

Southeast DClinPsych Homelessness Workforce Project

Salomons, Southampton, Surrey, Oxford



Overview

- Context & background
- Structure, logistics and governance
- Developing competencies
- Wider University

The health needs of those sleeping rough



20%

of people seen sleeping rough had **no alcohol, drugs or mental health support needs**

of Soleilhac

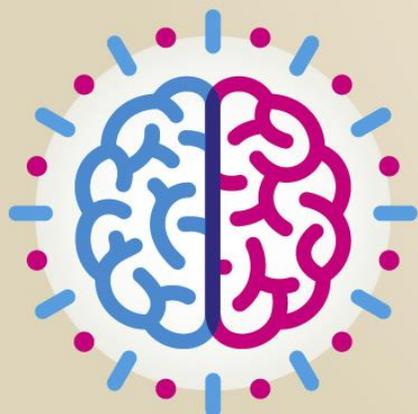
ALCOHOL MISUSE



42%

of people seen sleeping rough had alcohol misuse needs

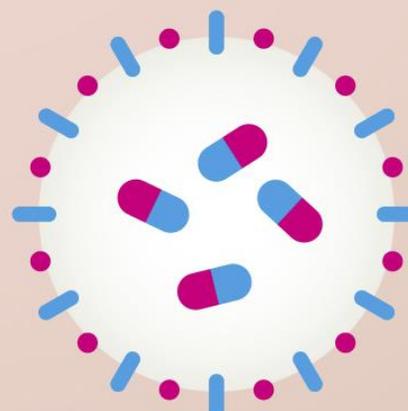
MENTAL HEALTH



50%

of people seen sleeping rough had mental health needs

DRUG MISUSE



41%

of people seen sleeping rough had drug misuse needs

NHSE Project

Southeast DClinPsych Programmes

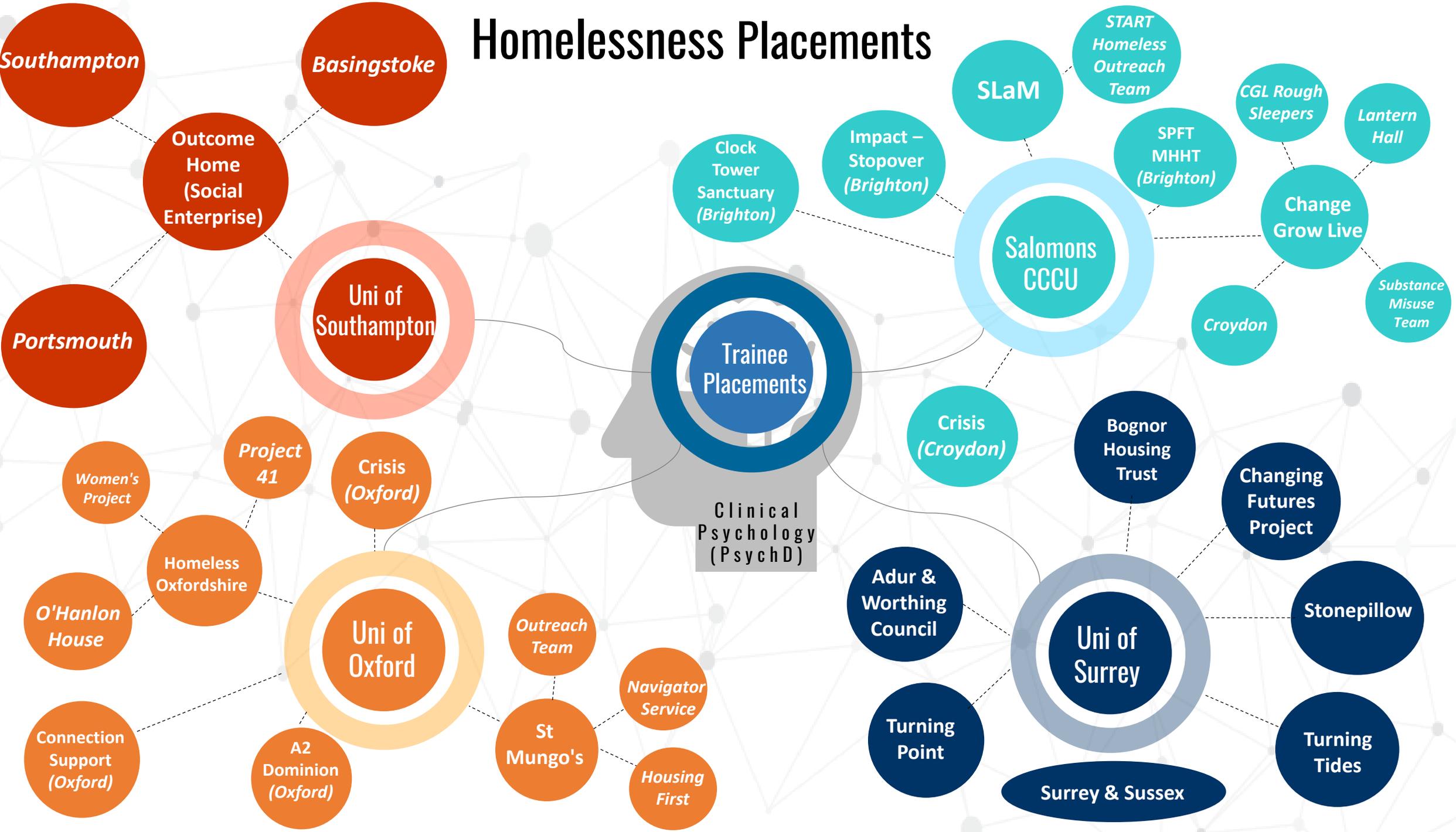
Rationale:

- Lack of mental health practitioners working in the homeless sector, particularly clinical psychologists
- = a high level of unmet mental health need for people who are the most marginalised in our society

Ambition:

- To create systems change through working with clinical psychology programmes and their local services supporting the homeless
- To generate specific interest in those qualifying from DClinPsych programmes to work within the homeless sector
- To identify learning that could be transferred to other programmes and disciplines
- To develop a research infra-structure to support innovative research and a community of practice. See: chrphomeless.co.uk

Homelessness Placements



Placement logistics

Structures and governance

- Across all year groups - which works best?
- Clinical supervision arrangements
- Placement based mentor
- Support from the course
- Managing expectations
- Contracting arrangements including clinical responsibility
- Practical infrastructure - desk, IT, phone, rooms
- Record-keeping
- Management of risk
- Links with academic assignments
- Observation

An aerial photograph of a residential neighborhood featuring numerous brick houses with tiled roofs. The houses are arranged in a dense, somewhat irregular pattern, with some featuring gabled roofs and others with more complex rooflines. The roofs are primarily dark brown or grey, while the brickwork is a warm, reddish-brown color. Some houses have white window frames and doors, and there are small trees and shrubs scattered throughout the yards. A black rectangular box with a white border is overlaid on the right side of the image, containing the text "Developing competencies".

Developing competencies

**The Homelessness Project
PsychD Clinical Psychology Programme
University of Surrey**



UNIVERSITY OF
SURREY

Placement activities varied depending on the context of the charity provision, including:

- Adapted individual work with clients
- Working with staff teams to develop suitable referral criteria and pathways - to be as inclusive and accessible as possible
- Bringing a psychological perspective to team discussions
- Developing bespoke training for staff e.g. trauma informed principles
- Service evaluation projects
- Informal support for staff after an incident
- Inter-agency work to advocate for marginalised clients
- Consulting with team colleagues to support psychological thinking in their client work

Types of Activity

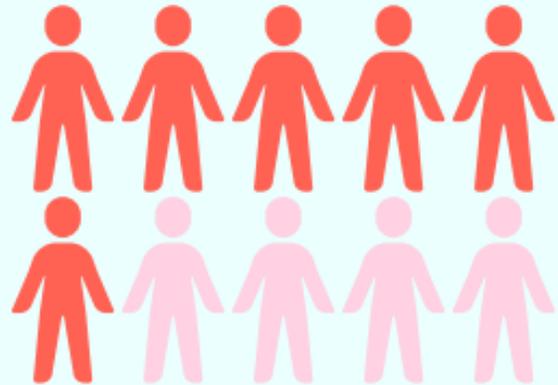


Therapeutic competencies

Reflections on learning from some 1st year trainees:

- Focusing on engagement and the relationship above all else
- Adapting and integrating therapy models before you have learnt the basics
- Learning to tolerate ruptures in therapeutic relationships
- Learning it is OK - and sometimes important - for a client to be angry with you
- Learning to notice what you are avoiding, when and why
- Learning to establish boundaries in a more flexible and person-specific way
e.g. responding to client questions
- The need to manage risk, needs navigating in a new way

From the Southampton evaluation project



6 trainees out of 10 are extremely likely to work in homelessness services in the future

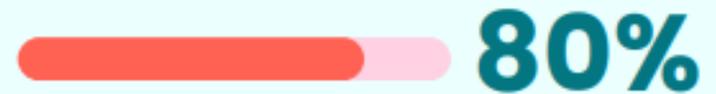


60% of trainees are extremely likely to recommend this placement to others

BPS competencies met

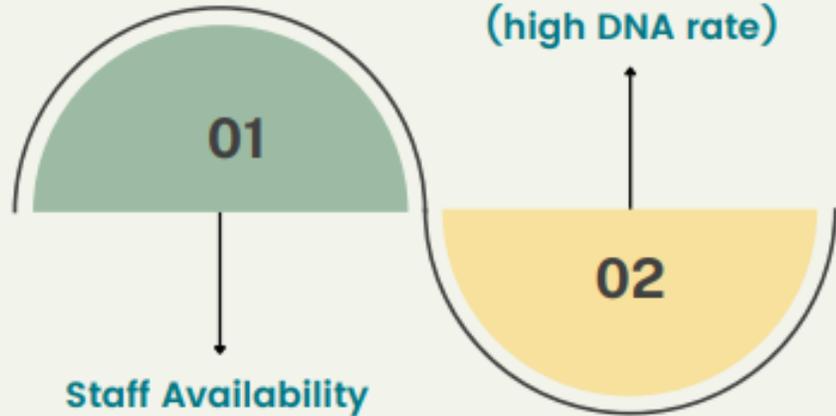


Understanding the impact of differences, diversity and social, health and wealth inequalities on people's lives





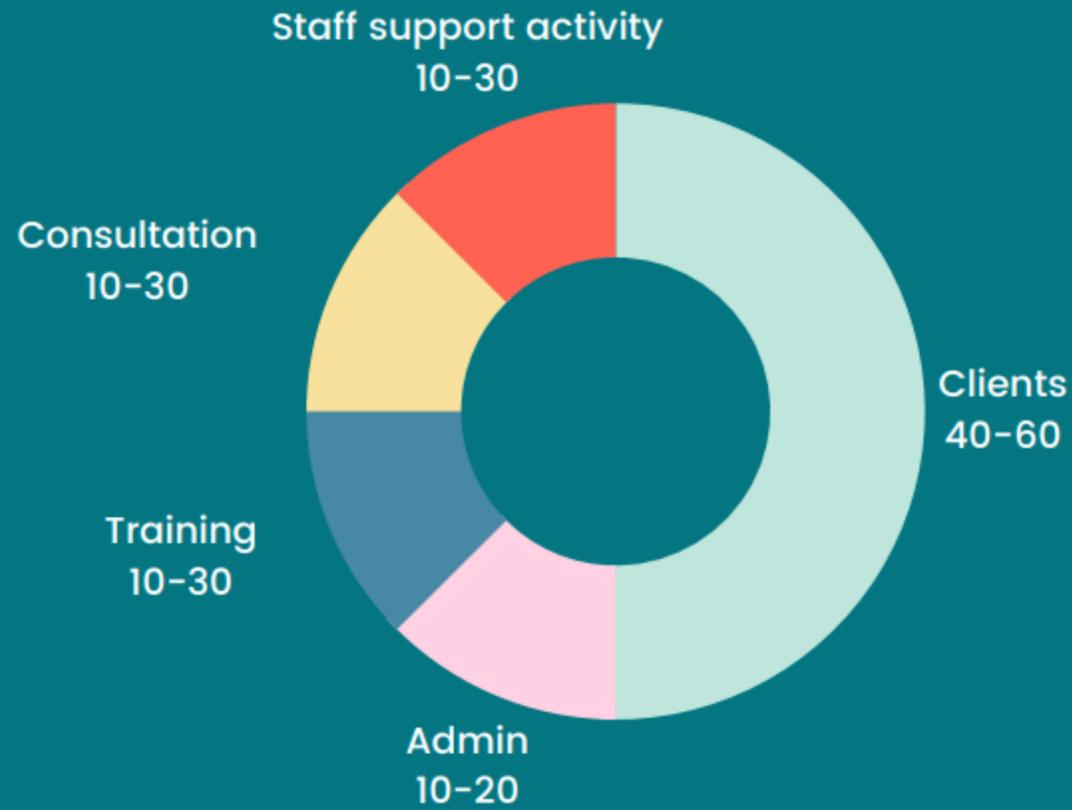
to effective
competency
completion

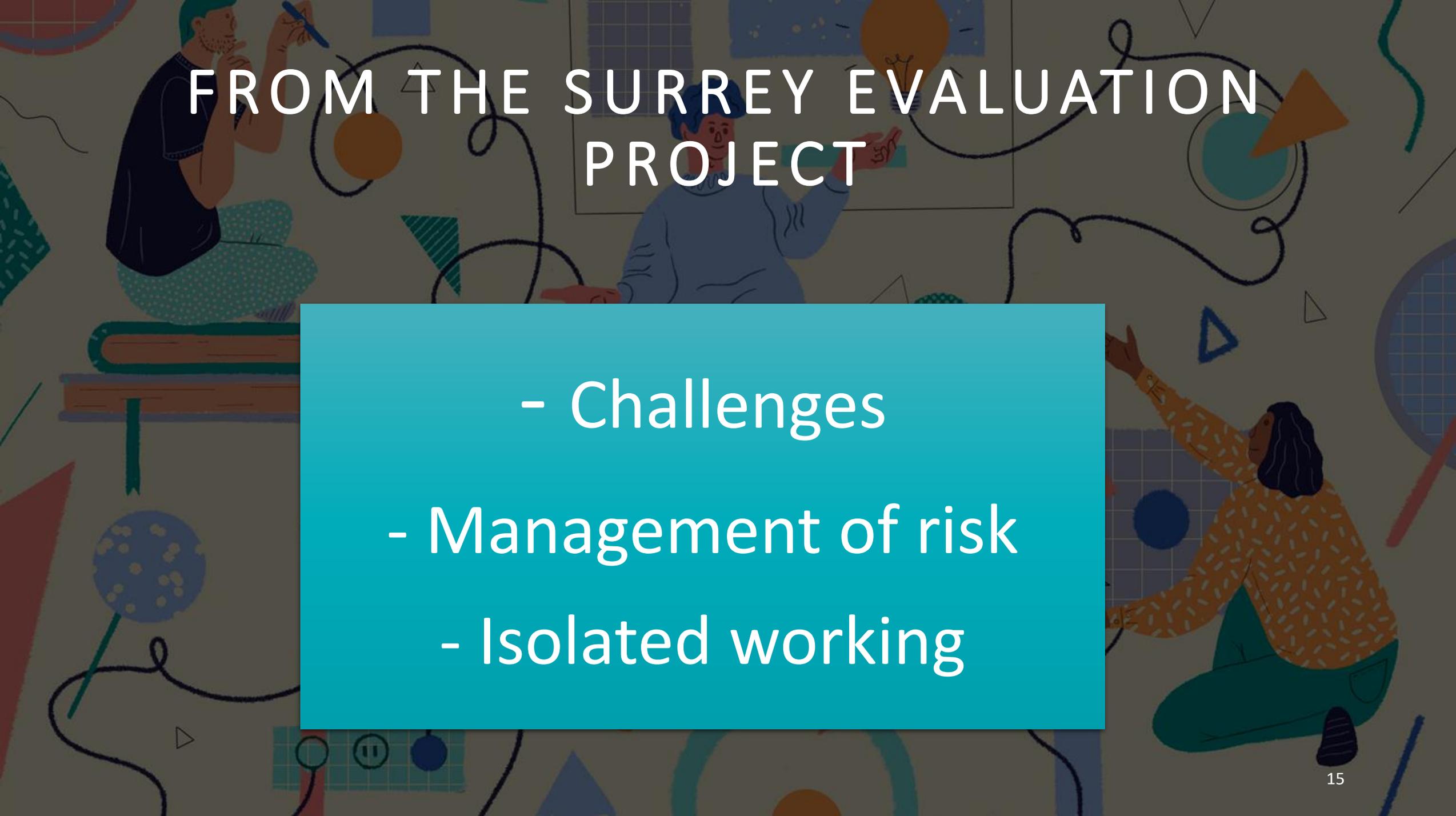


Theories and Models Used

Acceptance and Commitment Therapy (ACT)
Psychological Informed Environments (PIE)
Cognitive Behavioral Therapy (CBT)
Compassion Focused Therapy (CFT)
Dialectical Behavior Therapy (DBT)
Trauma Informed Care (TIC)
Attachment Theories
Systemic Therapy
Schema Therapy
Psychodynamic
Mindfulness

On placement, % of time spent:



The background is a vibrant, abstract illustration. It features several stylized human figures in various poses, suggesting a collaborative and creative environment. One figure on the left is sitting on a stack of books, holding a pen. Another figure in the center is holding a lightbulb, symbolizing an idea. A third figure on the right is reaching upwards. The scene is filled with geometric shapes like circles, triangles, and squares, along with flowing lines and a color palette of teal, orange, and blue. The overall atmosphere is one of intellectual activity and innovation.

FROM THE SURREY EVALUATION PROJECT

- Challenges
- Management of risk
- Isolated working



Questions?