



## FoCUS

### **South West Surrey Area Group Meeting Wednesday 4<sup>th</sup> July 2018 1pm – 3pm**

Godalming Baptist Church, Queen Street, Godalming, GU7 1BA

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#### **Minutes of the Meeting**

**Attendees:** Paul Earl, Linda Gilligan, Claud Norris (FoCUS Rep), Alex Lepkowski, TMG, Simon Telling (FoCUS Rep & SABP Governor), Rosemary Moore (NW FoCUS Rep), CT

Matthew Shine (Richmond Fellowship), Pete Williams (Community Service Manager SW CMHRS Manager & EIIP), Jane Jefferies (CMHRS Manager Waverley), Jo Lynch (SABP), Caroline Hampshire (Catalyst, Welcome Project), Sarah (Student Nurse, CMHTOP), Donna Davies (Advocate SDDP), Jane Ahmed (FoCUS Involvement Facilitator), Lucy Finney (LF Solutions, minute taking)

**Apologies:** Simon Tester, Sandy Riddle, David Muir

#### **1. Welcome, introductions, ground rules**

Jane Ahmed, the FoCUS Involvement Facilitator, welcomed attendees to the meeting and introductions were made.

#### **2. Minutes of previous meeting (June 2018)**

##### Accuracy

Page 4: TMG commented that the timeframe referred to should be 18 months not one year.

The minutes were agreed as an accurate record of the meeting.

*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.*

### Matters arising

Paul Earl commented that having read part of the minutes in respect of PALS talking to the People's Experience Report where it was raised that the overall picture of the performance of the PALS and Complaints service did not include any negative complaints comments and suggested there needs to be a balance of positive and negative. Claud Norris also suggested using the option of a no star rating.

Simon Telling commented that there was no indication of complaints that had gone over the statutory time limits and Jo Lynch replied explaining that the Trust acknowledge Paul's point about highlighting negative complaints and learning and that there is no longer any statutory time limit nationally for responding to complaints. However, the Trust try to focus on good quality replies and have set a benchmark of 25 days in which to respond, so far reaching 80% of this target. The improvement is a credit to the operational services working with the PALS team. Some members queried why FoCUS were not aware of this and Jo Lynch agreed to look back to find the date from which there was no longer a statutory time limit for responding to complaints.

Page 3 – Rosemary Moore spoke about the feedback from Gavin Wright, the Trust's Director of Workforce, and queried why he had not spoken about the Enrich project at the FoCUS Committee. Jo Lynch advised that the questions to Committee for Gavin were around workforce and staff information. Rosemary explained that the point she is trying to make is that everyone should have the same information. Jo commented that this is a new process and therefore the information was provided – some people were not aware of this project and recognising that communication is failing in some places the Trust have learnt from this.

Rosemary raised another issue regarding no involvement information on Victoria Ward in Farnham Road Hospital and she has asked Simon Telling and other Reps if they can come to the ward and see what is available and what they think as she feels the information is very lacking. Jane Ahmed advised Rosemary that following the meeting last week she has been in touch with the Ward to organise a time to go and visit and discuss these issues. Jo thanked Rosemary for this observation and

noted that it is helpful to have another pair of eyes looking at this and they have now linked Jane in with the Ward and will also speak to the Communications and the ward manager to ensure that the information that should be available is.

Simon Telling queried why Jane is visiting wards and Jo explained that part of the support team role is engagement and Jane is raising the profile of focus for people in services. Pete Williams reiterated that it is important the Trust know where information is lacking and not just in the wards this includes community services, please do always raise this with the Trust – it is always really helpful to receive feedback.

TMG spoke about Advanced Directives and Advanced Statements and felt that people can be confused between the two? Jo Lynch reported that Helen Potter (EPR Solutions Lead for the Trust) will be attending the September local area meetings regarding Advanced Statements and Decisions and how they appear on a person's electronic care record and one of the pieces of work Helen will talk about is what would good look like with regard to this. TMG commented that it is very important that the Advanced Statement is visible to crisis services and Jo agreed this has to be far clearer. She also noted that the Trust recognise there is not consistency across the services and they are now going through a process to become more forthcoming.

Advance Directives are very different to Advanced Statements and is a legal document. Janice Clark, one of the FoCUS Rep for the West, has been involved in the drafting of the policy for Advance Statements. It was agreed that Jo Lynch would clarify the definition and differences of Advanced Statements and Advanced Directives.

Page 7: TMG asked if anyone is training staff at SABP on autistic spectrum disorders particularly as females are misdiagnosed all the time? Jo explained that there is an Autism Strategy for awareness being written (late diagnosis/misdiagnosis/uniqueness of presentation) and each community team has had training which, includes a film, around autism, although it is not in depth at the moment. They are also commissioned to run the AAA support service (Autism, Asperger's and ADHD). Jo thanked members for raising this issue and will think about where the Trust are with regard to specialist training and take this away to discuss with colleagues. Staff are aware of the challenges for those with a mental health diagnosis and autism and how particular environments can be distressing; the Trust don't have it cracked just yet, but people are in place to help with this.

CT commented that her organisation offers free autism training to Surrey staff and offered this to the Trust. Jo suggested it may be something that could happen at one of the area meetings and the support team will connect with CT.

Rosemary Moore raised the issue of missed diagnosis's which is an important issue.

Actions from June 2018:

1	<p>FoCUS has just learnt about the 'Enrich' pilot where people are trained, and then paid, to provide peer support to people upon discharge. FoCUS would like to know more about this service and how it is funded; many members were also surprised that this has something that has already started and yet FoCUS are not aware of it.</p> <p><b>Completed, please refer to attached information.</b></p>	<p>Lucy Finney Jo Lynch</p>
2	<p>Zeenat to confirm whether the Crisis Line has an answerphone message when the line is engaged. FoCUS would also like to suggest that any answerphone message include details of local safe haven's and opening times.</p> <p><b>Completed: The Crisis Line already has an automated message requesting callers to leave a message when the lines are busy and this is how they pick up the voicemails. Having the details of all the safe havens as an automated message would be too long as they can't have just the local ones and will need all of them.</b></p> <p><b>Note: The crisis line should not just have an engaged dialling tone and the Trust have asked if FoCUS can tell them when there was problems with the line and they can look into it.</b></p>	<p>Zeenat Mosaheb</p>
3	<p>Jane Ahmed to speak to the Trust about visiting Victoria Ward to provide information about FoCUS.</p> <p><b>Completed.</b></p>	<p>Jane Ahmed</p>
4	<p>Graphs in the Carers Report at still too small and difficult to read – please can the size be increased.</p> <p><b>Completed and noted by the Trust.</b></p>	<p>Ann Stevenson Jo Lynch</p>
5	<p>FoCUS members recognise that staff may find it difficult</p>	<p>Jo Lynch</p>

	<p>to build trust with someone who is autistic and that mental health services need people trained well. An example of an inspirational trainer called Phoebe Caudwell was given and some members felt that the Trust could learn from her. Further information can be found at <a href="http://www.phoebecaldwell.co.uk/">http://www.phoebecaldwell.co.uk/</a></p>	
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### 3. Updated Actions from FoCUS Committee

Lucy Finney ran through the FoCUS Committee Actions that have been updated so far which included:

No	Action
1	<p><b>Discharge Leaflet:</b> Currently with Jo Lynch and Maggie Gairdner for review. Jo Lynch to provide FoCUS with a publication date when available. <b>In progress</b></p>
2	<p><b>SPA:</b> FoCUS raised a query that another steering group has been set up to work on this and those involved in the original steering group do not seem to be involved. Maggie Gairdner to take this back to Georgina Foulds for clarification. <b>Maggie Gairdner is discussing this with Georgina Foulds who is leading the project</b></p>
4	<p><b>Advanced Statements and Decisions included on SystemOne:</b> Jo Lynch and Lucy Finney to liaise regarding FoCUS members involvement in this working group. Those involved from FoCUS to take the concerns raised at Committee to this working group – this includes concerns with care plans highlighted. <b>The Advance statements policy was approved in June. Once this is published we can circulate the guidance in the policy for people using services to FoCUS. Advance statements are on the agenda for the September area groups for people to be involved in their implementation.</b></p>
6	<p><b>Out of date literature:</b> there appears to be out of date information at Farnham Road Hospital about the local police liaison officer. The Trust to ensure this is updated and maintained. <b>Completed.</b></p>
9	<p><b>Workforce Development – staff survey:</b> FoCUS asked if some areas/departments in the Trust responded better than other areas to the staff survey and Gavin Wright will provide the response rate for each area. <b>Complete and information attached.</b></p>
13	<p>Janice Clark to draft a response to the Personal Health Budget</p>

consultation and circulate to Reps (consultation closes on 8 <sup>th</sup> June). <b>Completed.</b>
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#### **4. Local Issues from FoCUS members**

##### Good news and Compliments

With regard to attendance at meetings Pete Williams will ensure that managers attend all meetings and has made it clear that if anyone can't attend they have the telephone number of the support team and can give their apologies. Pete asked members how they felt about other CMHRS staff attending meetings such as psychologists and the group felt this would be a good idea.

TMG wished to praise Louise Rutland-Laws who finally helped her family's situation and who was great and stepped outside her responsibilities to help.

Simon Telling said that the Psychiatric Liaison at the Royal Surrey County Hospital (RSCH) are now proactive on the wards and continue visits when the person is an inpatient. Rosemary Moore felt that she had not experienced this at the RSCH.

CT thanked the Care Coordinator's at Waverley CMHRS commenting that 'they are really good'.

Claud Norris almost has a care plan which she is really pleased about.

##### Local Issues

CT is unable to access IAPT services as she is under the CMHRS. Jane commented that if you have been referred to IAPT services please discuss this with your treating team to look at alternatives or they can liaise with IAPT.

TMG raised that there are three different managers at the CMHRS in Guildford which is a concern for both the staff and people using services. Pete acknowledged this and the difficult situation however they are not able to get the permanent substantive manager in post until around September. They have sat down and looked at who is doing what and they have divided responsibility – there should always be someone available. Pete is the overarching service manager who can be contacted if there are any concerns.

They have undertaken case load reviews across the team and Pete is looking at every case to make sure people are in the right place. There will be people waiting for allocation of a care coordinator for a while but they want to ensure they do it right.

Simon Telling asked about the waiting list at Waverley CMHRS and Jane Jefferies confirmed that there are 50 people who are a mixture of new patients and those waiting for a care coordinator but noted that there may be other professionals involved in their care currently depending on a person's treatment package. There is a plan in place with new staff coming in and they have identified the people they will be allocating at the first opportunity. Staff look at the lists on a regular basis with the consultants and review and send out letters or make calls if that is what is indicated. Simon also referred to a large number of out of date care plans with regards to service users under Waverley CMHRS and Jane commented that she understood this and action is being taken.

TMG asked if there was care coordinator training for new members of staff and Pete commented that they would be provided with guidance and training around this and if they have not been a care coordinator before there would be shadowing and learning on the job. Jane commented that this should be part of nurse training also.

Pete confirmed that both the Guildford and Waverley CMHRS's do struggle in recruiting particularly for Band 6 nurses and they have both been given the go ahead to have locum CPNs and Pete has spoken to Maggie Gairdner who has approved a further locum in Guildford.

Simon Telling asked if Surrey County Council are recruiting more staff and Jane Jefferies commented they are going through the process and an advert will go out soon for 2 mental health social workers and an admin role.

TMG commented that an article appeared in the BBC to do with university students being an at risk group for suicide; this is becoming more and more relevant and the Government is launching a Mental Health Charter. Further information can be found here:

<https://www.bbc.co.uk/news/av/education-44634393/mental-health-university-students-share-their-worries>. TMG felt that SABP should be in touch with student services and be more coordinated. Pete commented that they are in touch with University of Surrey and are looking at what else they can put in place.

## 5. Suicide Prevention, Jo Lynch

Jo Lynch explained that she is not directly involved with suicide prevention but attended the meeting to present on behalf of Liz Holland who is leading on this. The Reps across the area groups will be receiving training in September and it will be a good resource to them.

The Five Year Forward View, which is a Government key document, sets out what all mental health services have to achieve in the next five years and all mental health organisations must reduce suicide rates by 10% by 2021. Most organisations including SABP work around suicide prevention. In England one person every 90 mins dies of suicide – in Surrey the rate is 9.1 people per 100,000 which is slightly below the 10 national rate – however this is still too many people. This equates to around 92 deaths from suicide in Surrey equivalent to 1% of all deaths in Surrey.

As an organisation SABP have signed up to the Zero Suicide Alliance which will form part of their strategy around suicide prevention. SABP felt uncomfortable about setting a target as there can never be an acceptable threshold or target for suicide and by joining the Zero Suicide Alliance the Trust's aim is to achieve zero suicides – they may not achieve the target at times along the way but this is their aim.

The strategy has four areas:

1. Supporting high risk groups
2. Reducing access to means
3. Training and education
4. Understanding data

All groups are co-produced and were open for anyone to join, although they are now full, however the working group will keep FoCUS up to date with what is happening.

In October 2016 the Trust received a £50k grant and looked at what suicide prevention training is currently available as they wanted to formalise training for staff working in services and people using and caring for people using services. With the funding the Trust have created their own training which has been co-produced with families, friends, carers and staff and includes real-life stories and videos.

There are two tiers of training, one for clinical staff which is a one day course targeting those working in clinical assessment services (such as HTT, Psychiatric liaison) but available to all staff working in clinical roles.

This training looks at how it feels to be at the point of suicide, confidentiality, consent, sharing information, monitored risk assessment and formulation and writing of crisis plans. Family members share their stories at the start of the training which is very powerful.

The second tier is through the Recovery College with whom they have created a suicide prevention training model which is similar to the clinical training but with adjustments. So far, this training has been run three times at the Recovery College and has been a positive experience both for staff, carers and families.

They are creating a new resource information pack called 'people who have been affected by suicide' which is a locally focused support leaflet/information.

Paul Earl explained his personal situation and felt that he is hearing information for the first time and it is great that this issue is now being focussed on although the Trust need to engage those with experience of suicide as it feels it is an internal discussion. Jo commented that it is important to hear that although they have all the data, real life experience is that there is a feeling that people are not being engaged with. What Jo has taken from Paul's experience is that they need to ensure they are reaching everybody. The Zero Suicide Alliance and SABP are working together to say that if they accept and look at everyone who touches mental health services, potentially any death could be avoidable and prevention work carried out. The Strategy is aligned to what Public Health are doing in Surrey as only 28% of people who commit suicide have contact with mental health services.

Pete Williams explained that he was quite heavily involved with the teaching element of this training and what hits most is the confidentiality issue – often carers hear 'I can't discuss that with you', however conversation is key to reducing suicide.

Alex Lepkowski asked if there is a register for those who may be a risk of suicide and Jo explained how this works in the Trust and that information will be held will be by individual teams for those who may be at most risk, however it is not collectable across a whole organisation or county.

Caroline Hampshire thought the training idea was brilliant and suggested that training be available to community connections to help those who are at risk. Pete commented that the wider Strategy is now about how the Trust work with partner's such as Community Connections. It was agreed

that Jo would feed this back to Liz to see whether Community Connections can be offered training. Jane Ahmed reminded members that the Recovery College course is available to everyone.

Next steps will be to continue to scale up and spread the training; the Trust have developed a bespoke suicide prevention package for GPs and delivery of this is going well so far and they are now looking for extra people to build up their bank of trainers. They are looking at creating an e-learning package and online training plus how they share this with other local organisations who have expressed an interest.

Jo mentioned a free 20 minute suicide prevention video, information about which had recently been circulated, however the support team will circulate this again.

Rosemary Moore asked what support families bereaved by suicide are given during an inquest etc. Jo Lynch explained that £50k grant is to drive the whole strategy and Sarah Wickens has taken up a new role as the Family Liaison lead for the Trust and supports families at the time of an incident through inquest, coroners etc; the Trust recognised this aspect was lacking and they have resourced and created this post. Jo said that families will be offered support from the time of death until they feel they no longer need it.

Jo was conscious that this is a delicate sensitive subject and if after discussions today anyone needs to speak to someone please do reach out to speak to a staff member if you need to.

The group thanked Jo for her time.

## **6. CMHRS Update, Pete Williams & Jane Jefferies**

Pete said that hopefully most people will be aware of the transformation work going on around CMHRS, Single Point of Access (SPA) – and a lot of the issues raised today will be addressed by this.

With regard to care plans there have been independent reviews and it's come out that the number of people that are involved in drafting their care plans and that have care plans is poor and the Trust are considering an alternative to get rid of progress notes meaning that everything has to go through a care plan or risk assessment. This will give the care plan focus, if something new comes up it can't be documented it unless added to a person's care plan. Pete is passionate about care plans and recognises

that it's a culture change that is needed and a lot of staff need their mindset changed that it is a live document

## **7. Community Hubs update, Susie Gray, Director of Property, SABP**

Susie joined the Trust 18 months ago and one of the Strategies she has been working on is the creation of community Hubs; Hubs meaning a location in an area where they can bring together a number of different Trust services and can operate from a single building thus making it easier for people to find the location and staff to work better cross-divisionally. It also enables the Trust to manage the cost of their estate; the more buildings they have the more the expense and they are aware that any money spent on buildings is taking away from front line services.

The project has also enabled the Trust to take on buildings that are in a better state of repair and have a better environment for staff and clients.

The Hub programme has been running for several years now and there are currently Hubs in Redhill (Gatton Place) and Frimley (Theta) and Susie is here to talk about the new Hub which will be located in Chertsey.

The Trust have land at the St Peter's Hospital site which is underutilised and a decision was made to sell this for residential development and for the Trust to move services out of isolated buildings into a Hub. They have acquired a building in Chertsey and are about to start works to fit the building out after a consultation period with staff about what is suited to be located there. They also looked at other buildings they could close to bring in more money.

Teams that will be located at the new Hub include Older Adult, LD, Children's services, CMHRS, some therapy services amongst others and they will all come together when they move in around October this year. Susie also commented that they are looking at working on an area that could be used a safe haven out of hours.

With regard to access to the new Hub Susie explained she is aware that parking is an issue in Surrey and at the new Hub, Unither House, there is a generous car park divided into two sections, one for staff and the other for people using services, which will be free; disabled parking will also be available. There is also a public car park to the rear of the building which is very cheap.

Simon Telling asked about signage at the Hub and Susie said this had been a lesson learnt at Theta; signage can be tricky when sharing a building with other organisations and there are further challenges to do with the shape of the SABP logo and they are trying to tackle this. At Unither House they deliberately tried to pick a building which they could have sole occupancy of so signage can be placed where most appropriate and as large as needed.

Rosemary Moore commented that she has seen the new building and felt the building was 'out of this world' and is 'fantastic in every way'. Susie advised that if anyone has missed the opportunity to look at the building, or any of the Trust's Hubs please do let the support team know and this can be arranged.

## 8. Date of next meeting

**Date of Next Meeting:** Wednesday 5<sup>th</sup> September 2018, Guildford Baptist Church, Millmead, Guildford, GU2 4BE.

## Issues to go to next FoCUS Committee meeting on 7<sup>th</sup> August 2018

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### Actions

1	Jo Lynch agreed to look back to find the date from which there was no longer a statutory time limit for responding to complaints.	Jo Lynch
2	Free 20 minute suicide prevention video to be re-circulated to the Group. <b>Completed. The link to the training is <a href="https://www.zerosuicidealliance.com/">https://www.zerosuicidealliance.com/</a></b>	Lucy Finney
3	It was agreed that Jo Lynch would clarify the definition and differences of Advanced Statements and Advanced Directives.	Jo Lynch
4	Jo Lynch to look at where the Trust are with regard to specialist Autism (AAA) training and will discuss with colleagues.	Jo Lynch
5	Support team to liaise with CT and SABP regarding autism training and local area meetings.	Support Team Jo Lynch
6	Jo Lynch to feed back to Liz Holland the suggestion that suicide prevention training be made available to Community Connection providers.	Jo Lynch

## Contact details for your Support Team

For Member support please contact:

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## Glossary of Abbreviations:

AMP	Approved Medical Practitioner
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
SHIPP	Surrey High Intensity Partnership Programme
STEPPS	Systems Training for Emotional Predictability and Problem Solving