-offending; problematic substance misuse and mental ill health.**

During the early stages of the delivery of the Fulfilling Lives program a systemic problem was identified relating to clients with complex needs finding it difficult to access mainstream mental health services, with a number of reasons given such as alcohol and drug use as well as poor engagement with services. Despite many of these individuals having complex trauma histories and serious mental health problems they did not easily fit into the existing statutory mental health offer. However it was observed that Fulfilling Lives clients were accessing accommodation based and homelessness services and building relationships, and engaging, with the staff in these services.

Fulfilling Lives reflected on these observations from the frontline of service delivery. As a response a literature review was conducted around meeting the psychological needs of homeless people. A growing community of practice was identified around an innovative approach to this longstanding and entrenched system failure for individuals with multiple and complex needs. This approach was called Psychologically Informed Environments (PIEs).

Supported by three services from within the Fulfilling Lives core partnership: two accommodation services delivered by Mental Health Concern and a drop-in day centre delivered by Oasis Aquila Housing, a pilot was delivered looking to introduce the three services to the PIE model.

Ray Middleton, Fulfilling Lives System Broker, took responsibility for planning and implementing the PIE pilots. Initially he met with the managers of all three services and outlined a plan to offer a combination of:

1. Training sessions
2. Fortnightly 90 minute reflective practice sessions for the staff team for 6 months initially
3. To use a Psychological Framework, Ladder4Life, which Ray Middleton had written based on his previous experience.
4. To take an "Open Dialogue" approach to the work, drawing on an innovative approach to mental health from Western Lapland<sup>1</sup> (which is now being piloted in three NHS Trusts)<sup>2</sup>
5. Evaluation of the PIEs, to be undertaken after the pilots had been introduced to evaluate their effectiveness and impact.

A one day's training session was delivered which 12 staff could attend.

As facilitator, Ray Middleton visited the three services fortnightly and delivered 90 minute reflective practice sessions. Reflecting on the difficulty of freeing all staff up to get onto a day's training, it was decided to adapt the approach to the needs of the local services. Part of this listening, reflecting and adapting the PIE delivery was to use the first 20 or 30 minutes of each reflective practice session as a "brief" training time. The training was based around the areas of the Framework Ladder4Life and could cover topics such as the impact of trauma, narrative approaches to mental health, "Personality Disorder" and was able to be tailored to the local needs brought up and an open dialogue with the staff about what would be useful to learn more about.

---

<sup>1</sup> For website about Open Dialogue: <http://opendialogueapproach.co.uk/> or academic reference: Seikkula J, Alakare B & Aaltonen J (2011) The Comprehensive Open-Dialogue Approach in Western Lapland: II. Long-term stability of acute psychosis outcomes in advanced community care. *Psychosis* 3(3) 192-204.

<sup>2</sup> <http://www.nelft.nhs.uk/aboutus-initiatives-opendialogue>

# EVALUATION METHODOLOGY

**B**efore the delivery of the pilots a commitment was made to provide an evaluation of the impact of PIE on the three services. This was also a commitment to the fifth key element of delivering a successful PIE: evidence gathering practice.

The aim of the evaluation was to answer two key questions:

1. What was the impact of the PIE pilots on the three services?
2. What are the implications for the wider multiple complex needs system?

At this stage of the evaluation the focus was around impact on the services and staff, rather than directly on clients, a qualitative only approach was taken.



*Above: Ray Middleton's 'Ladder4life' framework and approach that has been implemented throughout the pilot to great success.*

This is because the PIE approach expects to impact staff and services first with a follow on impact for clients once the PIE embeds, if further research was conducted at a later stage this would focus on the direct impact for clients but at this point in the pilot it would be too early to report any significant or sustainable impact on this specifically.

Fieldwork was conducted from six months after the initial training period had ended and was carried out over a period of six weeks. Six months was given to allow time for PIE to embed and for the evaluation to assess whether the PIE approach had sustained in the three services. Interviews and focus groups were conducted with all of the services. Interviews were held with each of the service managers and one of the dedicated facilitators. Three focus groups were held with each of the service staff members, including facilitators. The interviews and focus groups were conducted using a semi-structured interview format. In total 14 people were interviewed or consulted as part of the pilot evaluation.

Interview and focus group data was thematically analysed using framework analysis, to identify patterns of similarity and difference in the data in order to address the aims of the evaluation. Scrutiny and analysis of data was carried out repeatedly and findings were discussed with stakeholders to help review and refine the themes.

## FINDINGS

**The PIE pilots delivered through the Fulfilling Lives programme were successful. The services involved have developed and changed their approaches to working with individuals with multiple complex needs leading to staff teams with more resource to problem solve, and to reflect and ensure their own self-care, and to improving outcomes for clients. There is not enough evidence across the three pilots yet to demonstrate a cost saving element of the PIE pilots but if this was extended further this would be an area of consideration for future evaluations.**

Looking at the outcomes as delivered through the PIE pilots discussed above there is a strong case to be made for the value of expanding PIE throughout the wider multiple complex needs system. The PIE approach sustained at all three services following the delivery of the training, and this supported by a commitment and desire to keep it going from all the services; and amongst the facilitators to improve their skills in delivering the reflective sessions.

PIE helps to develop positive, supportive and constructive relationships between staff that improve ability and confidence in engaging with clients with multiple and complex needs. PIE has had a demonstrably positive impact on increasing staff resilience and personal capacity to work within the challenging multiple and complex needs system. Strong peer relationships and reflective space has benefited staff performance and ability to carry out their roles effectively.

Being able to consider their uncertainties and approaches within a defined psychological framework has helped to create a common language of practice between the three separate services involved in the PIE, suggesting a cultural change.

A psychological framework gives staff the tools to better support their clients in a manner that offers the staff themselves reassurance and support without restricting their ability to problem solve constructively. The tools offered by PIE have started to spill into the wider service environment suggesting a positive impact on culture change.

The potential barriers to sustaining PIE relate almost entirely to having dedicated and ring-fenced time and space for the reflective sessions.

The most positive and successful outcomes were seen at the service dealing on a consistent basis with clients of high complexity and need, whereas the service that saw the least engagement with PIE was that which had a more stable client base and a much lower level of chaos.

The skills developed through PIE could help to free up resources elsewhere in the system by up-skilling staff so that they did not always rely on other more specialist services to pick up with a difficult or challenging situation.

The benefits of a well-trained external facilitator is evident through how positively this role was received, and how it helped to ensure that the space needed for PIE to be sustained was ring-fenced. However there are concerns over the ability and support available to those who are chosen or volunteer to act up into this role from within the services.

One of the most appreciated parts of the training was that it was felt to be tailored to the services specifically and wasn't a generic offer across the board.

# RECOMMENDATIONS

**B**ased on the learning from the pilots we have conducted in the North East region, we have concluded the following recommendations to successfully extend the PIE programme into the wider system:

**1** Relative advantage is needed. This means services and staff need to see the immediate benefit to them over the status quo. Initial focus should therefore be on the services that have the most interaction with chaotic and challenging clients first and then extend backwards into services with less chaos as the model becomes more integrated across the system.

**2** There needs to be a commitment from strategic and senior management and commissioners to allow for a PIE approach to embed. Services need to feel they have the permission to work outside of traditionally rigid performance structures.

**3** Service level managers need to have visible buy-in - PIE will be more likely to fail if there is resistance at the service manager level. Time and resource must be invested to ensure this is in place before trying to establish PIE within services.

**4** Service managers need support from senior management to ensure they can commit to the time and space needed for reflective sessions, and to consider physical changes if needed.

**5** Resource needs to be given to ensure that the training is delivered by someone with expertise in PIE, and that the training materials are produced to a high standard.

**6** Consideration must be given to ensure that training retains a service-specific element tailored to the local service's needs.

**7** A peer network of the trained facilitators from across the services should be established to support and ensure sustainability of peer facilitation.

**8** To ensure capacity, quality, consistency and momentum in delivering PIE across the wider system a dedicated PIE training and facilitator position should be funded. This would be the most cost effective means of embedding PIE across the wider system.

“

Given the increasing diversity of client's needs within different services it is vital that any approach has a consistent, understandable offer which can also be flexible and adapt to the needs of different services and their clients.

”

“

She managed to ask a couple of questions along those [PIE] lines which led to someone being moved out the area who was being sexually exploited. I think if she hadn't asked those questions we might never have even known about it.

”

# CONTACT DETAILS

**For more information on PIE and the pilot detailed in this document, contact Ray Middleton, System Broker for Fulfilling Lives Newcastle Gateshead:**

[ray.middleton@fulfillinglives-ng.org.uk](mailto:ray.middleton@fulfillinglives-ng.org.uk)

**For more information, or any queries, regarding the evaluation of this pilot, contact Sophie Boobis, Research and Evaluation Lead for Fulfilling Lives Newcastle Gateshead:**

[sophie.boobis@fulfillinglives-ng.org.uk](mailto:sophie.boobis@fulfillinglives-ng.org.uk)

**FULLING LIVES**

Newcastle Gateshead



**CHANGING LIVES**