About the Authors

Richard Velleman is Professor of Mental Health Research at the University of Bath (UoB), a consultant clinical psychologist with the Avon and Wiltshire Mental Health Partnership NHS Trust (AWP), and Director of the AWP/UoB Mental Health Research and Development Unit. His previous books include Clinical Handbook of Co-existing Mental Health and Drug and Alcohol Problems (edited, with Amanda Baker, 2006).

Eric Davis is Visiting Senior Research Fellow at the University of West of England (UWE) and a consultant clinical psychologist with the Gloucestershire Partnership NHS Trust. He is the Trust lead, and the National Institute for Mental Health, England (NIMHE) southwest associate, for early intervention in psychosis and helped to set up the Integrated Approaches to Serious Mental Illness course at the University of Gloucestershire.

Gina Smith is a consultant nurse with the Avon and Wiltshire Mental Health Partnership NHS Trust and is the Trust lead for psychosocial interventions. She is a co-facilitator on the Integrated Approaches to Serious Mental Illness course at the University of Gloucestershire and is the Clinical Director of Studies for the postgraduate programme in mental health practice at the University of Bath.

Michael Drage is a carer who has been involved with the Family Work for Psychosis service in the Avon and Wiltshire Mental Health Partnership NHS Trust for many years, both as someone receiving help from the service and as a key participant in training and information courses about the family work service. He is now a lead carer-researcher with the AWP’s Family Work for Psychosis service.
Changing Outcomes in Psychosis
Collaborative Cases from Users, Carers and Practitioners

Edited by Richard Velleman, Eric Davis, Gina Smith and Michael Drage
# Contents

Notes on Contributors vii  
Foreword: *Lu Dubig, Laurie Bryant and Professor Antony Sheehan* xv  
Preface: *Richard Velleman, Gina Smith, Michael Drage and Eric Davis* xvii  

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Psychosocial Developments: Towards a Model of Recovery</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><em>Eric Davis, Richard Velleman, Gina Smith and Michael Drage</em></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Shared Caring for a First Episode of Psychosis: An Opportunity to</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>Promote Hope and Recovery</td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>Mandy Reed and Caroline Stevens</em></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Integrating Family and Individual Approaches with People Who</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Experience Bipolar Disorder</td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>Annie Higgs and Roger Thompson</em></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Positive Risk-taking within Family Intervention</td>
<td>61</td>
</tr>
<tr>
<td></td>
<td><em>Gina Smith, Alison Drage, Emily Drage, James Drage and Michael Drage</em></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Assertive Outreach and Family Work</td>
<td>80</td>
</tr>
<tr>
<td></td>
<td><em>Frank Burbach, John Carter, Jane Carter and Matthew Carter</em></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Relapse Prevention in Bipolar Disorder with Staff Who Are</td>
<td>98</td>
</tr>
<tr>
<td></td>
<td>also Service Users</td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>Eric Davis, Guy Undrill and Lauren Samuels</em></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Women’s Experiences of Psychosis: Recognition of Gendered Difference</td>
<td>117</td>
</tr>
<tr>
<td></td>
<td><em>Vicky MacDougall, Karen Luckett and Megan Jones</em></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Advance Agreements, Advance Directives and Pre-emptive Care-planning</td>
<td>135</td>
</tr>
<tr>
<td></td>
<td><em>Steve Brooks, Jo Denney and John Mikeson</em></td>
<td></td>
</tr>
</tbody>
</table>
Contents

9 Recovery from Voice-hearing through Groupwork 154
  Keith Coupland and Tim Cuss

10 Recovery through Sports in First-episode Psychosis 172
  Sean Adams, Lydia Bishop and Jane Bellinger

11 Employment, Mental Health and PSI: Occupation Is Everyone’s Job 194
  Sarah-joy Boldison, Rosie Davies, Hilary Hawkes, Christine Pacé and Ruth Sayers

12 Using Effective Management Strategies to Facilitate the Delivery of PSI 211
  Debbie Furniss and Eric Davis

13 Carer–Practitioner Collaboration in Research and Evaluation 228
  Willm Mistral, Michael Drage, Gina Smith, Siobhan Floyd and Nicola Cocks

14 Changing Practice 241
  Gina Smith, Michael Drage, Eric Davis and Richard Velleman

Author Index 256
Subject Index 261
Sean Adams was born in Guyana. He moved to the UK when he was 13, and later went on to study applied physics at university. He is currently working full-time in retail electrical goods. Sean is a very good sportsman and particularly enjoys badminton. He is interested in computers and IT and has recently registered for an Open University course to develop these skills. He hopes this will help him run his own business in the future. Sean was a user of the Gloucestershire Recovery in Psychosis (GRIP) service from the time of his discharge from hospital.

Jane Bellinger, RMN, RGN, BSc (Sports Science and Leisure Management), Dip Thorn, spends more time thinking about exercise than doing it. As a late convert to sport, she participates with more enthusiasm than skill, but believes it helps her cope better with life’s stresses and frustrations. When not procrastinating about going to the gym, she works as a case manager/community development worker for an early intervention in psychosis service (EIS).

Lydia Bishop has managed to bring up three children as a single mum while juggling work commitments as a local councillor. She is the primary carer for her eldest son who is making a steady recovery from psychosis. Lydia has found that exercise helps her balance the demands of her caring role. She has contributed a great deal locally in promoting a positive message for those involved in helping someone recover from psychosis.

Sarah-joy Boldison, Dip COT, MSc, is an occupational therapist who has a rich tapestry of experience working in a range of mental health settings. She has a Masters in Management Development and Social Responsibility and is a graduate of the Common Purpose Programme (Bristol). She was a trustee of the Circles Network for 10 years. She now works for both the University of Bath and the National Institute for Mental Health in England. She is passionate about inclusion and human rights issues and the importance of whole systems work, alongside the leadership and team-working needed to bring about positive change.

Steve Brooks is 34 years old. He was born in Cheltenham and attended Grammar school and college and was employed in the Civil Service. When he was 19, he developed a serious
psychosis. He had several admissions to hospital, firstly diagnosed as ‘manic depressive’ then ‘schizo-affective’, owing to the presence of voices and his beliefs about them. In the early years, medication and social therapy were offered. Ten years ago he was helped with individual and group cognitive behaviour therapy (CBT). Since that time he has developed the skills of working with others with psychosis and this includes part time work as a co-therapist and lecturer. He now lives independently in Cheltenham.

Frank Burbach, BSocSc, BA (Hons), MA (Clin Psych), Dip Mar and Fam Ther, C Psychol, is a consultant clinical psychologist with the Somerset Partnership NHS and Social Care Trust. As a family therapist and United Kingdom Council for Psychotherapy accredited cognitive-behavioural psychotherapist he has been involved in various training initiatives including the development, since 1995, of Somerset’s family interventions services (with Roger Stanbridge). He established Somerset’s assertive outreach services in 2000/1 and is currently the lead for early intervention in psychosis services. He is a member of the national NIMHE psychosocial interventions implementation group, convenor of the Division of Clinical Psychology family interventions network and previously chaired the Association for Family Therapy’s ethics committee.

Jane Carter is now retired, following several years of working as a team leader in a Social Services department. In spite of this background, she was offered little assistance in attempting to gain help, advice and insight into her son’s mental health problems. At a later date, the formation of a carers’ training course, with the backup of an assertive outreach team, has proved invaluable in understanding and dealing with these serious problems. The continuity of the family support service has provided a solid base for recovery.

John Carter, BA, MA, started his career as a teacher, both overseas and in London. After the diagnosis of paranoid psychosis, he joined the family-run business which required less pressure. Later, following protracted mental health problems, the intervention of an assertive outreach team and the family support service became vitally important. These have helped him considerably on the way to recovery.

Matthew Carter is now retired, after having had a professional career in senior management, the last 20 years of which entailed operating his own business. During this time he has been very much self-sufficient, although it has been extremely difficult when the correct treatment for his son John could not be found. He was, however, able to provide stress-free employment for him. Subsequently, he has been able to help a mental health charity and the local mental health trust on a voluntary basis. The assistance given by the family support service has greatly helped John and himself in coming to terms with the dramatic changes in his son’s life.

Nicola Cocks, BSc. Following a 10-year career in administration, Nicola returned to education and in June 2004 completed a psychology degree at the University of Bath. She then worked as an advocate for Bath Mind where she was responsible for running outreach advocacy projects at the local acute inpatient ward. Nicola has experience of carer research and
is currently working on auditing and research projects for the Avon and Wiltshire Mental Health Partnership NHS Trust. She has also enrolled on a masters programme in Mental Health Practice.

**Keith Coupland**, RMN, BSc (Hons), Dip Thorn, was trained on the 1983 RMN syllabus. He has maintained an interest in working with psychosis throughout his career. He completed his nursing degree at the RCN and his Thorn diploma in working with psychosis from Manchester University. With Eric Davis, he set up a Thorn satellite course at the University of Gloucestershire; and was appointed to his present post of nurse consultant for psychosocial interventions in psychosis in 2001.

**Tim Cuss** trained to be a chemical engineer, but then began a decline into a family illness of schizophrenia. He was treated in hospital and became a long-stay patient, experiencing catatonia and complete withdrawal for many years. He steadily found recovery through the Milsom Street hearing voices group and received personal help for psychosis. Since then he has run a ‘recovery’ group for inpatients and has had a number of posts as a user consultant. He is also a bee-keeper with about 30 hives.

**Rosie Davies**, BSocSci, MSc, is research co-ordinator for a lottery-funded project based at Bristol Mind exploring access to services for people seen as ‘hard to engage’. Rosie has bipolar disorder. Prior to diagnosis she worked in the voluntary sector and was training as a Gestalt psychotherapist. Since diagnosis, she has developed a keen interest in self-management. Rosie has been involved in other research projects as a service user researcher. Areas of work have included acute inpatient care and the impact of loss of occupation following mental health problems.

**Eric Davis**, BSc, MSc, PhD, Dip Thorn, Cert Management, C Psychol, is a consultant clinical psychologist and is Gloucestershire and NIMHE southwest lead for early intervention in psychosis services as well as being Visiting Senior Research Fellow with the University of West of England. As well as service development responsibilities, he remains an active clinical practitioner with children and young adults with first-episode psychosis, and their carers. He set up the GRIP early intervention in psychosis team which was featured in the CSIP/NIMHE document ‘10 High Impact Changes’. With Keith Coupland in 1996 he set up and lectured on the Thorn diploma course at the University of Gloucestershire. His research encompasses a range of interests including service effectiveness and the role of sport and exercise in recovery – this connects with his Senior Research Fellow role.

**Jo Denney**, MSc Dip COT, Dip Thorn, qualified as an occupational therapist in 1986 and has since worked in a variety of mental health settings. In collaboration with the University of Gloucestershire she has led the university diploma in Integrated Approaches to Serious Mental Illness for the past five years. She has a partner and two children.

**Alison Drage**, RGN. For the last 14 years Alison has worked as a theatre nurse at Royal United Hospital, Bath and is soon to retire. With the help of her husband, Michael, she
brought up five children; the two youngest developed a severe mental disorder: the other three children continue unscathed from psychosis. With the help of Gina Smith, Alison started a carers’ support group in Trowbridge; this group is now a registered Rethink (severe mental illness) group. Retirement from nursing will enable Alison to develop the support group further and give much needed private space and time to photography and growing vegetables.

Emily Drage is James’ younger sister and is presently struggling in the grip of a severe and enduring psychosis. Though her future looks bleak she still perseveres against the odds. At rare times her warm sunny nature makes an all too brief appearance.

James Drage is Emily’s older brother. He has spent the last six years battling with a severe mental disorder. He is now well on the road to recovery and living independently. He enjoys the guidance and benefits of an active support care network. Because of his experiences he feels that he is now in a position to help other service users and to warn against the dangers of drug abuse. He is a keen sportsman and his interests include motor-cycling, sailing, croquet and the importance of a good diet.

Michael Drage (Rev.), BA, MA Cantab, MSc Psych OU, is a lead carer-researcher with the Family Work for Psychosis service, Bath University, Avon and Wiltshire Mental Health Partnership NHS Trust. Married to Alison and father of five children, two inflicted with a mental disorder: the other three children continue unscathed from psychosis. Formerly lecturer/teacher in A level psychology and adviser in education, Canterbury diocese. He is interested in family intervention in cases of psychosis and the role of faith in brain chemistry.

Siobhan Floyd, BSc, is a researcher at the Mental Health Research and Development Unit, University of Bath. She has a particular interest in developing carer and service user led research collaborations and is committed to undertaking research which inspires change. Siobhan has certificates in both counselling theory and skills and is currently studying for an MSc in Mental Health Practice. She hopes to develop as a research-practitioner, aiming to bridge the practice—research gap within mental health services, while growing as a passionate, reflective and recovery-oriented practitioner.

Debbie Furniss, RGN, RMN, BSc (Hons), MBA, is the specialist services manager within Gloucestershire Partnership NHS Trust. This encompasses county-wide services for assertive outreach, rehabilitation, early intervention, prison inreach, criminal justice liaison and supported accommodation. Debbie is currently working with senior clinical colleagues to develop a psychological interventions strategy within specialist services and family work services within the Trust. A key aspect of her style is the integration of managerial and clinical knowledge and experience and she applies this approach in her role in commissioning and modernising services.

Hilary Hawkes, BSc (Hons), is an occupational therapist in a vocational service within a
Mental Health NHS Trust. She has 17 years experience in both the statutory and independent sector of supporting people into work who are disadvantaged in the workplace. She has previously published her experience of leading the conversion of a sheltered workshop to an individual support service. Additionally, Hilary periodically uses mental health services.

Annie Higgs, BSc (Hons) Community Studies, SRN, RMN, PGCEHE, Dip Thorn, is a clinical specialist for psychosocial interventions in the Gloucestershire Partnership NHS Trust. She is working with others to develop a local family work service and to develop psychosocial interventions for individuals and carers in the inpatient unit in Cheltenham. She delivers training for family work service on the local Thorn course. She has co-authored an article, in 2002, about the medication management dissemination project from the Institute of Psychiatry and awaits publication of a manual, co-authored, about working with families of those who experience psychosis.

Megan Jones had her first-episode of ‘hypomania’ at 18, while at university. During the rest of her studies, her employment and through becoming a mother of three children in her 30s, she was well. However in 1992 at the age of 42, she experienced a terrifying mental breakdown, with repeated episodes between then and the present, usually involving voice-hearing, and leading to a variety of diagnoses. She has given talks alongside Vicky MacDougall, both locally and internationally, on hearing voices, women and psychosis. She has co-facilitated focus groups for the NHS supporting people project and a group on recovery.

Karen Luckett is a student who developed serious mental health problems in her early 20s following the death of her mother. She began to hear voices and became paranoid. Eventually she was diagnosed with a schizo-affective disorder. For many months she was in and out of hospital. She is now well down the path of recovery. She attended a hearing voices group and she also received both CBT and psychotherapy. All of this together has made recovery possible.

Vicky MacDougall, MSc, Dip SW, is mental health development and project manager within the Gloucestershire Partnership NHS Trust. She has an interest in women’s mental health and in particular women with self-harming behaviours, personality disorders, domestic violence and sexual abuse and women voice-hearers. She was involved with Keith Coupland and Eric Davis in setting up voice-hearing groups and self-harm groups in Gloucestershire. In addition to this, Vicky has also been involved in a number of research projects that include the employment of service users, and she teaches on a number of projects with service users.

John Mikeson had a career in local government and enjoyed sport and socialising until, at the age of 29, severe mental illness forced early retirement. His interests since then have included voluntary work, psychology and representing patients at user focus groups and forums. He has also had letters published on these issues in the national press. He created the Rainy Day plan to benefit others.
Willm Mistral, BSc, MSc, PhD, is general manager of the joint Avon and Wiltshire Mental Health Partnership NHS Trust/University of Bath, Mental Health Research and Development Unit. He manages a broad portfolio of research, and has published widely on mental health issues, substance misuse, young people, ethnic diversity and service evaluation. He is particularly interested in projects that make a positive impact on people's lives via collaboration, empowerment of participants and self-reflective inquiry.

Christiane Pacé is a practitioner in mental health. Her experience as service user and carer has made her passionate about the need for change and led her to become an advocate with Bristol Mind and train as a social worker. She had to stop both as she struggled with her mental health and the system. She is sure that her return to advocacy and involvement with user-led research projects have maintained her worth as 'person' v. 'patient' and led her back to work and social inclusion.

Mandy Reed, RMN, RGN, MSc, Dip Thorn, has worked as a mental health nurse for most of her adult life, predominantly in community settings. She has always endeavoured to develop robust, collaborative relationships with clients and their carers, built around flexible models of care, and is passionately committed to developing proactive mental health services which promote social inclusion on all levels. Working with young people recovering from psychosis, their carers and social networks was therefore a natural progression in her career. She is the past UK chair of the Mental Health Nurses Association (MHNA). At the time of writing this chapter she was the specialist team leader for the Gloucestershire early intervention service (GRIP). She now works as a consultant nurse/senior lecturer in Acute Adult Care for Avon and Wiltshire Mental Health Partnership NHS Trust and the University of the West of England where she remains committed to developing best practice and implementing the Early Psychosis Declaration.

Lauren Samuels was born in London in 1971. She qualified as a health professional in 1993. Lauren experienced the mental health services as a service user at age 16, then again later as an adult in 1997. Lauren was diagnosed with bipolar disorder in 1998. In 2002 she started collaborative work on relapse prevention; since this work started she has remained relatively stable and not had a further nervous breakdown.

Ruth Sayers, BSocSc, PGCE, was a lecturer in sociology, and engaged in multi-cultural staff and curriculum development for further and higher education in the southwest. She became ill with a mood disorder aged 40. Retiring from teaching, she spent several years on courses, in voluntary and temporary work, and on benefit, before being awarded a grant by the Mental Health Foundation. This enabled her to research into the effects on individuals of losing work following mental health problems (2001–3). The published report, *Life’s Labours Lost*, has led to other opportunities for research, training and development on issues of meaningful occupation and social inclusion, and related work, in the UK and Sweden.

Gina Smith, RMN, RGN, Dip Thorn, MSc, is known for her work on implementing family interventions in routine clinical practice, exemplified by an NHS Beacon award 1999–2002.
granted to the family work service operating across the Avon and Wiltshire Partnership NHS Trust area. Her research interests include exploring the needs of families of forensic patients and developing meaningful outcome measures for family interventions.

**Caroline Stevens** was a mother of five children. She had not really had any contact with mental health services prior to her eldest son developing a psychotic disorder in the summer of 2003. She had always devoted most of her time to bringing up her children and was determined to help her son through this period of his life and support him in his recovery. She achieved this by devoting a lot of time and patience and working closely with the early intervention team members, in particular Mandy Reed, the co-author of her chapter in this book. She then resumed her full time work in the local resource centre and maintained a great relationship with her son and the rest of her children. Tragically, she then contracted lung cancer and died in the autumn of 2006, after completing her chapter, but before the book was published.

**Roger Thompson**, BSc, was an IT professional who developed bipolar disorder in his early 30s. Over a four-year period the resulting manic and depressive behaviour put his marriage under great strain, lost him his job and left him feeling worthless. Fortunately he was put on a family work programme, which has restored his health, his confidence, his relationship and his overall quality of life.

**Guy Undrill**, MB, ChB, PhD, MRCPsych, is a consultant psychiatrist at Gloucestershire Partnership NHS Trust and honorary senior lecturer at the University of Bristol. His previous research has been in psychoanalysis and performance aesthetics. His principal current interest is the ethics and politics of risk.

**Richard Velleman**, BSc, MSc, PhD, FBPsS, FRSS, C Psychol, is a consultant clinical psychologist, Professor of Mental Health Research at the University of Bath, and Director of the joint Avon and Wiltshire Mental Health Partnership NHS Trust/University of Bath: Mental Health Research and Development Unit. He has a keen interest in evidence-based service development, and has founded statutory addictions services, helped Gina Smith develop the families and psychosis service within their Trust, worked as an NHS Trust board director, undertaken many externally funded research projects and published very widely on a range of mental health topics.