



**WORCESTERSHIRE VCSE MENTAL HEALTH PROVISION
PHASE TWO INTELLIGENCE GATHERING
AUGUST 2024**

“VCSE services supporting people living with a mental health condition or at risk of poor mental health”.



**Herefordshire and Worcestershire
Health and Care**
NHS Trust

Funded by Herefordshire & Worcestershire NHS Health & Care Trust



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Background Information



Background Information from the VCSE Alliance

This report was commissioned as part of a VCSE Mental Health Project, funded against the backdrop of H&W Health and Care Trust staff shortages.

A visionary Project Initiation Document (PID) written by Roger Britton outlined a 3-year plan to invest in the VCSE sector to deliver substantial system change across the ICS in relation to mental health delivery. This was to be achieved alongside current CMHT by empowering and enabling more & smaller VCSE organisations to deliver effective, quality services at place level, to support the NHS and statutory system partners to improve access to services for patients. However, only partial short-term funding was received, therefore this vision has not been fully realised. Part of the funding was used to undertake this work to understand current VCSE Mental Health provision across Worcestershire.

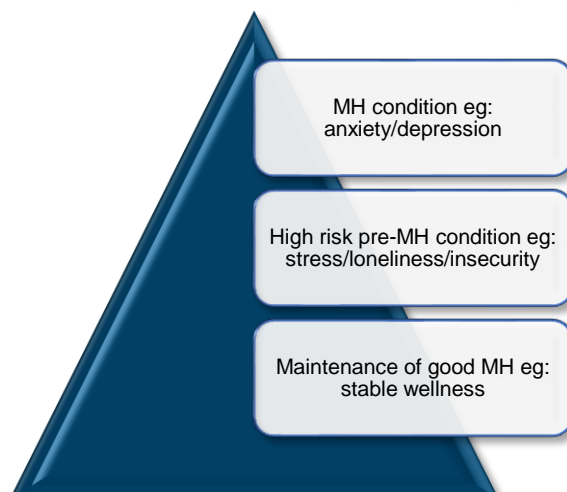
Aims of this Report

1. To understand current VCSE Mental Health provision across Worcestershire and to identify organisations who work with high-risk groups and underserved communities, including young people and older adults; low, moderate, and severe mental illness and prevention.
2. Identification of diversity and capability of local services currently meeting local need.
3. To support commissioner's awareness of the range services available to meet national and local priorities.

Background Information to Data Collection

A first phase of data collection was carried out in the summer of 2023 which focused on engaging with organisations:

- a. Providing services which support people living with mental health conditions with the aim of improving their mental wellbeing.*
- b. Who deliver services in Worcestershire.
- c. Who specialise in particular groups of people eg: veterans, older people, new parents, carers, those living in areas of highest need, LGBTQI+.



*This data collection and report concentrates on organisations delivering services to people in these two groups.

MH = Mental Health

Background Information



Areas of Focus

The intelligence information gathered for Phase One concentrated on the following areas:

- The organisations and the diversity of services they are providing to the groups of people above.
- The types of referrals these services are receiving and their capacity.
- The funding structure to deliver the services.
- Any gaps in provision.

The Phase One report is available [here](#).

The VCSE Mental Health Steering Group agreed it would be beneficial to expand the reach of the survey, investigate certain findings in the report in more detail and provide summary information across each district in Worcestershire.

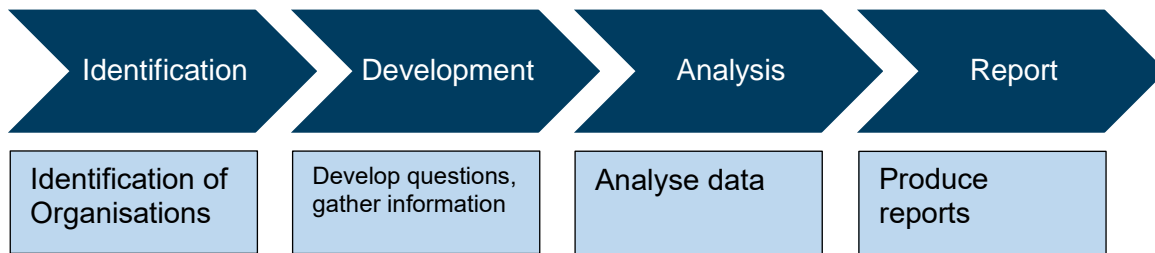
The table below identifies the additional areas of focus for this report.

Item	Comment
Countywide data	<ul style="list-style-type: none">• Ensure that the information gathered is representative of the whole county.
District Summaries	<ul style="list-style-type: none">• Provide a “District on a page” summary for each collaborative area across Worcestershire.
Waiting Lists	<ul style="list-style-type: none">• Explore the waiting lists in more detail to understand the reasons behind them, the length of time people are waiting, how they are being managed and what good practice might look like.• Investigate the demand for specialist services which may be a cause of waiting times eg: interpreters, and what solutions there could be eg: central access to services for VCSE.
Venues	<ul style="list-style-type: none">• Investigate venues in more depth to understand what organisations need, what type of venue and facilities are needed etc.
Volunteering	<ul style="list-style-type: none">• Explore the volunteering needs of the organisations in greater detail to understand best practice, what the challenges are and opportunities for collaboration.
Workforce Development	<ul style="list-style-type: none">• Further investigation into what the VCSE MH workforce look like, are there any gaps, commonalities, standard training, role descriptions etc.
IT & Data Infrastructure	<ul style="list-style-type: none">• Understanding the systems VCSE organisations have in place to support general operations & data management.• What quality systems are underpinning operations and services.• How impact and evaluation of services take place.

Background Information



Phase Two employs the following methodology :



1. **Identification:** Organisations were identified based on the following criteria:

- a. Provision of services aimed to support people with mental health conditions.
- b. Delivering services in Worcestershire.

A number of organisations were already known to Worcestershire Association of Carers through partnership working and signposting people for support. Wider desktop research was carried out to identify further organisations and link with existing networks eg: Redditch District Collaborative, Social Prescribers. The link to the questions was also posted on Social Media and shared via the VCSE Alliance website. *(Sample communications are available in Appendix 1)*

2. **Development:** Additional Questions were developed to investigate the areas of interest in more detail.

- a. These new questions were sent out to the organisations who responded to the Phase One data collection.
- b. Phase One and Phase Two questions were sent out and promoted to organisations who did not participate in Phase One.

(The full set of questions can be found at the end of this report in Appendix 2)

3. **Analysis:** An MS Form was produced and sent to the identified organisations asking them to complete a set of questions as comprehensively as possible. A deadline of the 15th December 2023 was given for all submissions, which was subsequently extended until the first week of January due to holidays.

4. **Reporting:** The data was collated and presented in a report which was then circulated to a wide range of stakeholders and made available on the VCSE Alliance website.







Overview of Key Findings



A total of 232 organisations and groups were invited to participate and share information about their services and the challenges they may be facing to continue delivering interventions to people living with mental health conditions. 63 individual organisations responded (27%), the remaining organisations were either unable to contact or did not respond. (eg: undeliverable email, contact details not available).

36 organisations responded to Phase One and 54 responded to Phase Two – describing 103 services. (20 organisations responded to both Phases). 75% of all organisations responding, found the Phase One report useful.

What does a typical Organisation providing Mental Health Services look like?

<p>Main Office based in Worcester City (33%), deliver services across the county or in one district.</p> 	<p>Focus on children, young people and adults (aged 25 – 64).</p>	<p>Deliver a range of wellbeing interventions – face to face and online.</p> 	<p>Take referrals for people with low level MH needs but support people with more substantial conditions.</p>
<p>Employ up to 10 members of staff and up to 10 volunteers for each service.</p>	<p>Offer supervision, training and development opportunities for personnel.</p> 	<p>Fund their organisation through grants, charitable funds and trusts.</p>	<p>Services have a waiting list of between one week and one month.</p> 
<p>Keen to increase their service provision with additional funding and more staff.</p> 	<p>Would need additional funding and access to suitable venues to grow.</p>	<p>Signpost and refer people to NHS services.</p> 	<p>Have a formal quality assurance framework (50%) and carry out basic activity reporting.</p>

Analysis of Data

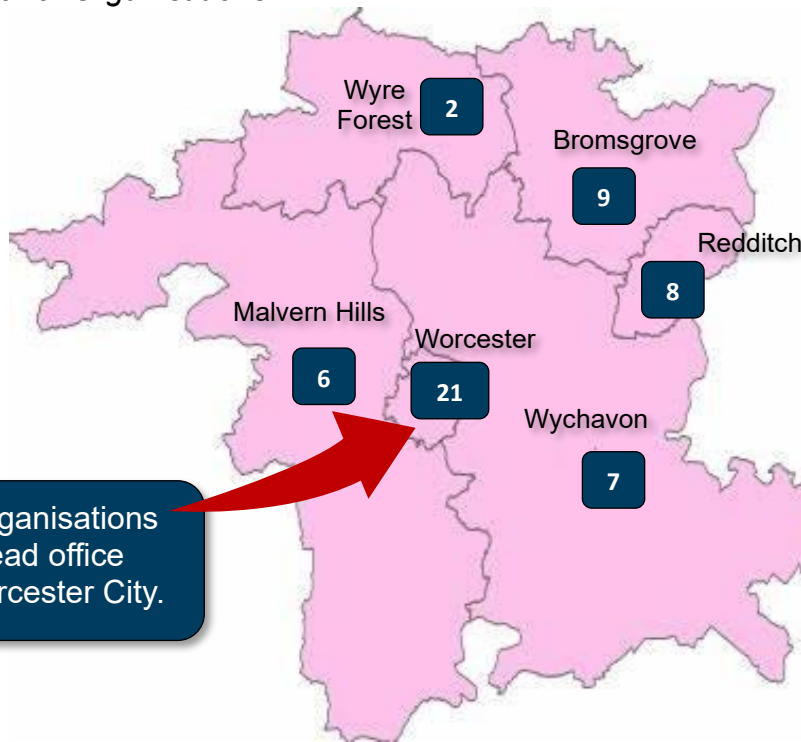


Location of Organisations

Q5 - 63 organisations responded to this question.

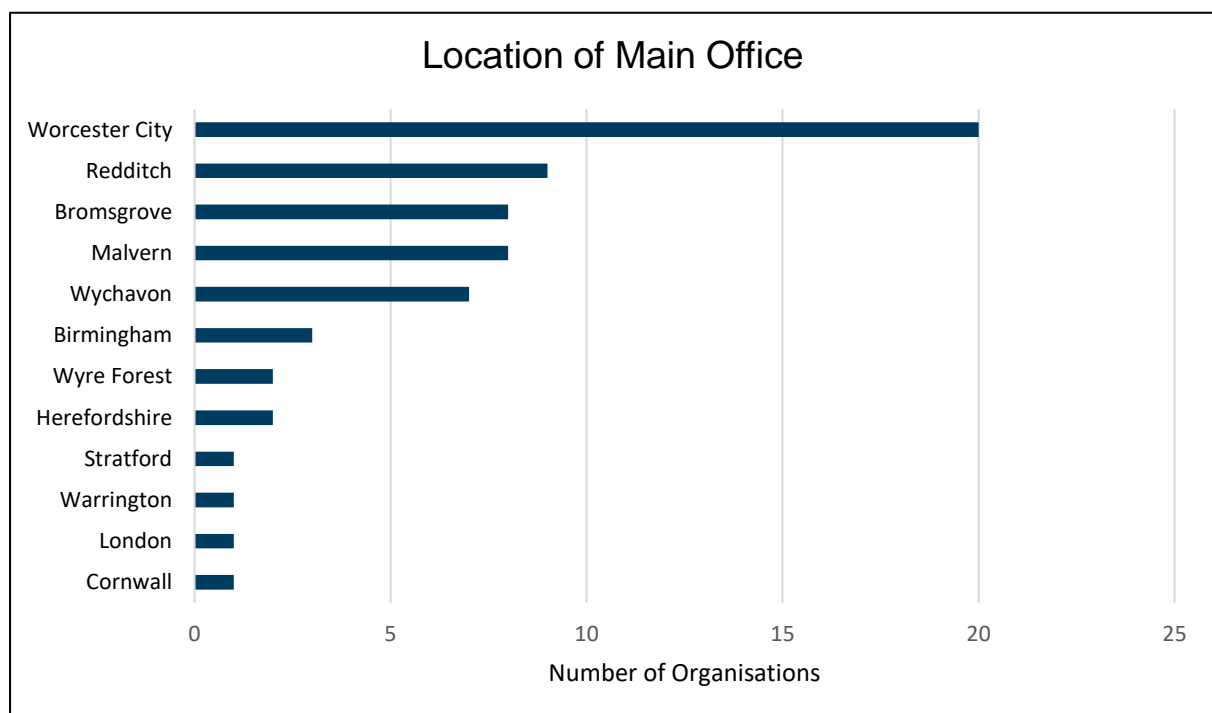
The following map shows where organisations participating in this project have their main office. (*Appendix 3 offers more detail about these organisations and the services they offer.*)

Number of Organisations



Other Areas
Cornwall – 1
Stratford – 1
London – 1
Birmingham – 3
Hfd'shire – 2
Leamington – 1
Warrington - 1

33% of all organisations have their head office based in Worcester City.



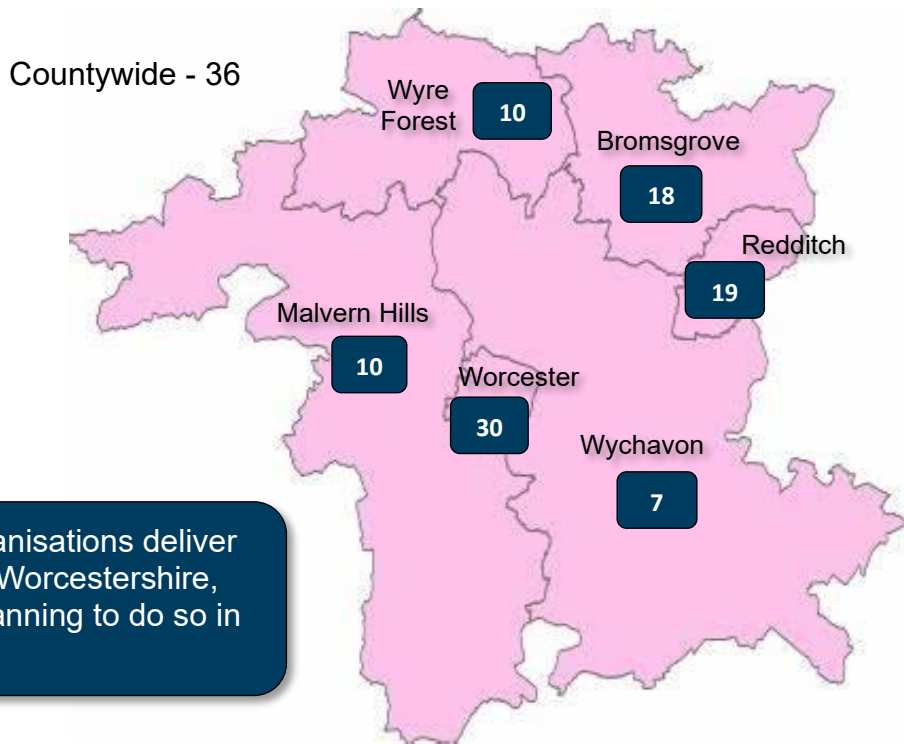
Analysis of Data



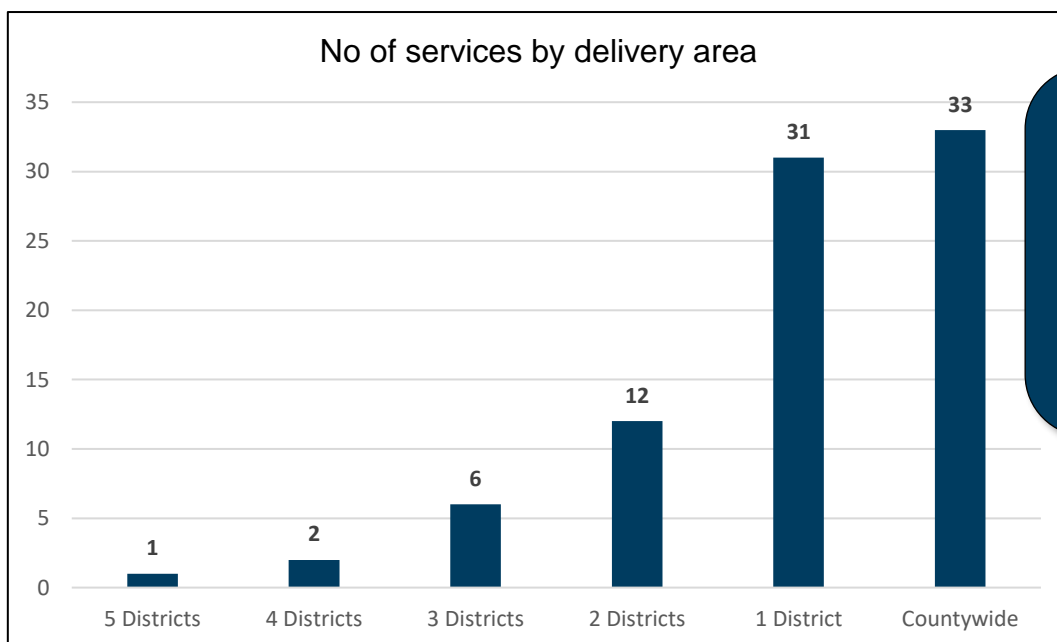
Location of Service Delivery

Q12 - 61 organisations responded to this question.

The map below shows the locations where organisations are delivering their services. The numbers are higher than the number of organisations responding to call for information, as this data relates to the services delivered.



98% of organisations deliver services in Worcestershire, with one planning to do so in the future.



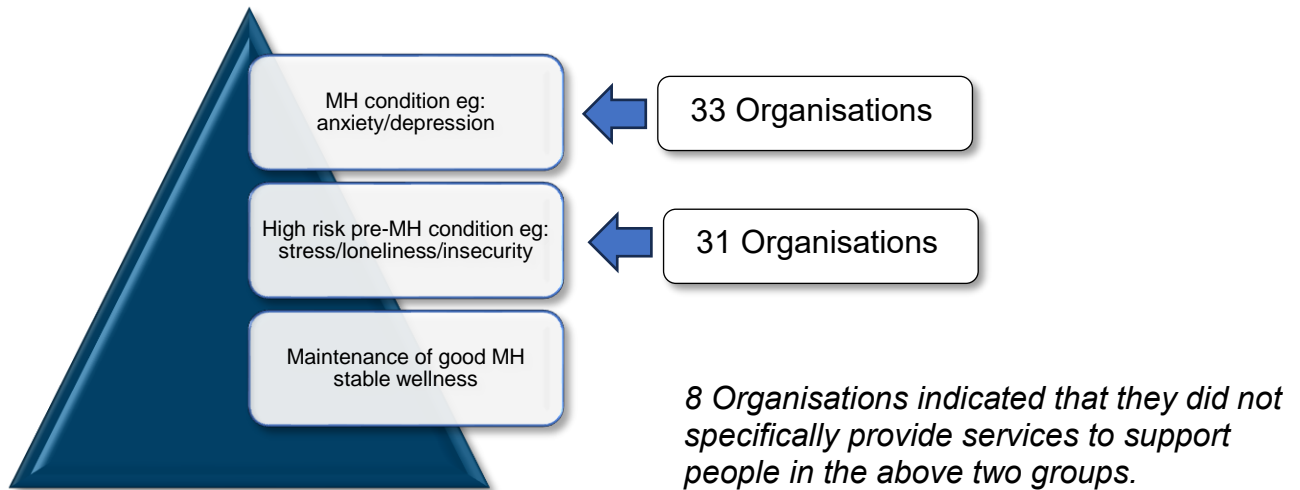
- 39% of services are delivered across the whole of Worcestershire.
- 36% of services are delivered in one district only.

Analysis of Data



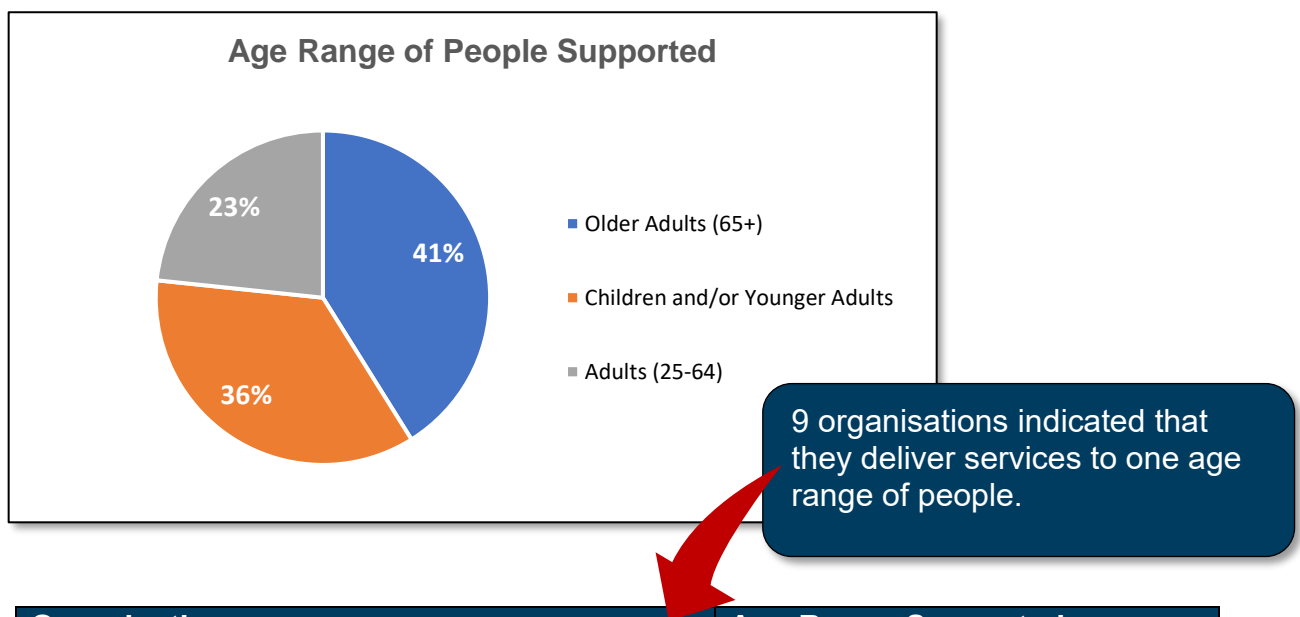
Groups of People Supported

Q3 & 4 - 48 organisations responded to these two questions.



Age Range of People Supported

Q26 - 48 organisations responded to this question.



Organisation	Age Range Supported
Artists Clubhouse	Adults (25- 64)
Jacks Place Care CIC	Adults (25- 64)
Jigsaw	Adults (25- 64)
The Koala Tree CIC	Adults (25- 64)
The Shed at Top Barn	Adults (25- 64)
Bromsgrove Youth and Commmunity Hub	Children and/or Younger Adults
You Turn	Children and/or Younger Adults
Age UK Bromsgrove, Redditch & Wyre Forest	Older Adults (65+)
Age UK Worcester and Malvern Hills	Older Adults (65+)

Analysis of Data



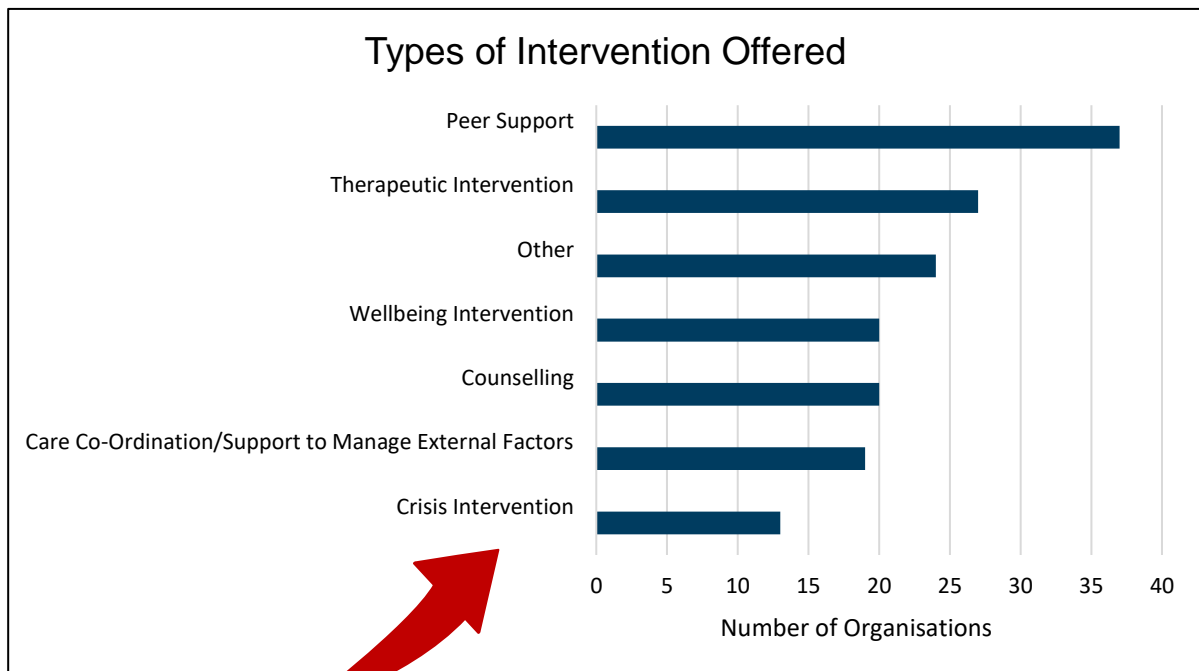
Types of Mental Health Support Provided

Q8 - 62 organisations responded to this question.

Organisations were asked to indicate the type of interventions they offer through their services using the options below:

<input type="checkbox"/>	Crisis Intervention
<input type="checkbox"/>	Therapeutic Intervention
<input type="checkbox"/>	Counselling
<input type="checkbox"/>	Peer Support
<input type="checkbox"/>	Wellbeing Intervention
<input type="checkbox"/>	Care Co-Ordination / Support to Manage External Factors
<input type="checkbox"/>	Other

The majority of organisations provided a combination of intervention types, with Peer Support and Therapeutic Interventions being the most common. The chart below shows the types of intervention and the number of organisations delivering these interventions.



13 Organisations indicated that they offer interventions to people in crisis:

Worcester Community Trust	Salvation Army
Home Start NE Worcestershire	Ahead of Wellbeing CIC
Sandycroft	ASPIE Ltd
Batchley Support Group	KEMP Hospice
MMSC/Yellow Flag	Papyrus
The Basement Project	West Mercia Women's Aid
Worcestershire Association of Carers	

Analysis of Data



Organisations were also given the option of adding further details about the interventions they offer:

Camaraderie and Friendship/Volunteer Befriending	Managing anxiety and wellbeing relating to autism
Bereavement Support	Early interventions around mental health and awareness
Advice, Information & Signposting	Information on mental health issues for new parents and infant mental health issues
NHS sanctioned wellbeing app	Mental health awareness courses and family activities
Helpline	Groups to reduce loneliness and isolation
Social/Peer Events/Day Care/Activities	Future Planning
Coping Strategies and talking therapies	Help with social, emotional and practical problems
Referrals and signposting to relevant groups and services	Facilitated support groups
Low level wellbeing support & Self help	Informal education (such as group discussions)
Guidance and debriefing relating to suicide	Education process to learn theories and techniques to clarify self-identity and encourage positive steps forward

Organisations were asked if they offered a specific service which supported people moving from one service to another – Q 39. 48 organisations responded to this question. Only 4 organisations offered this type of service:

Worcestershire Association of Carers	Children to Adults
Simply Limitless	Children to Adults
Onside	Children to Adults
Ways for Wellbeing CIC	Children to Adults

A further 8 organisations provided the following additional information:
(please see Appendix 3 for organisational abbreviations)

No	Org	Comment
4	AUKHW	Signposting people internally and to other orgs;
8	ASP	we can help smooth the path;
10	AWM	We support referrals to other services and signposting.
20	DWH	We work with all ages so don't need to support a move;
22	HSN	Within the services offered;
27	JIG	Our service may do this if required by the carer. Our service is tailored to individual needs of carers.;
31	MBH	we offer services from age 0-upwards;
38	SNDY	multiple services means we are signposting internally due to specialising in multiple complex cases which can include the whole family. External partnerships working within the Centre also provide transitional services.;





Analysis of Data



Gaps Identified

Q21 - 57 organisations responded to this question.

Organisations were asked to highlight any gaps in service provision for the people they are supporting. A number of themes arose from the responses which are listed below. (See Appendix 4 for full responses).



<p>Location</p> <p>Enabling all services to be delivered across the county.</p> 	<p>Prevention</p> <p>Provision of preventative services and support to avoid more complex or severe MH issues arising.</p>	<p>Loneliness</p> <p>Additional face to face and one to one support to tackle loneliness. More friendship groups and social opportunities for a wider range of people.</p>	<p>Waiting Lists</p> <p>Support for people on MH waiting lists. Practical and emotional. Group and one to one based. Counselling.</p> 
<p>Specialists Services</p> <p>Specialist services to support people either living with certain conditions or from a particular community eg: interpreters, LGBTQI+.</p>	<p>Reach</p> <p>Support and training to reach and provide expert support to more people eg: autism, ethnic groups, veterans, young parents, domestic abuse.</p>	<p>Transitions</p> <p>Support and services for people experiencing transitions.eg: young adults, parents, carers.</p> 	<p>Partners</p> <p>More collaboration between partners to enable wider delivery of services and support eg: dementia services, young people support.</p>
<p>Counselling</p> <p>Counselling to support specific conditions/areas such as loss of a child, loss of a loved one through suicide and couples counselling.</p>	<p>Method of Delivery</p> <p>Additional peer support groups and one to one support.</p> 	<p>Service Types</p> <p>Services to help people who are out of work or have issues with housing and benefits, which are impacting their mental health.</p>	

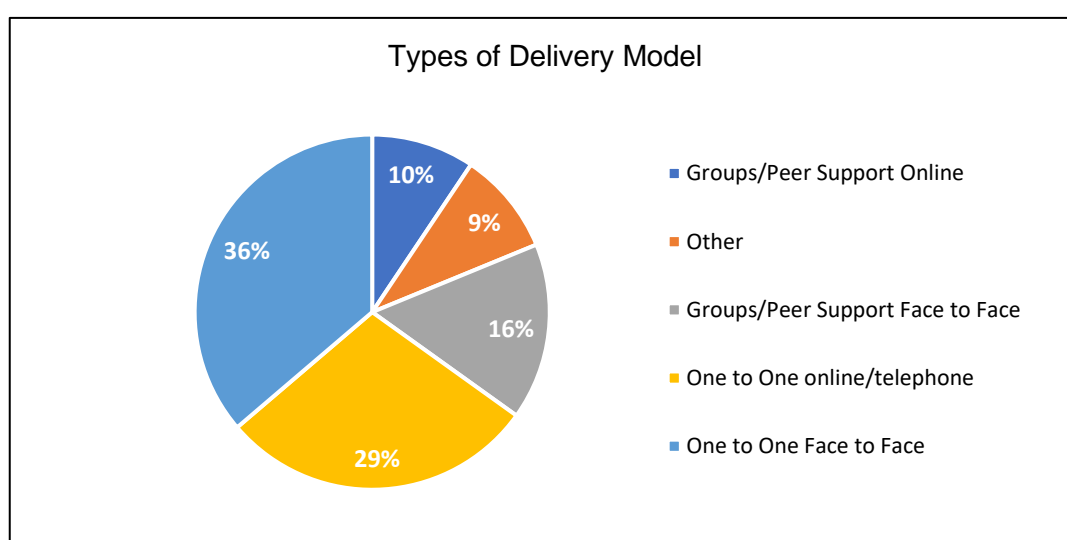
Analysis of Data



Models of Delivery

Q9 - 62 organisations responded to this question (92 services). Organisations were asked how they delivered their services.

Face to Face	Online
58% of organisation's services are delivered face to face	42% of organisation's services are delivered online
	



Organisations identified other methods of delivery, which are listed below: *(please see Appendix 3 for organisational abbreviations)*

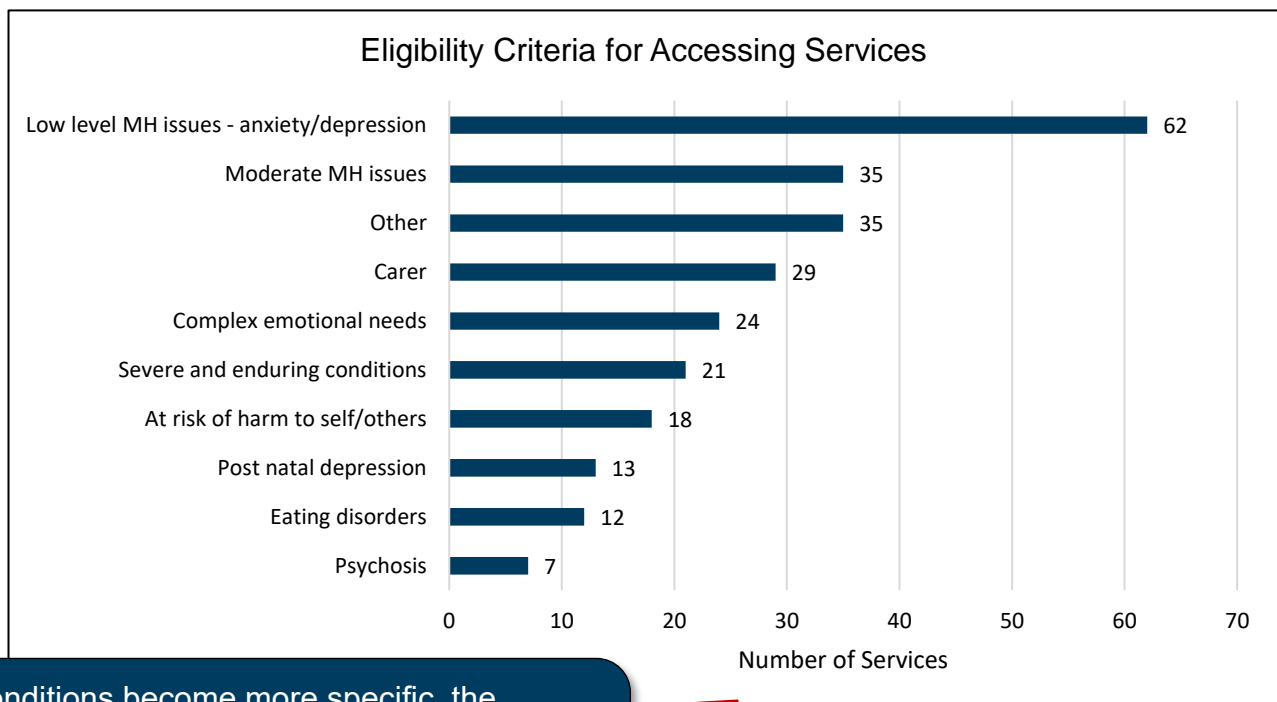
No	Org	Comment
2	APP	Online peer support forum (also - note that face to face is not always an option);
3	AUKB	Not a formal mental health service - Shed run by volunteer supervisors;
7	AC	Self-help;
10	AWM	Helpline service via phone call and email.;
14	BEN	Training courses;
21	HUP	Small groups, whole class, 1:1 and year assemblies.;
24	IPC	A resource, not a support service as such. We provide an NHS-sanctioned health and wellbeing app.;
28	KEMP	CYP - seen within schools and support /advice to schools;
35	PAPY	Our training can be delivered online or face-to-face in groups of 8-30;
37	RELAT	We work with couples and families too;
57	WMWA	accommodation services;



Eligibility Criteria

Q10 & 11 - 95 services are included in the analysis of these two questions. Organisations were asked to identify the eligibility for their services (criteria for referrals) and then the actual need a person was presenting with once the referral had been received. The data indicates a range of criteria to be accepted onto services from being very specific (needing to meet one criteria) through to being generic (covering a range of conditions).

The following chart shows the required eligibility criteria by service:



As conditions become more specific, the number of organisations offering interventions for people living with those conditions reduces eg: eating disorders and psychosis

Respondants also put forward additional and / or alternative criteria for accessing their services. These range from no criteria at all through to very specific criteria, such as palliative patients. *(The full list of responses are listed in Appendix 5.)*

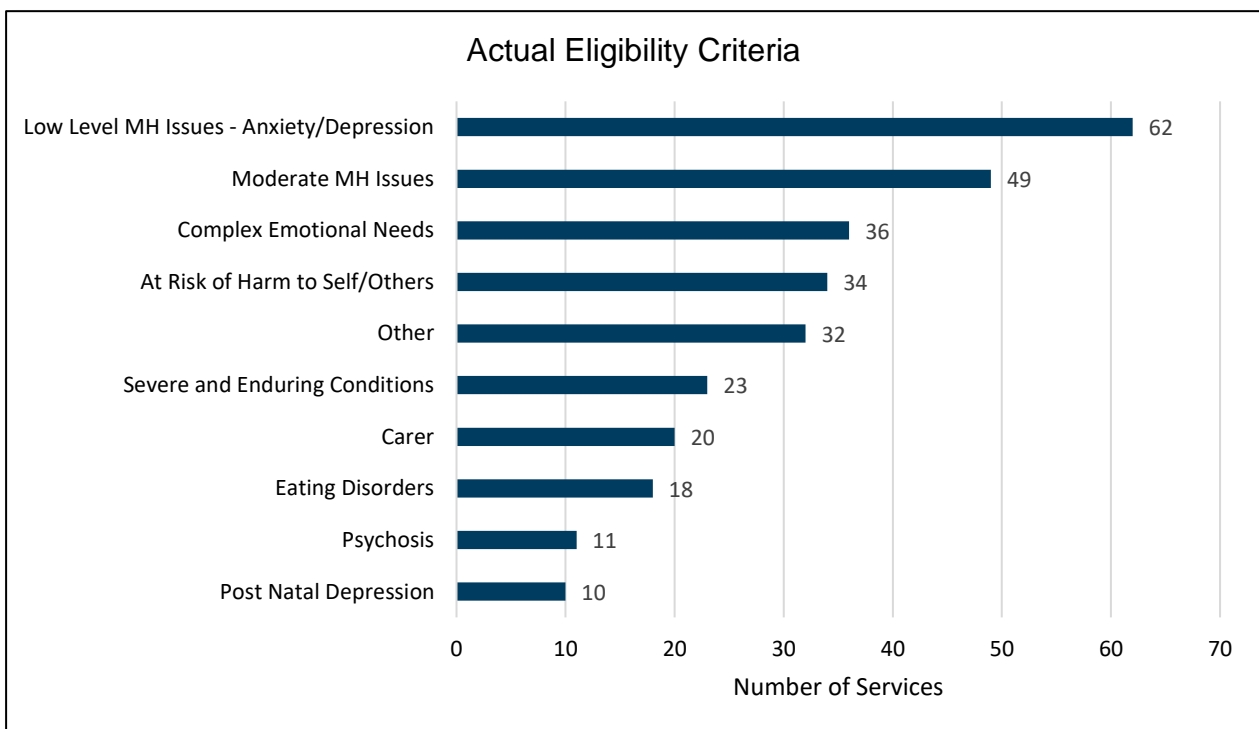
Analysis of Data



Actual criteria supported

The graph below shows the actual need after the referral has been received.

- There is a overall increase in the level and complexity of MH support needed.
- The greatest difference is seen in people presenting with:
 - risk to themselves and/or others.
 - complex emotional needs.
 - eating disorders.
- 39 services experienced no change in their criteria or presenting need of their service users.









The following table shows the difference between the criteria organisations' services require and the actual need presenting on receipt of a referral to these services. Eg: 24 services have a criteria for complex emotional needs but the actual number of services supporting people with complex emotional needs is 36.

Criteria	Original	Actual	Change
Low level MH Issues – anxiety/depression	62	62	
Moderate MH issues	35	49	
Complex emotional needs	24	36	

Analysis of Data



Criteria	Original	Actual	Change
At risk of harm to self and/or others	18	34	
Eating disorders	12	18	
Carers	29	20	
Severe and enduring conditions	21	23	
Post natal depression	13	10	
Psychosis	7	11	

Organisations were also seeing additional MH conditions or conditions which may put people at risk of a MH condition (*please see Appendix 5*), with the most prevalent being:

Dementia	Trauma	PTSD
Severe Mental Health Issues	Suicidal Thoughts	

Analysis of Data

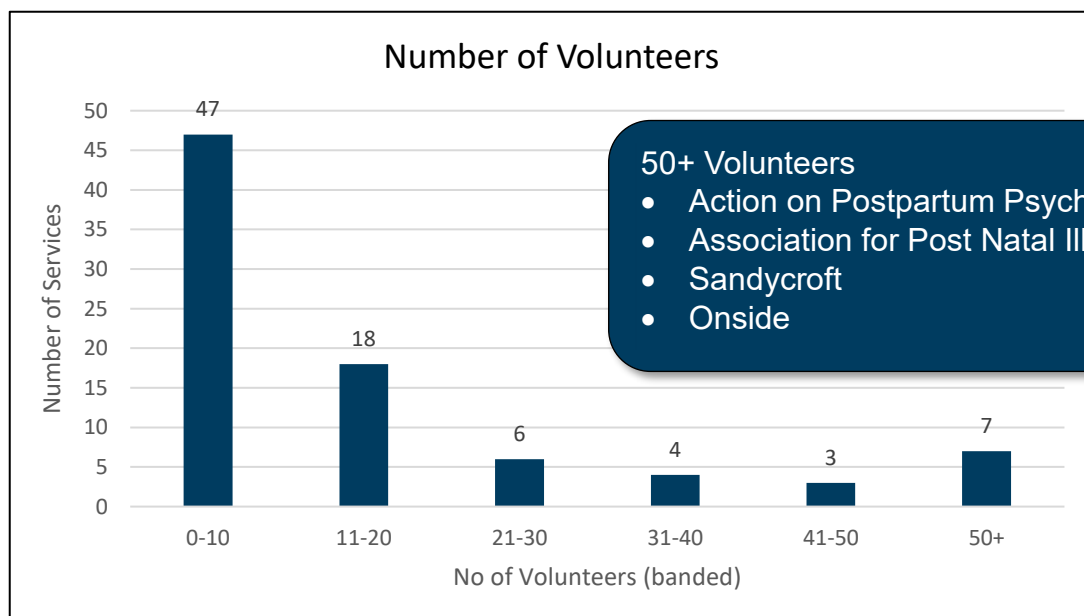
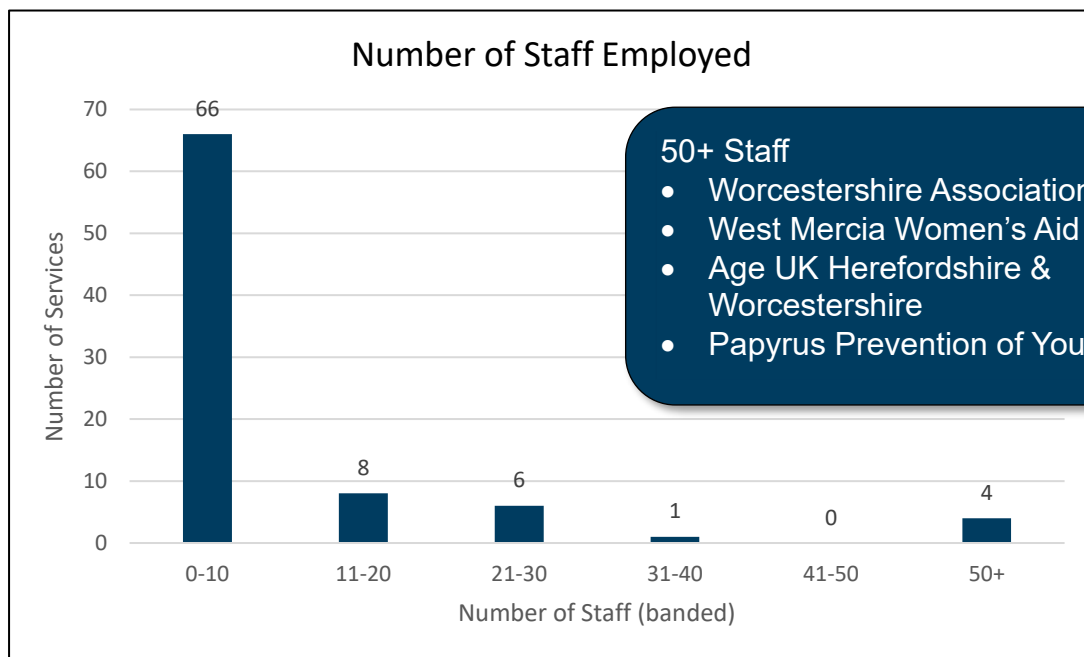


Staffing & Volunteers

Q13 & Q14 - 89 services responded to these questions.

Organisations were asked how many employees and volunteers they have delivering their services.

- The majority of organisations reported that they employ up to 10 employees for each service delivered.
- 4 organisations reported that they employ more than 50 people to deliver their services.
- 47 services engage 0-10 volunteers.
- 7 services employ over 50 volunteers.



Analysis of Data



Staff and Volunteer Management and Training

Q40 to 50 - 48 organisations, covering 60 services, responded to these questions. Organisations were asked to expand on their interventions, processes and training plans they had in place for their staff and volunteers.

Staff

- 12 organisations said they employed clinical staff.

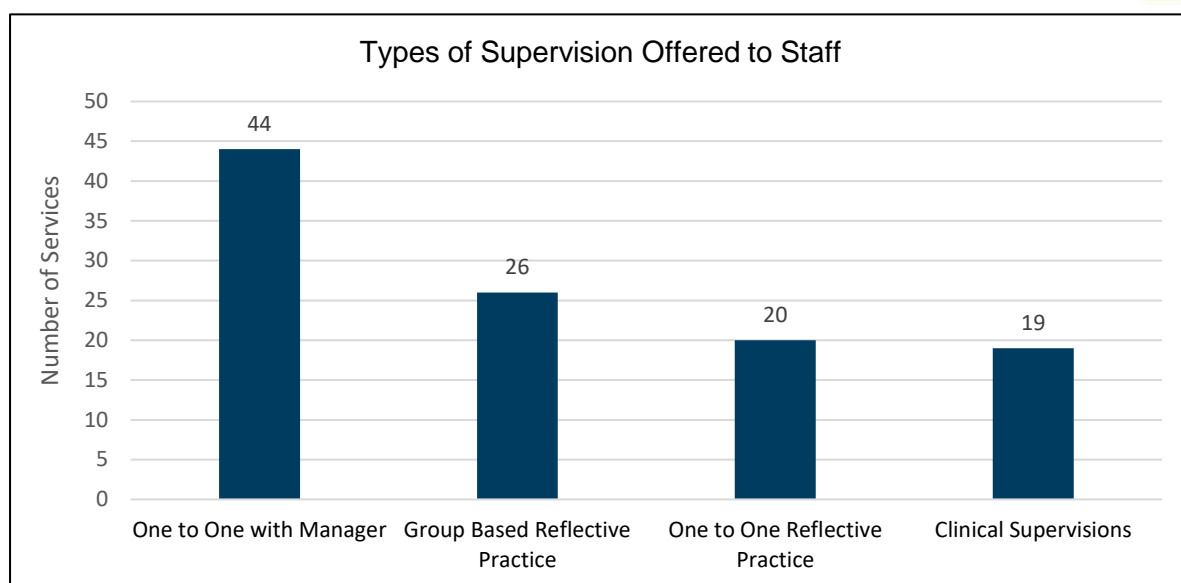
Age UK Herefordshire & Worcestershire	Bromsgrove Youth & Community Hub
KEMP Hospice	Mavlern Community Art Therapy
Megan Baker House Ltd	MMSC/Yellow Flag
Onside	Relate Severn and Wye
Sandycroft	The Koala Tree CIC
The Old Needlework's Foundation	Wick Care Farm

(This may be across all their services rather than just for those supporting people with MH conditions or at risk of developing a MH condition).

Do you offer regular supervisions with your staff?	85%
Do you offer one to one supervisions with your staff?	40%



Analysis of Data



Organisations also offered additional information around the types of supervision they offered, as follows: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
14	BEN	External supervisions as well (group or 121) as needed;
20	DWH	Not in a formal capacity
27	JIG	Informal peer to peer
30	MCAT	We get clinical supervision from outside
54	TSTB	General Oversight

Do you have a formal induction process for your staff?	84%
Is core training offered to all staff?	100%
Do you offer additional development opportunities to your staff?	73%
Do you offer training outside of your organisation? <i>(please see Appendix 6 for further information)</i>	43%

The following table shows the % of organisations offering the 4 types of core training to their staff: *(eg: 82% of all organisations responding have Health & Safety training as part of their core training offer to staff).*

Type of Training	%
Health & Safety	82
GDPR Information Security	84
Safeguarding	89
Equality & Diversity	77

Analysis of Data



Other types of training offered to staff and comments received include: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
5	AUKW	Numerous
6	AWCIC	MHFA and Orange Badge;
7	AC	I currently do not have any staff only myself and my fellow company director who invoice the business when we can. I am mental health first aid trained and have completed suicide awareness training and look to keep these qualifications updated.
8	ASP	our 'staff' are self-employed and adhere to their regulatory bodies;
9	APNI	We have a Postnatal specialist who comes in for training and updating our knowledge;
10	AWM	Induction, First Aid, Communication, Autism Awareness. ;
14	BEN	Food hygiene;
15	BARN	Dementia, social media, etc;
16	BYC	Youth Work training;
20	DWH	Safeguarding: We discuss other areas but are not qualified to give formal training;
26	JCK	N/A
27	JIG	We are all, volunteers. We talk about all these subjects as they occur.;
33	MMSC	we don't offer GDPR to ALL staff, just the relevant ones. Also, all our organisation is focused on migrants, EDI is embedded in everything we do;
35	PAPY	All of our suicide prevention training products;
54	TSTB	We don't have any staff
57	WMWA	A huge variety of courses we offer. ;
58	WCFRM	Manual handling; fire safety; basic life support; food hygiene; dementia awareness

Respondents also communicated that there were challenges delivering training to both their staff and volunteers. The main challenges fall into 2 categories:

Funding:

- Money to pay for training.
- Cost of training.
- Time to access training.



Training Type

- Access to specialist training.
- Delivered outside of normal hours.



Appendix 6 outlines the feedback from all organisations participating in this question.

Analysis of Data



Volunteers

Do you have role descriptions which outline what skills are needed for your volunteering opportunities?	78%
Do you have a formal induction and training programme for your volunteers?	78%
Do you offer regular supervisions, with the same member of staff, for your volunteers?	43%

Organisations were asked if they had any further comments in relation to the support offered to volunteers supporting their services: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
18	CLBF	Always available to discuss concerns
20	DWB	Due to the nature of our volunteers, who are counsellors in training they have to undertake their own private supervision as a requirement of their training. We do offer internal support and space for discussion and reflection whenever it is needed, as this goes hand in hand with the type of work we are providing. Our provision is in line with BACP ethical framework;
26	JCK	No volunteers
27	JG	We talk about specific areas that frequently occur. We are hoping to utilise training on how to run a charity.
28	KEMP	depends on service;
30	MCAT	No volunteers at present.
40	SNOW	No volunteers are delivering services.
43	SWCAB	No volunteers involved in wellbeing projects currently although they are very much involved in other areas of the organisation;
60	WAC	Not all a volunteer specific some are integrated with staff. ;
61	YMCA	We don't have volunteers;

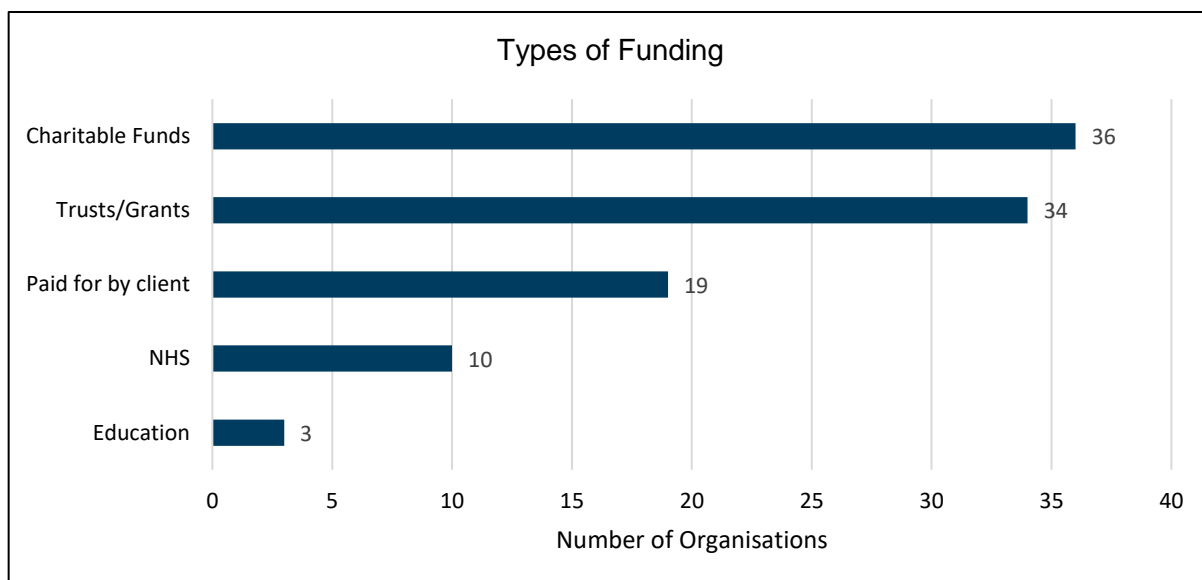
Analysis of Data



Funding for Services

Q13 - 59 organisations delivering 89 services responded to this question. Organisations were asked to explain how their services were currently funded.

- 10 organisations are reliant on one source of funding.
- 15 organisations deliver their services with two sources of funding
- 34 organisations use a combination of funding



Organisations were also given the option to identify any sources of funding they receive: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
6	AWCIC	recent grant from PHE
7	AC	A mixture of funding grants, sales and paid for services;
8	ASP	modest membership fees;
13	BTS	The only funds we get is small fundraising and grants but not much time to apply for them due to no support and grants, but not much time to keep on top of applying;
18	CLBS	Voluntary
29	LINK	We are part of Warwickshire Colleges Group who provide background funding but are also dependent on commercial sales, grants and trust monies;
35	PAPY	Only training is paid by the client (in some scenarios), the rest is through charitable funds.
36	PWH	Initial start-up funds from local authority - Wychavon and Pershore Town Council;
54	TSTB	Self-funding via membership fee;
57	WMWA	co- commissioned by local authority and the OPCC- Office of Police Crime Commissioners. ;
59	WCT	Lottery
63	YSS	Worcestershire Police and Crime Commissioner ;

Analysis of Data



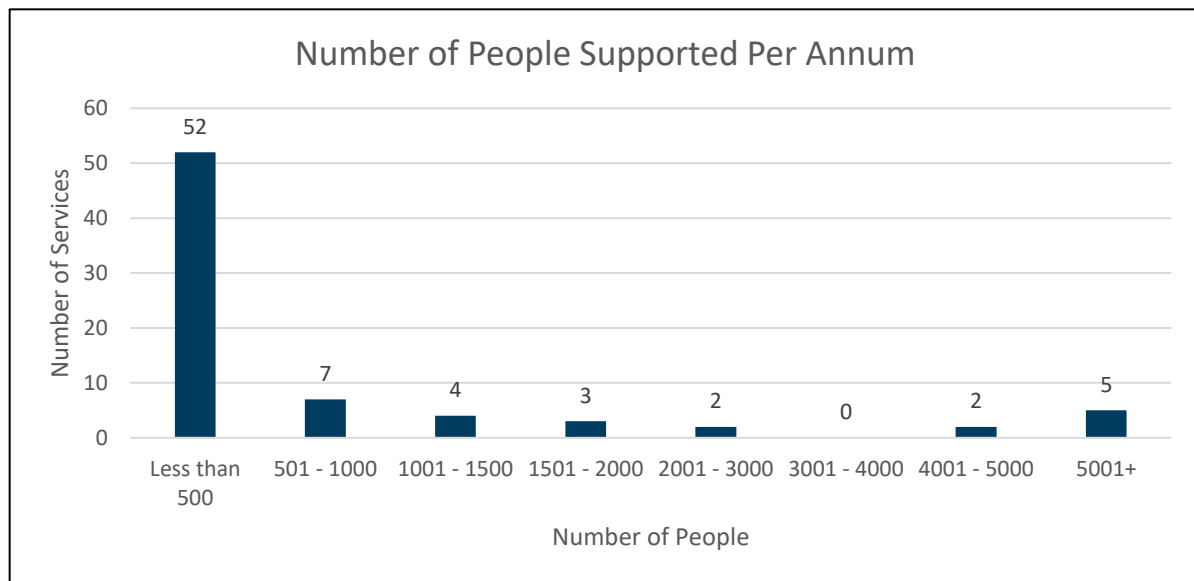
Capacity and Growth

Organisations were asked a series of questions to understand their current levels of delivery, waiting lists, capacity, growth opportunities and any barriers to achieving this growth.

Current Service Levels

Q16 - 59 organisations delivering 89 services responded to this question.

- The majority of services reach less than 500 people per annum
- *(Where more than 5000 people are supported, this may be for all services delivered by an organisation rather than just one)*

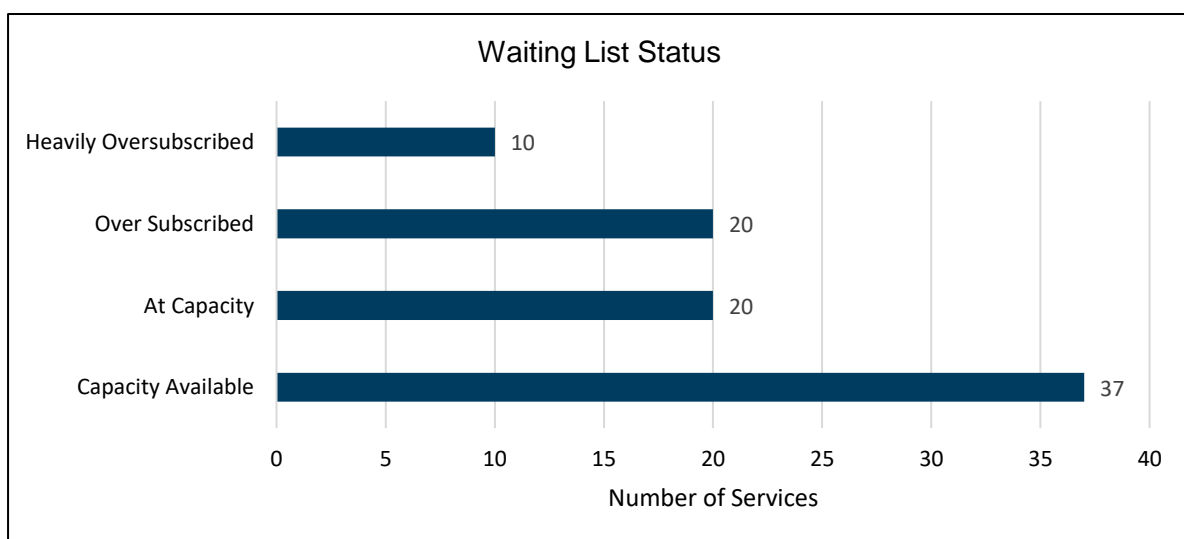


Waiting Lists

Q17 & 32 to 36

Q17 - 59 organisations delivering 87 services responded to this question.

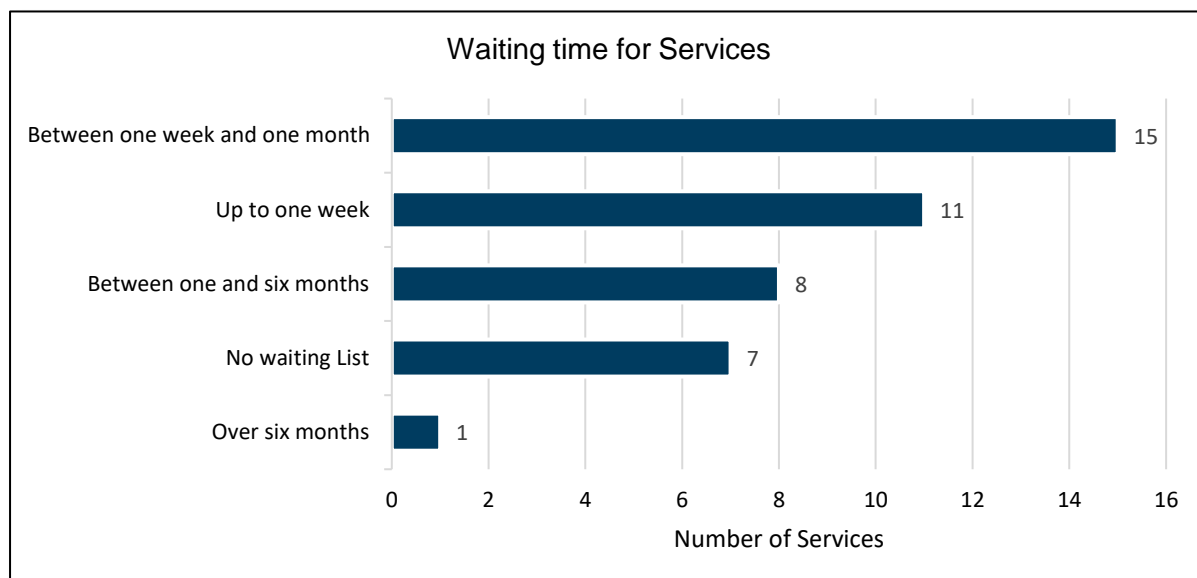
- 57% of all services have a waiting list, 37 services have capacity available.



Analysis of Data



Organisations were asked how long people were on their waiting lists for. 42 services provided the following information with the remaining 45 providing additional information. (see below).



Organisations reporting they have no waiting lists:

Artists Clubhouse	Behind the Smile	Bromsgrove Youth and Community Hub	Jigsaw
Pershore Wellbeing Hub	Stars Adult Day Care Centre	The Shed at Top Barn	

Additional information was provided as follows: *(please see Appendix 3 for organisational abbreviations)*

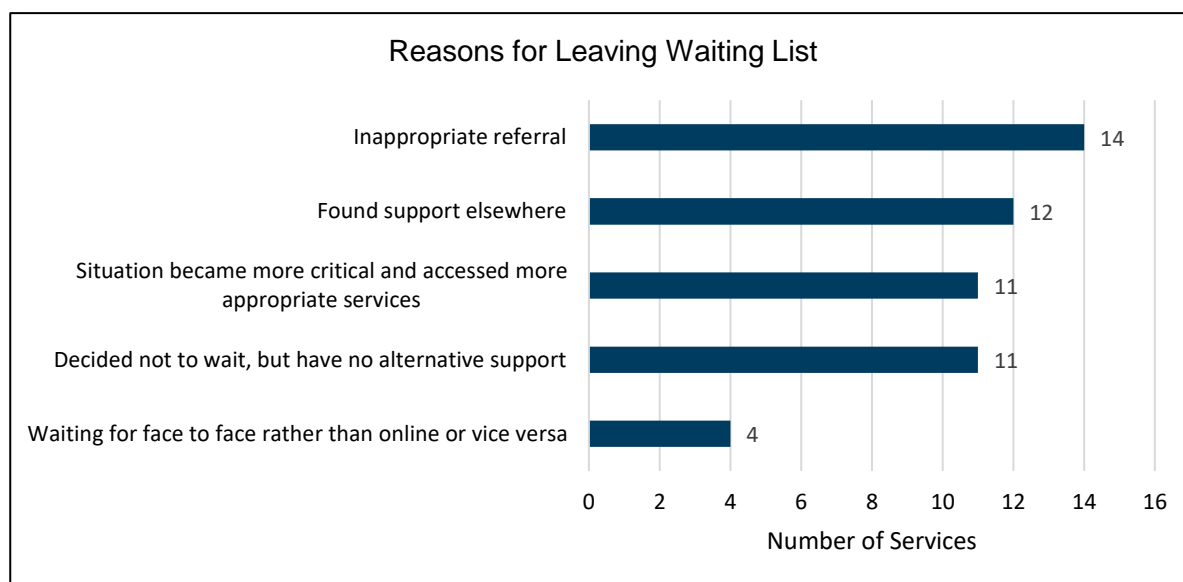
No	Org	Comment
3	AUKB	It varies by service - I&A can be 6+ weeks, Befriending depends on availability of volunteers etc.
8	ASP	our service is on demand to avoid crisis
9	APNI	Instant support
17	CABR	our generalist service has no waiting list but we meet 39% of demand. Specialist support for debt can be a wait of up to two months currently
30	MCAT	Not currently open
35	PAPY	Immediate support on HOPELINE247 and roughly a one-two month wait for training
38	SNDY	different services with different waiting times.
57	WMWA	IT depends on the particular service wanted.

Analysis of Data



No	Org	Comment
58	WCFRM	couldn't answer as we're full for 1:1 but have vacancies for more independent clients. Once a client is part of our community, there is no discharge date but on average and people rarely move on except for some of our dementia clients (who are 1:1) and the wait time can be over six months.
60	WAC	CMH up to 1 wk. SP 4-6 wks. Carers Hub Triaged on need 1 day to 6/8 wks.
63	YSS	Varies depending on each service

Q32 asked about reasons why people may leave a service waiting list. 52 services responded to this question and 12 organisations provided additional information (see below).



Organisations were able to offer additional reasons that people left their waiting lists and these included: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
3	AUKB	People don't often leave our waiting lists for I&A, Befriending etc;
5	AUKW	Self supported or accessed support from family/friends;
6	AWCIC	unaware of this happening as we triage;
7	AC	self help based so sometimes unsuitable;
10	AWM	referred by services and weren't wanting to access support from us
20	DWH	As yet this has not happened;
28	KEMP	people tend to stay on waiting list;
29	LINK	Ability to find £5.00 per week. Accessibility - getting here by bus ;
33	MMSC	They left Worcestershire.;
38	SNDY	multiple reasons;
52	TONF	Change in circumstances;
56	WFW	Access 5 to 6 sessions and no longer require support;

Analysis of Data



Q34 asked how organisations managed their waiting list. 56 services responded to this question. All services had some form of contact with people on their waiting lists.

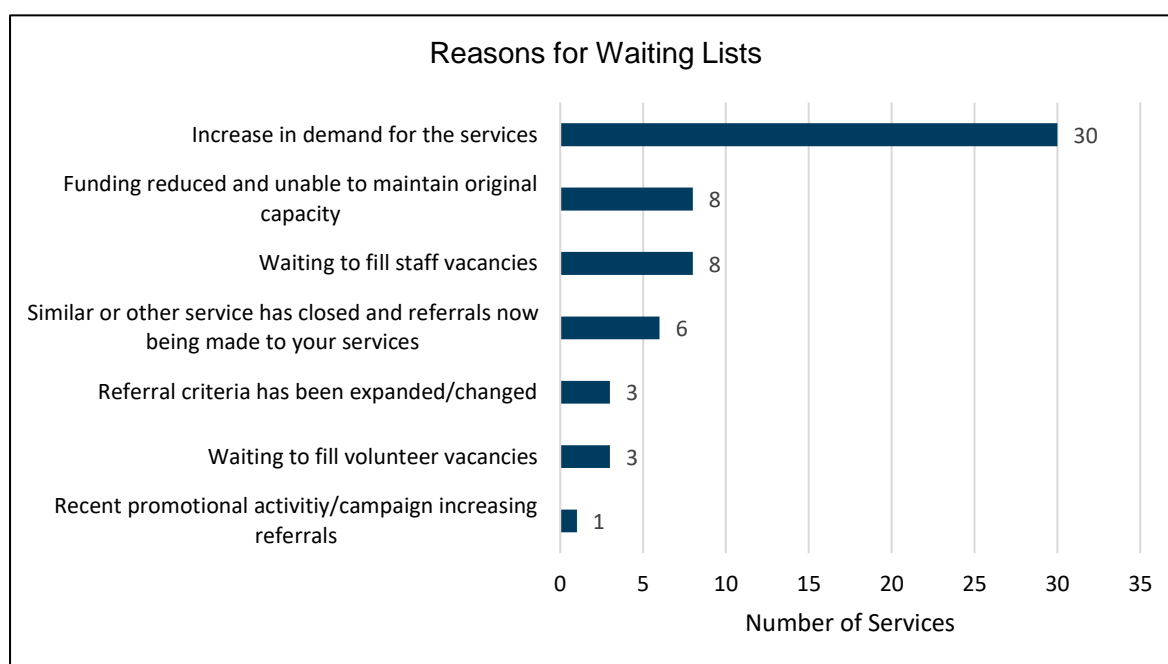
Contact people on their waiting list with updates	62%
Contact people, assess their situation and offer alternative or interim support	38%

Additional information was provided as follows: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
8	ASP	a waiting list is no good if someone is suicidal;
17	CABR	it is self-managed in the sense that we will book an appointment but do not contact in between;
33	MMSC	Contact people when a spot opens.;
36	PWH	Day to day visitors to the Hub - no waiting list. MH Peer Support Group we intend to contact people regularly to update them;
51	TKT	Our waiting list is held by a partner service. They regularly review;
58	WCFRM	our waiting list isn't that large, people know we will contact them if a vacancy arises, or they may contact us to check.;
60	WAC	Provide welcome pack, includes self-help resources;
61	YMCA	Update them when there is availability;

The next question asked (Q35) was around the reasons for the waiting lists.

- 51% of organisations responding indicated that their waiting lists were due to an increase in demand.



Analysis of Data



Additional comments relating to the reasons for waiting lists include: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
10	AWM	We are the only service offering what we do so demand is high. ;
13	BTS	There is a need to expand / offer another group but need more volunteers / staff;
16	BYC	There is a need to expand / offer another group but need more volunteers / staff;
20	DWH	Current funding and increase in demand means we haven't got finances to pay experienced and qualified counsellors;
29	Link	We arrange an initial meeting as soon as someone is referred/refers themself;
33	MMSC	Nobody wants to fund EE-specific services.;
61	YMCA	Waiting for a bedspace;

Exploring the reasons for the waiting lists in more detail, organisations were asked if access to specialist services were impacting on delivering services. (Q36)

Advocacy Services	54%
Interpretor Services	46%

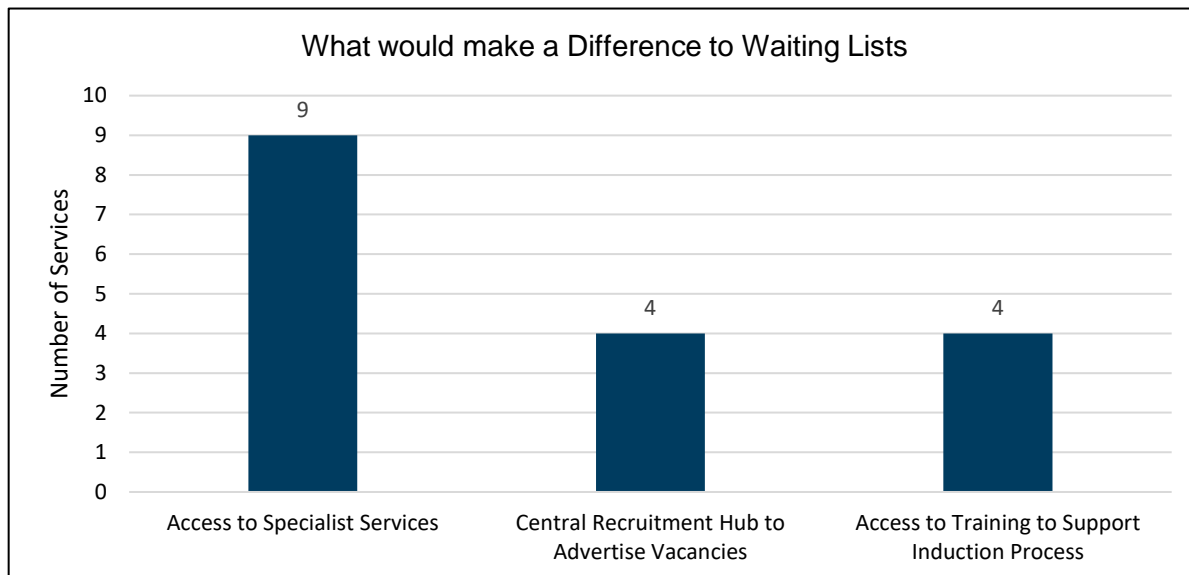
Other specialist services which impact on waiting lists included: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
8	ASP	we juggle to fit everyone in need, in;
10	AWM	Mental health Services not accepting referrals for autistic people. ;
33	MMSC	WE are the specialist services.;
34	ONSD	secondary mental health; Trauma Counselling, CAMHS, ;
49	STEPW	Waiting for a mental health appointment;

Analysis of Data



Finally, Organisations were asked what would make a difference to their waiting lists. (Q36). 17 services responded to this question and 18 provided additional information (see below).



Additional information relating to Q36 was supplied as follows, with three themes arising:

Staffing

- Increase in the number of trained and experienced staff.



Funding:

- Additional funding to build capacity.



Accessibility:

- Access to services.
- Reduced waiting lists in the rest of the system.



(please see Appendix 3 for organisational abbreviations)

No	Org	Comment
4	AUKHW	Increased numbers of volunteers and staff;
8	ASP	some cash would help us to keep up with demand;
10	AWM	Mental health Services working with us and understanding autistic people's mental health needs better so they have access to mental health support allowing us to support them with areas linked to their autistic needs. ;
14	BEN	Having funding to run extra sessions.;
15	BARN	Funding to support increased capacity;

Analysis of Data



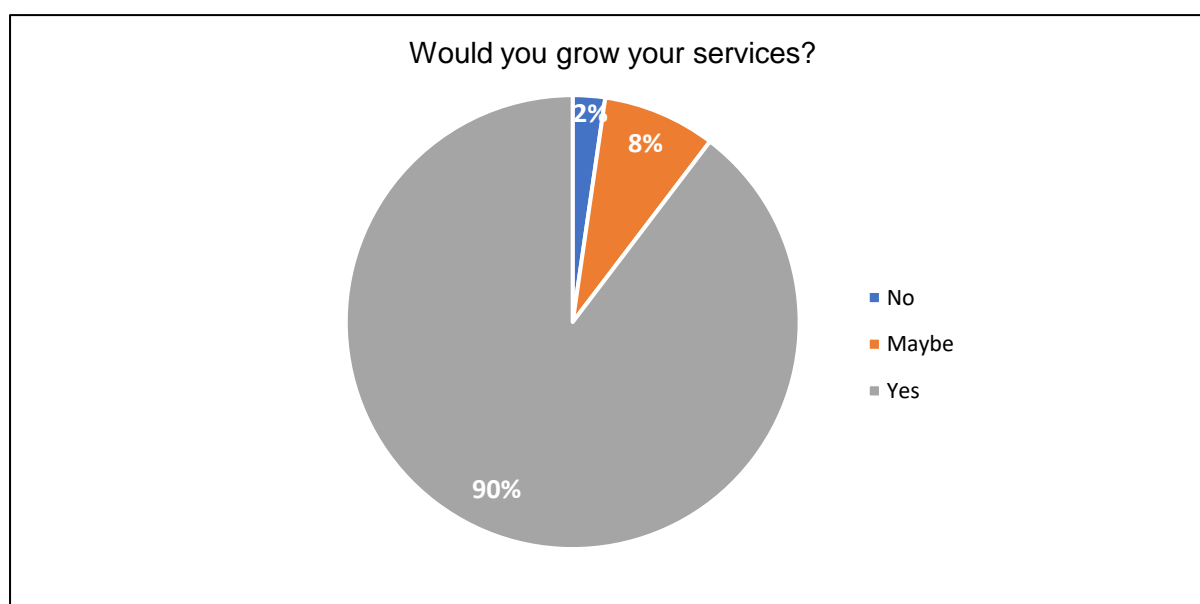
No	Org	Comment
17	CABR	resources for more caseworkers;
20	DWH	Increased funding so we can have a big enough team to meet the increasing demand;
22	HSN	Increase in staffing;
33	MMSC	Funding;
34	ONSD	Increase in funding for services; More resource (staffing); an increase in staff numbers and increase in number of NHS laptops available for staff;
37	RLAT	More Relate qualified counsellors;
38	SNDY	funding to increase capacity as work force already in situ;
51	TKT	Increase funding;
52	TONF	Increased funding;
57	WMWA	Better accessibility to mental health services for clients;
60	WAC	reduced waiting times elsewhere in the system, statutory and VCSE.;
61	YMCA	More bedspaces;
63	YSS	Additional funding ;

Growing Services

Q18 to 21 & 23 - 89 services, 58 organisations delivering 89 services responded to these questions.

- 90% of all organisations would like to grow their services to meet more demand.
- Only 2 organisations would like to remain delivering their services within their current model

Bromsgrove Youth and Community Hub	St Richards Hospice
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Analysis of Data

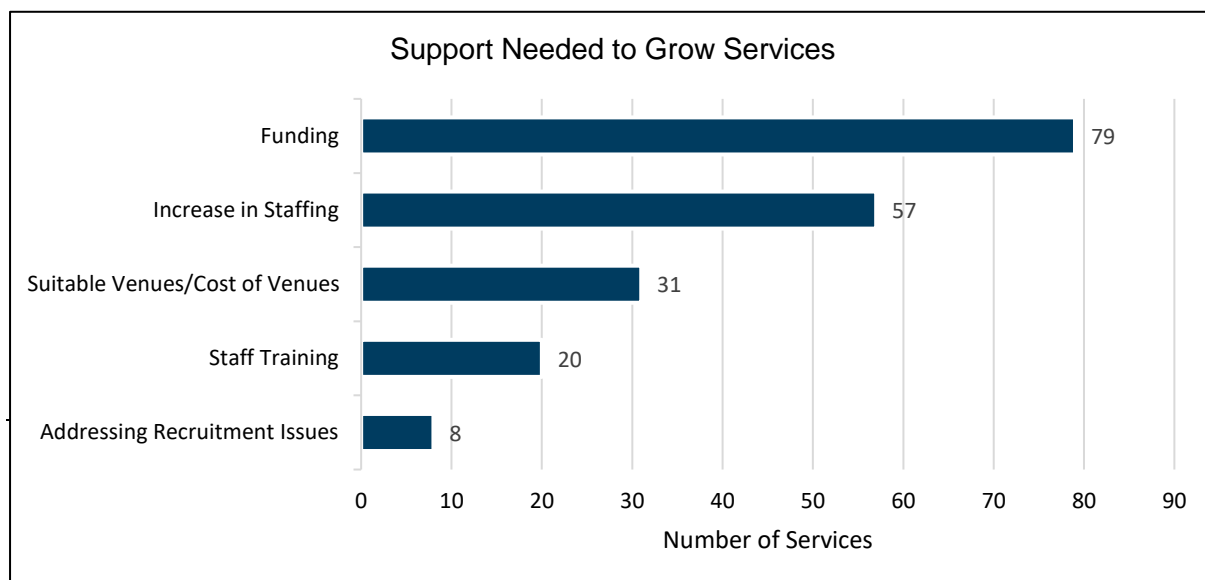


Q19 - The next question asked if the organisations had capacity to grow their services. 87 services responded to this question.

Capacity to grow services	47%
May have capacity with the right support	22%
Do not have capacity	31%

Q20 – Organisations were asked what support would be needed to grow their services. 84 services responded to this question.

- Funding and an increase in staffing were the main requests to enable organisations to grow their services.



No	Org	Comment
3	AUKB	Volunteer Supervisors;
23	HSSW	volunteer availability;
24	IPC	NHS workforce development to increase the awareness of our service/resources and how they should be used to maximise the benefit for families.;
27	JIG	Professional staff informing relatives/carers about Jigsaw.;
29	LINK	Higher profile of the services we offer;
29	STEPW	Increased Engagement and Volunteers

Analysis of Data



Q21 – Organisations were asked how many more people could be supported and how much might this cost. 79 services responded to this question.

Organisations were asked to think about how many people they could support using their current delivery models/services and how much this might cost. There was a wide ranging response to this question (*Appendix 7*) with the majority of organisations putting forward increased client numbers and costs to achieve this.

Q23 - The final question in this section asked organisations how much of the demand they could meet with the appropriate funding. 72 services responded to this Question with a wide range of suggestions. (*Appendix 7*). Themes arising include:

Geography:

- Extending services across the county



Venues:

- Additional venues



Referrals:

- Increase the number of referrals



Analysis of Data

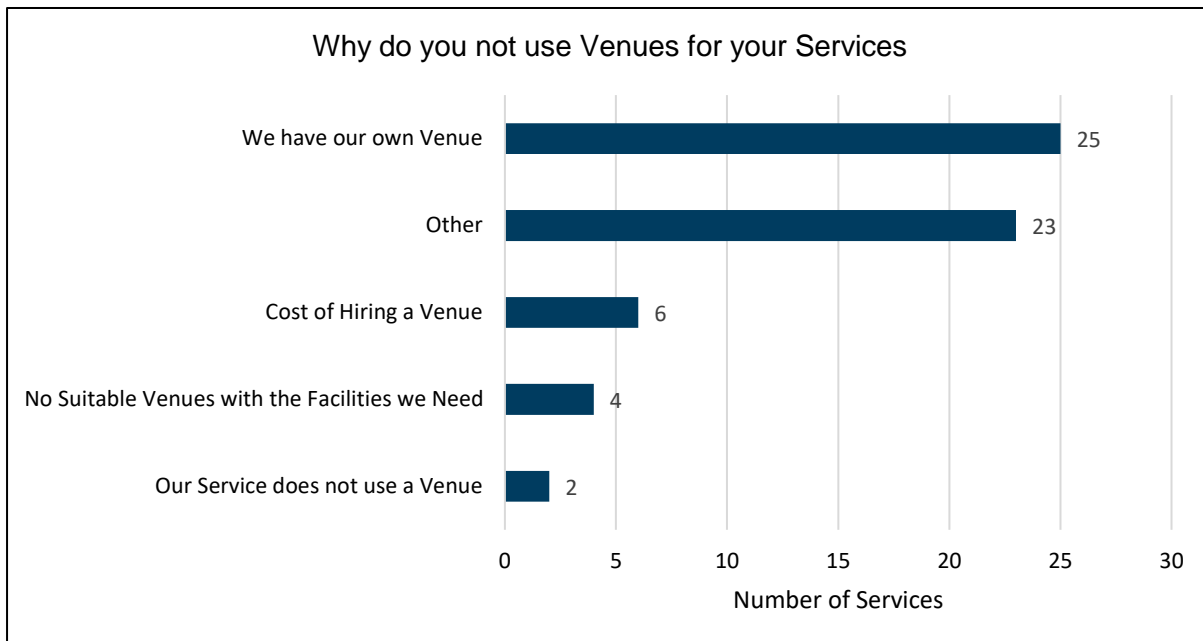


Venues

Q37 to 39 - 48 organisations delivering 60 services responded to this question. Suitable and cost appropriate venues were highlighted as a challenge to service delivery in the phase one data analysis. The following data explores this in more detail.

- 48% of organisations use an external venue to deliver some or all of their services.
- Of the remaining 52% who do not use external venues, 64% have their own.

Batchely Support Group	Age UK Herefordshire & Worcestershire	Ahead of Wellbeing CIC
Citizens Advice Bromsgrove 7 Redditch	Droitwich Wellbeing Hub	Home Start North-East Worcestershire
Jacks Place Care CIC	KEMP Hospice	Link Nurseries
Onside	Pershore Wellbeing Hub	Sandycroft
St Pauls Hostel	Stepway CIO	The Old Needleworks Foundation
The Shed at Top Barn	Wick Care Farm	YMCA Worcestershire
You Turn	ASPIE Limited	



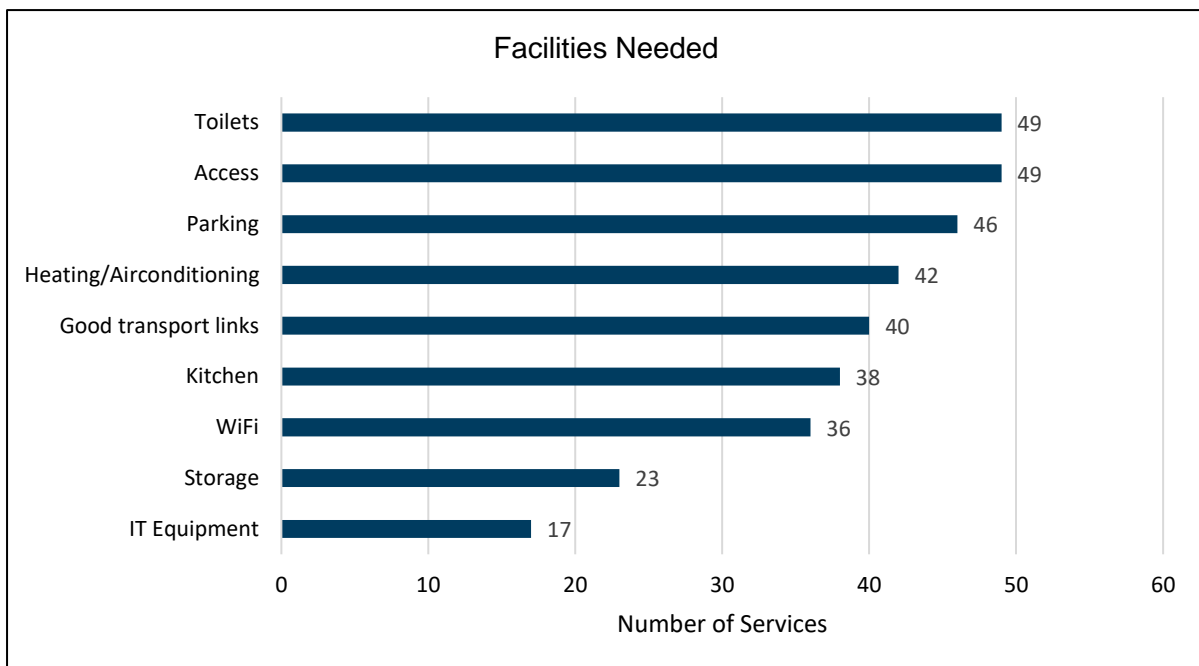
Analysis of Data



Organisations also outlined additional reasons for not using venues: (*please see Appendix 3 for organisational abbreviations*)

No	Org	Comment
8	ASP	Rented because people on the spectrum need routine and certainty.
14	BEN	After 5 years, we have been refused our venue for sole use on a monthly contract and are having to move to another venue, yet to be found so that we can increase our service when we secure further funding.
60	WAC	With pressures on budgets, and uplifts not keeping pace with inflation the cost of venues can be a challenge.

Q39 – Organisations were asked what kind of facilities they needed from a venue. 56 services responded to this question. The top three requests are:



Analysis of Data



The following table shows the further additional facilities needed by organisations to deliver their services: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
6	AWCIC	Private room
8	ASP	a variety of rooms for different purposes, games, pool, computer use, counselling rooms and a quiet room
22	HSN	Offices with large hall space;
34	ONS	private consultation rooms;
35	PAPY	Availability of two good sized rooms for two consecutive days;
37	RLAT	Manned reception area during evenings;
51	TKT	Ground floor access - prams/pushchairs ;
58	WCFRM	We have a farm!;
60	WAC	Some outdoor space is also beneficial. ;

There is a wide range of venues used by the organisations involved in this report including:

Libraries	GP Practices	Partner's Venues	Own Venue
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(Appendix 8 shows the primary venues used by organisations responding to these questions.)

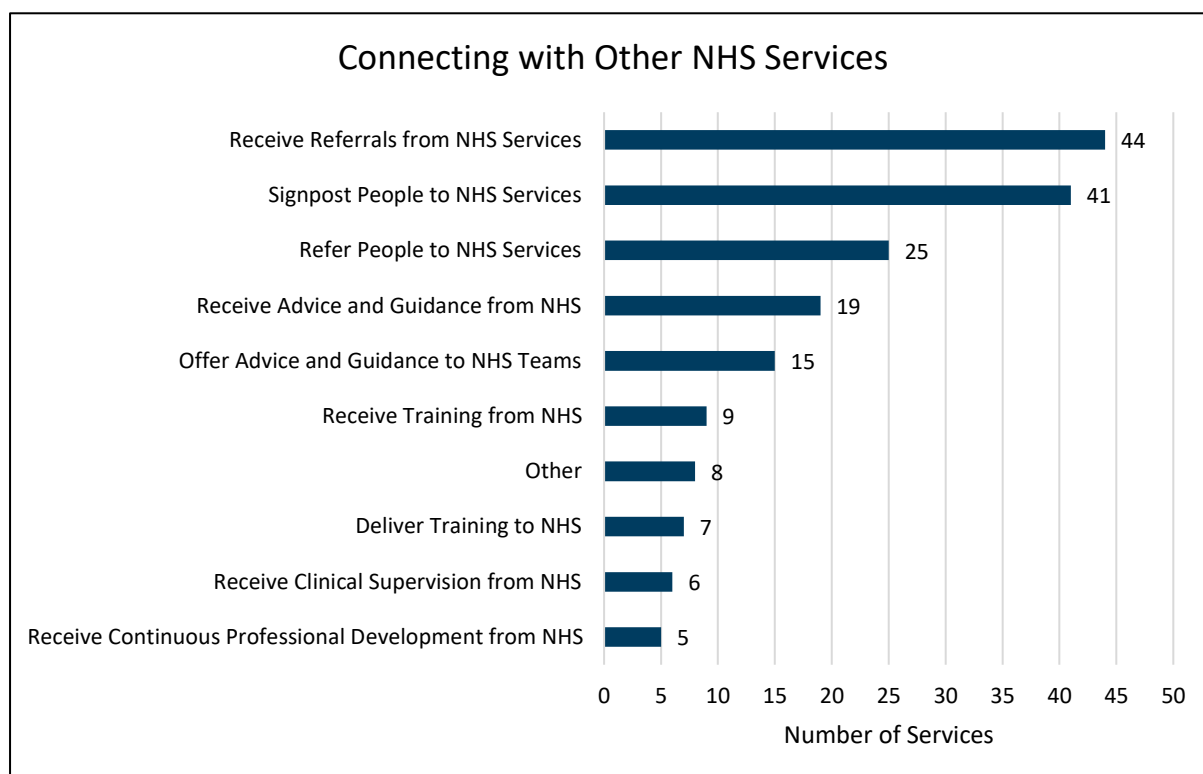
Analysis of Data



Connecting with NHS Services

Q29 - 60 services, 48 organisations delivering 60 services responded to this question. Organisations were asked to identify how they connect with NHS services across Worcestershire.

- Almost a quarter of all organisations receive referrals from NHS services.
- 37% either signpost or actively refer people to NHS services.
- 7% receive training from the NHS and 5% deliver training to the NHS.
- 3 organisations do not connect with NHS services.



The following information shows a breakdown of the organisations and their connections to the NHS.

Receive CPD

Sandycroft	Onside
Ways for Wellbeing CIC	South Warwickshire & Worcestershire MIND

Deliver Training to NHS Teams

Stepway CIO	West Mercia Womens Aid
Autism West Midlands	South Warwickshire & Worcestershire MIND
Papyrus	

Analysis of Data



Receive Clinical Supervision from the NHS

Worcestershire Association of Carers	Sandycroft
Onside	South Worcestershire Citizens Advice
South Warwickshire & Worcestershire MIND	

Receive Training from the NHS

Sandycroft	Stepway CIO
West Mercia Womens Aid	Onside
Age UK Herefordshire & Worcestershire	Ways for Wellbeing CIC
Bromsgrove Youth & Community Hub	

Office Advice and Guidance to NHS Teams

ASPIE	Sandycroft
Age UK Worcester and Malvern Hills	Wick Care Farm
Stepway CIO	West Mercia Womens Aid
Onside	Home Start North East Worcestershire
Autism West Midlands	South Warwickshire & Worcestershire MIND
Papyrus	Action on Postpartum Psychosis (APP)
Worcestershire Association of Carers	

Receive Advice and Guidance from the NHS

Sandycroft	KEMP Hospice
Simply Limitless	Age UK Worcester and Malvern Hills
Wick Care Farm	Stepway CIO
West Mercia Womens Aid	Onside
Home Start North East Worcestershire	South Worcestershire Citizens Advice
Age UK Herefordshire & Worcestershire	JCK Counselling & Psychotherapy
YMCA Worcestershire	St Pauls Hostel
Bens Youth & Community Group	

Refer People to NHS Services

Bens Youth & Community Group	Worcestershire Association of Carers
Sandycroft	Batchley Support Group
Droitwich Wellbeing Hub	Pershore Wellbeing Hub
Relate Severn and Wye	KEMP Hospice
Simply Limitless	Age UK Worcester and Malvern Hills
Wick Care Farm	Stepway CIO
West Mercia Womens Aid	Onside
Homestart North East Worcestershire	South Worcestershire Citizens Advice
Age UK Herefordshire & Worcestershire	Autism West Midlands
South Warwickshire & Worcestershire MIND	Ways for Wellbeing CIC
St Pauls Hostel	

Analysis of Data



Signpost People to NHS Services

Worcestershire Association of Carers	Sandycroft
Batchley Support Group	Droitwich Wellbeing Group
Pershore Wellbeing Hub	Relate Severn & Wye
KEMP Hospice	Simply Limitless
Age UK Worcester and Malvern Hills	Wick Care Farm
Stepway CIO	West Mercia Womens Aid
Onside	Homestart North East Worcestershire
South Worcestershire Citizens Advice	Age UK Herefordshire & Worcestershire
Autism West Midlands	South Warwickshire & Worcestershire MIND
Ways for Wellbeing CIC	Artists Clubhouse
Ahead of Wellbeing CIC	APNI
Malvern Community Arts Therapy	The Old Needleworks Foundation
You Turn	YSS
Bromsgrove Youth and Community Group	Jigsaw
Snowgoose Solutions	JCK Counselling & Psychotherapy
YMCA Worcestershire	Papyrus
APP	St Pauls Hostel
BENS Youth & Community Groups	

Receive Referrals from NHS Services

Age UK Bromsgrove, Redditch & Wyre Forest	Citizens Advice Bromsgrove & Redditch
Crosslinks Befriending Service	Megan Baker House
Stars Adult Day Care Centre	The Shed at Top Barn
BENS Youth & Community Groups CIC	Worcestershire Association of Carers
ASPIE	Link Nurseries
Sandycroft	Batchley Support Group
Droitwich Wellbeing Hub	Pershore Wellbeing Hub
Relate Severn & Wye	KEMP Hospice
Simply Limitless	Age UK Worcester and Malvern Hills
Wick Care Farm	Stepway CIO
West Mercia Womens Aid	Onside
Homestart North East Worcestershire	South Worcestershire Citizens Advice
Age UK Herefordshire & Worcestershire	Autism West Midlands
South Warwickshire & Worcestershire MIND	Ways for Wellbeing CIC
Artists Clubhouse	Ahead of Wellbeing CIC
APNI	Malvern Community Art Therapy
The Old Needleworks Foundation	You Turn
YSS	Bromsgrove Youth and Community Hub

Analysis of Data



The following organisations connect with NHS services via one route only:

Organisation	Connection
Age UK Bromsgrove, Redditch & Wyre Forest	Receive referrals from NHS services
Citizens Advice Bromsgrove & Redditch	Receive referrals from NHS services
Crosslinks Befriending Service	Receive referrals from NHS services
Megan Baker House	Receive referrals from NHS services
STARS Adult Day Care Centre	Receive referrals from NHS services
The Shed at Top Barn	Receive referrals from NHS services
Jigsaw	Signpost people to NHS services
Snowgoose Solutions	Signpost people to NHS services
Bromsgrove and Redditch Network	Social Prescribers

Organisations were also given the opportunity to give additional information relating to their engagement with NHS services: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
2	APP	We have a number of partnership projects with the NHS, in Birmingham, Black Country and the NW, offering peer support;
13	BTS	Do not get anything from the NHS;
15	BARN	Social Prescribers
22	HSN	We offer accommodation to NHS services;
25	JCKP	We don't connect with the NHS;
33	MMSC	We tried to connect with the NHS for three years, we were finally told we are "useless" and we should disband. We joined VCSE for a year - and despite our desperate condition we were deceived into believing there will be funding where in fact we were used to provide funding for others.;
58	WCFRM	I attend multidisciplinary team meetings; send reviews/observational assessments to NHS; have joint emails with various NHS services eg, Behavioural Nurse, Speech and Language Therapists, Social Workers for Adult Services, Learning disabilities and mental health WCC Social Workers; Psychologists; support workers; Advocacy workers; ;

Analysis of Data



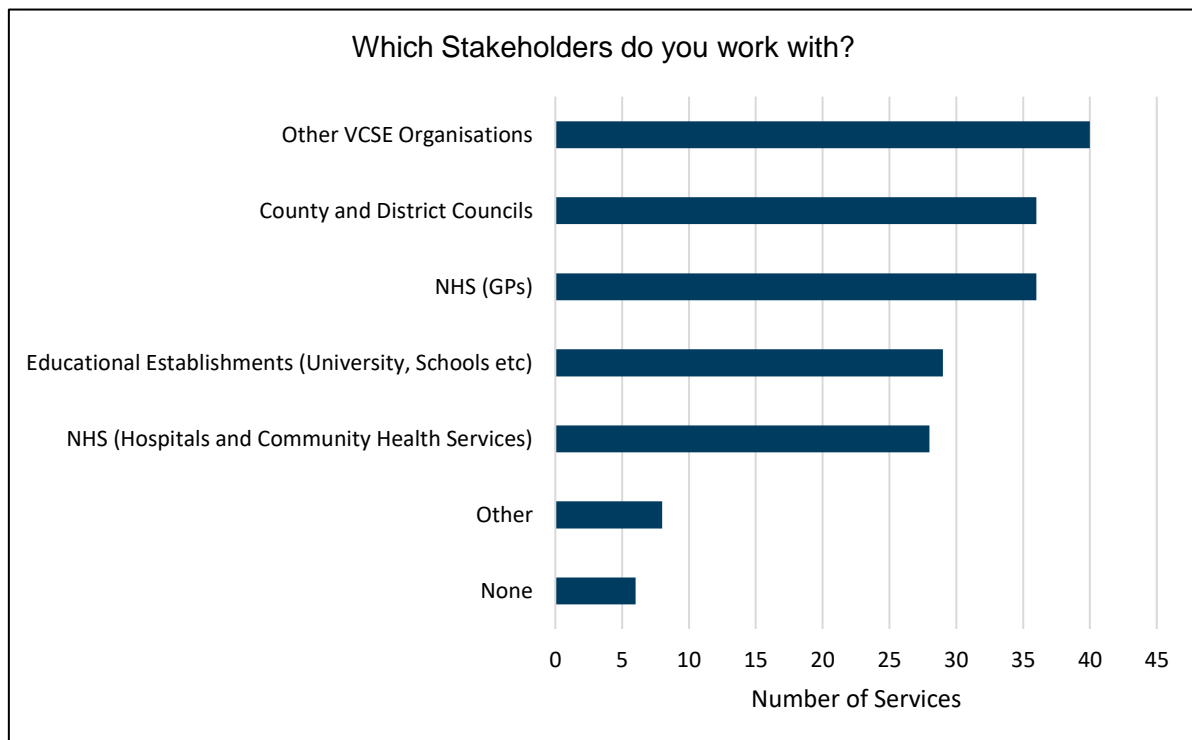
Stakeholders

Q30 - 48 organisations delivering 56 services responded to this section. Organisations participating in this data collection were asked about who they worked with and/or have developed partnerships with.

- 6 organisations communciated that they had no partnerships with wider stakeholders.

Artists Clubhouse	Behind the Smile	JCK Counselling & Psychotherapy
Malvern Community Art Therapy	MMSC/Yellow Scarf	The Shed at Top Barn

The top three stakeholders organisations indicated that they work with are:



Analysis of Data



Organisations also engage with the following stakeholders: *(please see Appendix 3 for organisational abbreviations)*

No	Org	Comment
11	BSG	Social Prescribers
15	BARN	Social Prescribers
16	BYC	Sexual Health (WISH);
20	DWH	A wide range of local partnerships including Housing Association, Starting Well Partnership, Public Health, WCF, Dawn Project, health advisors and lifestyle advisors to name some;
35	Papyrus	Any organisation or individual who is interested.;
57	WMWA	A huge amount of partnerships with other organisations. ;

Analysis of Data



IT Infrastructure and Support

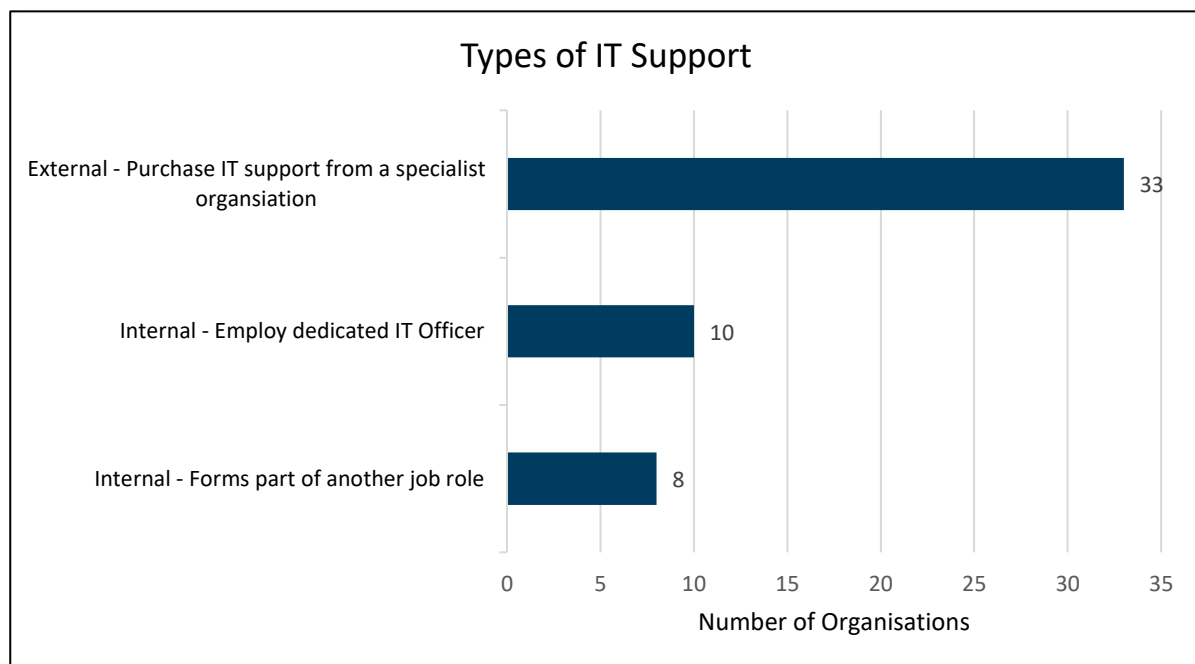
Q52 to 58 - 48 organisations delivering 60 services responded to these questions. This section aims to gain an understanding of the systems used to manage daily operations and the management of systems.

Organisations outsourcing their IT to an external provider	65%
Organisations with internal IT support	19%
Microsoft 365 used as day to day business software	65%
Access to NHS.net emails for communications	29%
Access to EMIS*	17%
Access to Carenotes**	5%

*EMIS is the electronic patient record software which is used by GP Practices

**Carenotes is the electronic patient record software which is used by the Herefordshire & Worcestershire NHS Health & Care Trust

Organisations using Excel as their data management system	21
Organisations using a data management software	22
Organisations not using any data management software	7

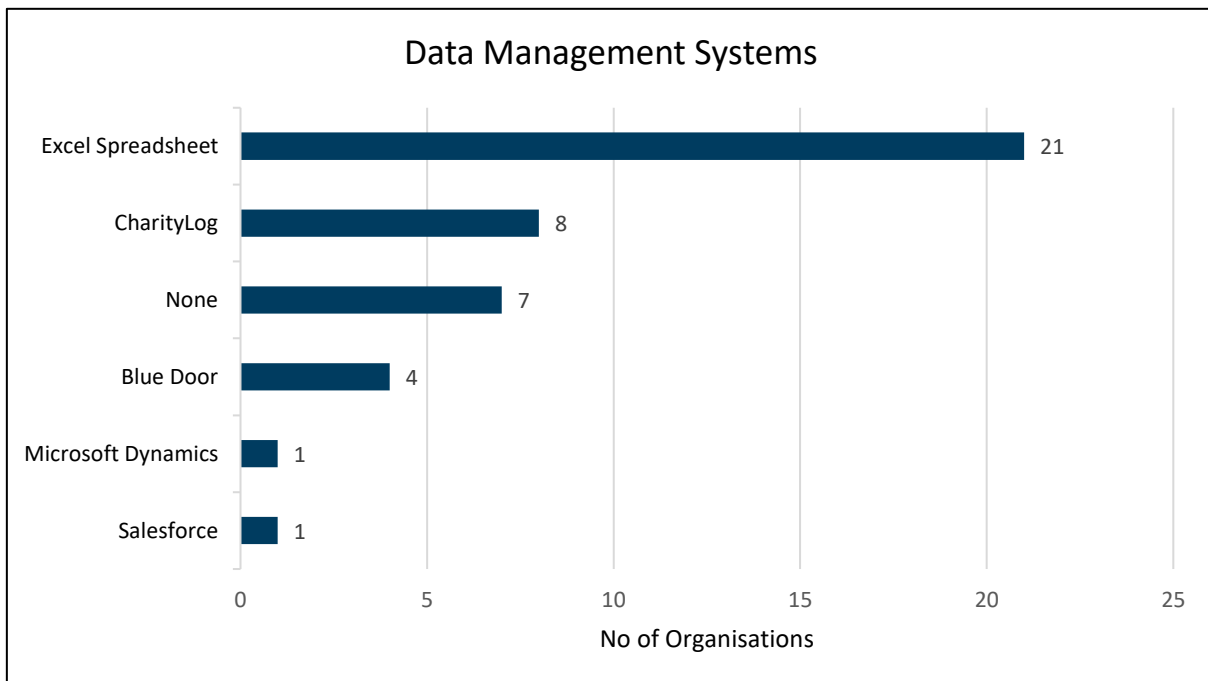


Analysis of Data



Organisations outsourcing their IT support use the following companies which are a mix of national and local providers.

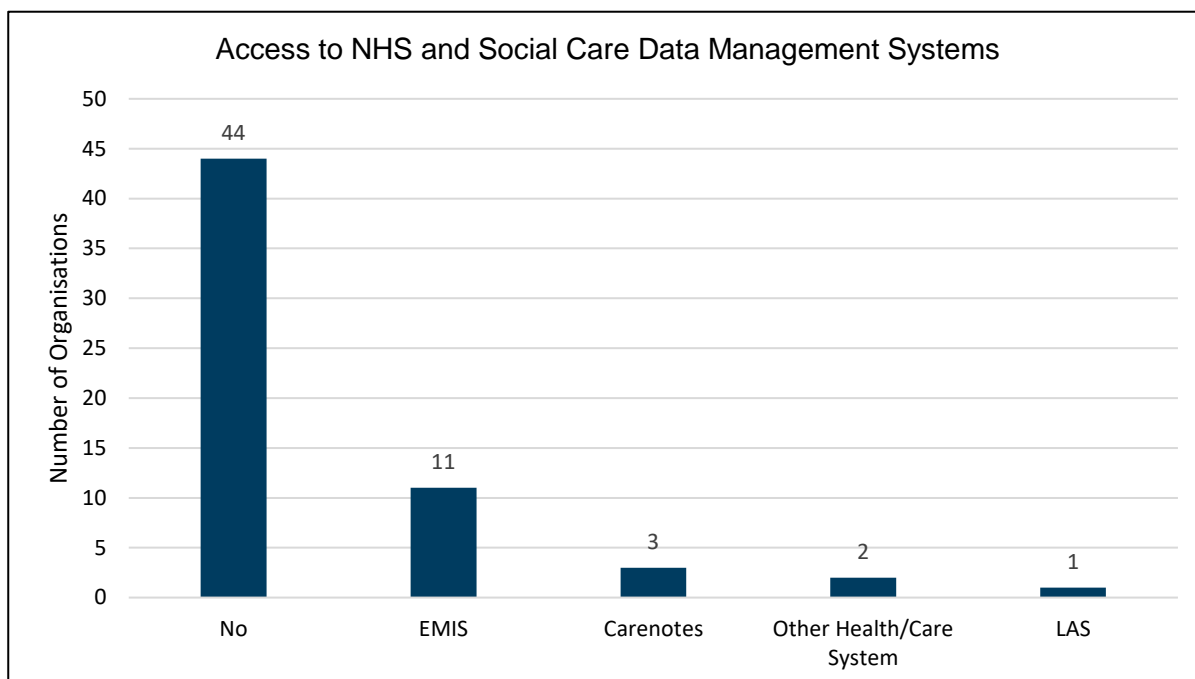
AirIT	EBC Group	Q6IT
MJS Services	Local Web Designer	Serveline
Super Fast IT Services	Webwax	Lancelot
Jumpexposure	Acutec	Charlton Networks
MFM	IT Contact	



Other systems utilised by the organisations include:

AMIS	Password encrypted files in MS 365	Blackbaud Raisers Edge
EMIS	Beacon CRM	Sharepoint
Upshot	VCS Cloud	GoDaddy
iCloud	In house system	Locked cabinet
Handwritten notes	Oasis	TP Tracker
No service user data	Bespoke national system	

Analysis of Data



Organisations reporting they have access to external Data Management Systems:

Organisation	System Access
Age UK Herefordshire & Worcestershire	EMIS
Age UK Worcester and Malvern Hills	EMIS
KEMP Hospice	EMIS
Onside	EMIS, Care Notes
South Worcestershire Citizens Advice	EMIS
South Warwickshire & Worcestershire MIND	EMIS, Care Notes
Worcestershire Association of Carers	EMIS, Care Notes, LAS*

*Worcestershire Adult Services Client Management System

Quality

Q57, 58 and 62 relate to Quality. 48 organisations delivering 60 services responded to these questions.

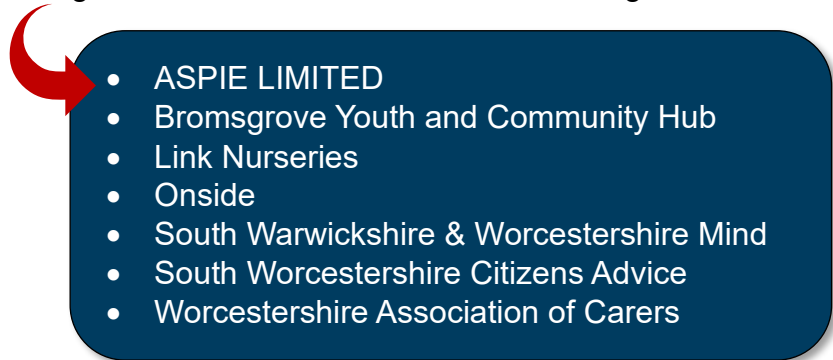
Organisations registered with the NHS DSPT (Data Security and Protection Toolkit)	21%
Submit data to the National NHS MHSDS (Mental Health Services Data Set) via an NHS Partner.	4%
Have a formal, documented Quality Assurance Framework in place	50%

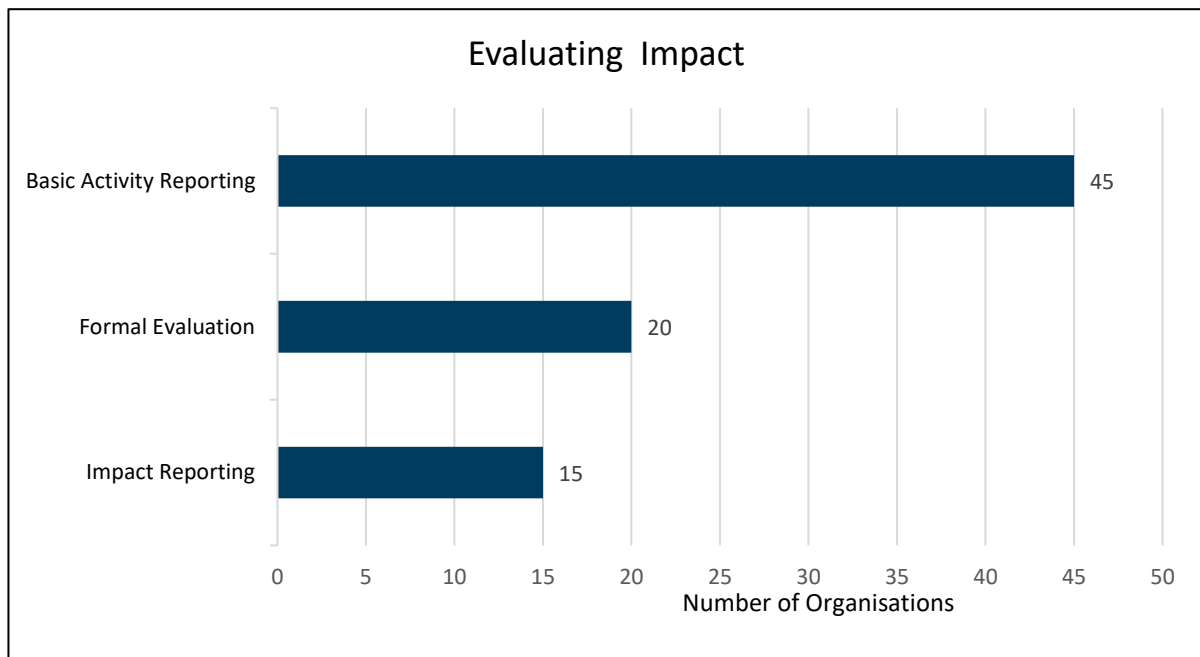


Monitoring, Reporting and Impact

Q59 to 62 - 48 organisations delivering 60 services responded to these questions.

- 96% of all organisations indicated that they carried out their own monitoring and reporting.
- Over half of the organisations participating use basic activity reporting to evaluate the impact their services are making eg: number of service users, number on waiting list.
- 14% provide IT, reporting and/or evaluation services to other organisations.

- 
- ASPIE LIMITED
 - Bromsgrove Youth and Community Hub
 - Link Nurseries
 - Onside
 - South Warwickshire & Worcestershire Mind
 - South Worcestershire Citizens Advice
 - Worcestershire Association of Carers



NHS MHDS

- 10 organisations did not know if they were submitting data to the NHS Mental Health Services Data Set.
- 4 organisations reported that they submitted data via an NHS partner.
- No organisations directly submitted data to the NHS Mental Health Services Data Set.

Recommendations



The VCSE Alliance propose the following recommendations from this report:

No	Recommendation
1	That the report is used by statutory partners and larger VCSE organisations to understand the breadth and capability of more and particularly smaller VCSE organisations already delivering Mental Health support services in Worcestershire, to engage in more meaningful conversations and understand better how to support delivery at place level to improve health inequalities and access to services.
2	That the report be used by commissioners to develop a strategy to support and engage more and particularly smaller VCSE organisations in delivering Mental Health Solutions in partnership with each other and statutory partners, to deliver national and local priorities on health inequalities, prevention, and reduce the natural deterioration to severe mental illness when patients do not receive the help they need early enough.
3	Of the 232 organisations identified as delivering some form of Mental Health support contacted, only 62 responded, there is therefore potential for further work to contact some of the organisations that did not respond individually, particularly any that work with high-risk groups and underserved communities, to see what other services may be available for development, as part of any offer or strategy that is developed by commissioners to embed the VCSE better in the ICS as Mental Health delivery partners.

APPENDIX 1 - Communications



Good Morning/Afternoon

Thank you so much for taking time to complete the recent VCSE Alliance survey asking for information relating to your services and the support you offer to people living with or at risk of mental health conditions.

We have a short window of opportunity to add any questions to the Phase Two survey before it is sent out for completion. I would be really grateful if you do have any additions or comments regarding the survey, to send them back to me (jconway@carersworcs.org.uk) by 16th November at the very latest. The survey will then be sent out on the 20th November with a return date of the 15th December. Equally if you feel there are any organisations that should be contacted, please do let me know as we would like to include as many services as possible.

The Phase One report can be found on the VCSE Alliance [website](#). This report really showcases the vital work our sector carries out and will be used to inform further research, service development and possible funding opportunities. This Phase One report has enabled us to identify opportunities for a “phase two” survey, looking in more detail at some of the challenges you have highlighted and some particular areas of interest. These include:

- Waiting Lists
- Venues
- Transitions
- Volunteering
- Workforce Development
- IT & Data Infrastructure

Thank you again, I understand that everyone is very busy and your time is valuable -look forward to hearing from you.

Best Wishes

APPENDIX 1 - Communications



Good Morning / Afternoon

On behalf of the VCSE Alliance in Worcestershire we are carrying out research which looks at the services and support available from VCSE organisations for people living with a mental health condition or at risk of poor mental health due to their circumstances eg: debt, homelessness etc.

The research will help inform service delivery, increase collaboration opportunities and may provide additional funding for our sector.

I would be really grateful if you could help support this research by providing organisations you might signpost or refer to, who provide such services, in order that we can contact them to be part of this study. Just the organisational name is required unless you are able to share a contact name and email as well.

Thank you so much, please do contact me if you have any queries.

With Best Wishes



Good Morning / Afternoon

[PHASE ONE REPORT - LINK](#)

On behalf of the VCSE Alliance in Worcestershire we are carrying out research which looks at the services and support available from VCSE organisations for people living with a mental health condition or at risk of poor mental health due to their circumstances eg: debt, homelessness etc. You have been identified as delivering services in Worcestershire and we would appreciate your views by the 15th December.

We would like to include your services in this study and have developed a survey with a series of questions which investigate how you deliver your services, what challenges you face and what solutions could be offered. The survey is quite long so will take about half an hour of your time. I do appreciate that you are busy and hope that you are able to participate – your views and expertise are really important.

The research will help inform service delivery, increase collaboration opportunities and may provide additional funding for our sector.

If you do have any queries please let me know.

With Best Wishes

APPENDIX 2 - The Survey Questions



#1 Questions

Questions 1 – 63 were sent to all organisations who did not participate in the Phase One data collection.

General Details	
1.	Name of your organisation?
2.	Do you deliver services in Worcestershire?
	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
3.	Does your organisation specifically provide services which support people who are diagnosed with a mental health condition (eg: anxiety, depression)
	No <input type="checkbox"/>
	People who have a diagnosed mental health condition <input type="checkbox"/>
	People at risk of developing a mental health condition <input type="checkbox"/>
4.	Does your organisation specifically provide services which support people who or are at risk of developing a mental health condition due to other circumstances (eg: housing issue, debt)?
	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
5.	Where is your head office based?
	Redditch <input type="checkbox"/>
	Bromsgrove <input type="checkbox"/>
	Wyre Forest <input type="checkbox"/>
	Worcester City <input type="checkbox"/>
	Malvern <input type="checkbox"/>
	Wychavon <input type="checkbox"/>
	Other <input type="checkbox"/>
Service Details	
6.	Please give the name(s) of the service(s) you provide?
7.	Please give a brief description of your organisation and the services you provide
8.	What type of mental health support does this service(s) provide?
	Crisis Intervention <input type="checkbox"/>
	Therapeutic Intervention <input type="checkbox"/>
	Counselling <input type="checkbox"/>
	Peer Support <input type="checkbox"/>
	Wellbeing Interventions <input type="checkbox"/>
	Care Co-Ordination / support to manage external factors <input type="checkbox"/>
	Other <input type="checkbox"/>

APPENDIX 2 - The Questions



9.	What is the model of delivery for this service(s)?	
	One to One online / telephone	<input type="checkbox"/>
	Groups / Peer Support online	<input type="checkbox"/>
	One to One face to face	<input type="checkbox"/>
	Groups / Peer Support face to face	<input type="checkbox"/>
	Other	<input type="checkbox"/>
10.	What as the original eligibility criteria for this service(s)?	
	Low Level MH Issues – anxiety / depression	<input type="checkbox"/>
	Moderate MH Issues	<input type="checkbox"/>
	Severe and Enduring conditions	<input type="checkbox"/>
	At risk of harm to self and/or others	<input type="checkbox"/>
	Complex Emotional needs	<input type="checkbox"/>
	Psychosis	<input type="checkbox"/>
	Eating Disorders	<input type="checkbox"/>
	Post Natal depression	<input type="checkbox"/>
	Carer	<input type="checkbox"/>
	Other	<input type="checkbox"/>
11.	If different from the original eligibility, what need is this service(s) currently meeting?	
	Low Level MH Issues – anxiety / depression	<input type="checkbox"/>
	Moderate MH Issues	<input type="checkbox"/>
	Severe and Enduring conditions	<input type="checkbox"/>
	At risk of harm to self and/or others	<input type="checkbox"/>
	Complex Emotional needs	<input type="checkbox"/>
	Psychosis	<input type="checkbox"/>
	Eating Disorders	<input type="checkbox"/>
	Post Natal depression	<input type="checkbox"/>
	Carer	<input type="checkbox"/>
	Other	<input type="checkbox"/>
12.	What geographical area does this service(s) cover?	
	Bromsgrove	<input type="checkbox"/>
	Redditch	<input type="checkbox"/>
	Worcester City	<input type="checkbox"/>
	Wyre Forest	<input type="checkbox"/>
	Malvern	<input type="checkbox"/>
	Wychavon	<input type="checkbox"/>
	Countywide	<input type="checkbox"/>

APPENDIX 2 - The Questions



13.	Who funds this service(s)?	
	NHS	<input type="checkbox"/>
	Local Authority / Social Care	<input type="checkbox"/>
	Charitable Funds	<input type="checkbox"/>
	Trusts / Grants	<input type="checkbox"/>
	Education	<input type="checkbox"/>
	Paid for by Client	<input type="checkbox"/>
	Other	<input type="checkbox"/>
14.	How many paid staff currently support this service(s)?	
	0 -10	<input type="checkbox"/>
	11 - 20	<input type="checkbox"/>
	21 – 30	<input type="checkbox"/>
	41 – 50	<input type="checkbox"/>
	50+	<input type="checkbox"/>
15.	How many volunteers currently support this service(s)?	
	0 -10	<input type="checkbox"/>
	11 - 20	<input type="checkbox"/>
	21 – 30	<input type="checkbox"/>
	41 – 50	<input type="checkbox"/>
	50+	<input type="checkbox"/>
16.	How many people does this service(s) support annually?	
	Less than 500	<input type="checkbox"/>
	500 – 1000	<input type="checkbox"/>
	1000 – 1500	<input type="checkbox"/>
	1500 – 2000	<input type="checkbox"/>
	2000 – 3000	<input type="checkbox"/>
	3000 – 4000	<input type="checkbox"/>
	4000+	<input type="checkbox"/>
	Other	
17.	Does this service(s) have a waiting list?	
	Capacity available	<input type="checkbox"/>
	At capacity	<input type="checkbox"/>
	Over subscribed	<input type="checkbox"/>
	Heavily over subscribed	<input type="checkbox"/>

APPENDIX 2 - The Questions



Meeting Demand and Growing your Service	
18.	Would you like to grow this service(s) to meet demand?
	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
	Maybe <input type="checkbox"/>
Other <input type="checkbox"/>	
19.	Do you have capacity to grow this service(s)?
	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
20.	What could support you to grow this service(s)? What are the barriers to growth?
	Funding <input type="checkbox"/>
	Increase in staffing <input type="checkbox"/>
	Suitable venues / costs <input type="checkbox"/>
	Addressing recruitment issues <input type="checkbox"/>
	Staff training <input type="checkbox"/>
	Other <input type="checkbox"/>
21.	How many more people could you support based on your current service model and at what cost?
22.	Have you identified any gaps in services that you could potentially meet? If so, please describe the service(s) and potential demand.
23.	How much of the demand could you meet if the funding was available?

#2 Questions

Questions 1 to 7 and 24 to 63 were sent to all organisations who participated and responded to the Phase One data collection programme.

General	
24.	Do you deliver services in Worcestershire?
	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
25.	Does your organisation specifically provide services which support people who are diagnosed with a mental health condition (eg: anxiety, depression)
	No <input type="checkbox"/>
	People who have a diagnosed mental health condition <input type="checkbox"/>
	People at risk of developing a mental health condition <input type="checkbox"/>

APPENDIX 2 - The Questions



26.	Does your organisation specifically provide services which support people who or are at risk of developing a mental health condition due to other circumstances (eg: housing issue, debt)?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
27.	What age range of people do you support?	
	Children and/or younger adults	<input type="checkbox"/>
	Adults (25+)	<input type="checkbox"/>
	Older Adults (65+)	<input type="checkbox"/>
28.	How do you deliver your services?	
	Face to Face only - Groups	<input type="checkbox"/>
	Online only - Groups	<input type="checkbox"/>
	Face to Face only – One to One	<input type="checkbox"/>
	Online Only – One to One	<input type="checkbox"/>
	Combination – Groups	<input type="checkbox"/>
	Combination – One to One	<input type="checkbox"/>
	If you only provide one method eg: online, why?	
29.	How do your services connect with other NHS services? (eg: GP practices, Health & Care Trust, Acute Trust etc)	
	Receive referrals from NHS services	<input type="checkbox"/>
	Refer people to NHS services	<input type="checkbox"/>
	Signpost people to NHS services	<input type="checkbox"/>
	Advice and guidance from NHS	<input type="checkbox"/>
	Offer advice and guidance to NHS teams	<input type="checkbox"/>
	Training from NHS	<input type="checkbox"/>
	Deliver training to NHS Teams	<input type="checkbox"/>
	Receive Conituous Professional Development from NHS	<input type="checkbox"/>
	Receive clinical supervision from NHS	<input type="checkbox"/>
	Other	<input type="checkbox"/>
30.	Which stakeholders do you work with?	
	NHS (hospitals and community health services)	<input type="checkbox"/>
	NHS (GPs)	<input type="checkbox"/>
	Educational Establishments (eg: University, schools)	<input type="checkbox"/>
	County and District Councils	<input type="checkbox"/>
	Other VCSE organisations	<input type="checkbox"/>
	None	<input type="checkbox"/>
Other	<input type="checkbox"/>	

APPENDIX 2 - The Questions



Waiting Lists	
31.	If you have indicated in Q.16 that you are at capacity, over subscribed or heavily oversubscribed to your service, please answer the following questions.
32.	What is the current waiting time for your services?
	Up to one working week <input type="checkbox"/>
	Between one working week and one month <input type="checkbox"/>
	Between one to six months <input type="checkbox"/>
	Over 6 six months <input type="checkbox"/>
	Other <input type="checkbox"/>
33.	If people are no longer on your waiting list, what reason do they give?
	Inappropriate referral <input type="checkbox"/>
	Found support elsewhere <input type="checkbox"/>
	Decided not to wait but have no alternative support <input type="checkbox"/>
	Their situation became more critical and they accessed appropriate services to their needs <input type="checkbox"/>
	Waiting for face to face group rather than online or vs versa <input type="checkbox"/>
34.	How do you manage your waiting list?
	Contact people on the list at regular intervals to update them <input type="checkbox"/>
	Contact people on the list at regular intervals to update them, assess their situation and offer alternative or interim support <input type="checkbox"/>
	Other <input type="checkbox"/>
35.	What are the main reasons for your waiting list?
	Waiting to fill staff vacancies <input type="checkbox"/>
	Waiting to fill volunteer vacancies <input type="checkbox"/>
	Increase in demand for the service <input type="checkbox"/>
	Referral criteria has been expanded / changed <input type="checkbox"/>
	Similar or other service has closed and referrals are now being made to your service <input type="checkbox"/>
	Recent promotional activity increasing referrals / campaign <input type="checkbox"/>
	Funding reduced or not meeting demand <input type="checkbox"/>
	Access to specialist services eg: interpreter (please state which specialist service) <input type="checkbox"/>
	Other <input type="checkbox"/>

APPENDIX 2 - The Questions



36.	What would make a difference to your waiting list?	
	Access to supporting services such as interpreters	<input type="checkbox"/>
	Central recruitment hub to advertise vacancies	<input type="checkbox"/>
	Access to training to support induction process	<input type="checkbox"/>
	Other	<input type="checkbox"/>
Venues		
37.	Do you utilise an external venue to deliver your service?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
	If No, why?	
	Cost of hiring a venue	<input type="checkbox"/>
	No suitable venues with the facilities we need	<input type="checkbox"/>
	We have our own venue	<input type="checkbox"/>
	Our service does not use a venue for delivery	<input type="checkbox"/>
	Other	<input type="checkbox"/>
38.	Which venue do you mainly use?	
39.	What facilities do you need from a venue?	
	Access	<input type="checkbox"/>
	Parking	<input type="checkbox"/>
	Good transport links	<input type="checkbox"/>
	Wifi	<input type="checkbox"/>
	Toilets	<input type="checkbox"/>
	Kitchen	<input type="checkbox"/>
	Heating / Air Con	<input type="checkbox"/>
	IT equipment	<input type="checkbox"/>
	Storage	<input type="checkbox"/>
	Other	<input type="checkbox"/>
	Transitions	
40.	Do you offer a specific service which supports people moving from one service to another?	
	No	<input type="checkbox"/>
	Children's to Adults	<input type="checkbox"/>
	Adults to Older Adults	<input type="checkbox"/>
	Other	<input type="checkbox"/>

APPENDIX 2 - The Questions



Volunteering		
41.	Do you have role descriptions which outline what skills are needed?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
42.	Do your volunteers have a formal induction and training programme?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
43.	What kind of supervision and support do you offer your volunteers?	
	Regular supervision with the same member of staff	<input type="checkbox"/>
	Access to help from staff when needed eg: over the phone or whilst in the office	<input type="checkbox"/>
	Training opportunities	<input type="checkbox"/>
	Group meetings	<input type="checkbox"/>
	Social events	<input type="checkbox"/>
	Other	<input type="checkbox"/>
Workforce Development		
44.	Do you employ clinically qualified staff?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
45.	Do you have regular Supervisions with your staff?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
46.	What kind of supervisions do you offer?	
	One to one staff and manager	<input type="checkbox"/>
	Clinical supervisions	<input type="checkbox"/>
	Reflective practice one to one	<input type="checkbox"/>
	Reflective practice group	<input type="checkbox"/>
47.	Do you have a formal induction process?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
48.	Do you offer training as part of your induction process and to all staff? (eg: health & Safety, GDPR, Safeguarding)	
	Health & Safety	<input type="checkbox"/>
	GDPR / Information Security	<input type="checkbox"/>
	Safeguarding	<input type="checkbox"/>
	Equality & Diversity	<input type="checkbox"/>
	Other	<input type="checkbox"/>

APPENDIX 2 - The Questions



49.	Do you offer development opportunities eg: leadership training, recognised qualifications	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
50.	Do you provide training to other organisations?	
	No	<input type="checkbox"/>
	Yes	<input type="checkbox"/>
51.	Are there any challenges you face with training and professional development?	
IT, Data Infrastructure & Quality Systems		
52.	Do you have internal or external IT support?	
	Internal – employ dedicated IT Officer	<input type="checkbox"/>
	Internal – forms part of another job role	<input type="checkbox"/>
	External – purchase IT support from a specialist company	<input type="checkbox"/>
	If external, who provides this support?	<input type="checkbox"/>
53.	What system do you use for the day to day management of your organisation?	
	Microsoft Office	<input type="checkbox"/>
	Google Docs	<input type="checkbox"/>
	Apple	<input type="checkbox"/>
	Other	<input type="checkbox"/>
54.	Do you have nhs.net emails?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
55.	What system do you use to hold service user data?	
	CharityLog	<input type="checkbox"/>
	Salesforce	<input type="checkbox"/>
	Microsoft Dynamics	<input type="checkbox"/>
	Excel Spreadsheet	<input type="checkbox"/>
	Other	<input type="checkbox"/>
	None	<input type="checkbox"/>
56.	Do you have access to EMIS, Care Notes or LAS?	
	EMIS	<input type="checkbox"/>
	CareNotes	<input type="checkbox"/>
	LAS	<input type="checkbox"/>
	Other health/social care system	<input type="checkbox"/>

APPENDIX 2 - The Questions



57.	Do you have a Quality Assurance Framework in place?	
	Yes, documented	<input type="checkbox"/>
	Yes, informal	<input type="checkbox"/>
	No	<input type="checkbox"/>
58.	Are you registered with the NHS DSPT (Data Security Protection Toolkit)?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
Impact and Reporting		
59.	Do you undertake your own monitoring, evaluation and reporting?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
	If No, who carries this out for you?	
60.	How do you evaluate the impact your service is making?	
	Basic activity reporting eg: number of referrals, number on waiting lists	<input type="checkbox"/>
	Formal evaluations	<input type="checkbox"/>
	Impact reporting eg: cost benefit, SROI	<input type="checkbox"/>
	Other	<input type="checkbox"/>
61.	Do you provide IT, reporting or evaluation services to other organisations?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
62.	Do you submit data to the MHSDS (Mental health services data set)?	
	Directly	<input type="checkbox"/>
	Via an NHS partner	<input type="checkbox"/>
	No	<input type="checkbox"/>
	Don't know	<input type="checkbox"/>
63.	Would you be happy to be contacted to discuss any of these questions in more detail?	
	No	<input type="checkbox"/>
	Yes (please provide name and contact details)	<input type="checkbox"/>
64.	Did you find the Phase One research useful?	
	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

APPENDIX 3 - The Organisations and Services



Organisations and Groups

(Organisations and groups who responded to the call for data, phase 1 and phase 2)















No	ABRN	Organisation	Phase
1	3CHH	3 Counties Holistic Healthcare (3CHH) Ltd	1
2	APP	Action on Postpartum Psychosis (APP)	1 & 2
3	AUKB	Age UK Bromsgrove, Redditch & Wyre Forest	1 & 2
4	AUKHW	Age UK Herefordshire & Worcestershire	1 & 2
5	AUKW	Age UK Worcester & Malvern Hills	1 & 2
6	AWCIC	Ahead of Wellbeing CIC	1 & 2
7	AC	Artists Clubhouse	2
8	ASP	ASPIE Limited	2
9	APNI	Association for Post Natal Illness (APNI)	1 & 2
10	AWM	Autism West Midlands	1 & 2
11	BSG	Batchley Support Group	2
12	BF	Becoming Families	1
13	BTS	Behind the Smile	1 & 2
14	BEN	BENS Youth & Community Groups CIC	2
15	BARN	Bromsgrove & Redditch Network	2
16	BYC	Bromsgrove Youth and Community Hub	2
17	CABR	Citizens Advice Bromsgrove & Redditch	2
18	CLBS	Crosslinks Telephone Befriending Service	1 & 2
19	CRSE	Cruse Bereavement Support (Worcestershire)	1
20	DWH	Droitwich Wellbeing Hub	2
21	HUP	HeadsUP Mental Health Awareness CIC	1
22	HSN	Home Start North East Worcestershire	1 & 2
23	HSSW	Home Start South Worcestershire	1
24	IPC	Inspire Cornwall T/A DadPad	1
25	JCKP	Jacks Place Care CIC	2
26	JCK	JCK Counselling and Psychotherapy	2
27	JIG	Jigsaw	2
28	KEMP	Kemp Hospice	1 & 2
29	LINK	Link Nurseries	2
30	MCAT	Malvern Community Art Therapy	2
31	MBH	Megan Baker House Ltd	2
32	MSW	Men's Shed Worcester	1
33	MMSC	MMSC/Yellow Flag	2
34	ONSD	Onside	1 & 2
35	PAPY	Papyrus – Prevention of Young suicide	2
36	PWH	Pershore Wellbeing Hub	2
37	RLAT	Relate Severn & Wye (Previously Relate Worcestershire)	2
38	SNDY	Sandycroft	1 & 2
39	SL	Simply Limitless	1 & 2
40	SNOW	Snowgoose Solutions	2

APPENDIX 3 - The Organisations and Services



No	ABRN	Organisation	Phase
41	SPB	Social Prescribers – Bromsgrove	1
42	SWWMD	South Warwickshire & Worcestershire MIND	1 & 2
43	SWCAB	South Worcestershire Citizens Advice	1 & 2
44	STPC	St Pauls Church	1
45	STPH	St Pauls Hostel	2
46	STHR	St Richards Hospice	1
47	STAR	STARS Adult Day Care Centre	2
48	SWP	Starting Well Partnership	1
49	STEPW	STEPWAY CIO	1 & 2
50	TBP	The Basement Project	1
51	TKT	The Koala Tree CIC	2
52	TONF	The Old Needleworks Foundation	1 & 2
53	TSAW	The Salvation Army Worcester	1
54	TSTB	The Shed at Top Barn	1 & 2
55	TWET	The Wellbeing Tree	1
56	WFW	Ways for Wellbeing CIC	2
57	WMWA	West Mercia Women's Aid	2
58	WCFRM	Wick Care Farm	2
59	WCT	Worcester Community Trust	1
60	WAC	Worcestershire Association of Carers	1 & 2
61	YMCA	YMCA Worcestershire	1 & 2
62	YUTN	You Turn	2
63	YSS	YSS	2

Services – Types

Complementary Therapies 	Peer Support	Homelessness / Housing 	Bereavement Services
Dementia Support	Postnatal Wellbeing 	Autism Support	Men's Health & Wellbeing
Wellbeing Coaching	Social Prescribing	Lifestyle Activities 	Community MH Link Workers
Social Groups 	Family Support	Practical Support 	Tackling Loneliness
Group Based Support	Veteran Support 	Employment & Volunteering	New Mum Support
Young People Support	Faith Groups	Care Farm 	Counselling
Women's Health & Wellbeing 	Carers Support	Support for Older People	Information & Advice 
Domestic Abuse Support	Wellbeing Hub 	Suicide Prevention	Creative Activities
Education & Training 	VCSE Support Services	Helpline 	Digital Resources
Day Care	Hospice / End of Life Services 	Community Café	Support for Unpaid Carers

APPENDIX 3 - The Organisations and Services



Organisation & Service Descriptions

3 Counties Holistic Healthcare (3CHH) Ltd

www.3chh.org.uk

Based in: Worcester City

Deliver services across: Worcester City, Malvern Hills

We provide a unique approach for dealing with stress and anxiety by combining traditional mindfulness with empowering holistic therapy. Using 5 modalities and technique's such as acupressure, massage points aromatherapy, visualisations etc delivered over 8 consecutive weeks by a professional holistic practitioner. We deliver on -site or in our Worcester venue, Groups are small allowing for all to feel nurtured and nourished with a monthly support group and interactive social media.

Action on Postpartum Psychosis (APP)

www.app-network.org

Based in: Birmingham

Deliver services across: Countywide

Peer Support

APP's peer support service supports women who have experienced postpartum psychosis (PP), or experienced high mood or mania after the birth of their child, as well as partners and family members. We offer 1:1 peer support with a trained peer support volunteer with lived experience of PP (over email, video call, phone or face to face where this is possible), a number of regional 'café group' peer support groups (including for partners and grandparents), and an online peer support forum. Our peer support network aims to help people who have experienced or been affected by PP feel understood, supported and less isolated.

Age UK Bromsgrove, Redditch & Wyre Forest

www.ageuk.org.uk/brwf/

Based in: Bromsgrove

Deliver services across: Bromsgrove, Redditch, Wyre Forest

Men in Sheds

Bromsgrove Men In Sheds has been operating from Unit 1 Metal & Ores Industrial Estate, Stoke Prior, B60 4JZ since 2016. Men in Sheds originates from an Australian project started in the 1990's, called Men's Sheds, as a way of tackling loneliness and social isolation in older men where retirement can mean loss of status and contact. Not only does the Shed support individuals (by providing friendship, along with a sense of purpose and belonging) but the Bromsgrove Shed also benefits the wider community, by getting involved in a range of community projects. The Shed is open Mondays to Thursdays, 10am-2pm.

APPENDIX 3 - The Organisations and Services



Age UK Herefordshire & Worcestershire

Welcome to Age UK Herefordshire & Worcestershire

Based in: Worcester City

Deliver services across: Countywide

Age UK Herefordshire & Worcestershire are a local charity supporting older people, their families and carers. We are a brand partner of Age UK, and our aim is to make Herefordshire & Worcestershire a great place to grow older. The services provided at Age UK H&W are designed to bring people together, build stronger relationships and enhance the lives of older people across the two counties.

We are creating opportunities for people to get involved in a varying range of activities to appeal to a broader demographic and are person centred and led by the group themselves. We aim to empower people who are experiencing feelings of loneliness or isolation, to increase their quality of life whilst developing self-confidence, emotional growth and resilience. Deliver a range of services

(Befriending, Walking Groups, Walking Sports, Computer Cafe's, Allotment, Art Groups, Dementia Cafe's, Dementia Meeting Centres, Information and Advice, Home From Hospital, Support at Home, Veteran Support, Podiatry.) including:

Companion Line

Companion Line provides a weekly call to a lonely and isolated older person living in Worcestershire.

MCST

Maintenance Cognitive Stimulation Therapy (MCST) is a weekly one-to-two-hour long programme for people living with mild to moderate dementia. Group members take part in meaningful and stimulating activities, which have been proven to help maintain memory and mental functioning. The groups provide a fun, supportive environment where people can build new friendships. From quizzes to creative

Walking Friends

Activities to interesting discussions, our members have lots of fun whilst with us. Walking Friends is here to support people who may benefit from a regular walk with one of our friendly volunteers. A lot of people have experienced bereavement or illness or are simply feeling cautious about going out. Walking has been proved to be the safest activity for older people to improve your health and well-being. It can help to reduce the feeling of loneliness. It helps people to build confidence about going out and about in their local community. It provides a chance for a chat whilst enjoying being outside and getting some exercise.

Dementia Wellbeing Service

The Dementia Wellbeing Service offers dementia support and signposting and clubs and cafes.

Age UK Worcester, Malvern Hills, Hereford & Localities

Welcome to Age UK Worcester & Malvern Hills

Based in: Worcester City

Deliver services across: Worcester City, Malvern Hills, Wychavon & Herefordshire

Dementia Services

Dementia Meeting Centres. Dementia Befriending Service. Coffee and Memory Bus

APPENDIX 3 - The Organisations and Services



Ahead of Wellbeing CIC

<https://www.aheadofwellbeingcic.co.uk>

Based in: Redditch

Deliver services across: Redditch, Bromsgrove, Wyre Forest, Worcester City

Walk-in mental wellbeing hub open 7 days a week. We are supporting anyone in crisis including those escaping Domestic Abuse. Delivering a suicide interruption service and ongoing support with the NHS and delivering the education program for domestic abuse The Freedom Program. Deliver services and activities such as: Talking Therapy. Meditation, Craft sessions, games dominos, social events.

- Open 7 days a week 10 am to 4.30 pm walk-in Mental Health Centre, where anyone can gain immediate support for an emotional or mental health crisis and engage in 'bypassing' the waiting lists of Healthy Minds and GPs. Payment of Donations is expected however, the majority of clients in need, need to be in a position to pay. Suicide Prevention walk-in service.
- We operate a Safe Place for Escaping Domestic Abuse Centre. Deliver the Freedom Program, a domestic abuse education program via Zoom online.
- Wellbeing treatments and services are offered at fixed low cost. Massage, mediation, etc
- Face-to-face befriending. Peer to Peer Men's Groups and Women's Groups.
- Social Eating experience, Curry Buddy being relaunched once a month. Clients self-fund to £15. to a set menu at a local restaurant.
- Crafting as a shared chat and chill.

Artists Clubhouse

artistsclubhouse.com/stories/

Based in: Worcester City

Deliver services across: Countywide

We are currently running a series of free pop-up Creative Clubs funded by The National Lottery Community Fund, which go through a series of activities based on using creativity for positive mental wellness. Link to book is here

<https://www.eventbrite.co.uk/o/artists-clubhouse-63746401953>. On our website www.artistsclubhouse.com we have lots of creative activities for free for people to use as inspiration to work through as a way of unwinding or coping with overwhelming emotions. We will be developing this service along with others in the coming months.

ASPIE Limited

[Welcome to ASPIE - ASPIE](#)

Based in: Worcester City

Deliver services across: Countywide

ASPIE provides vital services and is a lifeline to adults who live with the complexities of Asperger's/autism

The purpose is to provide Asperger adults with an environment in which they are given the opportunity to:

APPENDIX 3 - The Organisations and Services



- Gain confidence and improve communication skills.
- Build a network of support in the skills required for independent living.
- Access suitable education and training courses and develop employment application skills.

Our centre in Worcester is a safe haven where Asperger adults can drop the mask they wear in the outside world and find acceptance, friendship, support and therapy to reduce isolation, depression, self-harm, sectioning and suicidal tendencies and increase self-worth and confidence through varied activities, workshops and mentoring overseen by a small dedicated team leading to achievement of personal and collective goals.

Association for Post Natal Illness

[APNI - Association for Post-Natal Illness | Post Natal Depression](#)

Based in: London

Deliver services across: Countywide

APNI provides a UK-wide helpline (free to access via telephone, email and online chat) and information leaflets for those affected by postnatal illness and their families. APNI also has a network of volunteers who have themselves experienced postnatal illness.

Autism West Midlands

[Autism West Midlands | Supporting the Autistic Community](#)

Based in: Birmingham

Deliver services across: Countywide

We are a service for adults aged 16+ who have an autistic diagnosis. We provide Information, Advice and Guidance relating to autism and elements around this. We can offer support around:

Learning about being autistic and your own autistic identity.

- Meeting other autistic people.
- Help with social interaction and relationships.
- Help with managing my physical and mental wellbeing.
- Help with anxieties or worries.
- Help with employment or work worries.
- Help with education worries.
- Making you aware of other services in your area.

We can't offer help with:

- Medical or Financial advice. – We can signpost to services that can.
- Letters that verify medical/financial/clinical information. – We can provide letters to state you have accessed our service.
- Acute mental health support – We can signpost to services that can.
- Counselling or Therapy – We can signpost to services that can.
- We are a support and guidance service and not trained to provide counselling or therapy.

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Batchley Support Group

[Batchley Support Group - Charity - Redditch, England](#)

Based in: Redditch

Deliver services across: Redditch

Registered Charity delivering Women's Group, Counselling, Advice and guidance, debt advice, housing support, mental health support, benefit claims.

Becoming Families

[Becoming Families Worcester, Antenatal Classes & Pregnancy Yoga](#)

Based in: Worcester City

Deliver services across: Countywide

Post Natal Wellbeing Clinic

A session will be completely tailored to your needs. You may find that just one session is all you need, or you may choose to have a number of sessions to support you as you negotiate your way through a challenging period. You may need to talk about something specific that is troubling you, or you may want to talk very generally about how you're feeling. Some of the common areas we support with are: difficult or traumatic birth experiences, low confidence, anxiety, low mood, bonding difficulties, understanding your baby(ies), signposting/referring to specialist services.

Post Natal Emotional Wellness Support Group

Aimed at women experiencing mild to moderate mental health difficulties in the postnatal period, the group offers a supportive and nurturing space to talk openly with others in a similar situation.

Behind the Smile

[Home - Behind the Smile](#)

Based in: Worcester City

Deliver services across: Countywide

We provide peer support for those with poor mental health and those bereaved by suicide.

BENS Youth & Community Groups

[Peer support | BENS Youth and Community Groups CIC | Worcestershire \(bensgroups.co.uk\)](#)

Based in: Redditch

Deliver services across: Redditch

Deliver services and support including: Peer support - communication, social anxiety, neurodiversity, mental health, confidence and self-esteem building. Family support - peer and 121 for behaviour, mental health, support through assessment process and EHCP application. Advocacy - school support, appointment support

- BENS groups focus on supporting communication and social skills, mental health, personal growth, goal setting and healthy friendships and relationships.
- We run peer support groups allowing young people to form friendships and learn social skills and healthy boundaries.

We teach Growth Mindset to help individuals build a have-a-go attitude and develop autonomy and resilience.

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Bromsgrove & Redditch Network (BARN)

[Bromsgrove and Redditch Network | Working for the voluntary sector \(barn.org.uk\)](http://barn.org.uk)

Based in: Bromsgrove

Deliver services across: Redditch & Bromsgrove

We're a network that's been supporting volunteers and community organisations across Bromsgrove and Redditch for over 25 years. We're the voice of the voluntary sector, support local communities, and help with networking, information, funding and volunteering. We're the local Council for Voluntary Service and run the Volunteer Centre for Bromsgrove and Redditch. We also run the BURT community minibus across Bromsgrove District and Skills for Work.

Bromsgrove Youth & Community Hub

[Bromsgrove Youth and Community Hub \(youthhubbromsgrove.org\)](http://youthhubbromsgrove.org)

Based in: Bromsgrove

Deliver services across: Bromsgrove

We are a youth provision offering youth and community work. Offer services and activities such as: Open access youth provision, detached youth work, LGBTQ2+ youth club, ASD/SEN youth club, alternative curriculum provision, mentoring, community projects.

Citizens Advice Bromsgrove & Redditch

[Citizens Advice Bromsgrove and Redditch \(cabr.org.uk\)](http://cabr.org.uk)

Based in: Bromsgrove

Deliver services across: Bromsgrove & Redditch

We are a general advice agency with specialist work in available in certain areas. We will take questions on anything and then signpost/refer on where others are better placed to support. We support about 9,000 households a year currently. We offer support such as: Debt and benefits casework and general support across all areas including employment, housing and all those questions you do not know who else to ask.

Crosslinks Befriending service

[BROMSGROVE CROSSLINKS BEFRIENDING SCHEME - Bromsgrove & Redditch Methodist Circuit \(brmethodists.co.uk\)](http://brmethodists.co.uk)

Based in: Bromsgrove

Deliver services across: Countywide

Regular phone calls to client by matched befriender to support loneliness and isolation. There is no time scale for this service.

Cruse Bereavement Support (Worcestershire)

[Home - Cruse Bereavement Support](http://www.cruse.org.uk)

Based in: Worcester City

Deliver services across: Countywide

Cruse offers face-to-face, telephone, email and website support. We have a Freephone national helpline and local services, and a website.

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Droitwich Wellbeing Hub

[Counselling | Droitwich Wellbeing Hub | England](#)

No Answer

HeadsUP Mental Health Awareness CIC

[Home - HeadsUP Mental Health Awareness CIC \(headsupmha.com\)](#)

Based in: Worcester City

Deliver services across: Countywide

We offer free Mental Health Awareness whole class workshops, as well as small group work with those identified with anxiety, stress, worries, confidence, etc. We also try to work with other agencies, in particular sport coaches to tie in mental health and the importance of exercise/movement. We also do 1:1, however, struggle to fulfil this due to capacity.

Home-Start Northeast Worcestershire

[Home-Start North East Worcestershire](#)

Based in: Redditch

Deliver services across: Redditch, Bromsgrove

Pre-Birth Teen Support Service

- Teen service
- Bringing young parents together to increase network of support and prevent isolation.
- To educate and prepare teen parents for parenthood.
- To address mental health issues and increase confidence in becoming a parent.
- Identified parents who need home-visiting volunteer support to build confidence, promote resilience and coping strategies.
- To ensure they have the correct services surrounding them using external partnerships who specialise in their field.

Mums In Mind – Post Natal Depression Support Service

A post-natal group looking at how Post Natal Depression (PND) and anxiety affects mothers and their families. Networking to decrease isolation and talking about own situations and feelings associated with motherhood. Based around Maslow's Hierarchy of Needs model of self-actualisation, topics addressed are: signs and symptoms of PND and anxiety, birth experience and past history, expectations of motherhood, vs reality and society expectations, effects of PND on relationships, Coping strategies, 1 session delivered by a Community Psychiatric Nurse (CPN) from the Peri natal team looking at medication and self-help strategies, 1 session by a NHS Health Visitor looking at child development when living with PND who also specialises in the Solihull approach. 1-1 support for more complex needs. Creche provided.

Circle of Security – Address attachment and bonding difficulties parenting group

Group delivered programme to support all parents who may be experiencing attachment and bonding difficulties.

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1-1 Specialised Support delivered by Clinical Psychologists

Follow on service after Mums In Mind or identified at initial assessment for mothers who have complex deep-seated issues that require specialist support by a trained Clinician to work with mums experiencing issues with perinatal mental health and infant mental health. This refers to issues including ante and postnatal depression and anxiety, parental OCD, birth trauma and attachment and bonding difficulties. Also Individual psychological therapy for mums and/or dads and parent-infant therapy to treat a range of difficulties identified, including cognitive behaviour therapy, attachment informed therapy, compassion focused therapy and trauma therapy.

Baby Massage

Helps parents express their love and care for their baby, spending quality time together as a family helps with parent's mental health. Promotes bonding and healthy attachment. Assists calmness and soothing for parent and baby before bedtime. Added benefits for babies include weight gain (especially important in premature babies) aids digestion, helps develop skeleton and muscular movement improving circulation. Helps with teething pain and aids sleep.

Volunteer Support Service

Focus on perinatal mental health difficulties and attachment relationships. Volunteer home-visiting services will promote modelling, emotional support and will compliment and embed the above programmes to families in their own home. Co-Ordinator/Family Support Worker offering specialised service for more complex cases where volunteer would not be appropriate. (All complimenting good mental health and healthy attachments)

Freedom Programme

A tailored package of support for victims of Domestic Abuse identified by the parent to meet their individual needs and give them control of succeeding, build on their confidence and self-esteem which allows us to build on their strengths. Information to understand the effects of domestic abuse on their children. Volunteers will visit parents in a safe place offering emotional or practical support and support them through the decisions they make. When women feel safer and more confident with our service we will introduce specialist support. We offer the Freedom Programme which helps victims identify a perpetrator, recognise healthy relationships, listening and signposting if appropriate, promote protective behaviours. We will support them to break the cycle of violence, how best to cope and flee abuse. Continuation programme then offered "Freedom Forever". We offer similar programme tailored for men if men seek service. Freedom for Children - offer 1-1 support identified by school or parent for children who have witnessed domestic abuse. (5-18 years). 9-week Group sessions for children in school setting. (5-8 years). All delivered by experience qualified staff. Both support services are offered to discuss feelings, what is a healthy relationship and what they can do if they are scared. Work in partnership with other specialist organisations.

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How do we support families?

We recruit, train and supervise volunteers to support parents with children at home. Through their initial 30 hours preparation volunteers learn about the Home-Start ethos and approach, understand the needs of parents and children's development, how to use their listening skills and requirement for confidentiality and safeguarding and promoting the welfare of children.

Home-Visiting Support

Supporting families in their own homes. Volunteers provide non-judgemental, practical and emotional support and help build the family's confidence and ability to cope preventing family breakdown.

97% of parents suffer low to severe mental health conditions.

- 69% of women supported have experienced domestic/sexual abuse.
- 65% of parents supported are classed hard to reach not accessing other services.
- 81% of families rely on benefits and struggle to provide for their children. (food parcels are frequently requested from our service).
- 27% of the families we support are or have been on a childcare plan and we support the family to meet the needs identified. Our priority is making sure that children are safe from harm.
- 54% are single parents.
- 74% of our referrals come from Health or Social Services.

We support parents in situations as diverse as isolation, bereavement, debt, housing issues, domestic abuse, depression & other mental health issues, alcohol & substance abuse, multiple birth, illness, disability, learning difficulties or just finding parenting a struggle.

Person Centred Counselling Service

CBT. Counselling for Children. All Service offered by volunteer qualified counsellor and 2 trainee counsellors. Weekly service - term time only to support families who have or believe their child has additional needs offering a safe place for families to meet other parents and be supported. We offer home-visiting volunteers and Family Support Workers if needed. We support families emotionally come to terms with receiving diagnosis and what to expect not only with the child but the impact it can have on the whole family. Help them get the right support when needed support them through the diagnosis process and EHCP process. Make sure they are claiming the correct disability benefits. Offer emotional and practical support. Attend meetings. Help them understand the reports they receive. Anything else the family identifies as a need.

Home-Start South Worcestershire

[Home-Start | South Worcestershire \(home-startsw.org.uk\)](http://home-startsw.org.uk)

Based in: Malvern Hills

Deliver services in: Worcester City, Malvern Hills, Wychavon

Experienced parent volunteers visit families at home to offer support, friendship and practical help. Families have a child under 5 and live in Malvern Hills, Wychavon and Worcester City.

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Inspire Cornwall CIC (t/a DadPad)

[DadPad | Contact DadPad | Essential guide for new dads \(thedadpad.co.uk\)](#)

Based in: Truro, Cornwall

Deliver services across: Countywide

Resources (hard copy books and app) for expectant and new dads, to help them get to grips with the transition to parenthood and gather the knowledge and practical skills needed to support themselves and their partner, so that babies get the best possible start in life. The DadPad resources are also intended to assist health professionals engage and build relationships with these new dads and dads-to-be, as well signposting them to local/national resources, support groups etc (and our new Co-ParentPad, for LGBTQI+ non-birthing parents, enables the same support to be provided to ALL new families).

Jacks Place Care CIC

[Jacks Place Care CIC | Facebook](#)

Based in: Malvern Hills

Deliver services across: Malvern

We are a day care service for adults with a learning disability, adults with mental health problems and elderly adults based out on a farm in the beautiful Worcestershire countryside. We have clients from all over Worcestershire, who we pick up in our own transport and we are open x 5 days a week (Monday - Friday). We offer a range of activities - creative and physical activities, maintenance around the farm, cooking, baking, dance, singing etc. We also love to go out and about on our 18-seater bus.

JCK Counselling & Psychotherapy

[Home | JCK Counselling and Psychotherapy \(jck-counselling.co.uk\)](#)

Based in: Pershore, Wychavon

Deliver services across: Wychavon

Mental health support.

Jigsaw

[Jigsaw - Home \(jigsawhomes.org.uk\)](#)

Based in: Powick, Malvern Hills

Deliver services across: Worcester City

Charity offering peer to peer support for people who care for and support adults/older children with mental illness. Information about NHS services. Knowledge about conditions, treatments and medications. Exchange of experiences. Knowledge dissemination via discussions and talks from professionals.

KEMP Hospice

[KEMP Hospice: The Wyre Forest Hospice](#)

Based in: Kidderminster, Wyre Forest

Deliver services across: Wyre Forest

We are a day hospice who support anyone over the age of 18 in the Wyre Forest which a life limiting condition, this can include co-morbidities and mental health conditions. Day Hospice also run groups to support carers.

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The befriending service is an extension of day hospice criteria to support patients experiencing loneliness in their own homes. Bereavement counselling is open to anyone in the Wyre Forest over the age of 5 who has experienced a bereavement in the last 5 years, this can include people with other health or mental health conditions. Our Family Support & Bereavement team of specialist counsellors and trained volunteers support anyone who is facing or who has experienced a bereavement or loss in the last 5 years. Our services are available to children from the age of 5, young people and adults, through one-to-one counselling and group support. The Family Support & Bereavement Services team offers telephone, video, or face to face counselling which offers choice to clients accessing the service. Clients can be seen face to face at the hospice and at schools. The team also provides external education, support and signposting to those working with, schools or those caring for individuals affected by bereavement.

Link Nurseries

wcg.ac.uk/linknurseries

Based in: Leamington Spa, Warwickshire

Deliver services across: Countywide

Link Nurseries is a community horticultural centre based in Powick, Worcestershire. It focuses on supporting people's physical & mental health & wellbeing through the use of a range of gardening & horticultural activities. In addition, it also has a small commercial garden centre, the proceeds of which go directly towards supporting its therapeutic activities. The Well Bean Gardening club provides structured and supportive learning about plants and growing techniques and the opportunities, within a social environment, for members to have responsibility to grow their vegetables on their own plots.

Malvern Community Art Therapy

Based in: Malvern Hills

Deliver services across: Malvern

MCAT is a new independent project run by two registered art therapists. In Feb 2023 we launched Friday Art Space, a weekly open-studio therapeutic art group for people with complex mental health needs. We are currently looking for funding to continue, with applications pending. Referrals come from the Social Prescribing and Neighbourhood Mental Health teams. We also provide 1-1 art therapy, via a larger organisation, BCAT arts therapies.

Megan Baker House Ltd

[Home — Megan Baker House](#)

Based in: Ledbury, Herefordshire

Deliver services across: Countywide

We provide conductive education therapy for people who have movement disorders also supporting clients with anxiety and depression, Parkinson's, stroke, MS, ABI, Cerebral Palsy, Genetic Disorders.

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MMSC/Yellow Scarf

[Home page | YellowScarf](#)

Based in: Evesham, Wychavon

Deliver services across: Countywide

We cover all aspects of MH services in national languages (polish, Ukrainian, Romanian) excluding residential care and rehab.

Men's Shed Worcester

[Mens Shed Worcester : Find It Do It Worcester](#)

Based in: Worcester City

Deliver services across: Worcester City

We are a workshop where men suffering loneliness, stress, isolation or experiencing mental health issues can make new friends, learn new skills or just find a new way to rehabilitate.

Onside

[ONSIDE - Independent Advocacy in Worcestershire \(onside-advocacy.org.uk\)](#)

Based in: Worcester City

Deliver services across: Countywide

Community Mental Health Link Workers

We are part of the Transformation Programme. We take our referrals via this pathway. We focus upon community engagement, support, and assistance with social issues. We draw upon CBT and confidence building techniques. We have Link Workers all across Worcestershire. My area is Wyre Forest. Our support is available for people with moderate mental health conditions, however the complexity has increased, and with the waits we often have people who have more complex and severe needs.

Wellbeing Coaching

Wellbeing Coaching is a safe space for you to learn new ways of thinking, feeling and behaving to improve your wellbeing. Each week you will be encouraged to identify small steps to move you closer to your chosen goals. It is a forward focused, pragmatic approach to improving wellbeing. Your Wellbeing Coach will offer you exercises to do between sessions to support you along the way. There are resources to help with:

- Reducing anxiety
- Managing difficult feelings and unhelpful thinking
- Building self-compassion
- Learning relaxation and mindfulness practices
- Changing habits
- Managing stress
- Incorporating positive wellbeing practices into your life

Wellbeing Coaching has been shown to be an effective way of supporting people who are experiencing mild to moderate mental health issues for the first time. You are likely to both feel better and have acquired tools and strategies that will keep you mentally fit in the face of future challenges.

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Wellbeing Coaching is not counselling or therapy – if you need to spend time exploring your personal story in depth, or you are experiencing bouts of extreme distress and / or suicidal thinking, then your coach, Social Prescribing Link Worker or GP can offer suggestions about how to access therapeutic support. You may be able to continue getting support from Onside through Social Prescribing while this is put in place. Wellbeing coaches are not able to advise on issues around diagnosis, medication or time off work.

Link Worker - Housing

A Link Worker: Housing will be the key point of contact for local authority housing teams managing homeless households who are also experiencing mental ill health, providing information and guidance on mental health issues and supporting individuals and their families to access appropriate support. The Worker will build and co-ordinate relationships with local authority Housing Advice/Options teams, Neighbourhood Mental Health Team, and other key services and professionals such as Cranstoun, drug and alcohol misuse service. This service will provide local authority housing teams with:

- A point of access for support and signposting around mental health issues
- Care navigation support and help to link up all elements of support available including Neighbourhood Mental Health Team, Cranstoun drug and alcohol service, wider community support, information and advice
- Support that meets needs relating to social factors, wellbeing and wider determinants of health
- An offer of support that is available to individuals who would not meet clinical thresholds for traditional secondary care services
- Information and guidance for Housing Advice/Options teams supporting households experiencing homelessness and mental ill health

Children and Families Services

The Children and Families services provided by Onside offer one to one holistic personalised support to children young people and their families. The service is accessible through local Schools and colleges (Act on It) We support with low level mental health, family relationships, health and wellbeing and special educational needs and disabilities. We support from ages 5 - 20 years.

CAF Service PCNs

The CAF service is accessible through the PCNs We support with low level mental health, family relationships, health and wellbeing and special educational needs and disabilities. We support from ages 8 - 18 years. Individuals are assigned either a social prescriber or Care Coordinator

Social Prescribing and Lifestyle Advice

Delivery of primary care based Social Prescriber Link Worker, Wellbeing Coaches & Lifestyle Advisors. Working alongside the neighbourhood mental health teams to provide social and practical support to those with a severe and enduring mental health condition. Signposting support for issues such as housing, finances, social isolation etc. Social Prescribing aims to support individuals to take greater control of their health and feel more empowered to look after themselves. Social Prescribers are based within GP practices. GPs and other health and social care professionals can refer into the service.

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Social Prescribing links patients with non-medical support to address people's needs in a holistic way. It recognises that people's health is determined primarily by a range of social, economic and environmental factors and aims to support people to address and deal with issues relating to these factors. We provide support to those who are looking to connect with their communities, join in with existing activities but need encouragement, confidence building and may need help reducing barriers to getting out more.

Papyrus – Prevention of Young Suicide

[Papyrus UK Suicide Prevention | Prevention of Young Suicide \(papyrus-uk.org\)](https://www.papyrus-uk.org)

Based in: Warrington, Cheshire

Deliver services across: Countywide

PAPYRUS Prevention of Young Suicide is the UK charity dedicated to the prevention of suicide and the promotion of positive mental health and emotional wellbeing in young people. Today, we are a leading youth suicide prevention charity in the UK. Our suicide prevention helpline, HOPELINE247, is staffed by trained suicide prevention advisers, who work with young people – and anybody concerned for a young person – to help keep them safe from suicide. HOPELINE247 is a free and confidential call, text and email service, which is available 24 hours a day, every day of the year (weekends and bank holidays included). If you are having thoughts of suicide or are concerned for a young person who might be you can contact HOPELINE247 for confidential support and practical advice.

Call: 0800 068 4141

Text: 07860039967

Email: pat@papyrus-uk.org

PAPYRUS offers a range of suicide prevention training, which is available to individuals, organisations and communities who want to create a suicide-safer society.

SP-ARK: Suicide Prevention – Awareness, Resources and Knowledge

30 minute free presentation for organisations about our services (online or face-to-face)

An introduction to suicide prevention. The key objectives are:

- To raise awareness of suicide and suicide prevention.
- To promote PAPYRUS – what we do, how you can help and how we can help you.
- To develop HOPE for a suicide-safer community.
- To understand the importance of self-care.

SP-OT: Suicide Prevention - Overview Training

90 minute training session (online or face-to-face)

What everyone needs to know. The key objectives are:

- To become more aware of the prevalence of suicide.
- To examine personal and societal beliefs around suicide.
- To understand PAPYRUS beliefs around suicide.
- To consider how we can all contribute to a suicide-safer community.

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SP-EAK: Suicide Prevention – Explore, Ask, Keep Safe

3.5 hours training session (online or face-to-face)

An introduction to suicide prevention skills. The key objectives are:

- To recognise the ‘signs’ that may indicate someone is having thoughts of suicide.
- To talk openly about suicide with that person and how we ask about those thoughts.
- To understand how to listen to someone talking about suicide – and why that’s important.
- To support a safety plan with someone thinking of suicide.

ASIST: Applied Suicide Intervention Skills Training

2 consecutive days (face-to-face)

Suicide first aid – how to help someone to save their own life. The key objectives are:

- Consider personal and societal attitudes to suicide.
- Enable you to spot the signs that someone may be having thoughts of suicide and engage them in a safe, appropriate and non-judgemental way.
- Seek a shared understanding of the reasons for thoughts of suicide and identify reasons for living.
- Review current risk and develop a joint plan to keep someone safe from suicide.
- Follow-up on all safety commitments, signposting for further help and community resources as needed.

Pershore Wellbeing Hub

Pershore Wellbeing Hub

Based in: Pershore, Wychavon

Deliver services across: Wychavon

Pershore Wellbeing Hub is a registered Charity and opened in June 2021 to provide a ‘drop in’ listening, support and signposting service for the local community. We are based on the High Street and offer a safe, confidential space where people of all ages can seek out a friendly ear, and where trained volunteers can offer time to listen and support visitors signposting to appropriate services and organisations as appropriate. Our “Virtual-Hub” website www.pershorewellbeinghub.co.uk extends our reach to the whole community, offering information, self-help advice, a comprehensive services directory, links to other websites, available 24/7.

Pershore Wellbeing Hub is open 10am-1pm Tuesday to Saturday. Contact us on 01386 555018. We are about to launch a weekly MH Peer Support Group (Jan 2024) Pilot for people living with anxiety/depression/low mood in partnership with MIND Works and Worcs. Pershore Wellbeing Hub is a registered charity set up primarily as a listening and signposting Service for the local community, with both a physical base and virtual comprehensive website. We also provide Foodbank vouchers, Baby vitamins, Baby Bundles, Help with completing AA forms

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Relate Severn & Wye (Formerly Relate Worcestershire)

[Worcester | Relate](#)

Based in: Worcester City

Deliver services across: Countywide

We provide counselling to couples, individuals, families and children and young people. We also provide sex therapy and work with sex addiction. We have trainers who provide courses for both professionals and client groups.

Sandycroft

<http://sandycroft.org/>

Based in: Redditch

Deliver services across: Redditch, Bromsgrove

- Person Centred and Integrative Therapeutic Counselling Service. The Sandycroft Therapeutic service is dedicated to supporting Mental Health and Psychological resilience. The Organisation has Practitioners who represent a wide range of Therapeutic interventions and approaches. The Service also provides specialist services to Children, Young People, and Trauma.
- The Organisation has a well-developed, documented system of clinical governance for all services we provide which defines our procedures and quality standards and ensures all systems are transparent and can be assessed for clinical effectiveness and service reliability.
- The Sandycroft Centre provides a range of evidenced based interventions from different therapeutic approaches such as Person-Centred Counselling, Cognitive Behavioural Therapy, Solutions Focussed Therapy, EMDR, Mindfulness, Interpersonal Counselling and Psychodynamic Counselling. All Counsellors work to BACP or NCS ethical and professional standards.
- This IDVA Service specialises in Domestic and Sexual Abuse. The main aim of the service is to offer a proactive, high quality and trauma informed support service to survivors of Domestic and Sexual Abuse. We aim to provide initial assessments, DASH Risk assessments, safety planning, Advocacy as well as prevention and recovery work. To manage caseloads across various degrees of complexity and need, including survivors and families assessed as high risk of harm and who are at particular risk of harmful practices and modern slavery. Our Advocacy and support team provide specialist advice and guidance to local people suffering any kind of abuse at the hands of a partner, ex-partner or family member. Our Independent Domestic Abuse Advocates and Trauma Counsellors are professionally trained to support families whatever their circumstances and work alongside them to find a practical pathway to safety.
- One of the main aims also is to adopt a person centred, survivor approach being mindful of the effects of trauma and additional barriers to access that survivors may experience. We also act to be the voice for the survivor when they find it a challenge to be heard and by using our skills, knowledge and guidance we can help them move towards a safer future and gain resilience, improved Mental Health and help them build trust in a better future.

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- Peer support is a service whereby people share their lived experience and practical guidance, peer support workers help the clients to develop their own goals, create strategies for self-empowerment; and take concrete steps towards building fulfilling, self-determined lives for themselves.
- We offer one to one support as well as support groups and Social groups. These are run to focus on emotional support, sharing experiences, education and practical activities. Many of the groups also have a focus on reducing isolation and help clients who have reoccurring dips in the functioning to remain more resilient or less likely to need a crisis intervention. Safeguarding is common and that means staff are regularly dealing with clients who present in distress and there are procedures in place to deal appropriately and effectively.

Simply Limitless

[Welcome to Simply Limitless Wellbeing Charity \(simply-limitless.org\)](https://www.simply-limitless.org)

Based in: Wyre Forest

Deliver services across: Countywide

We are a Health and Wellbeing charity providing support to people of all ages in the community with their mental, social, and physical health. We provide mental health support via groups particularly through Moodmaster, and Optimistic Living. Our interventions provide opportunities for peer-to-peer contact and support.

- Moodmaster - CBT small group support work.
- Optimistic Living - one to one support using outcome star.

Snowgoose Solutions

www.snowgoosesolutions.co.uk

Based in: Evesham, Wychavon

Deliver services across: Countywide

We were established a year ago and are currently registering as a charity so we currently operate as an unincorporated association. We want people 17-25 in Worcestershire, Warwickshire and South Birmingham to take control of their mental health and we endeavour to give them the tools and opportunities to do this. Group sessions using a solutions-focused approach. Some one-to-one sessions for those struggling to be in a group. Worry walks. Pints of View - a drop-in discussion group with no commitment at local pubs. A new podcasting group.

Social Prescribers Bromsgrove

[Home - bromsgrove.gov.uk](http://bromsgrove.gov.uk)

Based in: Bromsgrove

Deliver services across: Bromsgrove

The Social Prescribing Service is part of an individual's personalised care. We connect people to activities, groups and services to meet practical, social, and emotional needs that affect their health and wellbeing. We cover the Bromsgrove area and provide interventions in all modes from face to face, online, one to one, and telephone. Although our service is for low level mental health, people's needs have become more complex and are often moderate need because of the long waiting lists. We cover 9 PCN's, but we have developed self-referral now as a further means to free up GP's and to lessen wait for people to have access to supports.

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South Warwickshire and Worcestershire Mind

[Better Mental Health - South Warwickshire & Worcestershire MindSouth Warwickshire & Worcestershire Mind \(swwmind.org.uk\)](https://www.swwmind.org.uk)

Based in: Stratford

Deliver services across: Countywide

We provide a variety of services to support and empower people with mental health and wellbeing. We are commissioned alongside the transformation pathway and this is our current referral route. We offer groups, Community Mental Health Link Worker support, goal planning, help to develop coping strategies, and we link in with GP surgeries, schools, and Trust clinics. For Worcestershire we cover all of the below areas and also Wychavon. We provide crisis, peer support, support to manage external factors and groups. We undertake all four modes of delivery detailed below. Taking referrals from the NHMT and partners, we provide peer and practitioner led group support. These groups support local people to build skills to manage their mental health moving forward. The groups are time-bound and specific.

South Worcestershire Citizens Advice Bureau

[Citizens advice \(citizensadvice.org.uk\)](https://citizensadvice.org.uk)

Based in: Malvern Hills

Deliver services across: Malvern Hills, Wychavon

Social Prescribing is a holistic and person-centred service for people who need support with their emotional, social or practical needs. By focusing on what matters to them we can build on their strengths, find ways of overcoming barriers and create a personalised action plan to see them through their current difficulties, empowering them to self-manage in the future. Social Prescribers can help people with varying degrees of need to address some of the wider determinants of health such as money, debt and benefits, social isolation, employment and training, low level mental health, housing and relationships.

Lifestyle Advice is a similarly holistic and person-centred service as with social prescribing, but with a focus on weight management, healthy eating, becoming more active, smoking cessation, alcohol reduction and improving general wellbeing. The Lifestyle Advisor explores people's barriers to change and help them to address any underlying issues that may have been preventing them from success in the past, supporting people using behaviour change and motivational techniques.

The Being Well Service is a joint project between South Worcestershire Citizens Advice and Age UK Worcester and Malvern Hills, with each organisation hosting one part time Being Well Coordinator working across the Malvern Hills District. The focus is on proactively targeting people who are not currently in contact with services but who need support with their mental health, by being a listening ear and linking them to services and activities within the community. They work collaboratively with VCS organisations, services and GP surgeries to increase capacity, connectivity and activity in non-medical mental health support with a focus on early intervention and identifying gaps and blockages in services.

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The Circle Group runs weekly for 12 weeks and is aimed at anyone who is feeling anxious, isolated, lacking confidence or depressed. It is not a counselling or therapy group, but gives people tools to help them cope better and feel happier. It is a gentle space people can work in with a maximum of 12 participants. All attendees are invited to contribute ideas, but boundaries are respected and people can engage at a level where they feel comfortable. It works by building each week around a different theme and activity, allowing people to try different techniques for improving their wellbeing while making new connections both within the group and outside it.

St Pauls Church

www.stpaulschurch.co.uk

Based in: Worcester City

Deliver services across: Worcester City

- Parent and Carer Groups
Mother and baby group
- A community cafe that is friendly and cheap. We have a specific area for men who struggle with mental health, the aim is to develop friendships and have a safe space to socialise with people who genuinely care.
- Unfortunately we have no-one at the moment to champion a specific area for women although generally Expressions is great for women too.

St Pauls Hostel

[St Paul's Hostel • Welcome \(stpaulshostel.co.uk\)](http://stpaulshostel.co.uk)

Based in: Worcester City

Deliver services across: Worcester City

Homeless charity. Uses PIE and TIC as framework. 42 bed hostel for male and female. 20 beds in Houses of Multiple Occupation in the City. County Housing First service.

St Richard's Hospice

[St Richard's Hospice - Caring, compassionate, committed & professional \(strichards.org.uk\)](http://strichards.org.uk)

Based in: Worcester City

Deliver services across: Worcester City, Malvern Hills, Wychavon

Pre and post bereavement support for hospice patients and families. Bereavement support for those bereaved by sudden and traumatic death in South Worcestershire.

STARS Adult Day Care Service

[Home | stars \(starsdaycare.co.uk\)](http://starsdaycare.co.uk)

Based in: Worcester City

Deliver services across: Worcester City

Day Care for those with Dementia, Learning Disabilities and Socially Isolated

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Starting Well Partnership

[Starting Well Partnership | Worcestershire | Starting Well
\(startingwellworcs.nhs.uk\)](http://startingwellworcs.nhs.uk)

Based in: Bromsgrove

Deliver services across: Bromsgrove, Redditch

We support parents, families, and young people across Bromsgrove and Redditch from birth to 19 years old, although this is also a county wide service. We do one to one, face to face, peer to peer, and group support covering areas such as wellbeing, parenting support, health and lifestyle. We give a voice for the community to feedback needs to services and organizations. We identify local need and develop services to meet that need. We accept self and professional referrals. We link in with school Nurses and Health visitors.

STEPWAY CIO

[HOME - \(stepway.org\)](http://stepway.org)

Based in: Worcester City

Deliver services across: Countywide

STEPWAY is a military charity supporting all veterans and family members in civilian life. No matter their background or circumstance. Working throughout Worcestershire, and with the National Probation Service and HMP Hewell. Warm referrals to partner charities and organisations, including Op-Courage NHS. DMWS, and the Armed Forces Champions at DWP.

Banter & Brew

The Banter& Brew is a service we offer to veterans to meet other veterans in safe place, have a brew (bacon and sausage butties also available) and chat / banter with other veterans. Helping to reduce loneliness and isolation. Also building trust and hopefully voicing any further support needed to which we can refer to our partner organisations for further support e.g. financial or mental health.

Community Garden

The Community Garden Project is again a safe place for veterans and Civilians alike to be outside in the fresh air where there are a wide variety of tasks (depending on ability) which can be undertaken. Learning new skills, intergrading in a mixed group with the goal of growing produce and maintaining the garden. (Produce is either sold on site to maintain over heads or donated to the Salvation Army to either cook for the homeless and in need or to donate to struggling local families.

Veterans Support

Veteran (and family members) support: STEPWAY support all veterans, no matter the background or circumstance. We can provide 1-1 support, face to face, or over the phone we work at the pace of the veteran taking a person-centred approach. STEPWAY work with many other organisations and are part of the Defence Medical Welfare Services program called Veterans People and Positive Pathways, running across the Midlands using a 'join the dots' approach to working together to get the best support for the veteran we are working with.

APPENDIX 3 - The Organisations and Services



The Basement Project

[The Basement Project | Creating a Foundation for Independence](#)

Based in: Bromsgrove

Deliver services across: Countywide

Providing support to young people aged 25 years and under with any issue they may be experiencing. This includes homelessness, risk of homelessness, benefits, mental health, independent living skills, relationships, mediation, conflict resolution et al.

The Koala Tree CIC

[Home | The Koala Tree, Redditch](#)

Based in: Redditch

Deliver services across: Redditch

Clinical Psychology service for expectant and new parents who are at risk of/are struggling with mental health as a direct result of becoming parents.

- Individual therapy with clinical psychologists
- Facilitated support groups for new mums and dads who are struggling with the transition to parenthood
- Clinical Psychology supervision

The Old Needleworks Foundation

[The Old Needle Works Foundation – A hub of Wellbeing](#)

Based in: Redditch

Deliver services across: Redditch

We are a well being hub in the town centre offering:

- 121 Well being Coaching
- 121 Solution Focused Counselling
- Peer support
- Therapeutic groups
- Community café
- Warm hub
- Well being to Work courses
- Bereavement peer support
- Family Well-being Hub
- Volunteering opportunities
- Creative groups to support positive well being.

The Salvation Army, Worcester

[Worcester | The Salvation Army](#)

Based in: Worcester City

Deliver services across: Worcester City

The Salvation Army in Worcester is a hub with lots of charities working together to support the needs of the local area. We are always looking for ways to support the area in the best way possible. Services include:

- Step Ways - Veteran Support

APPENDIX 3 - The Organisations and Services



- CCP - Housing / Accommodation
- Employment Plus - Employability, Money Management, Training
- Donation Centre - Voluntary work placements
- Church - Older People's Ministry, Youth and Childrens work, Pastoral Support
- Prince's Trust - Students / Young Adults

The Shed at Top Barn

[Top Barn Trust](#)

Based in: Malvern Hills

Deliver services across: Malvern Hills, Wyre Forest, Worcester City, Wychavon

The Shed at Top Barn is an informal space to connect, converse and create run by members under the umbrella of The UK Men's Sheds Association

The Wellbeing Tree

[Holistic and Wellness Centre | The Wellbeing Tree | England \(the-wellbeing-tree.com\)](#)

Based in: Bromsgrove

Deliver services across: Bromsgrove

Community Wellbeing and Holistic centre offering a range of therapies for individuals, families, and local companies. We have qualified staff to support with Mental Health, with referrals triaged. We also undertake full range of Wellbeing interventions. We do this via therapeutic interventions, counselling, wellbeing interventions, and peer to peer opportunities. One to one, group and face to face contact. We do offer postnatal/perinatal support.

Ways to Wellbeing CIC

[Ways For Wellbeing UK CIC](#)

Based in: Birmingham

Deliver services across: West Midlands (*currently not delivering in Worcestershire, but have plans to do so*)

Health and Wellbeing Coaching, Advocacy, Mentoring. Covering 6 Pillars of Lifestyle Medicine including the following:

- Active Living
- Healthy Eating
- Restorative Sleep
- Stress Reduction and Awareness
- Mental Wellbeing
- Positive Social Connections

A Space for you to have time for you: Talk with like minded people, share stories, set goals, Work through things and support each other with solutions, positive support, tips and education.

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West Mercia Women's Aid

<https://www.westmerciawomensaid.org/>

Based in: Hereford, Herefordshire

Deliver services across: Countywide

We provide Domestic Abuse services but that includes a service for those who are diagnosed or self diagnosed with a mental health issue. We provide a range of services, accommodation, helpline, one to one support, group interventions and various specialised projects.

Wick Care Farm

www.wickgrange.co.uk

Based in: Pershore, Wychavon

Deliver services across: Countywide

CIC providing nature and farm-based indoor and outdoor activities in a social setting to around 7 people a day.

Worcester Community Trust

[Home - Worcester Community Trust](#)

Based in: Worcester City

Deliver services across: Worcester City, Malvern Hills, Wychavon

DAWN - Domestic Abuse Support

Targeted 121 interventions and group support

Wellbeing Job Clubs and Cadent

Supporting customers with Wellbeing, securing Education, employment and improving skills. Supporting customers to manage barriers that may be preventing them from moving forward. Supporting customers with financial barriers

Wellbeing Services (Community Connectors, Snack and Chat, Plus)

Projects targeting low level mental health, anxiety, stress and isolation; bringing communities together by creating a variety of social groups for 18+ and linking clients to local support services

Worcestershire Association of Carers

[Worcestershire Association of Carers \(carersworcs.org.uk\)](http://carersworcs.org.uk)

Based in: Worcester City

Deliver services across: Countywide

Social Prescribing and Lifestyle Services

Provides person centred support to enable people to make informed decisions about their wellbeing.

Carer Wellbeing and Peer Support

Provides a range of online and face to face wellbeing sessions and peer support events for carers in Worcestershire and Herefordshire.

Community Mental Health Link Workers

Support carers to manage their own mental health or to gain skills to care for someone with an enduring mental health condition.

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Carers Hub

Support, info & advice to unpaid Carers, deliver statutory Carers Assessments on behalf of LA, Provide practical training, wellbeing sessions and opportunity for involvement through Carer Voice.

YMCA WORCESTERSHIRE

[Home - YMCA Worcestershire](#)

Based in: Redditch

Deliver services across: Countywide

Supported accommodation for young people aged 16-25, with a housing need and the need for support to develop life skills. General needs accommodation for aged 18+ who need a reliable landlord with affordable rents.

- Supported accommodation
- General needs tenancies
- Youth team
- Community centres
- Prison family work
- Nurseries

You Turn

[Welcome to YouTurn Futures – Working together for better lives](#)

Based in: Evesham, Wychavon

Deliver services across: Wychavon

You Turn is a Youth Support Centre for young people aged 8 to 25 years with an emphasis on health and well-being. We are open to all local young people, although specialise in supporting those who are struggling with education, anxiety and low level mental health issues. We offer early intervention mentoring, an opportunity to gain qualifications, skills development, resilience, work on relationships and confidence building. Most of our support is aimed at giving young people the tools to cope with life, supporting them to make their own decisions, to feel confident and believe in themselves. We also recognise that support needs to be on-going, so we offer it for as long as needed – there are no time restrictions, each young person sets their own goals and staff are there to help them achieve them. Young people are involved in everything we do, they not only design their own programme, but shape what we deliver, when we deliver it and how. You Turn is taking a pro-active move towards tackling these issues by recognising that an early intervention approach is essential. Using a creative, sensitive approach, our aim is to raise young people's self esteem and confidence, giving stability, and a sense of belonging.

Young People that attend You Turn have an opportunity to:

- Get support to re-engage and stay in education
- Improve their academic performance, attitudes, and behaviours
- Improve relationships with family
- Meet new people and improve relationships with friends
- Develop self awareness

APPENDIX 3 - The Organisations and Services



- Address any issues and get support to remove barriers that affect their lives
- Engage in social and cultural enrichment
- Take part in community projects / art projects
- Develop their life skills
- Gain accreditation and grow into positive, active members of society.

YSS

[Home | YSS](#)

Based in: Worcester City

Deliver services across: Countywide

The main aim of our work at YSS is to support individuals who are in periods of transition and may feel marginalised by society. Working with them to overcome obstacles and barriers, which prevent them from realising their potential. They often have complex needs, due to past trauma and Adverse Childhood Experiences. We aim to help individuals become more connected to their local community and develop their skills to become more resilient. As a charity, we are rooted in our local communities and are proud to use a combination of both paid staff and skilled volunteers to deliver our services. We offer a diverse range of projects across our portfolio, which can be separated into two main areas, Children, Young People and Families and the Criminal Justice System. Services include:

- Connect
- #MORSE
- Chrysalis for women
- Remember Veterans
- Families First
- Shropshire Targeted Early Help
- South Worcestershire Parent and Community Development
- Worcestershire Young Carers

APPENDIX 4 – Gaps in Service Provision



Question 22 – Have you identified any gaps in services that you could potentially meet?

No	Org	Comments
1	3CHH	We could potentially provide a safe haven for people suffering from mild stress and depression. A daily drop in to improve mental health and well-being by offering self-help therapeutic techniques. We would require a building in Worcester City that is easily accessible and funds to cover running costs.
2	APP	We are keen to reach women and families from more diverse communities - we currently have a small project looking at outreach opportunities for women from Black, Asian and Minority Ethnic backgrounds. This is UK-wide.
3	AUKB	Age UK BRWF's Groups and Activities are aimed at preventing and tackling loneliness and isolation - they are not 'labelled' 'Mental Health services, although they do support wellbeing (and are also important for 'prevention').
4	AUKHW	Face to face befriending. With more support this service could be used to not only take people for one-to-one walks but encourage and facilitate people to come together for walks or meet and attend other walking groups. We currently work towards a supply and demand approach due to the geographical distances from volunteers and clients, through advertising the service where either the volunteer or client are based. By increasing our marketing and recruitment of volunteers we can match clients faster and reach more people. We have a waiting list for both our MCST sessions, these courses are not available countywide, only in Stourport and Worcester, It would be great to offer more across the county, particularly the south, Wychavon area.
5	AUKW	Anticipatory Grief Support for Carers
6	AWCIC	Freedom Program DA Education program. 1 to 1 face to face availability Peer to Peer groups including marginalized LGTBQ+ Crafting group (Chat and Chill) Once per month, the Social Eating Experience Curry Buddy Night Self Funded by the client is arranged to beat loneliness. (Set menu cost £10.)
7	AC	We aim to support people on waiting lists for mental health services and those who have finished their prescribed amount of counselling to be able to still have a support service, growing their confidence and finding a creative hobby to act as a healthy coping mechanism moving forward.

APPENDIX 4 – Gaps in Service Provision



8	ASP	<p>The Autism Act 2009 was the first ever disability-specific law recognising the needs of adults on the autistic spectrum and their families but implementation of the act by local authorities and health bodies in providing adequate and appropriate services is slow with little understanding of the rollercoaster of living with Asperger's and ASPIE fills the gap and is different from most groups for people on the spectrum in that we were founded by my late daughter Sarah, diagnosed when adult with Asperger's and everyone at ASPIE either has the condition and /or the lived experience. Also, unlike other support services, our centre is open for our 60+ members twice weekly, 52 weeks of the year for social, support and therapy. Online ASPIE provides support outside of ASPIE opening times. Asperger's is a neurological difference. Adults with Asperger's process information differently, think differently and learn differently. Their lack of social, communication and interacting skills frequently lead to being misunderstood, isolated and disadvantaged, missing out in education and employment opportunities because they are different. Additional difficulties are the co-occurring conditions, such as depression, dyspraxia, dyslexia, OCD etc and the sensory issues which impede their daily functioning and quality of life. There is a disappointing lack of understanding of the effort and immense courage it takes adults with Asperger's to cope in what is, to them, an alien world. Many are at the extreme end where they self-harm and become suicidal. Diagnosis is vital to those in crisis. It enables adults with the condition to understand why they are as they are and is a passport to better health, social inclusion, improved employment prospects and supported living. To some the diagnosis is a relief, others can take longer to come to terms with it and some resent the diagnosis. Long waiting lists can significantly impact on both the individual and their family's ability to function normally, and the incident of mental health and relationship issues developing is high. For the individual, these issues can manifest themselves in several ways, for example, poor sleeping patterns, interrupted learning, disordered eating, social isolation, depression, and suicidal ideation. The NHS provider of adult autism diagnosis for Worcestershire and Herefordshire is now concentrating on the 14 month backlog and no longer provide support to adults to help them understand their diagnosis. The newly commissioned support service refers people to us for our autism specific counselling. ASPIE's in-house psychological service and counselling steps in to provide that essential support and understanding to enable members and their families to cope.</p>
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APPENDIX 4 – Gaps in Service Provision



		Many health professionals do not receive autism training resulting in crisis teams, mental health teams, GPS, social prescribers etc directing patients to us. Professor Simon Baron-Cohen Director of Cambridge University's Autism Research Centre "Adults with Asperger Syndrome often suffer secondary depression due to social isolation, loneliness, social exclusion, lack of community services, under-achievement and unemployment. Their depression and risk of suicide are preventable with the appropriate support. This study should be a wakeup call for the urgent need for high quality services to prevent the tragic waste of even a single life." www.cam.ac.uk/.../adults-with-asp .
9	APNI	No Answer
10	AWM	We are not a mental health service so it is difficult to say that we could meet the gaps as we don't have training in this area. However, one of the biggest gaps we are aware of and have feedback from people using our service is a lack of mental health services that will support autistic individuals or have an understanding of autistic people's support needs.
11	BSG	Men's Group
12	BF	We'd like to be able to run this service in the different localities, to save families driving to our clinic base or needing us to drive out to homes across the county. Potential demand - 500+ families. Delivering the service in other areas of the County. Currently based just outside Worcester, but this prevents families from other areas accessing the help. Estimated a further 200+ families could be helped.
13	BTS	We have always wanted to offer befriending and telephone support to those being discharged from the mental health service eg discharged from, home treatment team, the hospital, the secondary team, we have many people who have been through the system who can offer support. This is a potential to help so many people. We have qualified trainers / teachers to be able to deliver courses such as the MEG etc, but we don't know how to get into tick potential boxes to get into the right people to train others, so we are capable but not done train the trainer.
14	BEN	Peer groups for neurodivergent adults - 18-25 years and over 25 years old. Support groups for families who live with someone who is neurodivergent.
15	BARN	Young people volunteering. We are working on funding
16	BYC	Yes there is a need for a youth provision in Catshill and also Droitwich town centre, we do not have capacity to do this currently.
17	CABR	We really need access to paid support for housing issues and benefits appeals
18	CLBS	No Answer

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19	CRSE	In person group support, CYP.
20	DWH	No Answer
21	HUP	We would love to deliver more joint sessions with other agencies and organisations. We are very passionate about delivering sessions that show children and young people that physical and mental health are equally important. It would be great to work with more local sporting community teams to deliver these sessions. I know the schools would be very keen to have joint sessions for the children.
22	HSN	Dads Matter - https://dadmatters.org.uk/national/ Baby Loss Support Trauma Informed Group All these groups have been requested by our families and referrers. We are the only service in local area who offers creche. We piloted Freedom for Children and now have other schools requesting our service and original school re-requesting our service. Recruitment of interpreters. CBT counselling Support parents through their own process for ASD
23	HSSW	None
24	IPC	We have identified a need for a similar provision to (a) dads in neonatal units and (b) LGBTQI+ non-birthing parents. We have, in recent years, developed hard copy resources for both. The latter are being provided at no additional cost to your area, as part of the original contract, and the former is available to purchase and be used within a neonatal unit as part of a holistic approach to supporting families (e.g. the FICare Model). We are looking to develop app-versions of each of these in due course.
25	JCKP	We could help more people with dementia who don't have meaningful activities or places to go in the day time.
26	JCK	Supporting low-income families in Pershore and surrounding areas that cannot afford to self fund.
27	JIG	Relatives and friends of people with mental illness are frequently not kept informed by medical staff about the extent or progress, etc. of the medical condition. Jigsaw tries to fill this gap but is reliant on people being informed by professional staff, seeing notices or searching the internet.

APPENDIX 4 – Gaps in Service Provision



28	KEMP	<p>We would want to be in a position to meet current demands for the Adult & CYP service and sustain this with the increasing trajectory demand for the service which we are seeing since the pandemic.</p> <p>Specific bereavement groups eg bereaved by suicide, lost long term partner, lost a child.</p> <p>Social support</p> <p>Befriending for socially isolated carers of palliative patients</p> <p>Befriending for bereavement</p>
29	LINK	<p>We have appropriate facilities for anyone who is interested in gardening who experiences loneliness or social isolation and mental and physical health issues. Unfortunately the referring agencies do not seem aware of our existence and we have been unable to draw attention to our services with GPs and Social Prescribers.</p>
30	MCAT	<p>We are new and developing a presence in the community. We know from referrers we could have doubled the group size at the point where we had to wind down referrals as funding ended.</p>
31	MBH	<p>We would like to help and support Carer's to understand the symptoms of the movement disorders and why their family, friend is changing and how they can help and support them in an enabling way.</p>
32	MSW	<p>None</p>
33	MMSC	<p>Yes, providing therapy and MH services in national languages.</p>
34	ONSD	<p>The wait for therapeutic mental health support provided by secondary mental health and healthy minds is growing. Our Wellbeing coaches have the skills and tools to help teach people techniques to help them build resilience and prevent their mental health deteriorating further. These roles are linked to our social prescriber roles who work at the beating heart of the community thus well placed for more holistic signposting support where finances/housing may be contributing to a further deterioration of mental health. Wellbeing coaching is appealing as we can deliver in 1to1 or group settings, there is a huge demand for 1to1 support, we follow a personalised but flexible structure of 6-8 sessions. There are people presenting to Crisis Team, the LA and to GPS experiencing homelessness, severe deterioration in mental health and more many of which exacerbated through socio-environmental triggers contributing to a worsening of physical and mental health. These roles, with excellent links with housing, NMHT and ONSIDE's other wellbeing services, play a fundamental role in joining the pieces together and preventing people experiencing homelessness and contacting CRISIS.</p>

APPENDIX 4 – Gaps in Service Provision



		<p>This service takes elements of our social prescribing role, our mental health link worker and our wellbeing coach to make a multidimensional role to support people to improve their motivation along with access socio-environmental support which has a positive impact on their mental health and thus potentially reduces demand on secondary mental health services, hospitals (A&E presentation) and primary care.</p> <p>Support for elected home education children and CME</p> <p>The need for extended support beyond 18years and transition into adult services all of our adolescents would benefit from a smoother transition period and more support from 18 - 25 years.</p> <p>Support with navigating SEN pathways for parents and young people we have seen a significant increase in young people presenting with different types of Neurodiversity. Demand for supporting parents with referral processes and wider support along with coordination of professionals and educational response to ensure the needs of the young person are met</p> <p>From our experiences with our PCN partners, we have found that many patients that present to their GP have other life triggers causing or exasperating their condition. The point of the Social Prescribers is to address the socio-economic issues which has a positive impact on both their physical and mental health. Through extra resource to grow this service we could support those with similar issues presenting to the neighbourhood mental health teams. With additional funding and case workers we could reach many more service users. We can help prevent severe isolation and loneliness by expanding our criteria to include those who score lower UCLA levels and providing a shorter but tailored offer to avoid them becoming further isolated. Potential for improving access to online support interventions for those truly housebound with low or good digital literacy. For those who have little confidence to go out and engage with community activities but would like to, we can support improving confidence to reach that goal over a 6 month period.</p>
35	PAPY	<p>There have been lots of requests for suicide prevention training, so if funding was made available to deliver training, this would meet an need in the community.</p>
36	PWH	<p>We identified a lack of MH support generally in the community in Pershore and have developed a collaborative approach with MIND to provide a weekly peer support group at the Hub starting Jan 2024. The reason behind this is that a large number of visitors to the Hub are living with some level of MH and therefore as an organisation we would focus on providing support for those with Lower Level MH needs but wanted to do so safely, hence developing a collaboration/partnership with MIND.</p>

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37	RLAT	<p>Poor relationships whether intimate, or with friends and family affect peoples mental health and wellbeing. There is a gap in local services trained to deliver counselling to couples and families and sex therapy is no longer available within statutory services. Our counsellors are all highly trained by Relate to a minimum of level 5. We also have a number of counsellors who are trained to deliver the NICE approved Couple Therapy for Depression model. Previously, we delivered a contract with the IAPT team at Worcestershire Healthy Minds. We were decommissioned when their services moved to lower intensity group work. People do not often wish to discuss their relationship issues in a group setting and we are seeing access from people who are also on the WHM waiting lists. Meeting the cost of sessions is a barrier for some and although we provide subsidies, we understand the cost of access remains an issue.</p>
38	SNDY	<p>The Gap that we identify is offering Therapeutic Counselling provision to marginalised groups where English is not their first language; it remains a pressure point for us. as we try to meet that need.</p> <p>A Gap we identify is lack of funding for us to increase our provision especially to work with multiple complex needs where we have to offer additional therapy.</p> <p>We also see a gap with Children's therapy, at present that is limited to lack of funding but could be ramped up if funding appropriately . Therapists would hold CYP qualifications and be experienced with an array of interventions.</p> <p>We identify gaps in provision with Elder Abuse, LGBT, and Clients with severe or complex mental health.</p> <p>We already work with these clients but lack capacity as we would need to increase our work force but we are able to offer our internal in house training for staff who also present with key transferable skills.</p> <p>There is a gap for speakers of other languages where English is not their first language.</p>
39	SL	<p>Helping to reduce waiting lists for NHS & Healthy Minds</p>
40	SNOW	<p>We work with those who have not necessarily sought medical help but are still struggling day to day. We also work with those who are on a waiting list for medical help. Potential demand unknown but probably huge.</p>
41	SPB	<p>No answer</p>
42	SWWMD	<p>No Answer</p>

APPENDIX 4 – Gaps in Service Provision



43	SWCAB	<p>Counselling. The gap we see time after time is for people who have been struggling with their mental health for a long time and their lives are severely impacted by it - but they are not at risk of harm so do not reach the criteria for help from the Neighbourhood Mental Health team. However they need support more urgently than Now We're Talking can provide which results in the inappropriately high levels of need referred into services aimed at lower level / preventative work, causing the system to back up. Social prescribers etc are tied up supporting those with higher needs while they wait for appropriate interventions, meaning they have less time for preventative work. We want to avoid medicalising social issues, but clinical work is still needed hand in hand with peer & social support, and the trusting relationships people form with their social prescriber may mean that is the first time they have opened up about the true level of their need. Social Prescribers are well placed to identify who would benefit from a therapeutic intervention and ideally we would like a service we could refer to and that clients could access in a short time frame, who would then refer the person back to the social prescriber once they were in a position to fully benefit from the support. If social prescribers could access more 1:1 counselling for people in a timely manner we would have more confidence in being able to sign them off and concentrate on the cohort we are intended to support, freeing up the system to deal with earlier intervention work.</p> <p>Green social prescribing.</p> <p>The Circle Group is showing good results and could potentially be expanded across the district / county, and into rural areas of the county.</p> <p>We would like to be more visible and available in the towns of Pershore and Droitwich and are currently looking for location opportunities and extra resources to achieve this aim.</p>
44	STPC	<p>There is always more need to support and encourage young parents. Weekly support for building friendships with other young parents is huge and makes such a difference in MH. We do have parents who've come to us say that although the statutory perinatal support for mums suffering PND is good, to have somewhere else that is not time limited to go and find friendship is invaluable. This would need more specific research in potential service we could offer but we are sure there is demand.</p> <p>Friendship without any formal statutory service attached where people can just 'be' (within boundaries) has been invaluable for the people we see, mostly those who are recovering from mental health breakdown and feeling socially isolated.</p>
45	STPH	<p>No. The gaps are in clinical services.</p>

APPENDIX 4 – Gaps in Service Provision



46	STRH	Currently we are seeing an increase in the number and complexity of referrals to our service. This is in part due to the lack of MH and local authority services for both adults and children. We are now at capacity and are in danger of our own specialist skills being diluted as we are being asked to take referrals that are beyond our remit.
47	STAR	More Activities in the community Activities provided in nursing homes
48	SWP	No Answer
49	STEPW	The support services is based on a model developed by the Founder Dawn Turner. The three services provided have an evidence based record of success. Furthermore, easy to replicate in other areas, without diluting the formula. There are gaps in provision for mental wellbeing support due to the rising number of people waiting for an appointment through the NHS. STEPWAY's support services can provide a safe place and fully trained staff through the Orange button scheme- Public Health to prevent suicidal thoughts and safely signpost or conduct warm referrals to prevent unnecessary loss of life. The Community Garden Project is a fantastic place which we encourage careers to bring clients too, we are working on the path to ensure disabled access to the whole site. we have raised beds and can adapt many tasks to be carried out sitting. The Banter & Brew allows veterans to reminisce over stories and shared experiences we work with them to reduce isolation.
50	TBP	We have identified that there is a gap in support for adults 25 years and over with many of our ex-clients returning to us to ask for help. We often struggle to find appropriate organisations to signpost them to, as they do not meet the criteria.
51	TKT	Couples counselling Peer support Parent-Infant therapy
52	TONF	Relationship counselling
53	TSAW	We are always looking for areas where there is a void of support, we don't want to be duplicating services available elsewhere.
54	TSTB	No Answer
55	TWET	No Answer
56	WFW	Low level mental health support - personalised health and wellbeing coaching for those on waiting lists, working unwell, out of work, long term sick from work.
57	WMWA	There are gaps for services for domestic abuse clients. Happy to discuss further if needed.

APPENDIX 4 – Gaps in Service Provision



58	WCFRM	<p>There are gaps for people with low-medium mental health difficulties who slip through the net as the GP hasn't got enough time to discuss their issues and suggest a long term placement with us; or other agencies don't have the interview/assessment skills to fully understand and approach social workers with valid clinical reasoning to comply with the social work criteria to refer onto us and to meet eligibility for funding. Also, people can use their PIP money on a placement at the Farm but we're not sure how well known this is.</p> <p>Occupational Therapy as a profession has always struggled to communicate how we can help and what we can offer in order for people to understand it's value.</p> <p>We are beginning to make strong connections with Social Workers and Mental Health workers and to work collaboratively and holistically with several of our clients but as we are not NHS, this is a working progress. We have subjective evidence that our service, in collaboration with mental health NHS services, have had positive impacts on our clients, including a reduction and eventual termination of mental health medication.</p>
59	WCT	<p>We saw a gap in service in Worcester within the international community - we set up an 'international women's group' that meets weekly for peer support to speak about their experiences with domestic abuse, and also their cultural experiences. This group is run by two part-time workers, who speak community languages.</p> <p>We also saw a gap in service around 'co-parenting' with Narcissistic ex-partners. A 'parallel parenting' course has been created which we have delivered 9 times. This is currently not funded, and a project worker delivers this outside of her outcomes. This added value course has been very well attended and is extremely sought after as there is nothing similar delivered in the area.</p> <p>a counselling service would be helpful</p> <p>Social groups for older adults with neurodiversity and diagnoses of Autism in particular.</p> <p>Little provision across the city to refer into and further training would benefit staff who would like to create these low sensory social opportunities.</p>
60	WAC	No Answer
61	YMCA	<p>Counselling, mental wellbeing and positive activities are all limited opportunities for our young people. We have recruited a wellbeing coach and life skills coach. We have also linked up with the University and are using counselling within our services for our residents.</p> <p>Gang intervention and mental health. We are focussing on wellbeing and positive activity as we are not qualified mental health practitioners.</p>

APPENDIX 4 – Gaps in Service Provision



62	YUTN	Need for more early intervention and less fire fighting and reactionary work
63	YSS	We are exploring potential services around joint support for Veterans in the criminal justice system and their families, focusing on maintenance of family relationships where appropriate and transitional support post release to aid their rehabilitation back into the community. We are also looking at Participation and peer support groups for families with a loved one in prison and those who feel marginalised in the community. Finally we are exploring a potential wellbeing/holistic support service to support children with mental health difficulties/past trauma that is not severe enough to enable them to meet the threshold for CAMHS.

APPENDIX 5 – Eligibility Criteria



Questions 10 & 11 – What was the original eligibility criteria for this service and if different, what is the need this service is currently meeting?

No	Org	Referral Criteria Q10	Actual Criteria Q11
1	3CHH	low level MH issues - anxiety/depression; Carers;	No change
2	APP	psychosis;	No change
3	AUKB	People attending the Shed need to be 50+ and to be able to attend the Shed independently & without support;	No change
4	AUKHW	Low level MH issues - anxiety/depression; Carer; Severe and enduring conditions; Loneliness & Isolation; Moderate MH issues; <i>Dementia support; In receipt of a dementia diagnosis;</i>	No change
5	AUKW	low level MH issues - anxiety/depression; moderate MH issues; complex emotional needs; Carers; People living with Dementia;	No change
6	AWCIC	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs; Carer;	Psychosis; Eating disorders;
7	AC	Low level MH issues - anxiety/depression;	No change
8	ASP	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs; Psychosis; Eating disorders; Carer; <i>adults on the autistic spectrum;</i>	No change
9	APNI	post natal depression;	No change

APPENDIX 5 – Eligibility Criteria



10	AWM	low level MH issues - anxiety/depression; <i>Autism related mental health support;</i>	We are not a mental health service, but we are supporting a significant amount of autistic individuals with cooccurring mental health needs as they are unable to access support through any other services.
11	BSG	Moderate MH issues; Complex emotional needs; Carer;	Low level MH issues - anxiety/depression; At risk of harm to self/others; Psychosis;
12	BF	low level MH issues - anxiety/depression; moderate MH issues;post natal depression; <i>Postnatal anxiety;</i>	Complex emotional needs;
13	BTS	low level MH issues - anxiety/depression; moderate MH issues; severe and enduring conditions; <i>NO specific restrictions just deal with what we can;</i>	At risk of harm to self and/or others; Eating disorders; <i>As above we have a variety of people attending so we try our best to meet their needs;</i>
14	BEN	Low level MH issues - anxiety/depression; Moderate MH issues; Complex emotional needs; Carer; At risk of harm to self/others;	No change
15	BARN	Low level MH issues - anxiety/depression;	No change
16	BYC	<i>most of our provision are open access, some are referral only such as the alternative curriculum provision;</i>	At risk of harm to self/others; Complex emotional needs;
17	CABR	<i>no eligibility, we will see anyone;</i>	Low level MH issues - anxiety/depression; Carer; At risk of harm to self/others; Moderate MH issues;
18	CLBS	Loneliness and isolation	No change
19	CRSE	Bereavement;	No change
20	DWH	No answer	No Answer
21	HUP	<i>Low level MH issues and general mental health support and awareness</i>	<i>I do get referrals from teachers worried about those with self harm, eating disorders and other needs as they are struggling with access to other help. However, I am still delivering the original objective.;</i>

APPENDIX 5 – Eligibility Criteria



22	HSN	low level MH issues - anxiety/depression; moderate MH issues; severe and enduring conditions; at risk of harm to self and/or others; complex emotional needs; eating disorders; post natal depression; <i>Antenatal, Trauma and PTSD;</i>	Severe mental health issues, Suicidal thoughts; Carers
23	HSSW	<i>Child under 5, parenting support;</i>	No change
24	IPC	<i>Again, as above, no criteria as not a service. Ideally our resource should be offered to ALL expectant/new dads within a commissioning area to help identify early symptoms of perinatal mental ill health experienced by either birthing or non-birthing parent.;</i>	No change
25	JCKP	Low level MH issues - anxiety/depression; Moderate MH issues; Complex emotional needs;	No change
26	JCK	Low level MH issues - anxiety/depression; Moderate MH issues; At risk of harm to self/others; Severe and enduring conditions; Complex emotional needs;	No change
27	JIG	Carer	No change
28	KEMP	<i>palliative patients and families support / counselling and bereavement counselling to CYP / Adults Wyre Forest;</i> low level MH issues - anxiety/depression; severe and enduring conditions; Carers; moderate MH issues;	Complex emotional needs; Moderate MH issues; at risk of harm to self and/or others; Increased complexity and need with clients both adult & CYPs who require bereavement support / counselling but who are experiencing increased complex mental health and safeguarding needs which are not addressed by MH services / other services.;

APPENDIX 5 – Eligibility Criteria



29	LINK	<i>Activities, groups & clubs are open to anyone over the age of 18 who feels they would benefit from the therapeutic nature of taking part in horticultural activities in a group setting.;</i>	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Psychosis; Our gardening club members present with a variety of different needs. Anything from a formal mental health diagnosis (e.g. schizophrenia, PTSD, Depression, Anxiety, Personality Disorder), Acquired Brain injury, Stroke Recovery, Visual Impairment, Early Onset Dementia & Learning Difficulties.;
30	MCAT	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; Complex emotional needs; Psychosis; Eating disorders; Carer; Post natal depression; At risk of harm to self/others;	No change
31	MBH	Low level MH issues - anxiety/depression; Severe and enduring conditions; Carer;	No change
32	MSW	moderate MH issues; low level MH issues - anxiety/depression;	Severe and enduring conditions;
33	MMSC	<i>Being Eastern European;</i>	No change
34	ONSD	low level MH issues - anxiety/depression; moderate MH issues; complex emotional needs; Carers; <i>Those who want to engage with their community to reduce isolation and who are committed to being able to do this independently within 6 months; Those under the care and support of NMHT;</i>	Severe and enduring conditions; Complex emotional needs; at risk of harm to self and/or others; Eating disorders; <i>Older Adults</i>

APPENDIX 5 – Eligibility Criteria



35	PAPY	None	<i>Those who are struggling with thoughts of suicide and those who care for and support them in both a personal and professional capacity.;</i>
36	PWH	Low Level MH issues;	<i>Due to our open door policy anyone with any need can visit us for a chat and a cuppa where they will be listened to and valued.;</i>
37	RLAT	Low level MH issues - anxiety/depression;	Low level MH issues - anxiety/depression; Moderate MH issues;
38	SNDY	low level MH issues - anxiety/depression; moderate MH issues; complex emotional needs; eating disorders ;post natal depression; at risk of harm to self and/or others; Carers; severe and enduring conditions	No change
39	SL	low level MH issues - anxiety/depression; moderate MH issues;	Eating disorders; Complex emotional needs; Low level MH issues - anxiety/depression; Moderate MH issues;
40	SNOW	<i>Anyone 17-25. People with specific issues or severe problems will be signposted to appropriate services.;</i>	Low level MH issues - anxiety/depression; Moderate MH issues; At risk of harm to self/others; Complex emotional needs; Childhood trauma, loss, learning difficulties affecting mental health;
41	SPB	low level MH issues - anxiety/depression	No change
42	SWWMD	moderate MH issues; eating disorders; Carers; low level MH issues - anxiety/depression;	Low level MH issues - anxiety/depression; Moderate MH issues; Eating disorders; Carers;
43	SWCAB	Low level MH issues - anxiety/depression;	Moderate MH issues; Low level MH issues - anxiety/depression; at risk of harm to self and/or others; Complex emotional needs; Eating disorders;

APPENDIX 5 – Eligibility Criteria



44	STPC	low level MH issues - anxiety/depression;post natal depression;	No change
45	STPH	Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs; Psychosis; Eating disorders; Low level MH issues - anxiety/depression;	No change
46	STHR	low level MH issues - anxiety/depression; Carers; <i>Pre and post bereavement support</i> ;	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; at risk of harm to self and/or others; Complex emotional needs; Psychosis; Eating disorders; Carers; <i>Pre and post bereavement support</i> ;
47	STAR	Low level MH issues - anxiety/depression; Severe and enduring conditions; <i>Dementia and Learning Disabilities</i> ;	No change
48	SWP	low level MH issues - anxiety/depression	No change
49	STEPW	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs; Eating disorders; Post natal depression; Carer; <i>Any Veteran (and family members). Although the Community garden is open to all. ;</i>	No change
50	TBP	at risk of harm to self and/or others; low level MH issues - anxiety/depression;	Severe and enduring conditions; at risk of harm to self and/or others; Complex emotional needs; Eating disorders; Low level MH issues - anxiety/depression; Moderate MH issues; Post natal depression; Psychosis;
51	TKT	Low level MH issues - anxiety/depression; Moderate MH issues; Post natal depression;	No change

APPENDIX 5 – Eligibility Criteria



52	TONF	Low level MH issues - anxiety/depression; Moderate MH issues; Complex emotional needs; Eating disorders; Carer;	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs; Eating disorders; Post natal depression; Carer;
53	TSAW	at risk of harm to self and/or others; severe and enduring conditions; moderate MH issues; low level MH issues - anxiety/depression; complex emotional needs; Carers;	No change
54	TSTB	<i>Someone looking for somewhere to meet people and develop practical skills ;</i>	No change
55	TWET	moderate MH issues	No change
56	WFW	Low level MH issues - anxiety/depression; Moderate MH issues; Carer;	No change
57	WMWA	<i>Depends on the service we are providing, but it is a case by case basis. ;</i>	No change
58	WCFRM	Low level MH issues - anxiety/depression; Moderate MH issues; Severe and enduring conditions; At risk of harm to self/others; Complex emotional needs;	No change
59	WCT	low level MH issues - anxiety/depression; <i>as long as a customer requires support with wellbeing and progression into work, education or improve skills, they are eligible for support ;</i>	Moderate MH issues; Low level MH issues - anxiety/depression; Severe and enduring conditions; at risk of harm to self and/or others; Complex emotional needs;
60	WAC	low level MH issues - anxiety/depression; moderate MH issues; severe and enduring conditions; at risk of harm to self and/or others; Carers;	Complex emotional needs; Psychosis; Eating disorders; Post natal depression;

APPENDIX 5 – Eligibility Criteria



61	YMCA	Low level MH issues - anxiety/depression; Moderate MH issues; At risk of harm to self/others; Complex emotional needs; Psychosis; Eating disorders; Post natal depression; <i>Don't need to have any mental health issues to be referred or use sessions ;</i>	No change
62	YUTN	Low level MH issues - anxiety/depression; Eating disorders; Complex emotional needs;	No change
63	YSS	Carer; <i>Other non MH referral criteria;</i>	Low level MH issues - anxiety/depression; Moderate MH issues; At risk of harm to self/others; Complex emotional needs; Carer;

APPENDIX 6 – Training



Question 50 – Do you provide training to other organisations?

The following organisations provide training to other organisations.

Action on Postpartum Psychosis (APP)
Age UK Herefordshire & Worcestershire
Ahead of Wellbeing CIC
ASPIE
Autism West Midlands
Batchley Support Group
BENS Youth & Community Groups CIC
Bromsgrove and Redditch Network
Bromsgrove Youth and Community Hub
Citizens Advice Bromsgrove & Redditch
Homestart North East Worcestershire
Jacks Place Care CIC
JCK Counselling & Psychotherapy
Megan Baker House Ltd
Onside
Papyrus
Relate Severn and Wye
Sandycroft
Simply Limitless
Snowgoose Solutions
South Warwickshire and Worcestershire MIND
STARS Adult Day Care Centre
Stepway CIO
The Koala Tree CIC
Ways for Wellbeing UK CIC
West Mercia Womens Aid
Worcestershire Association of Carers

Question 51 – Are there any challenges you face with training and professional development?

No	Org	Comments
1	3CHH	No answer
2	APP	As an organisation staffed mainly by staff who work part time, time to access training and development and funding to pay for training can be an issue.
3	AUKB	Funding plus priorities & demands of the 'day-job'
4	AUKHW	Availability
5	AUKW	Cost of training, resources
6	AWCIC	not identified currently
7	AC	currently no

APPENDIX 6 – Training



8	ASP	our emphasis is in preserving and improving the lives and prospects of adults on the spectrum often disadvantaged and marginalised for being neurologically different
9	APNI	N/a
10	AWM	Being able to find training providers who offer specific autism-linked training
11	BSG	No answer
12	BF	No answer
13	BTS	The cost, getting enough staff together at same time, we only have volunteers who work various hours.
14	BEN	No
15	BARN	Funding to support capacity
16	BYC	we have to constantly fundraise to do this, to afford the course costs and the sessional staffing time to attend. it's not an issue at this moment, but has been and I can see it may be in the future
17	CABR	Only the resources to provide it
18	CLBS	none as yet
19	CRSE	No answer
20	DWH	We are a very small organisation and have a rounded experience in our field of work. We can provide a basic information alongside the more formal learning our student counsellors receive at college. We do not have the funds to put students on formal training.
21	HUP	No answer
22	HSN	Cost of training and availability of training offered to meet our needs
23	HSSW	No answer
24	IPC	No answer
25	JCKP	yes... the cost and staff taking time away from their usual role to undertake it
26	JCK	Continuing CPD regularly
27	JIG	The development of our members/volunteers is limited by funding and the time volunteers are prepared to give.
28	KEMP	Financial cost of accessing certain courses
29	LINK	Lack of time. No This is accessed through WCG
30	MCAT	not applicable
31	MBH	Time
32	MSW	No Answer
33	MMSC	Lack of funding.
34	ONSD	No, cost can be a barrier. face to face is better but lots of training is now online
35	PAPY	Being able to secure high quality professional development from experts at a reasonable cost as we are a charity. Needing to provide training on a number of different dates for staff due to the nature of the job and staff availability.

APPENDIX 6 – Training



36	PWH	Funding and venue issues to support the facilitation of quality training always a challenge. Funding secured via H&W Wellbeing and Recovery College for MHFA training for volunteers for 2023
37	RLAT	Affording it.
38	SNDY	Funding is difficult to find for advanced training for specialist services as above the recommended competencies.
39	SL	Cost.
40	SNOW	No
41	SPB	No answer
42	SWWMD	Capacity dependent on workload.
43	SWCAB	Funding for professional qualifications in order to encourage workforce development is scarce. Cost, venue and lack of time
44	STPC	No answer
45	STPH	Budget and slack resources to allow staff to attend
46	STHR	No answer
47	STAR	Cost
48	SWP	No answer
49	STEPW	No
50	TBP	No answer
51	TKT	No
52	TONF	No
53	TSAW	No answer
54	TSTB	No
55	TWET	No answer
56	WFW	Access to money to train staff further
57	WMWA	Yes, we have some funding to deliver training to the communities. But challenges are, we could do with more.
58	WCFRM	time to do any training as our days are based on client services. Other staff/volunteers needed to work around rota (staff would obviously need paying extra).
59	WCT	No answer
60	WAC	Staff time and cost can be an issue at times when services and budgets are under pressure.
61	YMCA	Yes, funding. Rota issues and cost of cover. The service is never closed and often runs on few staff at a time so pooling all staff together for meetings and training is very hard.
62	YUTN	Funding
63	YSS	Access to funding for more specialised training if needed

APPENDIX 7 – Capacity & Growth



How many more people could you support based on your current service model and at what cost? Q21

No	Org	Comments
1	3CHH	90 people a week for 8 weeks cost £29,250
2	APP	We continue to recruit and train peer support volunteers with lived experience of PP. Ongoing funding to support the training and management of volunteers is always required to maintain this service. We can meet demand in line with staff and volunteer capacity.
3	AUKB	Men in Sheds: If we had additional Volunteer Supervisors, we could extend opening of the Shed to include a Friday
4	AUK HW	Companion Line: `At present we are supporting approx 50 clients with weekly calls and are at capacity. The proposed structure submitted with our recent funding bis would allow us to increase this to between 150-200 clients Walking Friends: We could support around 100 people with more staff and volunteers recruited. This would approximately cost £20,000. for one year to include, Salaries, Volunteer Expenses, Training and DBS checks for all volunteers. MCST: We could run another 6 month course from another location supporting 10 people with a dementia diagnosis at no extra cost. To run further sessions we would need to increase our workforce, cover venue costs etc. General: We currently support around 11,000 older people a year and are at capacity currently
5	AUKW	Dementia Support: we aim for 12 members per meeting group so 48 per week plus carers. Sessions are £25 per day.
6	AWCIC	We have scope to deliver further Zoom Freedom Program with funding which usually leads to individuals post-program seeking talking therapy to underpin the lessons. A significant rise in Child on Parent Violence (CPV) or Adolescent on Parent Violence and Abuse (APVA) is any behaviour used by a young person to control, dominate, or coerce their parents. The demand would easily accommodate delivering 4 programs each week covering evening, afternoon weekend. Currently, we can only deliver during a morning per week. We have a robust succession plan to bring forward established volunteers who are already trained as MHFirst Aiders, Full Cert. by us and now looking at Peer to Peer qualifications. Particularly with Men's Groups and one-to-one sessions. We have capacity however, difficult to give absolute figures However, working on the current capacity 1.5 therapists at a cost of £42K would absorb 130 clients 20 per month extra

APPENDIX 7 – Capacity & Growth



7	AC	<p>We are currently working towards building our online service, offering a curated mental health journey through creative activities and learning about self to help build confidence and understanding about where an individuals anxiety, depression or stress is coming from and support them to find coping mechanisms. This service is aimed at people with low level mental health issues and those waiting for support or who have finished with prescribed amount of counselling/treatment to help build them back up.</p> <p>We aim to have this service up and running in its new form early next year and can then see the service grow adding more workshops options and a workbook option.</p> <p>We will aim to claim funding to be able to offer this service for free to referrals.</p>
8	ASP	We are at full capacity but do not turn any adult on the autistic spectrum (or families) away because when they are in distress they need immediate support which we give on demand.
9	APNI	No Answer
10	AWM	This is difficult to quantify as our service is focused on autistic adults and depends on numbers accessing the service.
11	BSG	300
12	BF	<p>Wellbeing clinic: We could support 2-3 more families a month included in current funding.</p> <p>Wellbeing Support Group: Circa 40 more based on current funding.</p>
13	BTS	<p>If we had the support and funding it would make a big difference. Our current group is average between 17 to 24 people, if we had more we would split into smaller groups, we will need to hire extra rooms, from October another trustee is getting involved with the groups, he was the director of Worcester Samaritans so we could have two groups at the same time and therefore double capacity. We did have evening groups as we thought there was a need but only one or two turned up other than some from our current group occasionally. We would do more days and do evenings, but don't have attendance other than the Wed group. The Bereavement group is gradually building up.</p>
14	BEN	With further funding and a new venue for BENS, we would be able to increase our reach by an extra 65%.
15	BARN	That's not easy to quantify! The different services have different costs, some people don't take much time, others take a lot...
16	BYC	This question is too complicated to answer.
17	CABR	We could support another 6,000 household's for a probable cost of about £70,000
18	CLBS	No cost involved. No current limit on referrals taken.
19	CRSE	120 at cost of £1600

APPENDIX 7 – Capacity & Growth



20	DWH	No Answer
21	HUP	<p>We currently have one part time worker in Worcester but the demand for our service is huge. Due to funding (we offer our services free of charge) we have been unable to expand the service.</p> <p>I believe that due to the demand we could expand our service to have 2 full time workers (at least) to cover the Worcestershire area. To cover the cost of these roles and on costs it would roughly be £46,000.</p>
22	HSN	<p>Secure minds: 150 @ £95,000</p> <p>Blossom: 40 at £40,000 per annum</p> <p>Home visiting service: 30 at £30,000</p> <p>Listening ear: 50 plus at £50,000</p> <p>SNAPS: 30- it costs £1000-£1500 to support one family for one year.</p>
23	HSSW	10pa
24	IPC	<p>In your county (we are commissioned locally to provide DadPad resources to Herefordshire & Worcestershire), we can support an open-ended number via our app, and could support more via our hard copy resources if the commissioning teams wished to invest in more copies of these. Hard copies potentially enable: better engagement (sitting alongside a dad to discuss the content, for example); better access for those who, for whatever reason, may struggle to engage with the app content (e.g. via our Quick Read DadPad); and overcoming issues of digital poverty. Costing would be dependent on numbers ordered etc.</p>
25	JCKP	5 people paying minimum wage to a new member of staff
26	JCK	4 more clients at £45 a session for 50 mins
27	JIG	<p>There is no upper number limit as carers decide to attend. As a volunteer-led charity the extent of activity depends upon members volunteering for tasks. We pay a below-cost amount for someone to run our website and run surveys of attendees about the usefulness of meetings and zoom meetings.</p>
28	KEMP	<p>To help meet current demand and reduce the current waiting list which is currently around 8 months and increasing - Note: this is an increasing demand trajectory we are seeing year on year. A new FTE qualified experienced counsellor/ therapist on the team would be £37,500.</p> <p>Currently at capacity with waiting lists for day hospice and bereavement team</p> <p>Funding more bereavement counsellors, average £30k per counsellor, potentially 80 clients per year</p>

APPENDIX 7 – Capacity & Growth



29	LINK	<p>Art Therapy Group:20 - at a cost of at least one additional member of staff on a part time basis = £ 10,000 approx Education Therapy:30 more people per week over 3 days - each person contributes £ 5.00 per session If there was demand we have the capacity to open on 2 other days.</p>
30	MCAT	<p>The group is currently not running as we are looking for funding to continue. It costs around £22.5k to run the main group for a year, supporting around 40 people. An additional £8k per year allows us to run 4 x special groups per year for focusing on trauma and domestic violence for 6-8 people per group.</p>
31	MBH	<p>We would like to support 500 plus clients, across Worcestershire, Herefordshire, Gloucestershire, Shropshire Reachout Service, home visits. Cost - we would need to increase staff and venues - £300000 per year</p>
32	MSW	<p>30 after initial funding of £7000 is found, we will be self funding</p>
33	MMSC	<p>There is still a need of around 100-200 people annually in Worcestershire that we're not helping because NHS Worcestershire refuses to help them.</p>
34	ONSD	<p>CMHLW: If our capacity was increased, we could meet demand areas for support with Housing and finance, isolation/loneliness, and therapeutic interventions for anger management. Also look at provision to help younger people engage with their communities. Full cost recovery of support is £40,000 per annum, for each additional full time worker we could support 80 more people per year. Wellbeing Coaching: One FTE could support 120 x number of patients, as full cost recovery for £40,000. Number of FTE to be based on your estimated waitlist . We could extend our Wellbeing Coaching offer much more through an additional 1.8 FTE in WFHP and 1 FTE in WFNIP. A large focus of their support could potentially be group, we already have two strong group programs designed which resulted in GAD 7 drops of up to and over 10 points. A cost for 1 FTE Wellbeing coach is around £38,000 annually for us to host but we would be willing to discuss this.</p>

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		<p>Similarly, we would be able to prevent mental health crisis's if we were able to work more intensely with patients for issues such as housing for example, in early days we used to be able to support people with bidding and homelessness meetings under social prescribing, we now no longer have resource to do this which is not great for people with mental health or other complex needs - we could provide much more support here with extra resource. Finally, we could provide tailored lifestyle support (i.e weight management) for people in secondary care, along with mindfulness, sleep hygiene etc Social Prescribing:</p> <p>One FTE could support 120 x number of patients, as full cost recovery for £40,000. Number of FTE to be based on your estimated waitlist.</p> <p>Plus :</p> <p>Currently we have no wait list but numbers are slightly lower than capacity. If we had another FTE in each area, we could take many more referrals and market the service accordingly. Volunteer numbers are not as high as hoped so more paid caseworkers can help with the shortfall.</p> <p>CMHLW Housing:</p> <p>One FTE could support 80 x number of patients, as full cost recovery for £40,000. Number of FTE to be based on your estimated waitlist</p> <p>Children and Families:</p> <p>160 Children young people and families for 2 FTE at £80,000</p>
35	PAPY	<p>This will vary depending on whether it is the HOPELINE247 or education and training service we are offering.</p> <p>All the advisors on our HOPELINE247 are fully trained members of staff, as are those delivering the training, so try increase staffing levels we would have to consider their income - approximately £25,000-30,000 per staff member.</p> <p>When delivering training, we have staff available in the area, but at times the cost of the training prevents organisations from booking it. Receiving funding from local authorities allows us to provide the training free of charge and increases accessibility to those in communities.</p>
36	PWH	<p>using our current service model we could significantly increase the number of people we see if we had a funded infrastructure of operational management and administrations support. Total - £40k</p>
37	RLAT	<p>We are in the process of training new counsellors to deliver our services. We currently have 5 students in situ and we are taking on 8 more in February 2024. Each training place costs £2,500 and we award a bursary of £1,000 to each student towards this. At the moment we offer appointments to 88 people per week. We need to double this to meet demand and to enable us to bid for further contracts.</p>

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38	SNDY	<p>Therapeutic counselling: We could engage with more patients and potential put Counsellors in other Venues or NHS buildings. We have the capacity to expand but the present funding needs to secure the provision we already support for the NHS before we could give an accurate costing and capacity as we could likely recruit to meet at least a 50% increase in what we already offer annually.</p> <p>Eve Project: We support around 600 clients at present which does not include Trauma Counselling which is included in the Counselling Submission. If we have funding we would like to increase capacity to a 800/1000 annually. We would recruit two additional IDVA's with specialist expertise and an IDSVA for Sexual trauma.</p> <p>Peer support: We could potentially offer an increase of 50% with funding or work alongside others to create increased capacity.</p>
39	SL	<p>General: This is difficult as I would need to cost out and examine data. The support we could offer would increase significantly if capacity was increased. Not only could we increase our current offer, but outreach to the rural areas.</p> <p>Moodmaster and Optimistic ageing: None without further staff and funding</p>
40	SNOW	We need £40,000 to support 80 people a year
41	SPB	<p>It is difficult to answer this. More capacity would mean we could have more staff which could ensure that we could meet the increasing demand, and also provide additional services in the gap areas we have identified of finance, isolation, and loneliness. We are all ready in the process of developing a service to support people who have fibromyalgia as a result of identifying this need. We would gain from additional capacity to develop further services for wellbeing. This is a gap for people as they face huge waits.</p>
42	SWWMD	<p>We would need the data and to work out costings as our previous budget for the transformation project work did not take into account the cost of venues. this would need to be included going forward in any capacity offering. We could support hundreds more because demand has increased so much, and complexity. We could develop services in Gap areas such as loneliness, isolation, and counselling interventions. Also support for people who have longer term needs.</p> <p>MHLW Support Group: over 500 per year with our current budget.</p>

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43	SWCAB	<p>We would like to expand our Wychavon services by recruiting more specialist staff and a senior management team leader. We are investing in volunteer recruitment which is working well and should be able to increase capacity by approx 10% in 2024 if the right management support, training and premises were available</p> <p>Social Prescribing: Each FTE social prescriber can support between 200-250 people per year depending on complexity at a cost of £40,159 per FTE.</p> <p>Lifestyle Advice: TBC</p> <p>Being Well Service: The Being Well coordinators could support additional users; number and cost depending on whether 1:1 or group based or a combination.</p> <p>Circle Group: The Circle Group can support up to 48 people per group per year at a cost of approx £12,000 - £15,000 per group.</p>
44	STPC	<p>Little oaks: Currently we are at full capacity - in all three of parent/carer support groups. There is the possibility of opening another mother and baby group supporting young mums struggling with MH.</p> <p>Expressions coffee morning: If we could employ one person for 6-8 hrs a week to specifically support women who need friendship this would open up our support for women. We already pay for a male worker which has big benefits to working among the men</p>
45	STPH	We are at capacity.
46	STRH	<p>Family support: Based on our current capacity and workload we are unable to support more people</p>
47	STAR	10 - 15 clients a day (building based)
48	SWP	We could support thousands of people if capacity increased. We could develop more services for wellbeing as part of identified need.
49	STEPW	<p>300 direct beneficiaries and 900 indirect beneficiaries - per year- £30,000 project costs. % of core costs and overheads- £30,000. Total amount- £60,000</p> <p>We work with as many people attending, always space for more engagement. The more the merrier.</p>
50	TBP	Approximately 50 more young people. This would require 2 additional full time staff at a cost of approximately £60000 per annum
51	TKT	<p>Currently supporting 50+ families</p> <p>Last years turnover was £69,000</p>
52	TONF	200 plus on a 121 basis at a cost of £100,000.
53	TSAW	We have capacity to build a program as we have the rooms and already have lots of charities / organisations working together.

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54	TSTB	No more based on current volunteer management of the service
55	TWET	Hard to give exact number and costings. Would have to come back with this. Could always benefit additional capacity because of Gap areas, and increase in numbers and complexity
56	WFW	we could support up to 100 more and at a cost of £80 per session per person
57	WMWA	It would depend on the service we were expanding/additional staffing for any particular project.
58	WCFRM	We are at full capacity for clients requiring 1:1 support but we would be able to accommodate those who are more independent. We could have 4-8 more clients a week who requiring 1:4 support, charged at £55 a day. However, the more support a client would need, the less we could accept and the cost would increase to 1:3 = £65/day ; 1:2 = £75/day
59	WCT	Dawn: to support additional clients and increase capacity, we would need to employ further full time Project Worker staff- each staff member can support approximately 100 clients per year. A full time project worker plus management costs, room hire, training etc is approx £40,000 per year. We would like to expand the service to cover the whole of Worcestershire - it cost in the region of £ 40,000 per worker. We would need a further 4 workers for Bromsgrove Redditch and Wyre Forest. Job Clubs: This is based on what we have already been successful for with funding, a further 1000 people, which for a 4 year contract is £450,000 Wellbeing services: We could support additional numbers on PLUS with an increase in trained volunteers. We could welcome further clients, potentially up to 100 at our Community connectors social groups, reducing isolation, with an additional part time staff member, or increasing hours for current staff.
60	WAC	CMHLW: Currently support approximately 150 carers annually with 2 F/TE, could double amount to 300 per year with 2 x F/TE at cost of 80,000.
61	YMCA	Maximum capacity is 8 supported and 127 general needs. Apx £5000 per bedspace per annum.
62	YUTN	We currently have funding for a Counsellor one day a week @ £250 per day - paying a counsellor for 5 days a week would increase the young people we support by an extra 20 young people a week
63	YSS	It would vary depending on each service.

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Q26 Meeting demand with additional funding

No	Org	Comments
1	3CHH	Having our own building with a 5 year secured finance our service could be available 7 days per week We would need to recruit specialist staff and volunteers would work alongside similar mental health well being charities, we believe it is possible to reach the demand required
2	APP	Unable to say, but additional funding would enable increased capacity in our projects.
3	AUKB	It costs approx £11k per year to run Bromsgrove Men In Sheds - focus and priorities are upon raising funds each year to sustain the service 'as is' rather than looking at 'what-might-be-possible-if-funding-was-available'
4	AUK HW	We would be able to meet and exceed the demand if funding were to become available Companion Line: Many of our current volunteers are willing to extend their support to include face to face volunteering but at present we do not have the resources to ensure this is planned, managed and monitored. Walking Friends: If we were successful in obtaining more funding for this service we would be able to employ more staff to support the managing and marketing of the service to increase the numbers of people benefiting. MCST: We could offer further courses across the county
5	AUKW	All of it
6	AWCIC	without having parameters for the question I can not answer. Without knowing how much demand is 'waiting' we would be able to help. Yes, we would. Based in the Kingfisher Shopping Centre, Redditch we have the capacity and infrastructure and correct wheelchair-friendly access, parking, and toilet access for all clients.
7	AC	As this is a self help online service once it is up and running we can support a large number of people. Funding is needed to cover costs of website hosting to maintain larger levels of usage and other everyday business fees whilst we develop this service.
8	ASP	We would endeavour to meet all of it
9	APNI	No Answer
10	AWM	Due to not being a mental health charity, we wouldn't be able to manage the demand for mental health support. Currently, we are supporting many people who are autistic and need mental health support.
11	BSG	All of it

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12	BF	Wellbeing clinic: Circa 50% Wellness support group: Estimated half.
13	BTS	As much as possible, at the moment our only "clients / members" are that through word of mouth and the odd referrals, mostly referred through onsite or through social media or friends.
14	BEN	We could take 60 people per week.
15	BARN	20% increase
16	BYC	With funding and recruitment of staff we could facilitate this need.
17	CABR	quite a lot as it enables us to work with those clients affected by the above who cannot access national helplines so we would be focused on the very neediest in terms of support.
18	CLBS	Unknown
19	CRSE	100%
20	DWH	No Answer
21	HUP	If the funding was available I feel we could meet the majority of the demand in the Worcestershire area.
22	HSNW	All with right resources
23	HSSW	Not known
24	IPC	With more funding, we could provide more hard copy resources, as much as needed; we could provide additional training to help improve workforce awareness and optimum usage of our resources/efficacy of our product; and quicker development of new resources, such as the app versions of the DPNN and CPP.
25	JCKP	hard to say.. but I think about 5 a day
26	JCK	4 clients per week
27	JIG	If we had more funding, Jigsaw could reach more people, who would hopefully be prepared to become active members, thereby reaching more people, giving them knowledge and therefore more confidence to support their relatives. More members would help Jigsaw become a more influential organisation within the local NHS Mental Health environment.
28	KEMP	Family support: If funding is available we would be able to meet current demand and if additional funding was available it would help to meet this increasing trajectory - this would be more than 1 WTE as stated above. Day Hospice: Could start to address additional issues of loneliness and isolation and wellbeing
29	LINK	We could easily cater for 60 people per week and with additional funding could extend the number of days when we offer our services.

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30	MCAT	We can expand with available funding to meet demand.
31	MBH	We would be able to offer our Reachout service in more areas to help and support both clients and carers
32	MSW	difficult to calculate but we could double in size with no problem
33	MMSC	All of it.
34	ONSD	Children and families: There are on average 1000 elected home educated young people across Worcestershire the above would help address some of the needs by offering 1:1 individual support. 50% of current caseloads would require this support. CMHLW: There is significant demand for CMH link worker services. More resource would allow us to deliver more support.
35	PAPY	This would depend on the level of funding. For example, a recent £50,000 funding in another local authority is allowing us to deliver suicide prevention training to close to 1000 participants in the local community across a 12 month period.
36	PWH	This would need exploring further but a strong foundation has already been established offering the potential to grow/develop further
37	RLAT	It costs us £74 to provide each session of counselling. With our capacity increasing in the new year we could provide an additional 20 sessions per week, rising to 50 sessions in Spring 2024.
38	SNDY	Counselling: We could meet these demands if funding was made available as we would be able to expand. as have the capacity and competencies to do so. Eve project: We would be able to increase our capacity appropriately to any funding available. This funding may at first be not recognised under a Mental Health banner but survivors of Abuse present with significant dips in functioning and are a cost to the NHS not just the obvious Justice system. Peer Support: 50% or co working.
39	SL	Moodmaster: 400 per caseworker over a 12 month period
40	SNOW	We could meet the number specified in question 24
41	SPB	No Answer
42	SWWMD	No Answer

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43	SWCAB	General: Impossible to answer, depends on how much funding available and the success of recruitment. I would like to think that we could meet 100% of demand if we were fully resourced and able to expand things like our telephone service as well as working more closely with partners in established community hubs to deliver our services at a more local level.
44	STPC	Little Oaks: If the present member of staff we employ for all the other parent/carer groups could find another 3 hours a week @ £12 per hour there is the potential of running a postnatal group specifically for young mums with PND to follow on from statutory groups. Expressions Coffee Morning: At present our male worker has approx 15 guys who meet together on a Friday morning and he supports them through the week, helping them with things like benefits, accessing professional services when needed, supporting in things like cleaning up a messy house. I would envisage one or even two groups to support women, possibly working with 20+ women. We have tried running groups with both men and women together, but most of the women prefer to be with other women only.
45	STPH	N/A
46	STRH	This would need to be discussed at strategic level.
47	STAR	All of the demand
48	SWP	No Answer
49	STEPW	600 + direct beneficiaries and over 2,000 indirect Beneficiaries. If funding were available we could provide transport for our service users to get to the projects, and increase the number of locations.
50	TBP	With the appropriate funding to recruit more support workers we are confident we would be able to meet this demand.
51	TKT	This is a really difficult question to answer, it depends on whether we are talking about Redditch, or Worcestershire more widely. We would certainly be able to increase our capacity- we have staff identified who can increase their hours as and when required.
52	TONF	100 couples per year.
53	TSAW	Depending on the funding available there could be opportunities to work from other centres also Malvern, Redditch, Droitwich, Evesham, etc.
54	TSTB	None
55	TWET	No Answer
56	WFW	100% of the demand
57	WMWA	It depends on the service that we would grow as to how much demand could be met- hard to answer on this survey without any specifics information on what service would grow.

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58	WCFRM	We need to catch those who get missed in order to meet the demand.
59	WCT	<p>Dawn: Our service is relative to the funding available. We consistently have a waiting list, and if we were to have additional funding, we would recruit a further project worker to meet this demand for our service, or expand our service county-wide.</p> <p>Job Clubs: a large customer group as most of the people we see are looking for counselling support</p> <p>Wellbeing services: Would require additional research before accurate answer. We could create a weekly, stable offer of social support for people across the city with additional resources.</p>
60	WAC	N/A
61	YMCA	<p>If more funding was available we could recruit specifically for counselling. There is huge demand.</p> <p>We cater on bed spaces, if the local authority supported more funding, we could have additional properties. We cant cater for any more until we have bigger accommodation sites.</p>
62	YUTN	We currently see 35 young people who all have Complex trauma, with more funding we could increase this to 55 young people
63	YSS	If our funding bids are successful for all these services, we would be able to set them up across Worcestershire, Herefordshire, Shropshire and Telford & Wrekin.

APPENDIX 8 – Primary Venues



Question 39 – Primary Venues

No	Org	Comments
1	3CHH	No answer
2	APP	N/A
3	AUKB	Charity's own venues plus I&A and Befriending services visit people in their own homes
4	AUKHW	We use our own office and venues across the county to enable people to access our services easily In Redditch Batchley Community Centre
5	AUKW	Numerous - libraries, community halls, other VSCE, Freedom Leisure etc
6	AWCIC	9 George Walk, Kingfisher Shopping Centre, Redditch B97 4HB
7	AC	Hire venues, free venues or online
8	ASP	VestaTilley House, Lowesmoor Wharf, Worcester, WR1 2RS
9	APNI	APNI offices in Fulham
10	AWM	Previously The Hive, Worcester now Kingsway House Worcester. Bromsgrove Library Redditch Library
11	BSG	21 Salters Lane, Batchley, Redditch
12	BF	No Answer, Phase One only
13	BTS	Quakers Friends Meeting House
14	BEN	The Old Needleworks, although we will be moving in the near future.
15	BARN	Community House Redditch
16	BYC	Our own space (basement of a church) and then we hire local church halls to run our groups.
17	CABR	Our main premises in Bromsgrove
18	CLBS	People work from home
19	CRSE	No answer
20	DWH	Our hub is based in the old caretakers bungalow at the rear of Westlands First School/WANDs children Centre and close to the Moving Forward Project in the Westlands Community Hall.
21	HUP	No answer
22	HSNW	Community House, Easemore Road, Redditch B98 8EY
23	HSSW	No answer
24	IPC	No answer
25	JCKP	our own venue
26	JCK	Therapy room at Pershore town hall or remote / telephone support
27	JIG	Room at Malvern Hills Science Park, supplied free. Organised by one of our members who works there.
28	KEMP	KEMP Hospice
29	LINK	Link Nurseries Horticultural Therapy Centre, Off Hospital Lane, Hamilton Close, Powick, Worcs WR2 4NH
30	MCAT	Lyttleton Well

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31	MBH	Ledbury - however we offer services everyday to other venues too.
32	MSW	No answer
33	MMSC	Church House in Evesham, Online
34	ONSD	Riverside Hub GP surgeries Local schools & Colleges, youth settings, community hubs, GP surgeries, community spaces Libraries, Faith venues, social meeting areas, Redditch; Bromsgrove; Wyre Forest; Worcester City; Malvern; Wychavon; GP surgeries, community venues, cafes
35	PAPY	For our training, we use a range of venues depending on availability and cost.
36	PWH	Pershore Wellbeing Hub based on the High Street
37	RLAT	We use our own venue in Worcester and outposts in Evesham, Broadway and Bromsgrove. We want to re-open outposts in the Wyre Forest and Redditch in the new year.
38	SNDY	The Sandycroft Centre
39	SL	Harriers Social club, 5, Mason Road, Kidderminster.
40	SNOW	Church halls, community centres, pubs
41	SPB	No answer
42	SWWMD	Countywide community venues
43	SWCAB	Eden Church, Malvern Malvern Cube and GP surgeries Primarily we use our office to deliver 1:1 services but we deliver a group from a local community centre because we do not have the space to do this at the office and it is also a more relaxing and welcoming environment
44	STPC	No answer
45	STPH	Our hostel
46	STRH	No answer
47	STAR	Horizon Centre Stanley Road (self contained building)
48	SWP	No answer
49	STEPW	STEPWAY are in partnership with the Salvation Army who lease land and property at low cost or at peppercorn rent. This is the reason why the charity can expand at ease to any area. Funding for core and project costs is the only element which is preventing the charity to do so.
50	TBP	No answer
51	TKT	The Old Needleworks Foundation hub
52	TONF	The Old Needleworks, B97 6HD
53	TSAW	No answer
54	TSTB	Shared workshop with Good Soil Trust
55	TWET	No answer
56	WFW	community centres or libraries
57	WMWA	A variety of venues to deliver services.

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58	WCFRM	Wick Care Farm
59	WCT	No answer
60	WAC	The Bridge Redditch on a regular basis.
61	YMCA	Forresters, Gordon Anstis House
62	YUTN	You Turn Centre, Evesham Centre, Briar Close Evesham
63	YSS	For our South Worcestershire Parent and Community Development service we work alongside Action for Children in the Starting Well hubs. For the other services we mainly work in the community, at schools, family homes or online.