

## What you can do to make things happen

- Tell people about NWW.
- Give this leaflet to users, carers and workers.
- Discuss NWW with your user and carer groups.
- Take this leaflet to day centres, drop-in centres, GP surgeries, etc.
- Get NWW discussed at Trust and Partnership Board meetings.
- Discuss NWW with your service user/carer development worker.
- Ask about the Creating Capable Teams Approach (CCTA).

## Creating Capable Teams Approach

The CCTA aims to help teams to look at their knowledge and skills to see if they meet the needs of service users and carers. The programme involves users and carers at all levels, as valued members of the team, to produce a team workforce plan.

## For further information

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## Service user and carer experiences of NWW

A new multidisciplinary assessment clinic in Avon and Wiltshire had:

- 92% of users satisfied or very satisfied with being seen by two non-medical members of the team, rather than a senior or junior psychiatrist working alone;
- 83% of users satisfied with the assessment outcome; and
- 82% of users making use of advice or agreed plan.

New roles – STR worker

- “My STR worker would pick up signs if I was going downhill. To me, it’s great!”
- “He has made me think for myself; made me believe in myself; given me confidence.”

New roles – case workers: improving access to psychological therapy

- “I’m a new man – haven’t had a panic attack for three weeks.”
- “I wish this service had been around when I came out of hospital last year, because that is when I needed the support more, and wouldn’t have become worse.”

**This leaflet was devised by a group of service users and carers.**

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**NWW** New Ways of Working  
in Mental Health

# New Ways of Working (NWW) with you

“To me, it’s great”

## Information for users and carers

 **Department  
of Health**

## What is it?

- It is about enabling all workers to be flexible, to work in teams and to focus on their skills rather than their status, in order to meet service user and carer needs more effectively.
- It is about having service users and carers at the heart of every aspect of care as equal partners.
- It enables service users and carers to have access to appropriate skills of all workers.
- It recognises that carers have their own needs.
- It is developing extended roles, e.g. non-medical prescribers.
- It is bringing new people into new roles, e.g. Support, Time and Recovery workers.
- It is about matching staff skills to the needs of the service user.

## Why is it needed?

- Users and carers want a different approach.
- It moves away from attitudes of dominance and control.
- It moves towards balanced relationships with healthcare teams.
- Service users need to be seen as a whole person and not just as an illness.
- Carers need to be recognised as valued equal partners in the assessment and care planning processes.
- Staff have heavy caseloads, leading to unmanageable jobs and a poor service for users and carers.

- The workforce has to be enabled to:
  - better manage greater demand;
  - empower users and carers; and
  - encourage honest and open dialogue.

## The ultimate aim

The ultimate aim is to ensure that services provide high-quality, person-centred, effective services by having:

- all the right people;
- in the right place;
- doing the right job;
- at the right time; and
- with the right knowledge and skills.

## What users and carers want

- To be seen as respected and equal partners.
- To be involved in the development of services at all levels.
- To work together towards recovery.
- To lead a self-determined life, reflecting their hopes and ambitions.
- To make informed choices.
- To make decisions about their care that are acted upon.

Where this is not possible under the Mental Health Act, users and carers expect an honest and open dialogue in any decisions about their future, and should be treated with dignity, respect and compassion at all times.

## Examples of new roles

- Support, Time and Recovery (STR) workers.
- Primary Care Graduate Mental Health Workers (PCGMHWs).
- Community Development Workers (CDWs).
- Assistant Practitioners.

## Examples of extended roles

- Non-medical prescribers.
- Advanced Practitioners.

## Examples of NWW

- Consultant psychiatrists with fewer out-patient clinics, supporting multidisciplinary teams.
- Consultation with a psychiatrist is not always needed; it could be that other expertise within the team will meet needs more effectively.

## Where next?

The development of NWW in all Trusts:

- for their whole workforce;
- working in teams;
- with a range of partners (e.g. housing, education, voluntary sector); and
- to give person-centred care.

## Examples of what you can do

- Show this leaflet to your care worker.
- Ask if there is an STR worker in your team.
- Look on the NWW website: [www.newwaysofworking.org.uk](http://www.newwaysofworking.org.uk)