

Who We Are



How does Elmore work?

Elmore's flexible approach seeks to engage with people who may have slipped through the net of mainstream services, and to make a positive and lasting impact on their lives. We seek to address each of these four reasons why clients do not fit easily into services and can be hard to engage.

Elmore clients typically benefit from longer-term interactions. This contrasts with the many well-developed services for mental health issues in Oxfordshire which have been developed around a model that relies on short interventions. Initial approaches may be rejected. The Elmore worker will persevere, trying out different tactics to engage the client and build up their trust, possibly for the first time, in an agency. The build-up of trust delivers positive outcomes for the individual and the system in the longer-term, which means work can go at a slower pace. Our impact is a 'slower-burn' impact of increased time needed to achieve useful outcomes with clients.

We persistently try to engage people and make all potential avenues for treatment and support open and accessible. It is routinely our distinct role to make sense of the range of agencies that might be able to offer a relevant service, and to support people to access them.

Overview of Elmore Community Services' individual services

Complex Needs Floating Support

We support people with complex needs who do not fit easily into other services to stabilise their lives and access services. Funded through the Oxfordshire Mental Health Partnership and by Oxfordshire County Council, we provide practical support, link people up to services, and emotional support—helping people to gain self-confidence and independence.

Mental Health Floating Support

We support people to get practical and emotional support from specialist services to manage their mental health. Funded through the Oxfordshire Mental Health Partnership and by Oxfordshire County Council, we work closely with local mental health teams (including NHS teams) to help people work towards recovery.

New Beginnings for Adult Survivors of Childhood Sexual Exploitation (CSE)

We support people who have experienced childhood sexual exploitation to get practical and emotional support to move on with their lives. Funded by Oxfordshire County Council and working closely with agencies such as Thames Valley Police and the wider criminal justice system, we support survivors who often experience difficulties with mental health and relationships, substance and alcohol misuse, and poorer physical health. The severity of the experiences mean survivors often cannot access specialist help elsewhere. This service is delivered through the Oxfordshire Homelessness Alliance

Tenancy Sustainment

We support vulnerable council residents to keep tenancies and stay in their homes. Funded by Oxford City Council, we provide support with mental health but also help and advice with practical matters such as applying for (and staying on) social security entitlements.

Domestic Abuse: Family Solutions Plus

Funded by Oxfordshire County Council, Elmore's service works with perpetrators, as well as survivors of domestic abuse to treat the cycle of aggression with specialist roles delivering interventions, face-face and online, and in individual and group settings.

High Intensity User (HIU) Project

Similar to other areas of the UK, Oxfordshire has a system-wide challenge with people who present frequently and/or problematically to urgent and emergency care services. This is not a homogenous group of clients, but rather a number of individuals with varied and sometimes complex issues. Funded at first by Oxford Universities Hospitals and now Oxford Health NHS Trusts, Elmore provides individualised approaches to ensure they receive coordinated and consistent care and support, in order to reduce repeat ED presentations and ensure that people get the right support in the right place.

Supporting Oxford Safe Haven (OSH)

Oxford Safe Haven (OSH) offers out-of-hours support for adults experiencing mental health crisis, and Elmore has been supporting its extension to 7-days a week. Elmore works with Oxfordshire Mind to support people referred from OSH to access community-based support.

Rise & Shine

Elmore works with older adults with mental health problems to access community-based support.

Elmore's High Intensity Need and Floating Support Team in Buckinghamshire

Elmore is supporting individuals frequently using emergency services with an aim to try and provide some stability. Some individuals may then benefit from longer-term, floating support, where they will continue to receive support (ideally keeping the same caseworker) for up to 2 years.

Elmore's Floating Support Team in Berkshire

This team works with people with severe and enduring complex emotional needs often associated with a diagnosis of personality disorder. Workers provide 1:1 support to enable people to live and be supported in the community rather than acute healthcare settings. This service will be part of a pathway of services in Berkshire that promote recovery and independence. This team works with people who have been referred from mental health teams within BHFT.

Elmore's Dual Diagnosis Support

Elmore's Dual Diagnosis (HIU) support works alongside our current HIU team to provide high intensity user support in partnership with established hospital teams at the JR and the Horton (including Alcohol Care Team, High Intensity User Team and Community Safety Practitioners) to provide a bridge between these hospital services and community resources. Clients receive up to 12-weeks intensive interventions (with options for extended support as needed) to build bridges between hospital and community services and support a seamless step down into the community.

Is there a typical Elmore client?

Our clients will usually have multiple separate support needs such as mental health issues, homelessness and rough sleeping, substance misuse, offending, difficulty in forming and sustaining relationships, physical disability, self-harm, learning difficulties, domestic abuse, sex working or experience of abuse and neglect. Elmore deals with some of the most complex clients in Oxfordshire.

The lives of Elmore clients are typically punctuated by various traumatic events which have led to an inability to process emotions in a conventional fashion. Crises and escalating difficult behaviours can punctuate people's lives. Escalating behaviours can result in a range of adverse consequences for the person, including loss of housing and livelihoods, financial difficulties, and interactions with the criminal justice system. Self-harm, alcohol, or other drugs may be used by complex clients to reduce their emotional dysfunction.

In times of crises, multiple agencies may be contacted by or involved in the life of an Elmore client, often at the same time. These agencies can include GPs, Police, Social Care, Acute Medical Services, Mental Health Services, Third-Sector Providers, and A&E. These contacts can be multiple as well as simultaneous, and without clearer communication and join-up, they can risk overwhelming agencies and, indeed, an overall system that is not designed for such behaviour.

Why does this make it tougher for clients to fit easily into services?

With such needs, clients do not fit easily into services and can be hard to engage. Clients often have something fundamentally important in common—for a variety of reasons, they are not getting the services that they need, when they need them:

1. The client is **too chaotic, so the services they need cannot cope**. Elmore clients can have difficulties keeping appointments and may behave inappropriately when they manage to keep appointments.
2. The client **does not fit referral criteria for services**. People with a cocktail of problems are always the exception to somebody's rule. Indeed, strict admission criteria may result in the restriction of access to a service. Services, therefore, can cycle clients through local services as no one service wishes to be left holding responsibility of the patient. There may also be a lack of a clear effective intervention or a poor fit between a service's preferred intervention and the needs of a client, which means that services choose not to engage.
3. The client is **unwilling to engage**. They may distrust statutory agencies and refuse services.
4. Confusion over **which services should be involved**. Multiple problems can result in multiple agencies getting involved. Clients can often be well-known to services but there seems to be no one agency with an overview of their care needs, and this can result in a lack of clarity. It might be the case that the client receives variable mental capacity and various assessments of their wellbeing and capability leading to a difference of views among agencies about needs and actions, which cannot be effectively integrated.