

**FoCUS**  
East & Mid Surrey Area Group Meeting

Monday 1<sup>st</sup> October 2018  
1pm – 3pm

Park House, Randalls Road, Leatherhead, Surrey

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Minutes of the Meeting

**Attendees:** Don Illman, Stephanie Spiteri (FoCUS Rep), David Murphy, Val Murphy, Rosemary Moore, Veena G,

Gardner Gwashavanhu (Mole Valley CMHRS Manager), Zaahirah Saab (Tandridge CMHRS Manager), Jane Ahmed (Involvement Facilitator), Lucy Finney (LF Solutions),

**Apologies:** Mary Whitfield, Rachel Cocklin, Marion Price, Karen Murray, Ian Stronge, Jane Sellars, Fiona Pettie, Maria

**1. Minutes of previous meeting and matters arising (September 2018)**

Accuracy

The minutes were agreed as an accurate record.

*Please note once the minutes are approved they will be published on SABP's website, if you do not wish your name to appear please let LF Solutions know.*

Actions from September meeting

1	The Enrich Lead to be invited to a future FoCUS meeting to talk about the project. <b>Completed and added to the list for future meetings.</b>	Support Team Jo Lynch
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## 2. Local Issues

### Compliments and Good News

Stephanie S thanked the Epsom Safe Haven staff and Rowena Joplin, Rachel and Dr Fialo for being so supportive when she was in crisis.

The Action for Carers Surrey are trialling extended hours for phone support for carers which will run from 8am – 6pm Monday to Friday and 9am – 12pm on Saturday throughout September, October and November.

### Local Issues

David Murphy agrees with the West FoCUS Group and cannot understand why the Safe Haven are allowed to carry out supervision during the opening hours. *Post meeting note: in response to an action from the September West FoCUS meeting the Trust have assured FoCUS that all Safe Haven's will open on time as advertised. Aldershot Safe Haven will have its supervision 17:30-18:30. This will not impact the opening of the Safe Haven from October 2018 as the supervision will take place in a separate room whilst the Safe Haven opens its doors on time.*

Stephanie S talked about the Friday drop-in group at the Brickfield Centre that has taken place for the last 18 years and unfortunately will no longer continue to be run by Mary Frances Trust. Stephanie S highlighted the reasons why this was no longer happening and suggested the Trust employ someone to provide this service on a Friday? This service is a routine for people and keeps people balanced.

FoCUS members learnt that individuals are unable to get a prescription for psychiatric medication from their GP unless it is on record, however out of hours GP's do not have access to a person's health record unless the person is attending A&E. There seems to be a gap in the provision of emergency psychiatric medication without the individual having to visit A&E.

Veena G asked if the Trust involved in any neighbour nuisance cases that go to the police? Gardner Gwashavanhu said that the community services may receive a concern from the police but would need to look at specific cases. It was agreed that Veena would discuss this further with Gardner during the break.

Rosemary Moore spoke about the Enrich Pilot and felt that people didn't know that this was happening, however it was noted that information and an advert for this training had been circulated to FoCUS Members in early May. David Murphy hoped that the Trust would ensure those taking part were fit for purpose.

There were a number of concerns about the ACU noted as follows:

- Nurses having to come from the wards to pick up patients and visitors from the airlock in the ACU remains a concern for E&M members who feel this takes away from nursing time on the wards. Stephanie S and Rosemary Moore are both part of the group looking at the reconfiguration of the ACU and Stephanie will raise this at the next meeting. It was suggested that security is needed to carry out this role in the interim.
- Anderson ward needs something on the stairs i.e. fitted carpet as Members felt that if someone falls down the stairs there will be dire consequences.
- There is a fire extinguisher situated opposite Blake ward, next to the lift which can be easily accessed (and next to it is a window) this is dangerous and FoCUS would like to ask the Trust to have this moved or secured safely.
- Anderson and Blake wards have a hot tap that is accessible to all and people are burning themselves on this.
- There needs to be secure bins in the ward as some patients eat out of communal bins and may get food poisoning.
- The basketball hoop in the sports hall needs replacing.

### **3. Participation & Involvement, Liz Holland & Nikki Green**

Liz and Nikki attended the meeting to give an update regarding the planning stages around improving participation throughout the Trust, noting that this is still at the very early stages but they wanted to update about roles, feedback and moving forward. Some FoCUS Members were involved in the recent workshops where FoCUS and the Trust developed a driver diagram as to how to take participation forward.

The first thing to be achieved was to get someone from the Trust to lead on participation and Liz began by explaining her role and that she is a nurse by background and leads on QI (Quality Improvement) and Suicide Prevention for the Trust and now is the lead for Participation and Experience. Liz will be working more closely with FoCUS and will be

taking on the role Jo Lynch currently has with FoCUS; the transition will be managed slowly ensure things are not lost.

Nikki has been in the Trust for 28 years and until recently has been in the QI team and is now the People Participation & Experience Lead and will be working with Liz to get things going.

Rosemary Moore asked about the structure of the QI team and Liz explained that they are part of the Chief Nurse Directorate; Billy Hatifani is Director of Improvement and there are a number of 'Heads' within this Directorate, there are also three QI Lead nurses who look after different areas of the organisation and Kathy is the team administrator.

They are currently recruiting for a suicide prevention trainer and Liz and Nikki will be focussing on participation.

There are two things to update regarding early thoughts around participation about how to get more people involved in FoCUS and their wider plan for the Trust.

Much of the overall feedback received from those engaged with was around having wider representation, much more participation and how people within FoCUS can have more hands on influence around improvement and be actively able to participate in involvement.

The Trust are suggesting that FoCUS area groups and FoCUS Committee remain as they are but suggested introducing a third tier which would be a 'Working Together' group consisting of four members from each area group and Trust staff – all those attending would be equal members. This group would look at issues raised locally and then pick the most pertinent issue to work on, suggest ideas etc. make it happen and then take these to FoCUS Committee for sign off. For example should there be a concern regarding wards rounds this would be taken to the Working Together group who would brainstorm as to what should happen to resolve this, it may be decided that a booklet is necessary and the Working Together group will take on actions and create the booklet. Once completed this would be taken to FoCUS Committee for approval and rolled out across the Trust, if agreed, using the QI method. This way people are involved in shaping and making this happen.

When thinking about the Working Together group it was suggested four people from each area attend, however these people would need to be

those who want to take actions and move things forwards. It may be that the same for four people are on the Working Together group for up to a year but people can swap if necessary. When they have an idea people in the working together group will be trained in QI methodology.

Liz explained that it is about being able to help make the change and have an influence on how that happens and this is the Trust's suggestion based on feedback.

Clifford Wright asked about the working together group and who would be involved; Liz explained that it would be organised and run by the Trust (Liz or Nikki) plus members of the area groups and then if other Trust staff are needed they can be brought in.

Stephanie asked about the frequency of the working groups – and it was suggested these would happen after the last round of area groups and before Committee so that things can be taken to the Committee. There was a short discussion about whether this should take place before or after the Reps meeting, however Liz explained that this was all up for discussion.

David Murphy felt that 16 people coming to these working groups was too big and Liz explained that they have deliberately suggested this figure as they anticipate that not everyone can come to all meetings recognising some people will have good months and some bad months and this stops pressure being put on people that can't attend.

Stephanie asked about the amount of involvement and the time commitment required and Liz outlined that there will be one meeting and then other work to be done outside this meeting. There will not be any paid roles but the Trust will ensure there is lunch, travel expenses are paid etc. There will be one meeting to plan and the group can then look at the best way to get in touch with each other outside of the meeting and work on the projects – it could be meetings, skype etc.

Stephanie asked how Reps not involved with the Working Together group will know what is going on? Liz said that who are the best people to be in the group is up for discussion but felt it should be open to local groups as well as Reps. Liz will take the work from the Working Together group to FoCUS Committee

Don Illman has been a FoCUS member for many years and felt this is repeating what used to be done when FoCUS worked well. Liz noted

that the Trust accept that alongside the practical work there is a cultural piece of work to be undertaken so that the staff in the organisation are on board and acknowledging this – the organisation needs to be ready to work in this way.

Members asked whether they would act on information if they did a survey or monitoring and found that there were concerns about a particular service and Liz explained that the Trust have done a year's work on improvement culture and if there are differences in services and you have data you can ask questions about this.

In terms of the other branch of participation work the Trust are looking at creating wider opportunities for people and creating a resource building up a group of people who are interested in participating actively within the Trust. A very low level of recruitment will be used to ensure people are ready to be involved in this way and they hope to use people's experiences for improvement.

There will be opportunities for volunteers but also the opportunity to work as a Band 2, 3 or 4 staff member while working on a particular project. A profile will be created for the individual around their interests and experience and when opportunities arise they will try to match people to this. There will be roles available for volunteers and Banded staff members and for that period of opportunity the person would be a member of Trust staff, work in the team and be actively involved. There will also be the opportunity for someone to work up the scales and build their CV as they work through different opportunities as well as training and development.

Liz and Nikki are working with HR as to how to get people on board, and offer advice on such things as how benefits may be impacted for the paying roles. Recruitment will include such things as recruitment coffee mornings, evenings etc. The recruitment has to work and they don't want it to be so long that it stops people getting involved.

They have undergone a scoping exercise and are looking at what other organisations are doing well or badly, getting people's advice and opinions and views from the start.

David Murphy said that there are agency's that work with voluntary sector who have people who are looking to work and but may have a long term mental health concern and this may be of interest to those people.

When asked about timescales Liz noted that the Working Together group will begin as soon as they are confident they are doing the right thing and they would like to start recruiting people for the other project work in January.

If there is any specific feedback on volunteering then please let Liz and Nikki know; it is their job to make this happen and they are responsible for this working.

#### **4. CMHRS Update**

##### Gardner Gwashavanhu, Mole Valley CMHRS

Gardner has taken over from Declan Flynn who retired in July and he is currently in a transition period and will be full time at Mole Valley in the next few weeks. Gardner has been working in the Trust since March this year and has attended the West FoCUS meeting previously.

In terms of staffing levels one member of staff in Mole Valley has just left however they are looking at recruiting associate practitioners sitting alongside the nursing posts. These staff will be supporting the team in following up some of the people they work with and those in supported placements, running groups and taking away some of the workload from members of the senior team. Tandridge and Mole Valley will be advertising for these posts in the next week or two.

##### Zaahirah Saab, Tandridge CMHRS

Zaahirah explained that they have one Band 6 post vacant and have advertised twice but no applicants as yet.

The community services are getting ready for the SPA (Single Point of Access) which will be rolled out in the East first with Reigate hopefully at the end of the month followed by a phased plan, then two weeks later Tandridge and then Epsom and Dorking. They have not set a timescale and this will be reviewed as they go along. There has been a lot of background work carried out to ensure there are enough assessment slots and learning from other services to ensure they are checking in to have weekly meetings with the SPA etc. Rapid response will continue for those that need to be seen urgently.

Angela Devon will be visiting each CMHRS to roll out training on the Care Pathway.

Don asked about the Crisis Line and Zaahirah said that all SPA staff are going through induction and training and this will happen for the Crisis Line staff next week. They will keep the same telephone number as the Crisis Line and run the services in parallel, at least initially.

Stephanie asked how the SPA will affect people using services Zaahirah explained that at the moment everything will stay the same but when the SPA is rolled out there will be one number to contact for those wanting access mental health services, however if a person is already using Trust services and under an existing team they would contact them.

Gardner spoke about the Home Treatment Team (HTT) who are currently under 50% staffed at present. They have appointed a new manager (Geoffrey) and are looking at how some people using services can access the HTT and are trying to find out what is going on. Don Illman felt the problem with turnover of staff is disheartening.

Stephanie asked if training of staff for people with trauma and/or abuse has started yet and Zaahirah agreed to find out if this had been incorporated into the Safeguarding training yet. Rosemary Moore felt that what is said in the leaflet about abuse is not happening.

Don Illman commented that the judiciary that issue the PFD (Prevention of Future Death) notices have issued one to SABP, Surrey Police, Surrey County Council and the MASH (Multi-Agency Safeguarding Hub) for failing to safeguard a person. Don is concerned that SABP have had more PFDs than any other Trust in the South East. This needs to be highlighted to the Trust again.

Stephanie said that some people using services at the Safe Haven have reportedly been discharged from their psychiatrist but not from their Care Coordinator, however would rather have their monthly appointment with the psychiatrist. Feedback from people using services is that discharge needs to be slower and prepped as people can be nervous. Stephanie asked what a person would do if they had been discharged from their psychiatrist and but can't get hold of their Care Coordinator. Zaahirah noted that if a person still had a Care Coordinator they may not have an appointment to see their psychiatrist but will still be under the team who would still be responsible for the person. Generally if a Care Coordinator has concern about anyone under their care they discuss

with this with the psychiatrist and they will be seen if need. Zaahirah also noted that a person should have three sessions before they are discharged but will take this feedback back.

Don commented that conversation needs to be had with the person's GP particularly if they are on any psychiatric medication – there needs to be a pre-discharge meeting to make sure that everyone is aware of what's happening.

## 5. Questions to PALS

There were no PALS representatives present at the meeting.

## 6. FoCUS Terms of Reference

Jane Ahmed explained that the Terms of Reference for FoCUS are now due for review and whether any members had any comments they would like to raise.

Don Illman commented that Cobham should be included in the NW area. It was also noted that the Co-Chair meeting needs amending as this now happens on the same day as FoCUS Committee.

## 7. Date of next meeting

The next meeting will take place on Monday 3<sup>rd</sup> December 2018, 1pm – 3pm at Reigate Baptist Church, Sycamore Walk, Reigate, RH2 7LR

### **Actions to be taken to the FoCUS Committee/Reps Meetings:**

#### **Next FoCUS Committee meeting: 13<sup>th</sup> November 2018**

1	<b>Emergency Psychiatric Medication:</b> FoCUS members learnt that individuals are unable to get a prescription for psychiatric medication from their GP unless it is on record, however out of hours GP's do not have access to a person's health record unless the person is attending A&E. There seems to be a gap in the provision of emergency psychiatric medication without the individual having to visit A&E.
2	<b>Concerns regarding the ACU (Abraham Cowley Unit)</b>  E&M FoCUS Members raised a number of concerns about the ACU noted as follows: <ul style="list-style-type: none"><li>• Nurses having to come from the wards to pick up patients and visitors</li></ul>

	<p>from the airlock in the ACU remains a concern for E&amp;M members who feel this takes away from nursing time on the wards. Stephanie S and Rosemary Moore are both part of the group looking at the reconfiguration of the ACU and Stephanie will raise this at the next meeting. It was suggested that security is needed to carry out this role in the interim.</p> <ul style="list-style-type: none"> <li>• Anderson ward needs something on the stairs i.e. fitted carpet as Members felt that if someone falls down the stairs there will be dire consequences.</li> <li>• There is a fire extinguisher situated opposite Blake ward, next to the lift which can be easily accessed (and next to it is a window) this is dangerous and FoCUS would like to ask the Trust to have this moved or secured safely.</li> <li>• Anderson and Blake wards have a hot tap that is accessible to all and people are burning themselves on this.</li> <li>• There needs to be secure bins in the ward as some patients eat out of communal bins and may get food poisoning.</li> <li>• The basketball hoop in the sports hall needs replacing.</li> </ul>
3	<p><b>Prevention of Future Death (PFD) Notices:</b> E&amp;M FoCUS Members are concerned that SABP have had more PFD notices than any other Trust in the South East and felt this needs highlighting to the Trust again to ensure work is taking place to address these.</p>

### Actions – General

1	<p>E&amp;M FoCUS discussed the Friday drop-in group at the Brickfield Centre that has taken place for the last 18 years and unfortunately will no longer continue to be run by Mary Frances Trust. This group is crucial to a number of people to keep them well and balanced and E&amp;M FoCUS would like to ask whether the Trust is able to employ someone to provide this important service on a Friday?</p> <p><b>Completed. Mary Frances Trust met with the group of people currently using this service and they agreed to change the format of what is available. Rather than running a drop-in, they will provide a more boundaried weekly peer support group.</b></p> <p><b>Another letter is being sent out to all people who used to use the drop-in explaining that: Mary Francis Trust will organise a Christmas event</b></p>	Jo Lynch
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	<p>on Friday 14<sup>th</sup> December for people who would like to participate in the event and who are registered with MFT.</p> <p>The drop-in has been closed and therefore there will be no open service on Fridays until the new peer-support group starts.</p> <p>The new peer-support group will start on 4<sup>th</sup> January 2019.</p>	
2	<p>Zaahirah to find out if training of staff for people with trauma and/or abuse has been incorporated into the Safeguarding training yet.</p> <p><b>Completed. Debra Cole, Safeguarding Adults &amp; Domestic Abuse Lead has confirmed on 2/10 /2018 that she will be adding this to the training.</b></p>	Zaahirah Saab

### Contact details for your Support Team

For Member support please contact:

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### Glossary of Abbreviations:

ACU	Abraham Cowley Unit
AMP	Approved Medical Practitioner
CAG	Carers Action Group
CBT	Cognitive Behavioural Therapist
CCG	Clinical Commissioning Group
CMHRS	Community Mental Health Recovery Service
CMHT	Community Mental Health Team

CPA	Care Planning & Assessment
CPN	Community Psychiatric Nurse
CQC	Care Quality Commission
CTO	Community Treatment Order
EPP	Expert Patient Programme
ESA	Employment & Support Allowance
HTT	Home Treatment Team
IAPT	Improving Access to Psychological Therapies
IMCA	Independent Mental Capacity Advocate
IMHA	Independent Mental Health Advocate
NICE	National Institute for Clinical Excellence
OAP	Out of Area Placement
OT	Occupational Therapist
PALS	Patient Advice and Liaison Service
PICU	Psychiatric Intensive Care Unit
PPG's	Patient Participation Group
PRG	Patient Reference Group
PVR	Public Value Review
QUIPP	Quality, Innovation, Productivity, Prevention
RAG rating	Red/Amber/Green risk rating scale
SABP	Surrey and Borders Partnership
SCC	Surrey County Council
SDS	Self-Directed Support
SMS	Short Message Service i.e. text message
SPA	Single Point of Access
STEPPS	Systems Training for Emotional Predictability and Problem Solving
STP	Sustainability and Transformation Plans