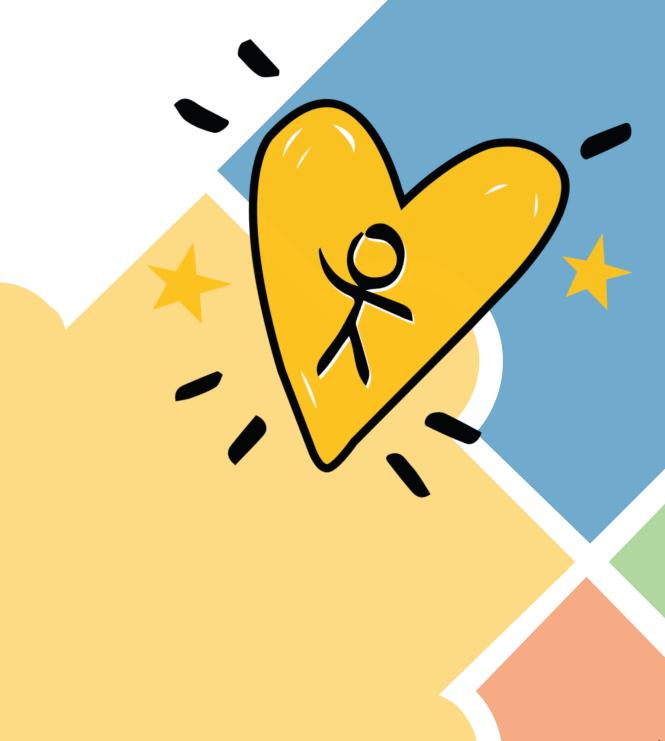


# Adult Community Mental Health and Wellbeing Transformation

Update to Health & Wellbeing Board

Nov 2023

Sara Brine, Head of MH Transformation NHSL ICB Victoria Sleight, Head of Adult Community MH Transformation, LPFT





# WHAT WE WILL TALK ABOUT

- 1. The NHS England Roadmap
- 2. Our Achievements
- 3. Benefits of ACMH Transformation in Lincolnshire
- 4. 'No Wrong Door'
- 5. How We Are Achieving This?
- 6. Mental Health & Wellbeing Community Investment Scheme
- 7. New Roles
- 8. Night Light Cafes and Wellbeing Hubs/Satellites/outreach
- 9. How Are You Lincolnshire?
- 10.Co-Production Network
- 11.Trauma Informed Approach
- 12. What's Next?



Lincolnshire Community Mental Health & Wellbeing Transformation



# The NHSE Roadmap for Adult CMH Transformation





**Trauma Informed and Personalised Care Approaches** - Together we will embed a trauma-informed recovery framework.



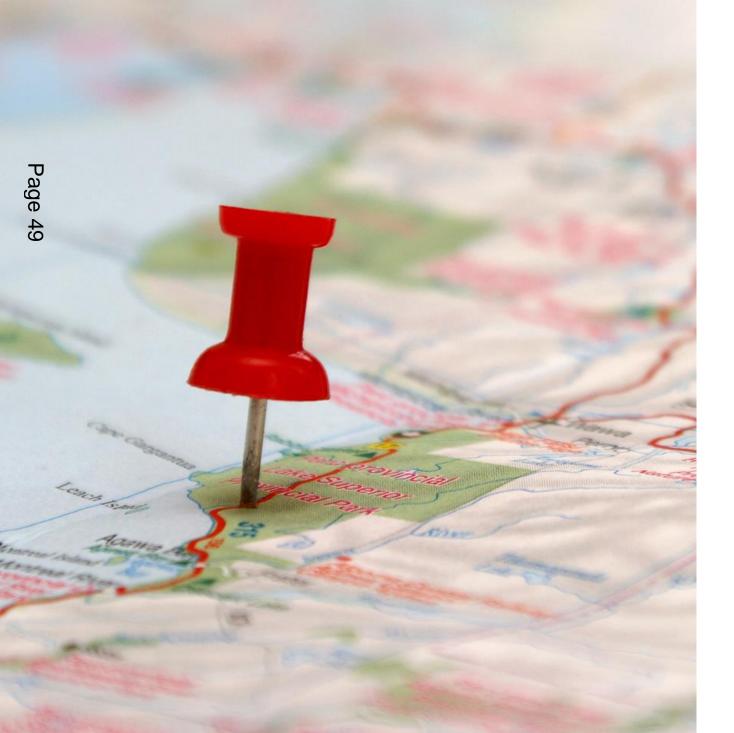
**Improved Access to Psychological Therapies** – increase access to evidence based psychological interventions such as CBT, DBT, CAT, SCM and we need to work in a person-centered way.



No wrong door approach means no rejected referrals recorded - Together we will ensure that a continuum of care is fully implemented.



**Commissioning and partnership working with VCSE services** – Invest in innovative and sustainable projects within local communities that support mental health, commissioning non-clinical staff via VCSE to create multidisciplinary teams within PCN areas.



# Roadmap Summary - Lincolnshire ICS Progress - May 23

Model development		Care provision		Workforce		Data					8 NO	IHS	
Joint governance with ICB oversight <sup>1</sup>	In place and effective	"Must have" services <sup>3</sup> commissioned at PCN level tailored for SMI <sup>7</sup>	CMHT now all aligned to PCN footprints	Recruitment in line with indicative 22/23 MH workforce profile	Remains a challenge	Record access data from new model (inc. primary, secondary and VCS orgs)	Able to report activity	CEN / 'persona disorde	lity	Community rehab		Eating disorders <sup>6</sup>	
Model design coproduced with service users, carers & communities	Co- production evident at all levels of governance	"Additional" services <sup>4</sup> commissioned at PCN level tailored	VCSe offer integrated with Secondary	Expand MHP ARRS roles in primary care	Yes - continuing to recruit	Interoperable standards for personalised and co- produced care	Using IROC as a mechanism, (albeit not	Specialist Team in	onsultation, s n place –	to core model: increased access support, supervision and training		to core model	
	governance	for SMI <sup>7</sup> Improved access	care	20/00		planning	mandated)	starting to understand the CMHT role / no PC offer		res		County-wide service in place	
Integration with primary care with access to the model at PCN level <sup>2</sup>	Roll out in line with milestones	to evidence- based psychological therapies	Utilising some of the new roles to expand	Staff accessing national training to deliver psychological therapies	Some MHWPs being used	Routine collection of PROMs using nationally recommended tools	Using all 3 PROMS, utilising IROC, inpatient and VCSE	Strong EBE repre		y experience in serv Yes	vice developr	oment and delivery Yes	
Commissioning and partnership working with range of VCSE	Strong VCSE partnership / commissioin ing	No wrong door approach means no rejected referrals recorded	MDT approach in progress	Multi-disciplinary place-based model <sup>6</sup> in place	In place	Waiting time measured for CMH services (core & dedicated focus areas)	In progress	Trauma-specific support, drawing on VCSE provision	In place	Ensure a strong MDT approach <sup>5</sup>	In place	No barriers to access e.g. BMI or weight thresholds	Thresholds in place
Integration with Local Authority services	Representat	Tailored offer for young adults and older adults	Commencing PHM approach, EBE older	Staff retention and well-being initiatives	Well being hubs in place	Interoperability for activity from primary, secondary and VCSE	In good progress	Co-produced model of care in place to support a diverse group	In place	Clear milestones are in place to reduce reliance on inpatient	Yes	Early intervention model (e.g. FREED) embedded Clear arrangements in	Champ on in place In progre PC lear
~67% PCN	All 15	Principles for	adults, Uni population HI workstream,	Dedicated resource to support full range	Co- production	Impact on advancing	Trust BI dashboard,	of users		provision  Co-produced care and support	EBE	place with primary care to for medical monitoring	& Strateg
coverage for transformed model	PCN's flowing data	advancing equalities embedded in care provision	PHM profiles - inform planning, WE statements	of lived experience input	network in place	equalities monitored in routine data collection	PHM approach			planning is undertaken	in team	Support across spectrum of severity and type of ED diagnoses	In progre
Shift away from CPA towards personalised care	Implementing HOPE toolkit – launch July	Support for co- occurring physical needs & substance use	Dual Diagnosis workstream in place, embedded in locality teams	Place-based co- location approaches	Working in a co- located way			244		Supported housing strategy delivered in partnership with LAs	report w orking in partners hip	Joint working with CYP ED services including transitions	In progre
Alignment of nodel with IAPT, CYP & perinatal	Focusing on transitions, Peer Support and grants for VCSE	Trauma- informed & personalised care	In place				5					Accept self- referrals, VCS referrals and Primary Care referrals.	No self referral a present



# What have we achieved to date?

Started in 2019 as an early implementer site

# Guiding documents:

- NHS Long Term Plan for Mental Health
- Mental Health Implementation Plan
- The Community Mental Health Framework for Adults and Older Adults
- NHSE Roadmap for community transformation

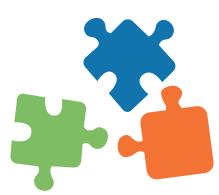




# As at November 2023 we have in place:

- A Transformation team in post including Lead roles, Programme Managers, 3 project officers, comms and engagement leads, BI
  and Digital leads, working with finance and LA/VCSE/PC colleagues
- Primary care strategic lead for the CMH programme and 14 PCN MH Champions in place; AED Primary Care lead role in place.
- Multi-organisational Programme Steering Group, includes members with lived experience, sub-groups and regular reporting structure up to MHDLDA Alliance
- 12 Local Project Teams and 9 Partnership Groups covering the 14 PCN areas developing locally focussed Mental Health and Wellbeing Transformation improvements
- 28/15 Wellbeing hubs with 19 satellite sites and 32 'roving outreach' alongside in place/being developed. 15 WTE community connectors (and a Community Connector Partnerships Lead now in place) connecting people to their communities including a range of initiatives and projects at a local level
- 23 Mental Health Social Prescribing Link Workers, working in alignment with PCN SPLWs
- 14 Peer Support Workers (12 employed by Shine Lincolnshire and 2 in the Recovery College,
- 25 Night Light Cafes across Lincolnshire working together through network arrangements led by the Acts Trust
- A Mental Health co-production network
- £1m invested per annum by the NHS plus £370k p.a. by the Local Authority working together via Shine Lincolnshire to offer the VCSE Mental Health and wellbeing community investment (which includes 3 year sustainability and 1 year innovation funding grants) to build community assets across Lincolnshire
- £152k p.a. invested in the VCSE via grants administered by Shine Lincolnshire to support Suicide Prevention Projects linking to the suicide prevention strategy





- 22 Mental Health Practitioners in PCNs (13/14 PCNs now have at least 1 Practitioner)
- 2 university night worker posts recruited to (1 at Lincoln Uni and 1 at BGU) Lincoln Uni also investing in a second post part of our 'crisis alternatives' offer
- Investment in the Homeless community in Lincoln via the HHH Team and advocacy services through Development Plus
- A new suicide bereavement service run by Amparo to provide a 'listening ear' to those recently or historically bereaved by suicide, including practical support and counselling services this is also part of our suicide prevention offer.
- A new service navigation tool, co-created with people with lived experience and working with CPFT —see:

  www.haylincolnshire.co.uk

  HAY Plus is under development which will provide a specific area for professional to gain access to resources and further information about the programmes of work.
- <sup>™</sup>PCN based population mental health profiles across Lincolnshire each PCN covered.
- Each community MH Team beginning to work in 12 localities, moved away from CPA to Trauma Informed Care and embedding I-ROC across all teams
- Training offer available to all who want to access it across Lincs see <a href="https://www.itsallaboutpeople.info/mental-health-transformation/training">https://www.itsallaboutpeople.info/mental-health-transformation/training</a>
- Resources: 'Leave behind' and Professionals' support card available see: <a href="https://www.itsallaboutpeople.info/resources/useful-resources">https://www.itsallaboutpeople.info/resources/useful-resources</a>
- Digital Kiosks are under development within community wellbeing hubs
- 'Together we will' statements developed through engagement across a huge range of people including those with lived experience and workforce







No wrong door: a vision for mental health, autism and learning disability services in 2032

NHS Confederation & The Centre for Mental Health describes 10 interconnecting themes, all of which are applicable, but specifically:



**Prevention** – protecting and promoting our mental health through every stage of our lives.



**Early Intervention** - Services will meet people where they are at, including online, at school, and in community spaces where they feel comfortable.



**Access to quality, compassionate care** - People will be able to present at any point in the system – from pharmacies, advisory services and community groups to education, social services, the criminal justice system and primary care – and get the right support.



# Ten year Vision

By 2032...

... services will not wait until someone is in crisis to offer help. Instead, early intervention will be the norm, with support front-loaded at an early stage to prevent more serious difficulties developing later on.

... MHLDA services will see the big picture as they support people to live their lives. People will get support with what matters most to them and services will help people with money, work and housing — with a package of support that is not limited to 'healthcare' per se.

MHLDA services will be proactive in addressing structural inequalities and injustices. They will understand and challenge the intersecting inequalities that underpin the unequal risks of poor wellbeing and the subsequent inequities in access to support, experiences of services, and outcomes achieved.

... service users will be reaping the benefits of a major investment in community support.

... services at all levels will be holding the outcomes that matter to service users as their lodestar. They will be able to measure these outcomes and be held to account for them. The system will no longer be driven by the outputs that matter to institutions, but by the outcomes that matter to people.

Prevention

**Early Intervention** 

Access to quality, compassionate Care

Seeing the bigger picture

Whole person care

**Equality focus** 

Co-production

Autonomy, human rights
& community support

A Stronger Workforce

Outcomes that matter

... greater effort will be made to protect and promote our mental health throughout every stage of life and to ensure autistic people and people with LD are properly supported to have fulfilling and independent lives. Services will take a systematic 'population health' approach to reducing the social and economic risk factors for poor mental health and boosting protective factors in individuals, families and communities.

... there will be no wrong door for anyone seeking support for mental health, autism and learning disability needs.

... services will support people with their physical and mental health and social needs together. Services will treat people as a whole person, being mindful and respectful of their needs, assets, wishes and goals.

... there will have been a shift in the power imbalance between people who use mental health, autism and learning disability services and the organisations that provide them. Coproduction as an equal partnership will be the norm in the design, development and delivery of services.

... there is a thriving workforce of clinicians, mental health professionals, allied professions, multidisciplinary teams and diverse experts.



- What does this look like for Lincolnshire?
- □ Can we challenge ourselves to see how we can transform services to attain the No Wrong Door vision by 2032 (or sooner)?
   □ How are we going to
- How are we going to measure this to know when we get there?

https://www.nhsconfed.org/publications/no-wrong-door



**Relationships** – continue to embed trusting, progressive, systemic relationships.

Investment into VCSE - more collaborative, targeted commissioning, enabling innovation and development.

**How Are You Lincolnshire?** – web-based service directory to ease access to local support and prevent isolation.

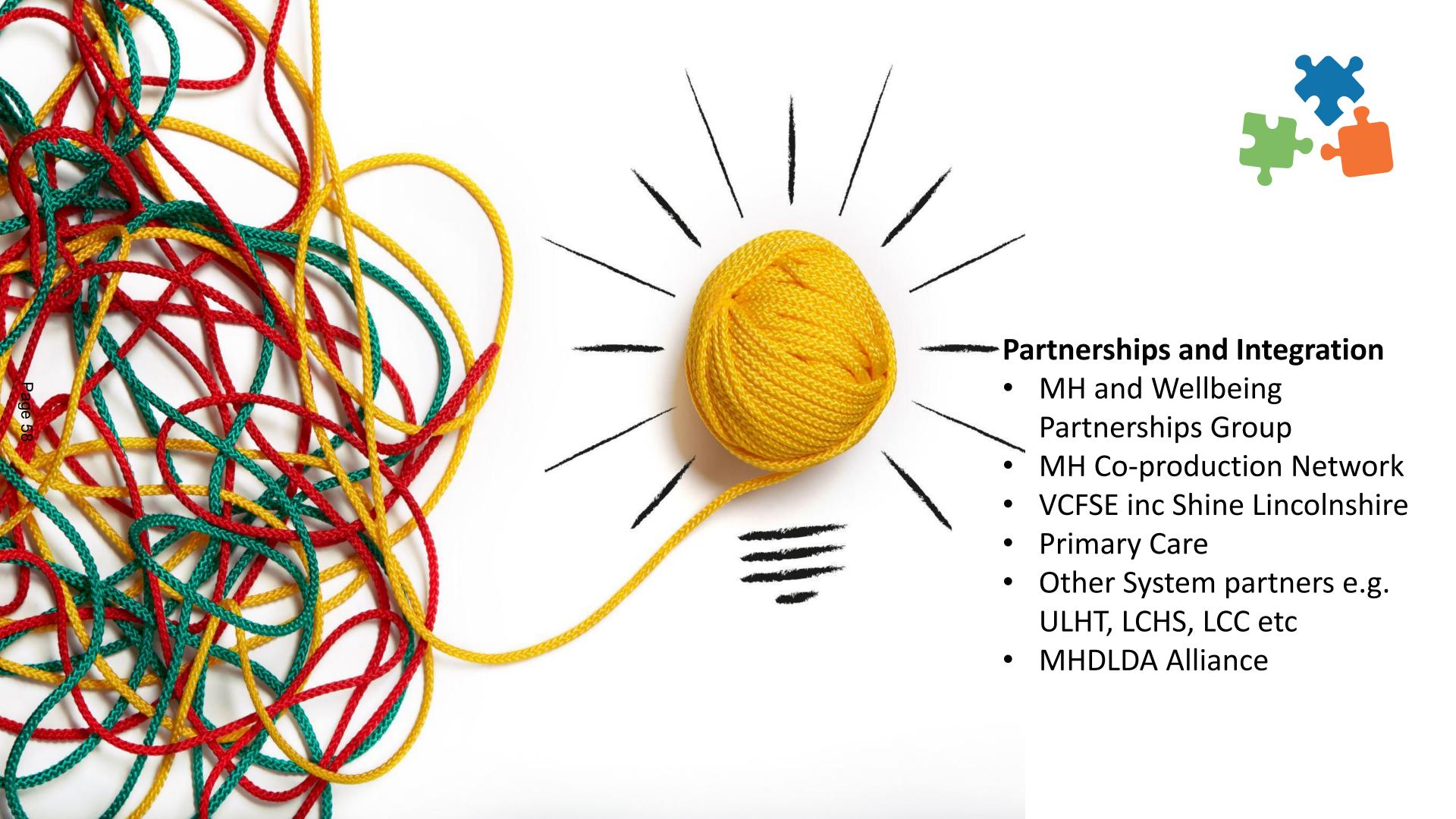
**Evidence** – utilise MH Population Health profiles to address Health Inequalities

**Training** – further develop and upskill a diverse workforce.

**Psychological Interventions** - provide the backbone to specific pathways and enable risk to be shared. Continue to develop and embed psychologically-led pathways at a locality level.

Co-Production – continue to involve Experts By Experience. Do with me, not to me.

**Trauma-Informed Practice** – evolve demonstrable outcomes aligned to TIC values.



# Mental Health & Wellbeing Community Investment Fund (MHWCIF)

- Sustainable, Systemic Investment fund of c.£1.5 million for VCSE around MH&WB initiatives across the county.
- Innovative and seeking to support best return on investment for all.
- Pioneering in its commitment to Support, Growth and Innovation of the Lincolnshire VCSE sector from grass roots to larger organisations.
- Acknowledges the rich tapestry of complexity within the VCSE in response to Population Health through utilisation of integrated Population Profiles.
- Ensures that funding is aligned to clear objectives, doesn't duplicate other funding streams and benefits the Lincolnshire Population which it serves.
- Able to flow data from VCSE organisations to a national database (MHSDS Data) to demonstrate impact.







# Mental Health & Wellbeing Community Investment Scheme (MHWCIF)

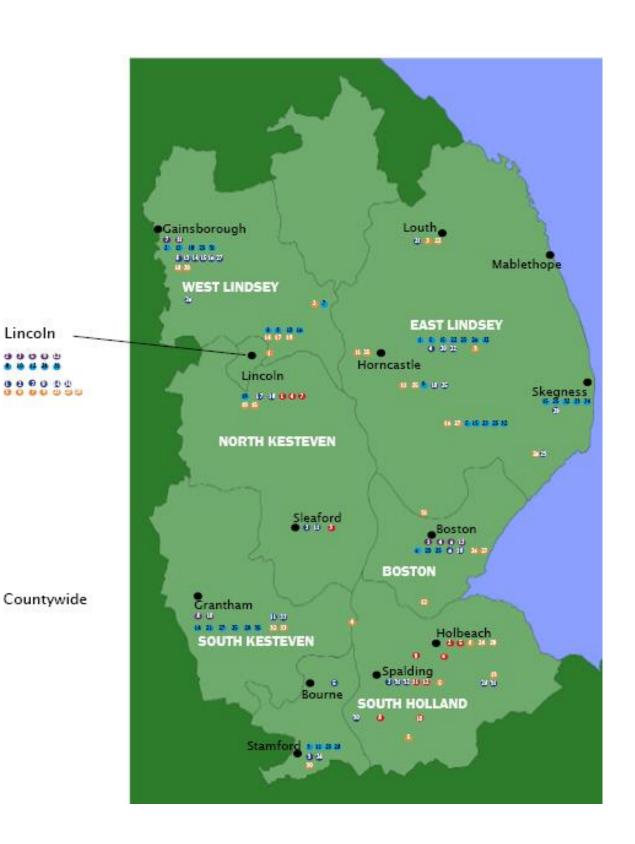




Organisations are supported by Shine beyond their funded project.

Full support is available including but not limited to:

- funding applications
- Policies & procedures
- project implementation
- Marketing
- reporting & data
- unexpected challenges & issues



# **Impact**

One £10,000 Investment reported:

- An additional 437 hours of support for 49 Individuals
- 313 x 20 mins telephone calls
- 18 staff accessed training with 8 undertaking accredited modules in Mental Health, Autism & Dementia
- Enabled a flexible, person-centred approach
- Increased awareness of the organisation

# Investment into VCSE organisations supports the individual but also:

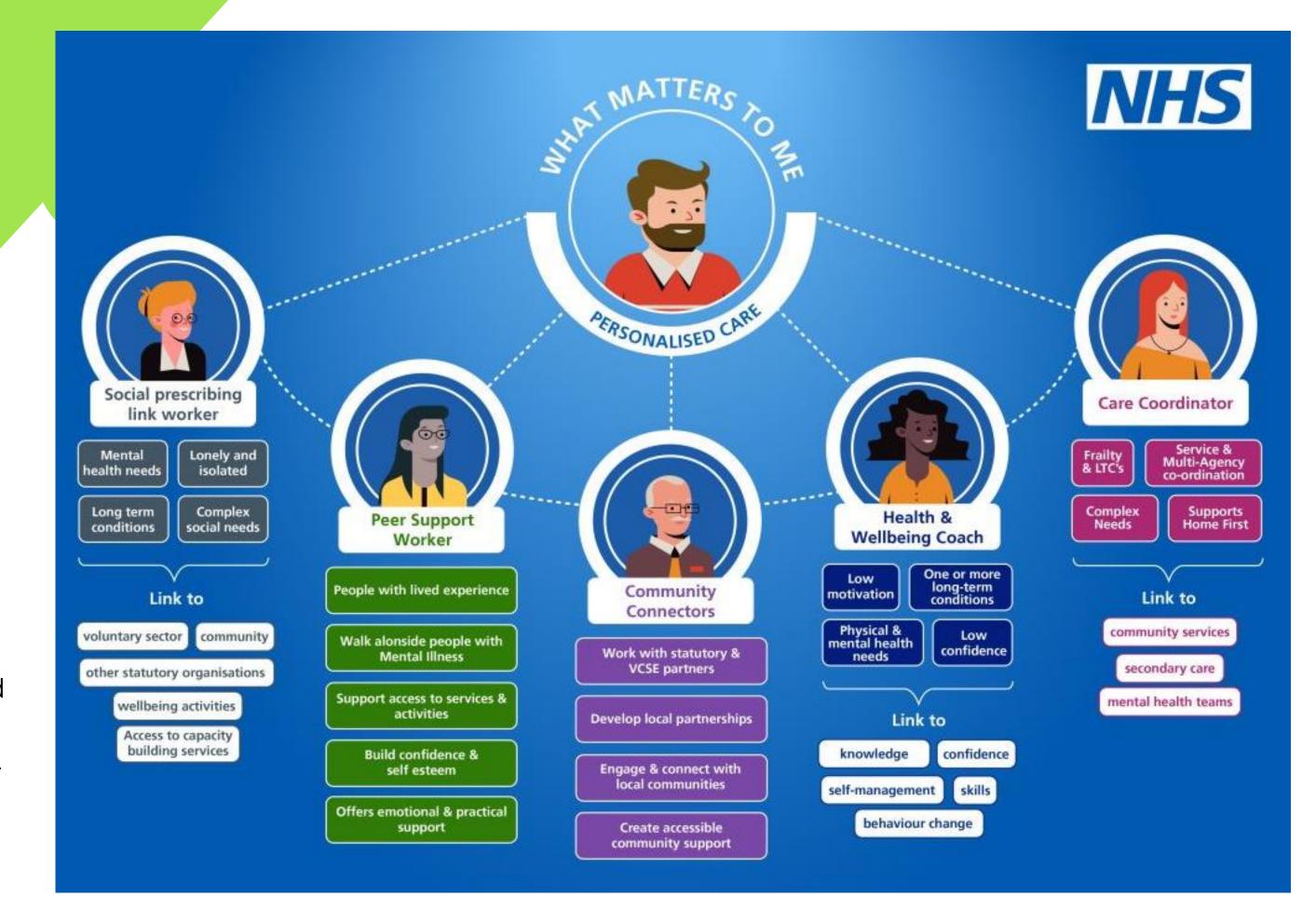
- Increases local volunteer & employment opportunities
- Raises awareness of small grassroot organisations and their local offer
- Increasing local capacity
- Aides with growth & sustainability for the organisations
- Builds trust, working towards stronger cohesive communities



Page

Lincolnshire Community Mental Health & Wellbeing Transformation

These roles are some of those we have funded and embedded in the locality mental health teams across the county.. We have also invested in a range of clinical roles such as MH Practitioners in Primary care., where funding is split between PCNs and LPFT.



# Night Light Cafés



## **h** LINCOLN:

Alive Central, Newland, Lincoln
Bailgate Methodist Church, Bailgate, Lincoln
Boultham Breakthrough Centre, Lincoln
Bridge Central, Lincoln
Energize Youth Centre, Birchwood, Lincoln

St Giles Methodist Church, Lincoln St John the Baptist Church, Ermine

St John the Evangelist's Church, Bracebridge Heath, Lincoln

The Salt House, Lincoln

Pilot – Twilight café for YP, Bridge Central

## **COUNTYWIDE:**

Day Care Centre, The Wong, Horncastle

Don't Lose Hope, Bourne

Gainsborough Trinity Foundation, Gainsborough

Mindspace, Stamford

New Life Centre, Spilsby

Overboard Church, Mablethorpe

Riverside Church, Sleaford

St Mary's Church, Long Sutton

Skegness Day Service, 40 Algitha Rd, Skegness

South Lincs Blind Society, Grantham

Tonic Health, Broadgate House, Spalding

Tonic Health, Holbeach

Trinity Centre, Louth

Centenary Church, Boston

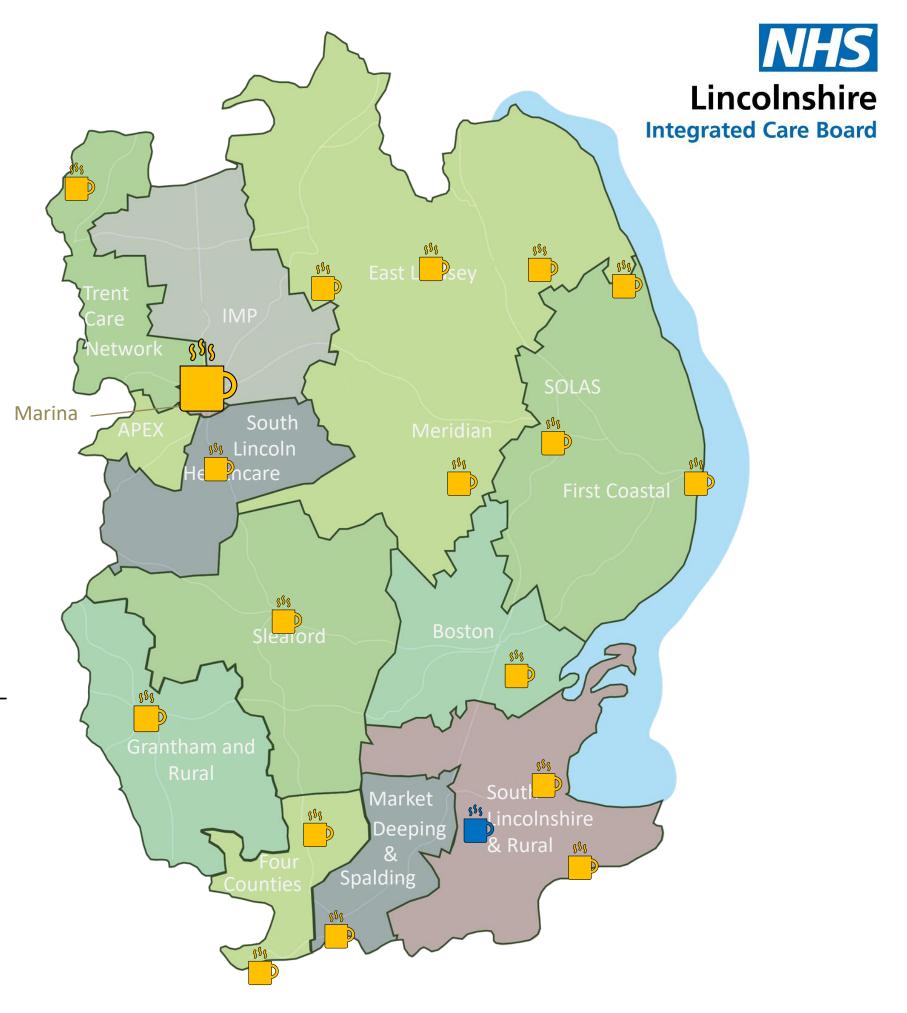
The Storehouse, Alford

New Life Church, Market Rasen



# Night Light Cafés in development

Sutton St James, TBC
Bishop Grosseteste University, Lincoln –
just opened September 2023



# Wellbeing Hub Offer - East



# Wellbeing Hubs

Boston – Centenary, Boston

First Coastal

Coast – Storehouse, Skegness/CLIP Mablethorpe

Rural – The New Life Centre, Spilsby

Meridian - Louth Trinity Centre

East Lindsey - Horncastle



### Satellites

### Boston

Safe Spaces (Boston Community Hall)

Black Sluice, Wyberton

Kirton

# East Lindsey

Caistor

Market Rasen

### Meridian

Woodhall Spa



# Roving Outreach

### Boston

Swineshead - TBC

## First Coastal

Coast – Chapel St Leonards

Sutton on Sea

Ingoldmells

Rural - Alford

Stickney

Wainfleet

Bratoft

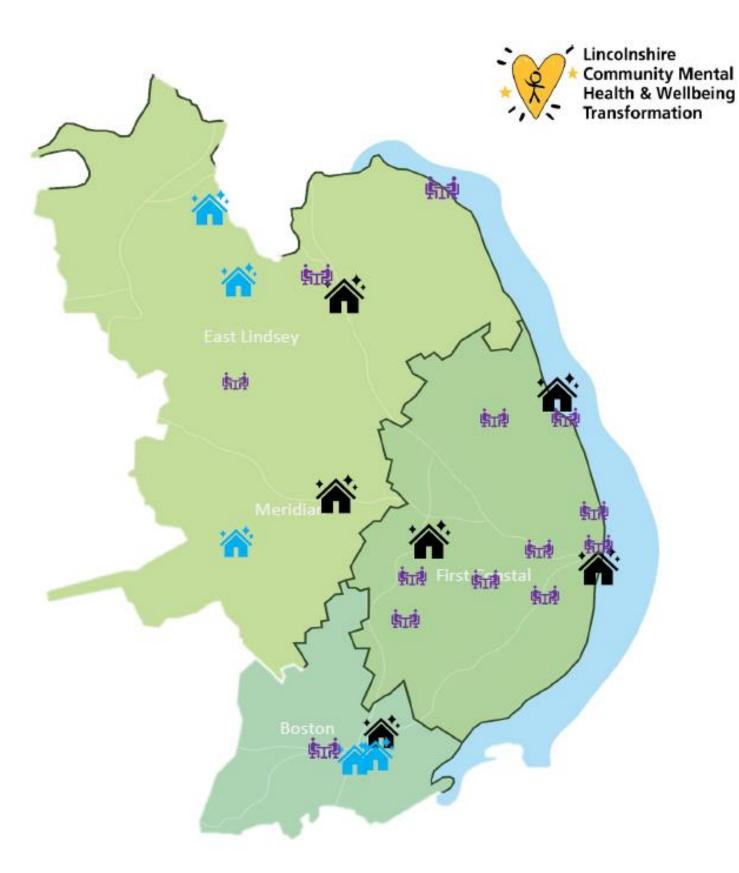
Keel

# **East Lindsey**

Binbrook

North Somercoates

Wragby



# Wellbeing Hub Offer - South





# Wellbeing Hubs

Grantham & Rural – Beehive Centre, Grantham
Four Counties – Mindspace, Stamford
K2 Healthcare Sleaford - South Lincs Church, Ruskington
South Lincs & Rural – Wellbeing Hub, Holbeach
Spalding – Broadgate House Wellbeing Hub, Spalding



### Satellites

K2 Healthcare Sleaford

Sleaford

**Four Counties** 

Bourne

South Lincs & Rural

TBC



## **Roving Outreach**

### Grantham & Rural

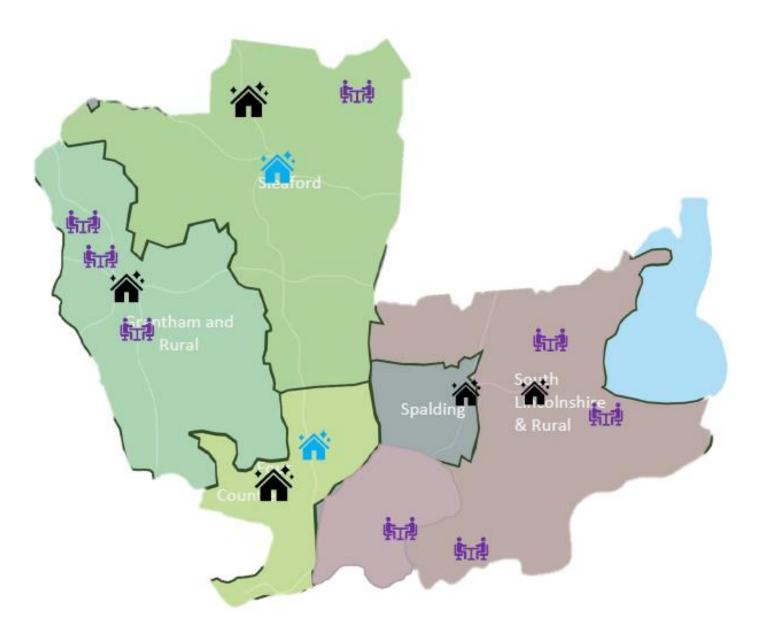
Allington Colsterworth Long Bennington

# **K2** Healthcare Sleaford

Billinghay

### South Lincs & Rural

Market Deeping
Crowland
Sutterton
Long Sutton/Sutton Bridge



# Wellbeing Hub Offer - West





## Wellbeing Hubs

Trent Network – The Bridge On The Bridge
Lincoln City & North - Bridge Central
South Lincoln Healthcare - St Michael's Church
Waddington



### Satellites:

### Trent Network

Gainsborough Uphill Community Centre Riverside Saxilby

# Lincoln City

Birchwood Life Church Bridge Community Hub (Newark Road)

### IMP

Ermine Library BGU St Giles

### South Lincoln Healthcare

Leadenham Welbourne



# Roving Outreach Trent Network

TBC

# **Lincoln City**

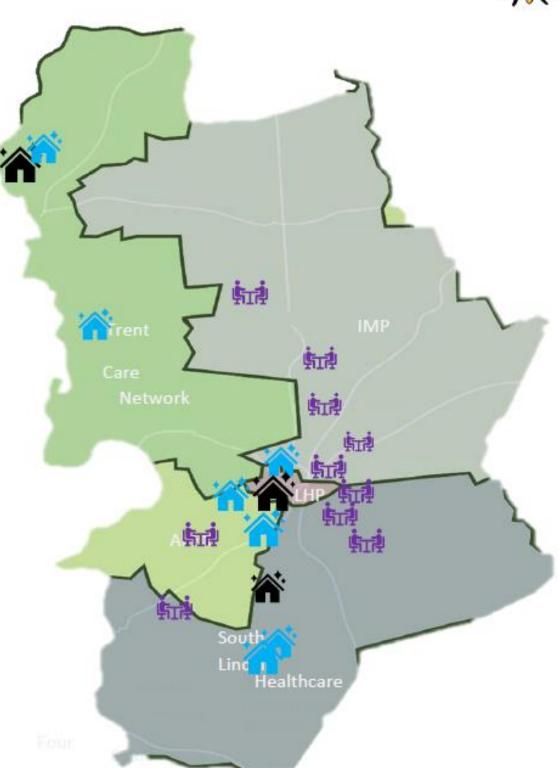
Boultham Park Moorlands

### IMP

Nettleham
Fiskerton
Welton
Ingham
Cherry Willingham

### South Lincoln Healthcare

Witham St Hughs Branston Metheringham (Ex Military) Washingborough





# How Are You Lincolnshire? www.haylincolnshire.co.uk



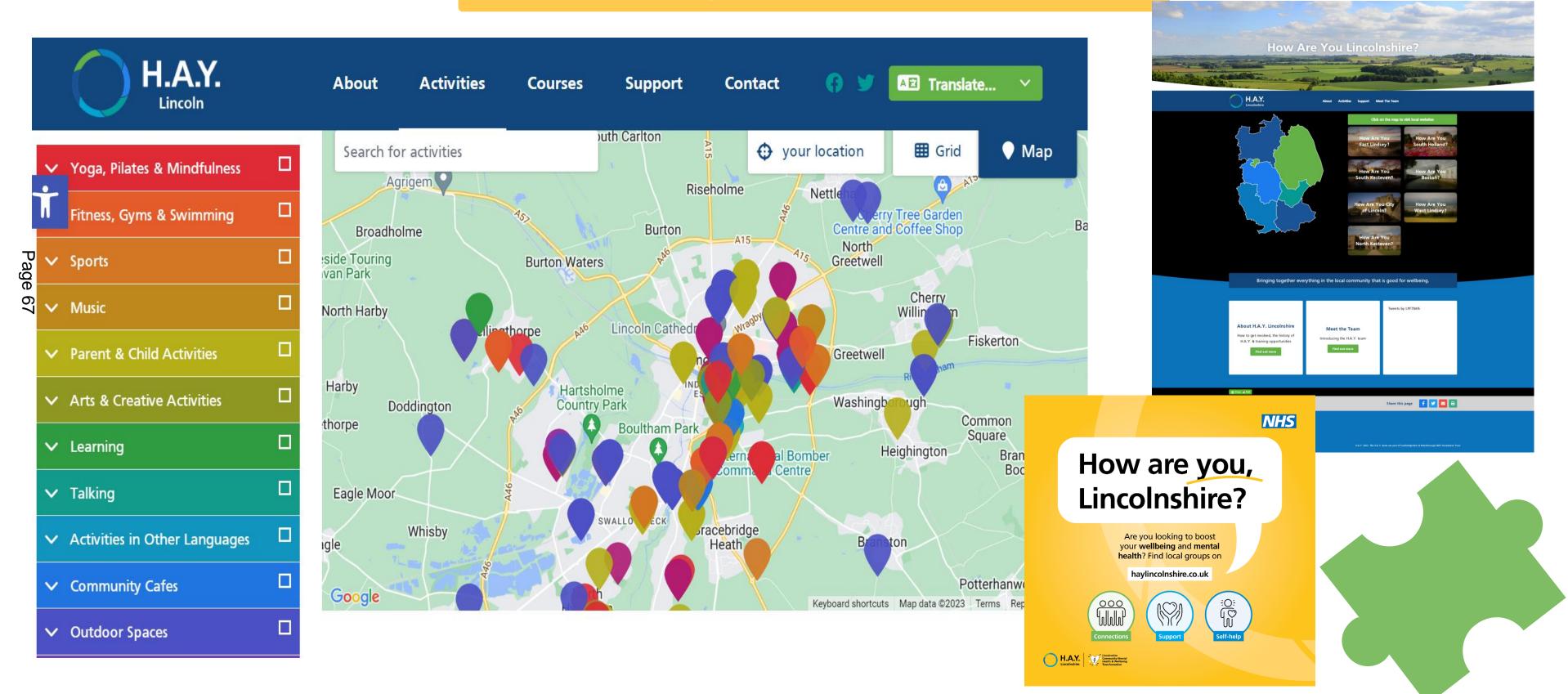
- Co-Produced, localised service navigation tool which enables easy access for all people seeking mental health and wellbeing support.
- Works in collaboration with Connect to Support Lincolnshire and other locally held VCSE directories to share information and ensure choice and empowerment for the individual at a community level.
- Supports the navigation of people back into their communities from the MH Matters Helpline and provides a valuable resource for all professionals such as GPs/MH Practitioners/Social Prescribers/Peer Support Workers.
- Maintained by our Community Connectors supporting the further development of networks and local intelligence as well as ensuring consistent messaging around prevention and self-efficacy.
- Able to analyse website traffic and help inform future decisions around need, funding and population health profiles.





# How Are You Lincolnshire? www.haylincolnshire.co.uk





Lincolnshire **Community Mental Health & Wellbeing Transformation** 

> **Night Light** Café



**Bridge Café** Community Hub



University Wellbeing Hub



www.studentservices.lincoln.ac.uk/ health-and-wellbeing





www.lincolnshire.icb.nhs.uk/about-us/our-gp-members/

Debt management -CAB



**Mental Health** Matters Helpline



0800 001 4331

Lincolnshire

HAY





www.voluntarycentreservices.org.uk/ social-prescribing

**Your Wellbeing Matters** 

A local guide to support your wellbeing

Lincolnshire **Talking Therapies** 



www.haylincolnshire.co.uk

www.lincolnshiretalkingtherapies .nhs.uk

Recovery College



www.lpft.nhs.uk/our-services/adults/recovery-college

Lincolnshire Wellbeing Service



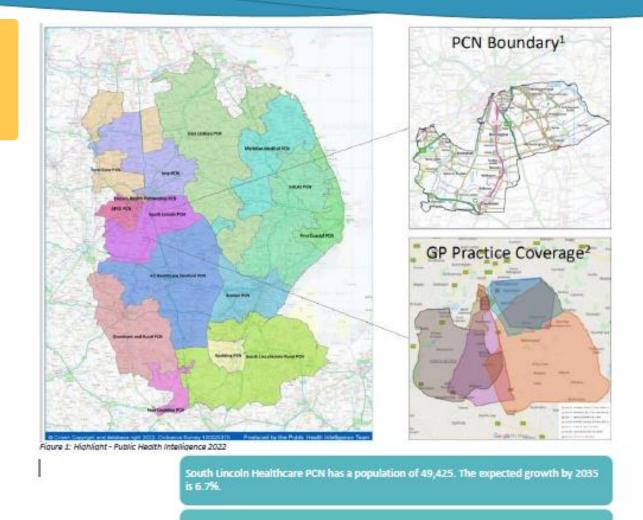
www.lincolnshire.gov.uk/wellbeing service



# **MH Population Profiles**

- Evidence base to ensure that we are funding in the right way
- Ensures that we are able to address Health Inequalities at a locality level
- Developing a Health inequalities workstream using a PHM approach.
- Enables systemic working within communities
- Working with NHSE to lead and support other areas to develop

## SLH Mental Health PCN Profile



Higher percentage of older people and lower deprivation indicators than the Lincoln average

Crime rates in South Lincoln Healthcare (6,422 per 100k) are lower than Lincolnshire
(8,740 per 100k). The proportion of Unemployed (3,8%) is lower than Lincolnshire (4,2%).

outh Lincoln Healthcare has higher life expectancy (81.9 years) than Lincolnshire (81. years). Premature mortality is lower in South Lincoln (305.5 per 100k) than Lincolnshir 325.6 per 100k)





overview



# Training

- Responding to a need and working together to support everyone to understand more about Mental Health and Wellbeing
- Designed collaboratively by colleagues and Experts by Experience drawn from across Lincolnshire
- Ensuring that we are supporting our workforce to upskill in psychological interventions and develop both themselves and the services which they are delivering
- Easier and accessible online resources to support professionals when working with people who are experiencing mental health difficulties.

https://www.itsallaboutpeople.info/mental-health-transformation/training/emotions-and-boundaries

# For all professionals in Lincolnshire



### FREE ONLINE TRAINING:

- Together We Can Working with people in distressing situations, Emotions & Boundaries
- Personalisation Training
- Suicide Awareness & Prevention Training

If you work with mental health clients and/or have a further interest



# **AVAILABLE FOR YOU:**

- Mental Health First Aid\* (£)
- Children's Mental Health Awareness
- Suicide Prevention Safe Talk/Assist\* (£)
- LPFT <u>Recovery College courses\*</u>

# Psychological Interventions across ALL pathways

- Work in a person-centred way and provide the backbone to everything that we deliver
- Reduce Social Isolation
- Increase Social Prescribing Opportunities at a local level
- Manage risk together safely and proactively
- Create community strength-based assets that respond to our local population
- Continue to develop Crisis Alternatives that are securely linked to psychologically informed pathways









# **Co-Production Network**

- Lincolnshire has developed a jointly facilitated Mental Health Co-Production Network that embeds Experts by Experience across everything that we do
- Experts by Experience are involved in all MHWCIF funding panels
- Experts by Experience use and volunteer in our Community Assets
- Experts by Experience make up part of our workforce through the roles of Peer Support Workers
- Experts by Experience help our wider workforce understand more about Mental Health and Wellbeing.
- Lincolnshire is referenced by NHSE as "Leading the Way" with Co-Production

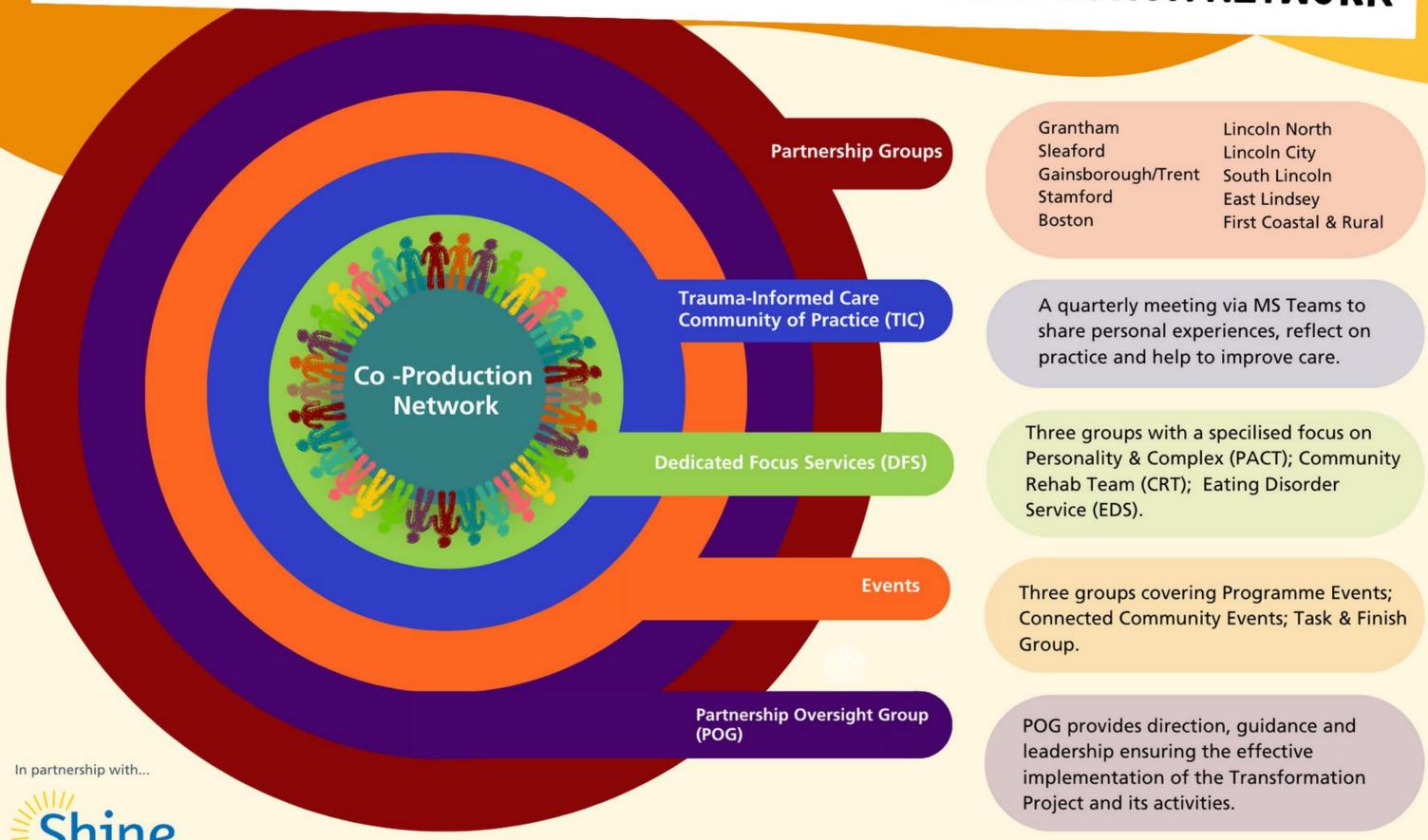








# COMMUNITY MENTAL HEALTH CO-PRODUCTION NETWORK





**Trauma-informed Approach** 

# Safety

The physical, psychological and emotional safety of service users and staff is prioritised

# **Trustworthiness**

Transparency exists in an organisation's policies and procedures, with the objective of building trust among staff, service users and the wider community

# Choice

Service users are supported in shared decision-making, choice and goal setting to determine the plan of action they need to heal and move forward.

# Collaboration

The value of staff and service user experience is recognised in overcoming challenges and improving the system as a whole.

# **Empowerment**

Efforts are made to share power and give service users and staff a strong voice in decision-making, at both individual and organisational level.

# **Cultural consideration**

Move past cultural stereotypes and biases based on, for example, gender, sexual orientation, age, religion, disability, geography, race or ethnicity.





# Together We Will...

# **Overarching Statement**

Together we will value each other as the experts of our own experiences...

# Safety

 Together we will offer a safe, nonjudgemental environment to be open
 and honest and to be ourselves

# Choices

 Together we will recognise the importance of active listening and having time to make choices

# **Cultural Consideration**

 Together we will walk alongside you instead of leading you by asking the service users, carers and all involved with your care, what your goals are and how we will achieve them together

# Respect

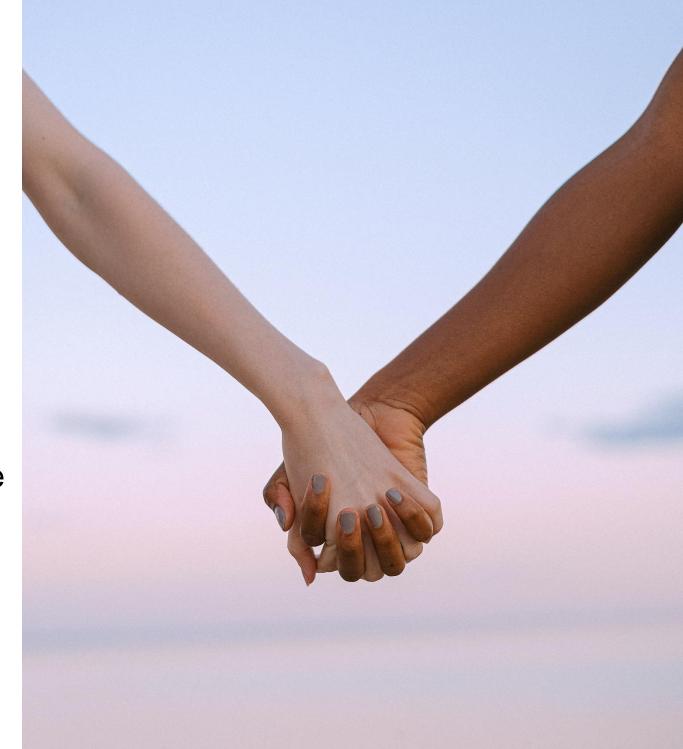
 Together we will embrace and value differences and implement this in a person-centred way

# **Trustworthiness**

 Together we will do what we say we will do, in an environment of openness and honesty.

# **Empowerment**

Together we will make no decisions about you without you





# What's next?

- Lincolnshire Citizen Offer in place this will support things like hoarding and homelessness, paid people with lived experience, cultural change to self-efficacy i.e. 'Turning the Triangle'
- Locality Mental Health teams fully operationalised across Lincs
- **SMI Health Checks** embedded across Lincolnshire with access to a range of support where required.
- Implementation of the **specialist services** (Complex Trauma, Adult Eating Disorder, Community Rehabilitation) countywide.
  - **Increased Access** to Psychological Interventions and Specialist Clinical Pharmacy Resource and Provision.
- Further development of the **Digital Offer** e.g. VR, AI, digital kiosks and Apps.
- **Keeping Well Guidance** in development and expansion of training programme to include Lincolnshire Recovery College.
- Embedding the vision of 'No Wrong Door',
- Paying attention to transitional pathways eg CYP and older adults linking to the Frailty Strategy
- Taking a PHM approach to enable a focus on health and social inequalities and ensuring the MH agenda is linked to physical health improvement e.g. Cancer, MSK
- System interoperability in place
- Working with Public Health to develop the Suicide Prevention Strategy and plan





# How will we know we have got there?

# We will:

- Achieve the 'We' statements
- Service user feedback
- Evidence based practice and outcome measures embedded
- Be closer to the MHDLDA 'vision'
- Performance data and outcomes
- LTP Deliverables met and maintained
- See improvement against our current JSNA challenges, and
- Be closer to achieving the MHDLDA priority objectives. So, we will have:
  - · Reduced the rate of suicides
  - Increased access to Community Based Provision (that reduces the need for specialist services)
  - Minimised In-patient and Residential Care Placements
  - Delivered a sustained and MHDLDA informed workforce
  - Developed a MHDLDA inclusive society and improved the promotion of mental wellbeing.





# Vision

Together we will... promote wellbeing for all and enable people with a mental illness, dementia, learning disability or autism to live independent, safe and fulfilled lives in their local communities.







# ANY QUESTIONS?