



Cheshire and Merseyside Lived Experience Network for Suicide and Self-Harm Prevention

Evaluation Report 2023 - 2024

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Cheshire and Merseyside Lived Experience Network for Suicide and Self-Harm Prevention

Evaluation Report

1. Introduction

In October 2019 Champs Public Health Collaborative commissioned Wirral Mind to develop and coordinate the Cheshire and Merseyside Lived Experience Network for Suicide and Self-Harm Prevention (LEN).

In February 2022 and 2023 Wirral Mind published our first evaluation reports exploring the impact and value the LEN has had on the workstreams it has been engaged in, but also on the experience of this for its members. During that time the LEN was heavily involved in the development and launch of the Cheshire and Merseyside Suicide Prevention Strategy.

It's another year on and the aim of this report is to highlight the effect and explore the value the LEN has continued to have on subsequent workstreams and actions from the strategy.

By 'lived experience' we mean people who have experienced or live with suicidal thoughts, people who have attempted suicide, people living with or in relationships with those who have suicidal thoughts, and those bereaved by suicide. This can include professionals working in this field with personal experience.

As such, the insight and knowledge that those with lived experience bring to the world, and to this sub-region's suicide and self-harm prevention strategy, is unique and valuable. It is vital that professionals understand and embrace the lived experience perspective, in both strategic and operational practice.

2. Purpose of this report: a review of the development of the Lived Experience Network which provides peer support and acts to advise, critique and co-produce the self-harm and suicide prevention programmes, policies, and plans.

The Champs Public Health Collaborative coordinates the joint actions for Cheshire & Merseyside Directors of Public Health's priorities. One of these priorities is the suicide prevention programme.

In 2022 a consultation process took place to develop a new strategy, and in November 2022 the Cheshire and Merseyside Suicide Prevention Strategy 2022 – 2027 was launched.

The strategy for 2022 – 2027 identifies risks and issues that need to be addressed, along with vulnerable groups that are the most affected. As such the key actions for Cheshire and Merseyside are:

- **Leadership and governance** ensuring an effective partnership and collaborative approach taking account of lived experience
- **Prevention** focusing on awareness, skills, and knowledge, supporting suicide prevention in other strategies, communication and engagement
- **Intervention** focusing on training and safety planning across the organisations, working to improve self-harm support and pathways, improving access to mental health and social support, and ensuring implementation of safer care
- **Postvention** focusing on bereavement services including specific suicide, postvention support and working with the media
- **Data, intelligence, evidence, and research** focusing on better data capture of the risks and intelligence on the local and national picture, collating evidence on interventions that work and supporting research where there are known gaps.

The strategy and details can be found at www.no-more.co.uk (please note that the website is correct at the time of writing the report; and a new website is currently under development but not yet live).

The LEN was commissioned to embed co-production of Suicide Prevention Strategy actions, and to act as a critical friend ensuring the approach is systematic across all activity and continues to work to achieve this.

Co-production by those with lived experience means delivering public services in an equal and reciprocal way, between professionals and those with lived experience, and those potentially and actually impacted by policies, plans and services.

The lived experience perspective informs service design and can avoid commissioners continuing to invest in services that may not work for those who could be in receipt of them. Those with lived experience bring a unique and diverse perspective that can inform how services could work effectively for those they are designed to help. A track-record of co-production can also support the accessing of future funding opportunities.

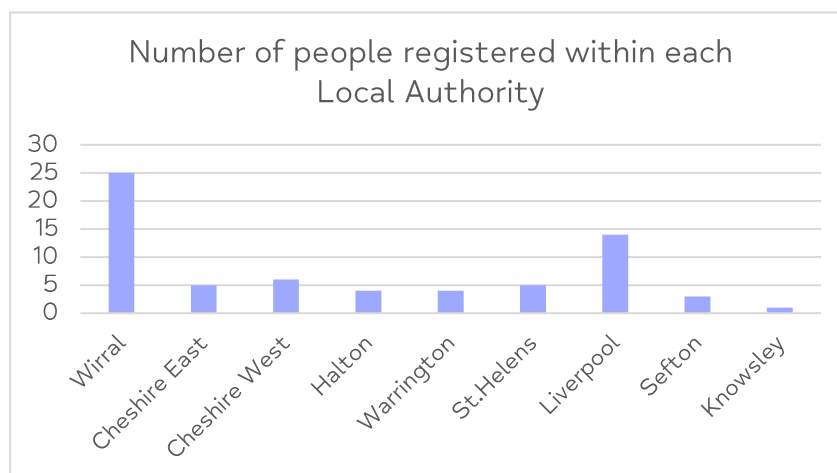
3. Current membership:

(All data recorded is as of 31/03/2024, please note that some pieces of data are missing from some members).

Total number of people registered = 67.

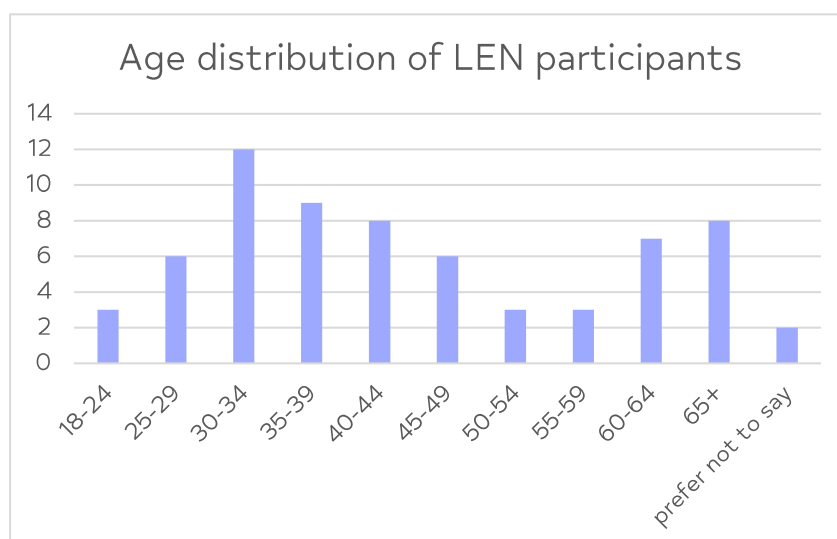
There are currently 24 males, 38 females, 2 non-binary registered as members, and 3 preferred not to say. The graphs below detail the number of members within each Local Authority area, age ranges of members, and types of Lived Experience within the LEN member demographic.

Graph 1.



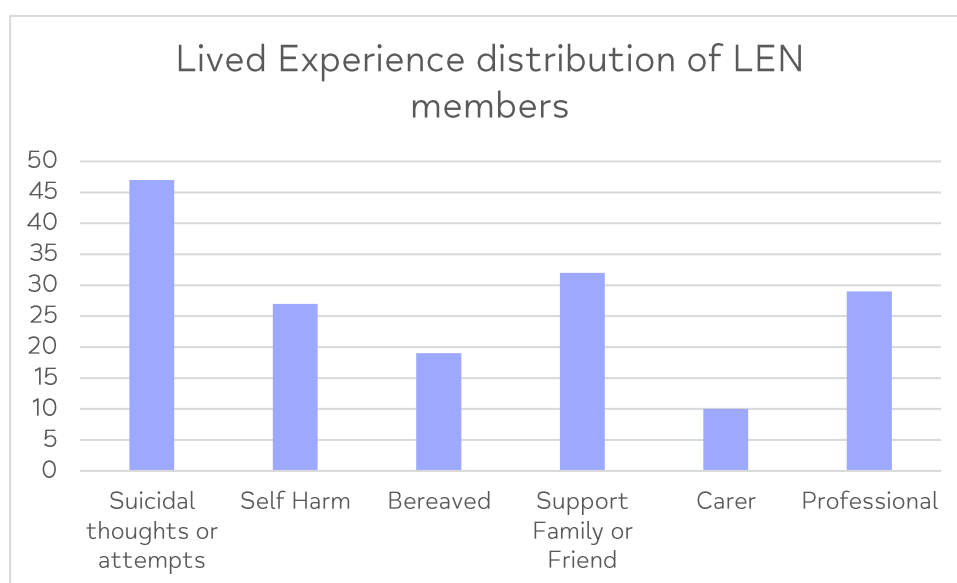
We expected to see greater numbers of members from Liverpool due to the population size, and from Wirral due to Wirral Mind's existing networks and contacts. Gaps were identified early on in certain areas and we have now successfully recruited from all areas.

Graph 2.



This graph shows a reasonable spread of lived experience by age. As age is a protected characteristic, we were keen to have representation within the LEN membership from across the age ranges.

Graph 3.



(Please note some LEN members may have more than one 'type' of experience.)

Within the registration forms we asked what 'type' of experience people had. This gave us a general indication of the sorts of lived experiences members had and allowed us to focus on specific types of experience for tasks we became involved in (for example for AMPARO's memorial event we were able to contact those bereaved by suicide, rather than every member, to invite them to the planning meetings). Having some background information from members allows the network to offer appropriate support when needed.

Further demographic breakdown is as follows:

- Race: 55 white British; 2 white European; 1 White and Black African; 1 other Asian ethnicity; 8 prefer not to say
- Disability: 25 identify as having a disability; 33 identify as not having a disability; 9 prefer not to say.
- Sexual Orientation: 47 identify as heterosexual; 1 identifies as lesbian; 6 identify as bisexual; 13 prefer not to say.
- Religion: 29 identify as having no religion; 23 as Christian; 13 prefer not to say; 1 identifies specifically as agnostic.

Research suggests that certain protected characteristics are more at risk of self-harm and/or suicide, therefore, we wanted to identify the demographic spread that was contributing to the LEN, and target recruitment campaigns to try to fill any emerging gaps.

During the first 18 months of the LEN, time was taken to create the network, by:

- developing information and structure.
- completing an initial recruitment drive.
- developing and delivering a training programme to support LEN members and enhance confidence and skills to engage and advise.
- engagement with professionals, teams, and existing groups to raise awareness of, and engagement with, the LEN.

This also took into account a short pause during the pandemic.

The LEN was relaunched in early 2021 and has since gone from strength to strength, increasing membership and the variety of workstreams LEN members have engaged in. This last year 2023 – 2024 is no exception with an additional 8 people joining the network, and further workstreams requesting LEN contributions and input (see section 4 for further information of project involvement). Within this time frame a total of 15 members got involved or contributed to at least one piece of work, 11 of which contributed to two or more pieces of work. The table below shows a break down of this in more detail:

Number of pieces of work	Number of LEN members
1	4
2	4
3	2
4	1
5	1
6	1
7	2

Further information can be found within Cheshire and Merseyside LEN Progress Report, April 2021, Evaluation Report February 2022, and Evaluation Report February 2023 on Wirral Mind's website: www.wirralmind.org.uk

4. Project Involvement

Between April 2023 and March 2024 there were a number of workstreams LEN members were asked to contribute to including at national, regional, sub-regional and local levels. These are outlined below.

The following workstreams relate to those the LEN got involved in that had a suicide prevention, self-harm prevention and/or mental health focus:

Champs Public Health Collaborative

World Suicide Prevention Day (WSPD) event: since the launch of the Suicide Prevention Strategy in November 2022, one of the top priorities has been the focus on how domestic violence increases the risk of suicide. LEN members were asked if they have any lived experience of domestic violence and would be interested in supporting and possibly being a part of the WSPD event. 1 LEN member gave their story during the day, whilst 3 other members attended the event. From this event we gained further membership to the LEN, and, whilst not members of the LEN, a number of other presenters at the event spoke about their own lived experience and added to the success of the event.

Website development: The Champs Public Health Collaborative are in the process of redeveloping two websites, Kind To Your Mind and the Cheshire and Merseyside Suicide Prevention websites, into new platforms with a full range of mental health support for people in Cheshire and Merseyside and suicide prevention and bereavement resources for professionals.

LEN members were initially invited to attend a focus group to understand their experiences and discuss what's most important when thinking about mental health, how to best access support, and how the new website could help with this. This was attended by 2 LEN members and 1 Wirral Mind member. Following the first focus group LEN members were then asked to complete a questionnaire. This was completed by 11 LEN members, and 12 Wirral Mind members. A second focus group was arranged to ask for feedback about the prototype of the Champs Public Health Collaborative website. This was attended by 1 member and is an ongoing piece of work.

Local Suicide Prevention meetings:

Each of the nine local places across Cheshire and Merseyside facilitate suicide prevention actions, informed by national and regional strategies, as well as local data. Places are encouraged to meet regularly with partners from across the borough to discuss data on local incidents and how to come together as a local place to support the prevention of self-harm and suicide within their area.

Of the nine places, Cheshire East, Cheshire West and Chester, Halton, St. Helens and Wirral have LEN members regularly attend and contribute to their meetings. Sefton place has lived experience contributions to the work they are doing but they are not members of the C&M LEN. The coordinators of the LEN have attended a number of the meetings in Sefton to encourage membership of the LEN with the aim of increasing numbers of people who are able to support the work across C&M.

Within Liverpool place, the network has a substantial working relationship with the wider Liverpool Public Health Team. LEN members have been involved in a number of projects, are in discussion about attending and supporting the local group meetings and the network is kept up to date regularly about developments.

Within Knowsley place, the network has maintained a close working relationship with the Public Health Team to discuss attending meetings going forward and trying to develop and increase membership of the LEN for this area.

In Warrington, the network is working to build relationships and increase the number of LEN members in this area.

Talking Therapies

Nationally the Improving Access to Psychological Therapies service has been re-branded to Talking Therapies. The Cheshire and Merseyside Mental Health Board supports the provision of Talking Therapies across the 9 places within the sub-region. On behalf of the LEN one of the coordinators attends the Talking Therapies steering group and is then in a position to facilitate conversations or send documents for review by LEN members. It was also encouraged for Talking Therapies at place level to contact us directly if they are reviewing something at place level.

In an initial review, 2 LEN members gave an overview of their experiences of Talking Therapies. These were later presented in the Talking Therapies Away Day. One member spoke at the event, sharing their experiences in accessing Talking Therapies. Following on from the Away Day and as part of the Workforce Development Workshops members of the LEN were asked to complete a short survey about what they understand Talking Therapies to be and their experiences.

Cheshire East Talking Therapies requested input from LEN members to review and comment on a Talking Therapies assessment outcome letter. LEN members were asked to give feedback on its structure, language and overall appearance; LEN members were also asked whether adding the wait time and information on private treatment would be useful. 2 people gave their feedback on the letter.

Crisis

There are a number of workstreams sitting under the arm of Crisis within Cheshire and Merseyside. We have liaised closely with those within the C&M Mental Health Programme who are leading on this work and initially discussed individual workstreams:

NHS 111 Mental Health Option: LEN members were asked to give feedback on proposed options for the development of a regional NHS 111 Mental Health option. When an individual calls 111 they will be asked if their issue is regarding physical health (press 1) or mental health (press 2). This will ultimately replace the existing mental health crisis lines and aims to be more accessible as people only have one simple number to remember. There will be different people answering the calls for physical health and mental health. LEN members were asked to give feedback on two possible options for transferring calls between physical health calls and mental health calls if it was made clear that the caller needed the other support as a priority. The options were either a “cold” or “warm” transfer. 7 LEN members gave feedback.

Section 136: This is an ongoing piece of work to review the current system and implement changes where needed. 3 LEN members identified themselves as having experience of Section 136, whether that be personal experience or supported or been witness to family or friends who have been sectioned on a 136 and wanted to get involved in this piece of work. We have conducted and transcribed 2 interviews to date, and these will be used in the Right Care Right Person and Crisis work.

Crisis Alternatives: another workstream is to explore alternatives to attending A&E or calling 999 when experiencing a crisis. LEN members were asked a number of questions including:

- What are ‘crisis alternatives’, what does that mean to you?
- What experience, if any, do you have with crisis alternative care and what was it like?
- What crisis alternatives would you like to see? (this might be alternatives to A&E i.e. crisis café; or could be further up the river and be more prevention provision i.e. Mersey Care Life Rooms).

10 LEN members emailed their responses, these were then collated and presented at a Crisis Alternatives Workshop.

Mental Health Vehicles: C&M are expanding the number of mental health vehicles available in the area to respond to call outs that have a mental health component. LEN coordinators have attended meetings to date.

Each of these workstreams are ongoing and there is a planned focus group regarding the Talking Therapies and Crisis workstreams to bring the topics together and discuss in more depth with the LEN the topics of Talking therapies, NHS 111 MH option, Crisis Alternatives, and Mental Health Vehicles. 10 LEN members have registered their interest.

LJMU Advisory groups for suicide prevention research

This was a series of focus groups that took place online. 3 LEN members attended to help shape a programme for children and young people in relation to self-harm prevention in schools. Work with LJMU is on-going.

St Helens Loneliness and Social Isolation working group

The group wanted to better understand how people are, or may be, affected by loneliness and social isolation. LEN members were asked to complete a questionnaire about loneliness and social isolation. It is unclear if anyone completed it as responses were anonymous.

Suicide Awareness Training to support autistic people

Greater Manchester Suicide Prevention programme requested LEN member feedback on training that was being developed by the Zero Suicide Alliance. The training was about suicide prevention for those supporting autistic people. Input was sought from anyone who is an autistic person, who cares for someone autistic, or works with autistic people. 1 LEN member confirmed they got involved; it is unknown if any more LEN members did.

SHOUT

SHOUT is the UK's first and only free, confidential, 24/7 text messaging support service for anyone who is struggling to cope. Cheshire and Merseyside have their own words relating to different areas to try to ensure local support can be signposted to where possible. During one of the Crisis meetings for Cheshire and Merseyside, LEN coordinators were able to offer the opportunity for LEN feedback. SHOUT services requested LEN members to give their opinion on their offer. LEN members were asked to complete a questionnaire about their opinions on the service and how to perfect it. 11 questionnaires were completed by LEN members.

Suicide prevention for CYP LJMU

This was an in-person meeting to present the on-going work being done by LJMU as well as the prospects of the project. One of the LEN coordinators attended, however no LEN members attended on this occasion.

The Applied Research Innovation and Service Evaluation (ARISE) Research Group – exploring support for people who support suicidal individuals:

The ARISE Research Group at the University of Liverpool were seeking the views of people who support suicidal individuals, to understand their experiences of this supportive role and their views about the attributes and requirements needed to perform this role and to support their personal wellbeing. Planned outputs from this work were to include supportive information/materials for individuals who support suicidal individuals, within and beyond Cheshire and Merseyside. LEN members were invited to attend up to 10 focus group sessions with each successive focus group discussion building upon and furthering discussions and debate, to answer the research question: “what are the personal support and wellbeing needs of ‘significant others’ and how can these be met?” 1 LEN member has expressed an interest. This piece of work will be carried forward into the next financial year.

Level Up and EmpowerED – Community Ambassador/Champion Programme:

This project gives people an opportunity to become Community Ambassadors and Champions, and information was shared with LEN members. These roles are to support LevelUp and EmpowerED to disseminate health and wellbeing information and signposting. In the case of EmpowerED these volunteers extend their assistance to those dealing with eating disorders.

To our knowledge 1 LEN member signed up; it is unknown whether any other LEN members expressed their interest.

Other value-added work:

There are a number of other opportunities that have come from being involved in and coordinating the LEN. These include:

- Alfie’s Squad – One of the coordinators met the mother of Alfie through a suicide prevention meeting, and had the privilege to attend an Alfie’s Squad session and speak to the parents about the LEN and the other support that Wirral Mind offers; Wirral Mind are working with Alfie’s Squad to host them at Wirral Mind for an activity weekend initially, and in the future host a Wirral ‘Squad’ meet.
- Coproduction Strategy for Wirral Adult Social Care – Wirral Mind were approached by Wirral Adult Social Care to contribute to workshops to coproduce a ‘Coproduction Strategy’ for Wirral Adult Social Care. One of the coordinators attended and was able to contribute significantly to the process with her experience of coordinating the LEN but also with some of the general feedback we have had through the LEN that was relevant to developing this strategy.

- Association of Mental Health Providers Lived Experience Leads Network – One of the coordinators has attended one meeting to date; this is to support those who lead or coordinate lived experience to explore best practices and achieve better outcomes.
- Wirral Mind training department have been asked to facilitate wellbeing sessions at Archbishop Beck School during their carousel for PSHE (Personal Social Health and Economic) wellbeing day. Archbishop Beck School are actively involved in the CYP programme regarding self-harm and suicide prevention.
- Help Through Hardship - Wirral Mind are working together with Citizens Advice Bureau (CAB) and Trussel Trust food bank in Wirral in response to the cost-of-living crisis. Anyone accessing any of these services will be able to link up to streamlined services for mental health support, finance advice, and/or emergency food parcel. The Help Through Hardship Team have asked for LEN input into a piece of work they are doing to review this pilot project. This highlights the wider use and impact the LEN can have in our communities.
- Workplace Wellbeing – attending a variety of meetings has led us to be able to support other agendas including workplace wellbeing and the C&M workforce development. In part the LEN are contributing to these discussions, but Wirral Mind's training manager has been able to bring other experience into those discussions too.
- British Heart Foundation Data Science Centre App design - The British Heart Foundation Data Science Centre asked for input into the design of a new app that could better study how activity levels vary with changing heart health. The research team hope this could give valuable insights into why heart and circulatory diseases develop and enable earlier diagnoses of these conditions. LEN members were sent the opportunity to complete an online survey seeking opinions about what data to collect, and any concerns about aspects such as privacy. Once developed, it will be tested to assess how well it tracks health information and how this data can assist doctors in diagnosing heart conditions. We were not provided with information from British Heart Foundation as to where respondents came from.

The following work areas were opportunities given to LEN members, where they did not choose to, or were unable to, engage in. These have been included in the report to highlight the opportunities that have arisen and highlight the awareness of the LEN across a wider range of activities and services.

Cheshire East Talking Therapies requested input from LEN members to review and give feedback on information about a new offer available to residents in Cheshire East. A range of wellbeing sessions was being provided by professionals from Talking Therapies. The main aim was to offer information on practical and emotional support. The sessions were being delivered in a community/workplace setting.

Mersey Care Review of Crisis Safety Plan

This was an evaluation of a safety plan that Mersey Care had written up for people with suicidal ideation. Mersey Care invited LEN members to attend a focus group and give feedback about the emergency response experience during a mental health crisis i.e. did you feel safe, were you taken seriously, were you helped/supported? Two dates were given, one in-person during office hours, one online in the evening.

Living Libraries

Mersey Care NHS Trust are hoping to create a Living Library. Living Libraries are events, usually organised by a “Librarian”, during which people with lived experience of health or mental health issues can become “Books” and share their stories, answer questions, and have one-on-one conversations with “Readers”. There were two initial launch dates where the strategy for these events was discussed. Each launch event gave more information about what a Living Library is, how they work and more about the roles; and the opportunity to give individuals perspective and opinions on how best to run further Living Library events and ensure the Books and Readers wellbeing. There will be an opportunity to become a Book, Reader, or facilitator of the Library – “Librarian”.

AMPARO Bereavement Group Meeting

AMPARO were planning a memorial event for people in Liverpool bereaved by suicide. Relevant LEN members were invited to attend a planning meeting to support the planning for the memorial event.

Halton Health Improvement Team

LEN members were asked to comment on (not complete) a questionnaire aimed to provide insight into why local young males aren’t accessing current mental health support at the same rate as young females even though males make up the majority of local suicides. The aim was to send the questionnaire out to students in the area in an online format. The questionnaire was sent to males – no LEN members replied.

Wirral University Teaching Hospital (WUTH) – Patient Experience Strategy.

WUTH’s Patient Experience Strategy forms 1 of 7 enabling strategies through which their 2021-2026 Strategy will be delivered and is broken down into 2 key elements: patient experience vision and delivery plan. The patient experience vision is a statement of their intention to deliver a high-quality patient experience for all and the patient journey broken down into promises, to inform their patients what they can expect from WUTH. The delivery plan will detail how they will improve the patient experience, and how they will monitor and measure themselves to assess their successes in achieving the patient experience vision. LEN members have been invited to contribute to various pieces of work and developments including:

- “Hello my name is”

- “Welcome Promise for Ward Folder”
- “Patient Experience Strategy”
- “Inclusive promise workshop – listening to me and respecting me as an individual”
- “Improving mental health experience – co-designing care with you”
- “Discharge Leaflets”
- “Voice of the Child workstream”

Further work on engagement and partnership working needs to be facilitated under this piece of work to make it accessible, engaging and valued by and to the LEN.

The future is...Dock Branch Park

LEN members from Wirral were given information about the opportunity to attend an event organised by Placed Academy and Common Good. This was on the back of last year’s Birkenhead Event ‘The Future is... Birkenhead’. The focus this year is on one of the central ‘catalyst’ projects for the town - Dock Branch Park (and neighbourhood). The idea is to turn a disused railway into a public park. The event gave people the opportunity to see the latest ideas for Dock Branch Park and the surrounding neighbourhood and enjoy some fun activities.

Spider Project Suicide Awareness and Prevention Bike Ride

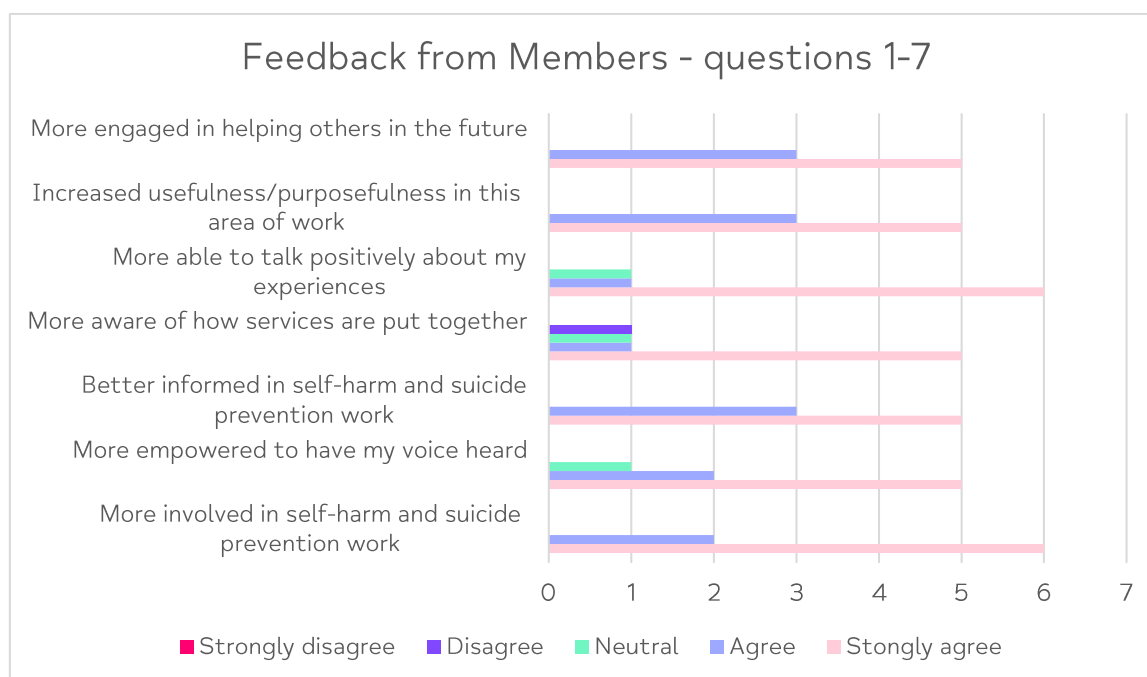
Spider Project are a Wirral-based creative arts and wellbeing project, providing a wide range of creative arts courses, holistic therapies, and physical exercise sessions for adults with former substance misuse issues and/or mental health issues. Each year Spider Project organise a Suicide Awareness and Prevention bike ride around Wirral in a bid to raise awareness of suicide on World Suicide Prevention Day.

5. Evaluation of Project Involvement

To try to evaluate the impact of the LEN taking part in these workstreams those who requested LEN input and those from the LEN that took part in a piece of work were asked to complete an evaluation form. Obtaining people’s responses has again been difficult this year, and therefore we have a small number of responses to report on in this report.

The following information is taken as a whole from all of the evaluations received, split into ‘feedback from members’ and ‘feedback from organisations’.

Feedback from Members:



Evaluations also asked:

Q. Please tell us of any particular strengths and/or weaknesses of your LEN participation.

“Listened to”

“It has built up my confidence tremendously”

“Being involved in this has felt like ‘the start’”

“I feel that I have been able to make valuable contributions”

“Positive”

“Worthwhile”

Q. Do you have any suggestions for improving LEN involvement?

“get some general feedback from the teams that the LEN participants have contributed to show e.g. “You said..we did.. etc”.

Please see **Appendix 1** for full responses to these questions.

LEN Member Case Study:

One LEN member wanted to give more detailed responses to some of the questions posed in the evaluation form, and together we have written this as a case study:

Following LEN involvement I feel:

More involved with Self Harm and Suicide prevention work - Strongly agree.

“I have felt totally supported by LEN in relation to Self-Harm. I am a person who struggles with my own self harming behaviour and would like to help others working and caring for people who use services both in the community and inpatient settings to understand the WHY ... I haven't been involved in this area however the bits I have been involved in helped me learn more, especially from the family and carer perspective, again LEN always gives me support and understanding especially checking in regularly, so I can be supported in case the work I am involved in re-traumatises me.

In relation to Suicide Awareness. I did my training with Wirral Mind, which helped me understand, we had people who had lost people to suicide and people who had tried to take their own lives. I unfortunately have tried to take my own life, and also lost people dear to me who sadly took their own lives. I believe the training gave me the support to understand a little more and gave me some skills to be able to sit with a person who is in desperate need for understanding to be able to sit with them in that dreadful moment of pain until I could get the help they needed. I can't thank LEN enough the training helped me in more ways than anyone will ever imagine. I also supported Liverpool's Reach Out Campaign for 2 years with support from LEN.”

More empowered to have my voice heard - Strongly Agree

“I have been sharing my Lived Experience for many years. I have grown in this area and now understand my ‘Why’ for sharing. I believe we need to offer a lot of support for service users to be heard and also more help for families and carers. My journey to get to where I am, has been frustrating at times, scary, and incredibly hard; it's been so worthwhile; however I believe in some areas people like me are just ticking a box, I do not feel like that when I am being involved with LEN, I feel they keep me safe and value everyone's thoughts and opinions. I would sincerely like to do more to support others starting off on their journeys. I would like to discuss this in more detail if I could. I am so grateful for all the opportunities LEN has given to me.”

More able to talk positively about my experience – Strongly Agree

“I do talk positively or at least I try. We need to be realistic in times like at present when people are experiencing things like we all are today in this current climate. I think we need to realise and understand that we all have lived experience and do our very best to give others hope that understanding and listening and supporting people to feel safe is not always being positive but together we can support the changes needed, but it’s not easy to be positive all the time. I try to recognise and understand the true meaning of working together, alongside, because we can’t do this on our own. We face the challenges together.”

Increased usefulness/purposefulness in this area of work – Strongly Agree

“I believe we all have a purpose and if needs are met and reasonable adjustments are made then people with Lived Experience can be supported, enabled, to share their wonderful talents and skills.

My journey has been a long one, at times frustrating and hard, I really thought/believed I had a purpose and could help others see that we could help people feel safe, cared for and have a meaningful fulfilling life with or without mental or physical distress. I hope to inspire and empower others who may have struggled throughout their lives, to enable others who haven’t been given the opportunities in life similar to me, to find the strength, to seek the help that would have given me a chance, and then the courage to support me and others which I know is so hard from my own lived experiences. In the last 6 months I have felt worthless and lost my sense of self, I have at times been used. I couldn’t ask for the support I needed but believe me I tried so hard, it’s just simply people in big organisations do not have the time, I also felt that if I did ask they would say I wasn’t fit to work, how sad is that, they took me back to where I started all those years ago blamed for being me and what had happened and was done to me when I was little and as I grew up. As I reflect on my journey I never in a million years thought I would be taken back to the times when I wanted to take my own life, I was, it’s frightened me so much, I didn’t want to bother anyone, I had a plan then I found my notes and the training slides I had kept from the suicide awareness training I did with Wirral Mind, I can only say Thank you to everyone who shared, it so touched my heart and in a strange sort of way, my very sad disillusioned mind, it helped me think differently and as I reflected reminded me of all of those people who had been on my journey. Thankfully my thoughts settled, and I reached out to someone I trusted who I knew would not shout or call me selfish, I am so grateful, I am alive and not going to give up the role I have. I have reduced my days to two days a week not because I wanted to but, because I needed to, it was so hard for me to continue banging my head on a door that is never going to open, because the organisation doesn’t want people like me. I used to think they would change eventually. Sadly, so many wonderful people of all

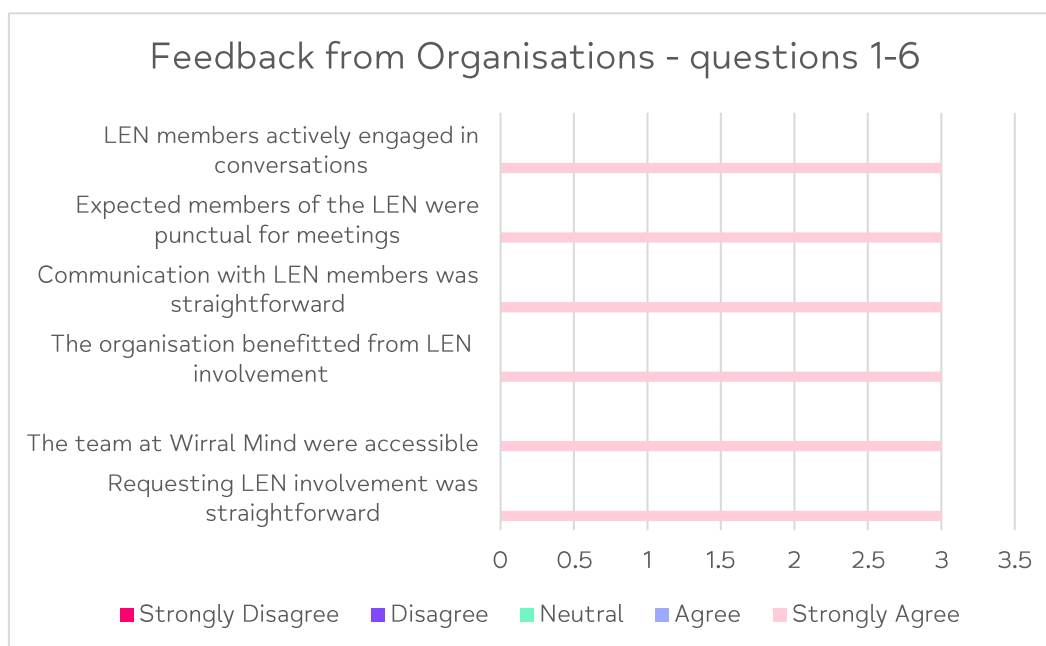
backgrounds and cultures, ethnicity, people who have walked beside me, alongside me who are now managers and above truly want to have the time to embrace and support lived experience practitioner like me, however, all of this work takes time and in the current climate they have none.

I totally get it, however if we don't make the time, find the time. We will not make a difference. We have to go back to move forward. Often, we get stuck, I believe we need to stop for a while, give ourselves some space and time to breathe. See where we got stuck, not what we did wrong, but reflect on how we did better and remember all of this takes a huge amount of time and courage, we cannot do any of this alone, we have to work together because together is the only way.

I think my reflections show that if we value the people in our care and around us, listen to hear, try our very best to understand the WHY it will, I truly know, make a huge difference to so many.

I believe and I hope this answers most of your evaluation questions. I am so sorry if my reflections make anyone sad, but I truly think after being involved and now working in a role my reflections are both honest and true. On a more positive note, I'm not going to give up or blame anyone for how I feel, I have come so far, been given so much support and have learned on my journey with those wonderful people I am so truly grateful for everything I have I have survived.”

Feedback from Organisations:



Evaluations also asked:

Q. Please tell us of any particular strengths and/or weaknesses of LEN participation.



Q. Do you have any suggestions for improving LEN involvement?

None were given.

Please see **Appendix 2** for full responses to these questions.

“Over the last year since I’ve been in post with the Cheshire and Merseyside Mental Health Programme the lived experience input from the network has been invaluable for the topic areas of Crisis and Talking Therapies. Involvement has included attendance at meetings or events and taking time to consult with members of the lived experience network on a number of key pieces of work. Engagement and commitment has been fully evident throughout and has provided assurance that the lived experience voice is being considered within programmes of work. A key element of the input is that the network can bring a representative voice of people with lived experience coming from a non-biased viewpoint sitting outside of provider trust networks. It also enables a more holistic oversight of input from a lived experience viewpoint rather than a tokenistic approach with just getting feedback from one or two individuals. The support and input from those with lived experience is fundamental for the development of any programme of work. The support of the network to achieve this is fully appreciated.”

Coordinators reflection:

In an effort to increase positive engagement of LEN members in more of the work that is going on across the system we organised meetings in person, online meetings, and at different times of day in-line with feedback from LEN members who struggle to access meetings during office hours, still with limited success. We have also contacted everyone on a 1:1 basis to check-in with members and give support, and also check-in from an engagement standpoint giving us the opportunity to ask what we could do to encourage further engagement. Feedback from LEN members was that everyone wished to remain a member of the LEN, some of the workstreams have not all been relevant to all members (whether that be geographically or type of experience for example), for some it has not been the right time to get involved in a particular piece of work. All of these things appear to have impacted on the number of LEN members engaging in pieces of work, and we will continue to monitor and explore other options for engagement going forward.

We have also tried arranging engagement sessions for Cheshire East (as requested by the Suicide Prevention Lead for this area) with two aims; to bring together the current LEN members and offer them the opportunity to meet, to ask coordinators questions and hope to increase their engagement in workstreams; and to try to increase LEN membership for Cheshire East, bringing more voices to the conversation. This has not come to fruition to date; however, we are keen to push forward with this and potentially across each of the 9 places where appropriate.

6. Conclusion

This report highlights the wide scope of opportunities LEN members have been able to influence, not only in the suicide and self-harm prevention agenda, but the wider mental health programme and further.

Whilst we would hope for more members to contribute, collaborate and co-produce in these conversations and workstreams, the report underlines that when this does happen the impact of having their voices heard is instrumental, not only for the LEN members themselves, but also for those that hear and listen to those voices and the ripple effect that this has on the workstreams and actions of the suicide prevention strategy.

Since the beginning of the LEN the network has worked tirelessly to demonstrate and promote the value and benefits of collaboration and co-production with people who have lived experience; to promote that the network exists and to encourage co-production across the actions of the suicide and self-harm prevention strategy. The

variety of workstreams and sources, and increase in number of requests received shows the success the network has had in making its presence known.

There is still learning to be had from our experience and from listening to the LEN members, and possible improvements to make to ensure further engagement from the members including a better vehicle for a two-way conversation and the ‘you said... we did’ feedback; and understanding and allowing time for true co-production.

The diversity of the LEN membership allows the voices of different perspectives to be heard, and this is especially true for the types of experiences people have had – whether they have had their own personal experiences of self-harm and/or suicide, supported or cared for someone who has, or has been bereaved by suicide. Everyone’s experiences are important, and the wealth of experiences people have brought to the network has allowed greater learning.

Having the network coordinated by Wirral Mind has also given an extra layer of support to the LEN members. Some topics of conversation can be triggering, and members have at times sought us out for support when required. We have been able to signpost directly to our services in Wirral Mind, or to other services, and be that listening ear if needed.

APPENDICES

Appendix 1

Evaluation of Project: Feedback from Members (full responses).

Q. Please tell us of any particular strengths and/or weaknesses of your LEN participation.

“I feel very positive in that those with lived experience are being listened to in helping deliver the right care and appropriate treatment at the right time.”

“I really enjoyed it all in equal measure, such diverse projects in some ways but underneath the common denominator of mental health and how to prevent MH decline/disadvantage/isolation. It brought my lived experience and professional experience of counselling and support work together in a joined up and integrated way to not just be able to help with support projects but to also change the narrative for me in a positive way. To feel helpful, having something worthwhile to say. It has built up my confidence tremendously. The Liverpool John Moores research teams have been a joy to work with and I feel that I have been able to make valuable contributions. Likewise, the Champs website focus group was small and allowed for much discussion per participant. This felt very tangible as a way to influence the more clinical face of suicide prevention work. I would love to be more involved if I had more time.”

“Being involved in this has felt like ‘the start’, as this is the first thing I have engaged with, with the LEN.”

“I think my strengths are I am a good communicator and can communicate to different people from all walks of life.”

“It’s good to be able to put knowledge and experience to good use in progressing services and initiatives, as opposed to just talking about your depression and help for yourself.”

Q. Do you have any suggestions for improving LEN involvement?

“... would it be possible to get some general feedback from the teams that the LEN participants have contributed to show e.g. “You said..we did.. etc”. How their input has shaped changes etc. I think this would be a good way of validating the input as far as the LEN members are concerned but might also help encourage other providers and services to get involved.”

“No”

“I do not have any suggestions for improving LEN involvement.”

“This form is cumbersome to complete.”

Appendix 2

Evaluation of Project: Feedback from Organisations (full responses).

Q. Please tell us of any particular strengths and/or weaknesses of LEN participation.

“It was excellent to be able to have the input of a LEN member to discuss through the applications and hear their perspective of the service being purposed.”

“Timely and positive input and support”

“The LEN were great at providing honest feedback and thoughts and this varied and unique feedback helped us form a strategic plan of action for the campaign.”

Q. Do you have any suggestions for improving LEN involvement?

None were given.



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