

FoCUS

North West Surrey Area Group Meeting

Monday 14th January 2019

Chertsey Hall, Heriot Road, Chertsey, Surrey

Minutes of the Meeting

Attendees: Tracey Hayes (NW FoCUS Rep), Rosemary Moore (SW FoCUS Rep), Larisa Orlova (NW FoCUS Rep), Sylvia Jones, Colin Jones, James, Pearl, Clifford Wright

Pattie Lopez (Patient Liaison, ACU, SABP), Jo Patel (Communications Manager for Change, SABP), Amanda Cummins (SPA Lead, SABP), Lucy Finney (LF Solutions, minute taking), Jane Ahmed (FoCUS Involvement Facilitator)

Apologies: David Keen, Gina Keen, Irene Christmas, Kathryn Nisbett, Hank Sohota, Karl Artreides, Glenis Nay, Duncan Sloman (Runnymede & Spelthorne CMHRS Manager)

1. Welcome, introductions, ground rules

Jane Ahmed welcomed Members to the meeting and reminded those present of the ground rules.

Jane Ahmed announced that Tracey Hayes has nominated herself for the role of FoCUS Rep for the NW area and this was accepted by the group.

Unfortunately, PALS are not able to attend the meeting today due to staff shortages, however they have now recruited two new members of staff who will be starting with the Trust soon. Jane explained the role of PALS to the new members present.

2. Minutes of previous meeting and matters arising (December 2018)

Accuracy

The minutes of the December 2018 meeting 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 December 2018 Meeting

1	<p>Rosemary Moore asked how the Trust help those addicted to painkillers and how do they ween people of these drugs.</p> <p>Completed: We do provide support for those addicted to pain killers. The approach differs according to the individual, their circumstances and what they are taking.</p> <p>We also provide advice and information to GPs and other health care providers regarding how they can help and manage those addicted to prescribed medication.</p> <p>Rosemary Moore said that the point of the question was that for those addicted to Heroin there are substances that can help withdrawal, however this isn't the case for those addicted to painkillers and therefore it is more difficult and more support is needed.</p> <p>Rosemary Moore wanted it noted that treating those with an addition to painkillers will be different to how those with an addition to a drug such as heroin are treated.</p>	Katy Matthews
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3. Local Issues

Good News/Compliments

Larisa Orlova would like to thank Colette Lane (Senior Recovery College Coach and India (mentor) for their phenomenal support during her recent crisis.

Larisa has also used both the Crisis Line and more recently the SPA (in December last year) and commented on the positive changes. These changes are due firstly to the brilliant management from Georgina Foulds and Amanda Cummings, but also a significant improvement is increasing the staff to 25 members and their tailored, ongoing training and the recruiting model in which she was highly involved.

Issues, Comments and Suggestions

Rosemary Moore advised that there will be a 24/7 workshop on Tuesday 15th January on the future of the Abraham Cowley Unit (ACU) and the following day (Wednesday) there is a 'Big Picture' meeting which is run by NW Surrey CCG (North West Surrey Clinical Commissioning Group).

Jane Ahmed has been contacted by a carer of a person on Victoria Ward who was recently moved, at very short notice, to a ward at the ACU and who would like to know why women on Victoria ward are being moved? The carer had been told a number of reasons including safeguarding, number of beds etc. and that the Trust are moving to single sex wards. One patient and carer were only given 2 hours' notice of this move which had a great impact on both the carer and on the patient in terms of their mental health.

It was explained that there is a Government directive to move to single sex wards nationally and the Trust will have to comply with this. However, it was clear that the notice period for this move was unacceptable and an explanation for the move was not communicated clearly to the person using services and their carer. Please can this Trust comment on this and ensure that moving forward people using services and their carers are not subjected to a 2 hour notice period to move accommodation and that staff take the time to sit with the person using services and carers to explain the reasons for doing so.

Clifford Wright (E&M FoCUS area) is a member of the Trusts Quality Assurance Committee and has been for the past 18 months. Clifford recently received a letter to advise him that his time on the Committee has now come to an end and that the Trust will not be replacing people who use services or carers on the Committee and instead Governors will take this role. Clifford is very concerned that Governors may not hear all the concerns that people using services and carers can bring. Other FoCUS members present also agreed that it is very important to have people using services and carers on Trust Committees and would like an explanation as to why they have taken this decision and whether the Trust have written to people using services and carers to explain their actions.

4. Single Point of Access Update (SPA), Amanda Cummins

Amanda introduced herself to the group and talked through the basic service model. The Government Five Year Forward Plan means that a SPA (Single Point of Access) is essential for every Trust to have developed by 2020. This will bring all referrals for working age adults, the Crisis Line and the Rapid Response function into one place; safe havens will also come under the SPA umbrella.

A referral will come in (from a person using services or a carer) and will receive listening and understanding, they may receive signposting and support and may not need further intervention. The referral will be triaged by clinical practitioners who will then make a decision as to the best next steps for the person concerned and whether it be community support from voluntary sector partners, a referral to primary care services such as IAPT or whether the person would benefit from an assessment through the CMHRS. Anyone accessing a CMHRS across Surrey will now have the same pathway wherever they are located. The SPA will make the appointment for the person on behalf of the CMHRS. However, if after triage someone needs a more urgent response the Home Treatment Team (HTT) will be able to do this assessment and may need a hospital admission.

In preparation the Trust looked at other SPA models across the country and decided on a model currently run by Northumberland Tyne and Wear as they were closest to the model the Trust wanted to run.

The Trust carried out some field tests and in doing so was clear that it didn't feel right to have a SPA for crisis care and not have the same for routine calls and contacts. Therefore, when the phased roll-out is complete the Trust will be implementing the SPA for both crisis and routine referrals.

The service began a phased roll out in October 2018 and includes the Crisis Line (which is now operating 24 hours, 7 days a week) and will eventually include Rapid Response and the triaging of all referrals. Currently the roll out is only for those referred by a GP but will be open to all new referrals from around April this year.

Phase I started in the East and this is now complete. Phase 2 started on 7th January 2019 and covers the NW of Surrey and Phase 3 will cover SW Surrey which will start on 18th February. GPs are still making their referrals to the CMHRS during the phasing and these are passed to the SPA by the CMHRS; however in the future the GPs will make direct referrals to the SPA.

The recruitment has been extensive and since they started they have had nearly 300 applicants, held about 80 interviews and recruited 41 permanent new staff members, 25 specifically for SPA and also some bank staff for flexibility who will also receive training.

A number of lessons were learnt in Phase I and there is a new team of call handlers, practitioners and administrators based at Gatton Place, sitting alongside the Home Treatment Team (HTT).

There has been intensive training and separate funding has been secured to deliver this. They have also worked with the Samaritans and underpinning this recovery focussed model is care, respect and resilience. There will also be monthly themed training days where they hope they will continue to take key learning from people's personal stories of experience. People using services and carers have been central to developing and delivering this staff training.

CMHRS staff are also attending a lot of new training and had a 2-day training programme prior to the roll out with follow-up action plans put in place for each CMHRS.

Amanda spoke about the Board they have in the office which is a live reference to see how performance is going and where they need input.

The SPA will coordinate the whole process and pathway for the person and the new unit in SystmOne built specifically for the SPA which will be able to track the pathway of the person and is more efficient.

In terms of Assessments there is a key focus on standardising the model for initial assessment, clinics etc. and delivery of evidence based interventions for each cluster across all teams. Everyone will get one assessment, receive one letter and a leaflet specific to the area. They are introducing Multi-Disciplinary Team feedback meetings and addressing medical availability during clinics and ensuring they include carers and family members.

460 calls were taken between Christmas and New Year and the average call length is 9 minutes. The target for the average pickup time should be 30 seconds and they are well underway to achieving this (29.4 seconds as of today). There is also a text service that is responded to.

They will be embedding systems for monitoring internal standards and caller experience, formal reporting processes and the SPA dashboard as well as developing external multi-agency pathways for example with the police,

ambulance, 111 services etc. Phase 3 will include the planned introduction of a free phone number for the SPA.

Amanda explained that the SPA is aimed towards working age adults, however there is no wrong door and whoever is calling will be directed to the appropriate service. The Older People's services have their own Single Point of Access called TOPS. However, a referral was received for someone over 65 or from a young person the SPA will deal with this to ensure they are signposted to the right service.

Rosemary Moore asked how call handlers will know a person's age and Amanda explained that the call handlers have to record everything and one of the questions will be about age.

Rosemary Moore asked about funding and Amanda explained that they will receive rolling funding from the CCGS for the SPA and the training funding received from Health Education England is a one off amount to develop training for Trust staff.

Rosemary asked about recruitment and Amanda confirmed they are on scheduled for recruiting triage practitioners which is an ongoing campaign, they are also supported by SABP bank staff.

When asked how GPs will track a person's referral Amanda explained that the SPA are aiming for better communication with GPs and now if a person is referred as urgent from the GP the Trust will not change this status until a conversation with the GP has happened. The referrer will also receive a letter about the person they have referred.

Rosemary felt that the dashboard should be open to people using services and carers also.

Larisa Orlova has been involved in the recruitment of staff for the SPA and felt they were really good; they are undergoing thorough training and practitioners sit very close to the call handlers so they can be involved. There are lots of positive changes and the time wasting has been cut as call handlers are supported by practitioners. Larisa explained that the most important thing for a call handler is to know how to build up a rapport with the person ensuring they are put at ease and feel nurtured. Their aim was to adopt not only competency, skills-based but also to emphasize to the value-based way of selection. The changes are significant and Larisa is confident these will continue in to the future.

Rosemary Moore asked about a further question around training and the links with the Samaritans who do a tremendous amount in the community, however they can do nothing other than what the caller asks them to do. Amanda agreed and said that part of the work with Samaritans is to learn from the experience they offer and identify the difference between the Trust's Crisis Line and what the Samaritans offer. In updating their publicity, they will briefly highlight the difference between Samaritans and their service.

The Group thanked Amanda for her time.

5. CMHRS Update, Duncan Sloman

Unfortunately, Duncan was unable to attend the meeting today.

6. Date of next meeting: Monday 11th March 2019, Christ Church, Jubilee Square, Church Street East, Woking, GU21 6YG.

Issues to go to next FoCUS Committee meeting, 12th February 2019

1	<p>FoCUS was recently contacted by the carer of a person on Victoria Ward at Farnham Road Hospital explaining that the person they care for was recently moved, at very short notice, to a ward on at the ACU. The carer was given a number of different reasons for the move including a move to single sex wards.</p> <p>However, it appears that the person using services and their carer were only given 2 hours' notice of this move which had a great impact on both the carer and on the person using services in terms of their mental health.</p> <p>FoCUS would like to highlight that this very short notice to be moved to a different ward/location is unacceptable and that an explanation for the move was not communicated clearly to the person using services or their carer. Please can the Trust comment on this and ensure that in future people using services and their carers are not subjected to a very short notice period to move accommodation and that staff take the time to sit with the person using services can carers to explain the reasons for doing so.</p>
2	<p>NW and E&M FoCUS have recently learnt that one of its members, Clifford Wright, who has been a member of the Trusts Quality Assurance Committee for the past 18 months, has received a letter to advise him that his time on the Committee has now come to an end.</p>

	<p>The letter also advised that the Trust would not be replacing people who use services or carers on the Committee and instead Governors will take this role. FoCUS is very concerned that Governors may not have the opportunity to hear all the concerns that people using services and carers may bring. FoCUS feel it is very important to have people using services and carers on Trust Committees and would like an explanation as to why this decision has been taken and whether the Trust have written to people using services and carers to explain their actions?</p>

Actions

1.	<p>NW FoCUS would like to hear more about Older People's Services and their Single Point of Access.</p>	<p>Jo Lynch Sharon Gregory</p>

Contact details for your Support Team

<p><u>For Member support please contact:</u> Carol Pearson and Jane Ahmed at the Surrey Coalition of Disabled People Tel: 01483 456558 Text: <u>077809 33053</u> Email: carol.pearson@surreycoalition.org.uk Email: jane.ahmed@surreycoalition.org.uk Address: Astolat, Coniers Way, Burpham, Guildford, Surrey, GU4 7HL www.surreycoalition.org.uk</p> <p><u>For Meeting support please contact LF Solutions:</u> office@lf-solutions.co.uk Tel/Text 07727 273242</p>

Glossary of Abbreviations:

AMP	Approved Medical Practitioner
CAG	Carers Action Group
CBT	Cognitive Behavioural Therapist
CCG	Clinical Commissioning Group
CMHRS	Community Mental Health Recovery Service
CPA	Care Planning & Assessment
CPA	Carers Practice Advisor
CPN	Community Psychiatric Nurse
CQC	Care Quality Commission
CQUIN	Commissioning for quality and innovation

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
OT	Occupational Therapist
PALS	Patient Advice and Liaison Service
PETS	Patient Experience Trackers
PICU	Psychiatric Intensive Care Unit
PPG's	Patient Participation Group
PRG	Patient Reference Group
PVR	Public Value Review
QUIPP	Quality, Innovation, Productivity, Prevention
SABP	Surrey and Borders Partnership
SCC	Surrey County Council
SDS	Self-Directed Support
STP	Sustainability and Transformation Plans
SHIPP	Surrey High Intensity Partnership Programme
STEPP	Systems Training for Emotional Predictability and Problem Solving