# **Supplementary material: Examples of the different types of Voluntary Sector Organisations (VSOs)**

These examples are included to illustrate the breath of different VS contribution. This is not intended to promote them as good practice as they were evaluated as part of our study. These examples are organised into different types, as identified through our research although, in practice, these types often overlap.

**Type 1 VSOs providing access to specific crisis support**

1. **Residential crisis provision**

***Maytree, Finsbury Park, London (residential)***

Source: [**http://www.maytree.org.uk/**](http://www.maytree.org.uk/)

**Service description**

Maytree describes itself as “A Sanctuary for the Suicidal”, and a “Suicide Respite Centre”.

It offers initial contact by phone or email, and then if staff feel it is appropriate, an offer for a four night-five day stay in which staff and volunteers spend up to 77 hours with each individual.

**Who is the service for?**

• There is no area limit.

• Over 18s only

• No alcohol or drugs

• Not for ‘street-homeless’ people

• Not for people experiencing psychosis

**Who provides it?**

Maytree is a solo organisation, founded in 2002. Currently funded by Lottery, Funding Network and Comic Relief, and several commercial companies. No NHS, local authority or other public funding.

**Model and approach**

Self-referral is essential. If contacted by an organisation on someone’s behalf, Maytree would insist on speaking to the person for whom the service is being contacted.

Initial contact by phone or email only – not a drop-in service. An assessment is made in the form of an informal conversation, “which is sometimes almost immediate if the situation demands it”. If a place is offered, the environment is non-clinical and focused on preventing suicide through rest, listening and befriending. No medication is prescribed or administered, although the person’s medication can be stored if requested.

**Care Roles/staffing**

Staff and volunteers. Some staff are trained counsellors and psychotherapists.

**Noteworthy features**

* Self-referral – not gatekept by statutory services and information is not shared with anyone without the user’s permission.
* Offers external training in suicide prevention and emotional first aid, and advice to people concerned about someone who is suicidal.

***Derbyshire Crisis Service (residential)***

Source: <http://www.richmondfellowship.org.uk/derbyshire/derbyshire-crisis-service/>

**Service description**

“Trevayler” is a four bedroomed house in Derby where a short-term mental health residential crisis service is provided. The usual time allowed is 5 – 7 days – in extreme circumstances service users can stay up to 2 weeks. One of the major purposes of the services is to prevent hospital admission.

**Who is the service for**

People aged 18 or over who are experiencing a mental health crisis, covers Derbyshire.

**Who provides it?**

Richmond Fellowship dates back to 1959 and is one of Britain’s largest voluntary sector mental health providers. All funding comes from the four Derbyshire Clinical Commissioning Groups.

**Model and approach**

Recovery-focused support, with skilled practitioners providing psychological therapy, assistance with practical -problem solving, and teaching residents coping strategies and distraction techniques to help them deal with emotional distress. Individuals have a tailored support package based on their needs. Derbyshire Crisis Service is CQC registered and can administer medication, but service users are encouraged to manage medication themselves as soon as they are able.

**Noteworthy features**

Works in co-operation with local NHS services all data is shared with NHS services. “Trevayler” seeks to provide a welcoming environment that is not hospital based. Evaluated in 2015 by Tony Ryan Associates, who concluded the service “meets its aims and objectives”, although some improvements are suggested, including peer support. Over 90% of the twenty people interviewed who had used the service gave a positive response, some saying that the service should be expanded. The Crisis Teams felt that there was effective partnership working in managing both the short and the longer term needs of those using the service, and there was a low level of subsequent hospital admission. Staff who were interviewed gave positive responses about effective working and job satisfaction.

1. **Non-residential crisis provision**

***Leeds Survivor Led Crisis Service, Leeds, West Yorkshire (non- residential)***

Source: <https://www.lslcs.org.uk/>

**Service description**

Leeds Survivor Led Crisis Service (LSLCS) provides a range of services including:

* Connect Helpline open 6pm-2am every night of the year for people living in Leeds. Staffed by volunteers many of whom have their own mental health problems.
* Dial House – 1 to 1 evening support sessions, open 6pm–2am Friday, Saturday, Sunday, Monday and Wednesday evenings.
* Dial House@Touchstone provides out-of-hours crisis services to people from BAME groups in acute mental health crisis, open Tuesday and Thursday evenings from 6pm to 12am.
* Groupwork Sessions – Deaf Support Group (The Tuesday Project: BSL) – Creativity Group – MyTime Thursday Group – BME Men’s Support Group – LGBT + Trans/Non-Binary Group – Coping with Crisis Group – Hearing Voices Group
* Leeds Suicide Bereavement Service
* Well-Bean “Hope in a Crisis” Café

**Who is the service for?**

The service focusses on people at risk of suicide and/or self-harm, and/or people who are survivors of trauma, but deals with people experiencing a range of self-defined crises and/or mental health problems. Access is via self-referral, though the service is well known and local public sector staff will advise people to self-refer.

**Who provides it?**

LSLCS was established in 1999 as a survivor-led alternative to public sector services. Principally local public sector funding, with additional income from consultancy work.

**Model and approach**

LSLCS works in a person-centred, non-medical/non-diagnostic style, stressing the centrality of compassion and humanity. Their service philosophy counters public sector service notions of fostering independence: LSLCS emphasises “inter-dependence”. Medication is viewed as a personal matter for individual visitors/callers. No formal data-sharing protocols, but have links with local public sector services.

**Staffing**

All support staff, and many of the volunteers, are people with personal crisis experience including suicide/self-harm.

**Noteworthy features**

It is run by those who have experienced a crisis themselves and aims to provide the care that they believe, could and should have been provided for them. Much of the work is with survivors of trauma and most commonly sexual abuse. They are particularly successful with those who have been excluded from services or have found it difficult to engage. This can include those with violent histories or those diagnosed with a personality disorder. They have a particular approach to risk management. It can be summarised as trusting people and giving them as much control as possible.

***Solidarity in a Crisis****(****Lambeth, Lewisham and Southwark)*** *(non-* ***residential)***

Source: <https://www.certitude.london/what-we-do/solidarity-in-a-crisis/>

**Service description**

Solidarity in a Crisis supports people in distress by providing out of hours emotional support over the phone and in person. People who call Solidarity in a Crisis are often isolated and have no one else to turn to. The service provides an important support role throughout the weekend when most mental health services are not operating. Monday– Friday: 6.00pm- 12.00am and Saturday & Sunday: 12.00pm – 12.00am.

**Who is the service for?**

For people living within the boroughs of Southwark, Lambeth and Lewisham.

**Who provides it?**

Certitude Support, which provides social care for people with support needs related to mental health problems, learning disabilities and autism. Established in 1990, Certitude covers 12 London boroughs in total.

**Model and approach**

Aims to reduce isolation out of hours, provide support using the empathy and knowledge gained through lived experince and before people reach crisis point. Will guide towards professional support if necessary. Can be referred by themselves or a professional.

**Staffing**

Peer Supporters who receive extensive training and ongoing support from the management team and their peers.

**Noteworthy features**

The service is run by Peer Supporters who have their own experience of facing and overcoming crisis enabling them to offer a very a different kind of mental health service.

**Type 2: Mental health VSOs providing crisis support**

***African Caribbean Community Initiative (ACCI), Wolverhampton***

Source: [www.ACCI.org.uk](http://www.acci.org.uk)

**Service description**

ACCI aim to enhance and where possible improve the quality of life for African Caribbean individuals experiencing or recovering from mental ill health. It provides a wide range of services, which have a role to play in preventing a crisis and/or enabling people to recover. Open 5 days a week, these include:

* Well-being Hub (notional day centre) offers a safe space
* a Resource Centre services,
* Outreach support team
* Activities - cooking (classes held elsewhere)
* Housing advice & information; welfare rights, life skills/ emotional support
* Carers’ support group
* Omari supported housing scheme (23 units across 4 sites in Wolverhampton)
* MH Housing Development Officer who visits people in hospital in preparation for discharge, and to ensure they don’t lose their homes/ tenancies when they stay in hospital. Challenge eviction notices etc.
* Therapeutic & holistic counselling service
* Men’s group, Women’s group
* Health & social care student placements
* Bespoke training for statutory & other providers. Used to offer vocational training; but funding cut.

 **Who is the service for?**

For African Caribbean people, and has regional and national reach.

**Who provides it?**

ACCI is a registered charity started in 1987 by a group of Rastafarian men in Wolverhampton concerned about Black men in the mental health system.

**Model and approach**

ACCI offers holistic & comprehensive support service to those suffering mental illhealth and works in partnership with service users, carers, local authorities, health providers, and local community. ACCI aims to develop, co-ordinate and deliver culturally appropriate and consistently high standards of supported care/advice for members of the African Caribbean community and their families affected by mental ill health. Although the main focus of the support / care offered by ACCI has been mainly directed at African Caribbean’s and their families within the local community, this support is also available to all members of the community.

**Staffing**

Paid staff and volunteers.

**Noteworthy features**

The African ethos of taking responsibility for the care of members of the extended family is one that is central to the ethos held by ACCI. To foster this ethos ACCI addresses everyone connected to the service as ‘members’ of the ACCI ‘family’.

**Type 3: VSOs for a specific population who may be vulnerable to MH crisis**

***SWAN Women’s Centre, Liverpool***

 Source: <http://www.swanwomenscentre.org/>

**Service description**

Provides a wide range of services for women to promote women's mental well-being and support women affected by anxiety, depression, stress or other mental health conditions. These include:

* Counselling
* Outreach
* Befriending
* Support groups
* Counselling
* Peer support
* Complementary therapies (for a fee) including Reflexology, Thai Yoga, Reiki, Tui Na, Body Massage, Indian Head Massage, Hopi Candles etc.

**Who is the service for?**

Based in Liverpool, providing services for women from 14 and over. With a specific service for young women 14-18.

**Who provides it?**

Established in July 1989, SWAN was an organisation that provided information and advice to women on health issues.

**Model and approach**

SWAN aims to promote mental well-being and to empower and support women who experience anxiety, depression, stress and/or isolation according to their individual needs in a holistic way. They recognise and aim to enhance life opportunities for women who are disadvantaged by poverty, mental illness, age or social exclusion.

**Staffing**

Paid staff and volunteers.

**Noteworthy features**

The services provided have developed I response to the needs of local women and become more mentl health focussed.

**Type 4: VSOs for specific social crises and/or life events**

**Freedom from Torture**

**Source:** <https://www.freedomfromtorture.org/>

**Service description**

Freedom from Torture (FFT) provides a wide range of services including specialist psychological therapy and casework to help asylum seekers and refugees who have survived torture and are rebuilding their lives in the UK. FFT also campaigns for change, raises awareness, and influences decision-makers about torture and its impact. FFT has centres in Birmingham, Glasgow, London, Manchester and Newcastle, and a presence in Yorkshire and Humberside.

**Who is the service for?**

FFT provides services for asylum seekers in the UK.

**Who provides it?**

Founded in 1985 as the Medical Foundation for the Care of Victims of Torture by Helen Bamber and Amnesty International Volunteers.

**Model and approach**

FFT’s aim is to help people come to terms with their experience and to enjoy their lives. The services are offered to men, women, children, and young people as well as families and couples. FFT makes it clear that it is not a crisis service.

**Staffing**

Paid staff and volunteers, including doctors, caseworkers, counsellors, legal advisors, physiotherapists, interpreters, therapists, psychotherapists, child and family therapists

and art and music therapists, trainers.

**Noteworthy features**

Providing access to specialist therapeutic help and support to asylum seekers, who might otherwise be unable to access any support. The campaigning role is an fundamental aspect of FFT’s work to change the way in which asylum seekers are treated in the UK.

**Type 5: Community and social organisations providing welfare and social connection**

**Gospel Express Ministries, Birmingham**

**Source: Personal communication,** **gospelexpress@gmail.com**

Founded by Revd. Deborah Harrison, a pastor and a carer established this organisation in 2004 for the BME community in the West Midlands. About 3 years ago, Revd Harrison organised a group of women to come together and discuss their issues, inspired by a gospel song ‘hear the cry’. All the women joined in the song and all cried, as all affected by terrible stories of mental illness, themselves or people they knew. Out of this ‘Hear the Cry ‘conference was born in 2017, offering peer support, and practical help for women who were carers of someone suffering mental distress. The first anniversary conference was held in July 2018, supported by Catalyst 4 Change (Birmingham). They do not receive funding and are reliant on donations, or entrance fees for events.