

FoCUS
East & Mid Surrey Area Group Meeting

Monday 3rd December
1pm – 3pm

Reigate Baptist Church, Sycamore Walk, Reigate, Surrey

Minutes of the Meeting

Attendees: Don Illman, Mary Whitfield, Stephanie S (FoCUS Rep), Rosemary Moore, Clifford Wright, David Murphy, Val Murphy, Rachel Cocklin (FoCUS Rep), Veena Gheerawo, Annabel Collyer, Fiona Pettie

Logh Ramdoo (Reigate CMHRS Manager), Josiah Anyinsah (Spiritual & Pastoral Care SABP), Gardner Gwashavanhu (Mole Valley CMHRS Manager), Zaahirah Saab (Tandridge CMHRS Manager), Jane Ahmed (Involvement Facilitator), Lucy Finney (LF Solutions),

Apologies: Marion Price, Jane Sellars, Helen Smith

1. Minutes of previous meeting and matters arising (October 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 October 2018 meeting

1	E&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&M FoCUS would like to ask whether the Trust is able to employ someone to provide this important
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	<p>service on a Friday? 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.</p> <p>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 on Friday 14th 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 4th 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. Completed. Debra Cole, Safeguarding Adults & Domestic Abuse Lead has confirmed on 2/10 /2018 that she will be adding this to the training.</p>

Mary Whitfield raised a concern about the Terms of Reference in that when people represent an area in which they don't live or attend services are they in a position to adequately represent us, Mary used an example whereby Stephanie S is the E&M FoCUS Rep but represents the NW group on the Redevelopment Programme.

Stephanie explained that she does represent E&M FoCUS at all appropriate times, however the Redevelopment Group has nothing to do with FoCUS work. Mary felt there is a conflict of interest and that people should be FoCUS Reps for the area they access services. It was explained that many people in the East and Mid areas receive services in the NW such as the ACU (Abraham Cowley Unit).

It was noted that there are two groups running, one looking at access provision in the future and one looking at hospitals in this area.

Discussion followed and it was agreed that FoCUS will ask the Trust for official representation on the Hospital Redevelopment Board.

2. Local Issues

Compliments and Good News

Rachel Cocklin would like to compliment the inpatient Occupational Therapy Team at Farnham Road Hospital.

Stephanie S attended the Reps QI (Quality Improvement) training run by Liz Holland which she described as brilliant, well presented with a lot of input and interaction from the Trust; Stephanie got a lot out of the session personally.

Stephanie would also like to thank Rowena Joplin and Dr Fialo and Rachel as they have supported her well.

It was reported that the service given at Gatton Place by a care worker has been excellent and the person has had less attendances at the Safe Haven due to the support received from Gatton Place.

Local Issues

David Murphy wished to raise an issue following a member coming to Reigate Stepping Stones in a distressed state. He summarised that the person had been discharged from the Crisis Overnight Support Service and were due to be contacted by the Home Treatment Team (HTT) about their medication. The person had no communication from HTT over the weekend as promised and by Monday was very concerned and distressed. David appreciates how hard the Home Treatment Team work but urged the HTT staff to ensure they make contact when they have promised to do so or contact the person to tell them why they haven't been able to get in touch - it's not good enough.

At the end of March there was an incident at the Redhill Safe Haven where some damage was incurred; a programme of work was agreed to be carried out however 8 months later this has not happened. The work included safety film on glass, door handle repaired, CCTV upgraded and panic button changed. David is appalled that it has taken this long. The Estates department has failed miserably.

David Murphy raised an issue regarding Margaret Laurie House noticing there are no people who use services on the working group; FoCUS would like a person using services on the group reviewing this.

FoCUS would like clarification as to whether the Trust are proposing to take all lay members (carers and people who use services) off the Quality Committee, only leaving Governors?

Stephanie S commented that inpatient ward notice boards used to display information about a contactable community police officer and FoCUS would like to know if this will happen again and the named police officer displayed?

Stephanie S felt there are lots of rules and regulations with the police and it would be good to know more information around the police and mental health in the community services and wards. There is no information displayed that tells people what to expect on a Section 136, whether someone can call the police when in hospital, leaflets to let the family know what to expect etc. Zaahirah explained that there is information provided about the Section a person is on and people have their rights explained to them. FoCUS members would like a talk on issues surrounding the police. Mary suggested speaking to Jo Lynch as there is a group from SABP that meet with the police on a regular basis and these topics are addressed.

Don Illman has recently heard that Elaine Braithwaite (Lead Governor for the Trust) has been suspended by the Trust after highlighting some errors relating to the Trust's Quality Account. Subsequently Elaine has been banned from attending FoCUS and CAG meetings. FoCUS would like the Trust to explain why Elaine is not able to continue to attend FoCUS and CAG meetings?

3. Feedback from FoCUS Committee

Jane Ahmed talked through the FoCUS Committee Summary which has been previously circulated, highlighting the following:

- There was discussion about the safe haven leaflets and Georgina Foulds has fed back that they anticipate they will be in circulation by 17th December. All the safe havens operating hours and standardisation of service models will be completed by this date.
- New FoCUS Reps were announced and Rachel Cocklin was welcomed as a new Rep for this area. Stephanie S and Helen Smith continue in their role as Reps for E&M also.
- The Trust want to increase participation within the Trust to 50% by next year. A Working Together Group has been agreed and four

people from each area will be on this group. Stephanie S reported that at the recent Reps QI (Quality Improvement) training it was suggested that there will be two Reps and two people who use services or carers on this group. Liz Holland and Nikki Green will update FoCUS about this soon. Nikki has also sent a questionnaire to different departments in the Trust asking about opportunities for people to participate and she has received a good response so far.

- The SPA (Single Point of Access) are currently recruiting staff and is being launch in a phased manner beginning in the East with referrals from GP and will be open to all referrals from March 2019.
- The E&M group asked about getting medication out of hours and learnt there will be a protocol that will be developed for this. The Trust would like to remind FoCUS members that if they have not done so they can request to be copied into letters that go to their GP.
- Substance misuse services have to save £1.7m from their budget which led to the closure of Windmill House. Katy Matthews, Substance Misuse Manager talked FoCUS Reps through the new pathways for drug detox and alcohol detox which is outlined in the presentation previously circulated. There is also lots of work being done for those with a dual diagnosis who have a drug or alcohol problem and mental health issue.
Don Illman asked whether those who have been an inpatient at the substance misuse unit in Maidstone get transport back home after their stay?
- FoCUS again raised the concern about people being escorted in and out of the ACU (Abraham Cowley Unit) and it was acknowledged that the Trust cannot fully resolve this until the refurbishment in 18 months' time, however there are now less people leaving the unit and they are also providing more activities on the wards.
- With regard to people eating out of bins it was suggested by FoCUS that portion sizes weren't big enough and the Trust will review this to see if there has been a food survey at the ACU recently.
- The Trust asked FoCUS where the information about PFD's (Prevention of Future Death notices) has been taken from as there is no onus on the Coroner to publish these. Don Illman said that these can be seen on the NLRS and Courts and Tribunals Judiciary websites.

4. Spiritual & Pastoral Care, Josiah Anyinsah, SABP

Josiah is one of the Chaplains for the department and his work involves people living with mental health issues and problems as well as those living with a learning disability covering the whole Trust. The team is small and is managed by Nigel Copsey who works part-time and Josiah is full time. They have just appointed a minister working primarily at Farnham Road Hospital and the Abraham Cowley Unit (ACU) and also have someone to work with the Muslim and Hindu communities who will work part-time. A Rabbi is also on call and available to see people. There is also a small central admin function.

Josiah's talk today will cover three areas, pastoral care, the clinical aspect of their work and research, training and volunteering.

When talking about pastoral care Josiah explained that they make routine visits to the wards regularly, making themselves visible to inpatients and finding out who may need their support spiritually. There is no agenda and they see how they can pastorally or spiritually intervene or help someone.

Support is provided for those with faith or with no faith on the spiritual spectrum. All chaplains are trained in the Humanist faith, and Josiah is training in psychosynthesis to help him understand and communicate with the doctors.

With regard to clinical care sometimes people present spiritual problems and if there are spiritual issues the doctors may refer to the chaplains who can work with the person using services in the short or long term. They will see the person once a week for ten weeks or as long as the person may need support. There is a patient confidentiality protocol and it was noted that the only occasion this would be broken is if there is a risk to the person and Josiah gave an example of this.

They take referrals from people using services, they don't have to wait to be referred by a doctor. They also support families and carers who contact them for support and work separately with people using services and their families.

Research and training is an important part of their work as they realise that many people using services that may have a spiritual background use prayer to try to get better but without intervention from services they may become acute.

They also do clinical and pastoral training and recruit volunteers who are happy to work in the mental health arena. Sue Shaw, who attends the SW FoCUS meetings, is a Humanist who has been on the training programme and is now a volunteer working on Victoria ward. They use the training to educate faith communities and equip them with skills to work alongside those with mental health issues.

They also support church ministers who are the front face of working with those who may have mental health issues in their church and they provide supervision. Looking at the training needs of ministers is important and this research will inform a new training programme they will develop and a psychologist will be recruited to help Josiah and Nigel develop this training.

Josiah is also Chair of the staff spirituality forum who meet bi-monthly and look at how they can support staff in their role looking after those who are unwell. All staff are able to explore and practice faith and spirituality in the work place.

There are a few learning disability homes in Surrey and Josiah visits these once a month. The homes have different needs and their service is tailored to those they are visiting. They use music and hymns in their service.

Clifford Wright asked if there is information displayed on wards about the accessibility to access chaplains of different faiths and Josiah commented that there are there posters displayed and there is a religious resource box and this can be requested on the ward. Someone from the team is also on call 24 hours and their services can be accessed anytime and are available to anyone using Trust services both as an inpatient or in the community.

The group thanked Josiah for his time.

5. Care Excellence Accreditation Work, Maria McCabe

Maria is from the Accreditation team at the Trust and works with Lisa Musselwhite. Their role is to visit SABP services to carry out Foundation Standard Review Service Assessments.

The Accreditation part of the role is around looking at services that are doing well and if they have a good rating in the Foundation Standards Review they can then go for an Accreditation to get acknowledgement for the work they do. Once achieved they will be rated as a service that is excellent and will receive a certificate and a plaque at an awards ceremony. Accreditation has to be renewed every three years.

Part of the Accreditation process includes both announced and unannounced observations and Maria would like to know if anyone is interested in participating in these observations; anyone taking part will be fully supported. They would also like to include people on a panel consisting of Directors, Managers etc. and would like to include people using services and carers on this. This year there are 8 services going for Accreditation and the Panels run throughout the year and are usually held at Trust HQ in Leatherhead and last around 3 hours.

If anyone is interested or you have please do get in touch with Maria or Lisa. Lisa.Musselwhite@sabp.nhs.uk / 01372216151.

Don Illman asked if the Service Improvement Programme still takes place and Maria said that this work is linked to the Accreditation work but it doesn't happen as much as it used to. It has been changed slightly so it's not quite as formalised and there is lots of interactive stuff going on.

When asked about those services that don't reach the standard Maria explained that each service will self assess, and any scores under 85% means the service is suffering and needs support and they are then put on the Risk Register.

Rosemary Moore asked how this Accreditation fits with Royal College of Psychiatrist Accreditation and Maria explained that this is an external Accreditation and they only look at specific aspects of the service. The Accreditation Maria is referring to is internal.

The Foundation Standards Reviews are linked to the CQC so there is a connection and the Trust also use it to prepare services for CQC visits to ensure they are on track.

Stephanie asked what would be expected from anyone who volunteered for the role and Maria explained that when carrying out observations or being on the Panel the person will be fully supported and will be prompted what to look out for and questions to ask.

Stephanie expressed an interest in being involved.

6. CMHRS Update

Gardner Gwashavanhu, Mole Valley CMHRS

The Single Point of Access (SPA) has gone live in Mole Valley today and they are the last team in the East to go live meaning they have been able to learn lessons from other teams. They will also review how they are working and referrals rates and how they are communicating. The referrals process is just for GPs until March next year when the SPA will be fully rolled out.

With regard to vacancies they are looking at recruiting a Band 4 member of staff who will help the Care Coordinator and teams in running groups and joint working, carrying out physical health checks and supporting senior staff.

In the new year they will be losing two admin staff, one who is leaving the Trust and one who will be going to Trust HQ on secondment.

Zaahirah Saab, Tandridge CMHRS

In terms of the SPA, Tandridge joined following Reigate and were initially concerned about how the screening and assessments were going to work but it has been working well with interface meetings held weekly to iron out any problems. In general it is going well.

Tandridge had a team away day on 22nd November and looked at what they are doing well and what can be improved as there have been a lot of changes in the team recently.

Care pathway training has been completed ensuring the CMHRS give a similar intervention in the cluster and a consistent care pathway.

They have managed to secure a few classes from Richmond Fellowship who will be holding wellbeing and recovery sessions from the Hub and the Recovery College will be coming to deliver some sessions. There have been positive outcomes from training.

As Gardner mentioned above they have one Band 4 vacancy and hope to shortlist seven applicants this Friday.

Logh Ramdoo, Reigate CMHRS

Reigate CMHRS went live with the SPA in October; it has gone well so far but it is early days.

Don Illman heard there is a review group looking at amalgamating some CMHRS and asked the CMHRS managers what they knew about this. Zaahirah explained that there was talk about amalgamating the management of the CMHRS but nothing has been agreed as yet; this would not affect the delivery of services which will remain where they are.

Clifford asked about staffing levels and particularly that of CPNs and he explained examples of when a person using services was dropped by the CPN and not given a reason – is this because too many patients are being handled by the CPNs? This has been happening in Mole Valley and Epsom. Gardner explained that one of the things they have noticed across the Trust is in terms of the role of the CPN is that there is a difficulty in recruiting nurses and it's a challenge they face. They lost a CPN when Gardner came to Dorking CMHRS and they have tried to recruit but have found this difficult. The only way to re-address the situation is to recruit to the Band 4 role who will sit in the nursing establishment and take on some of the roles of the CPN but not the Care Coordinator or medication part of the role; this will take some of the work load off the Care Coordinator.

7. Date of next meeting

The next meeting will take place on Monday 7th January 2018, 1pm – 3pm at Park House, Randalls Road, Leatherhead, Surrey.

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

Next FoCUS Committee meeting: 12th February 2019

Actions – General

1	FoCUS would like to ask the Trust for formal representation from the E&M area on the Hospital Redevelopment Board.	Jo Lynch
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2	<p>At the end of March there was an incident at the Redhill Safe Haven where some damage was incurred; a programme of work was agreed to be carried out however 8 months later this has not happened. The work included safety film on glass, door handle repaired, CCTV upgraded and panic button changed. Please can the Trust confirm when this work will take place?</p>	Jo Lynch
3	<p>For information: FoCUS would like to draw the Trust's attention to a concern regarding lack of communication, of which the following is an example: A person had been recently discharged from the Crisis Overnight Support Service and were due to be contacted by the Home Treatment Team (HTT) about their medication. The person had no communication from them over the weekend and by Monday was very concerned and distressed. FoCUS appreciates how hard the Home Treatment Team work but urged the HTT staff to ensure they make contact when they have promised to do so or contact the person to tell them why they haven't been able to get in touch - it's not good enough.</p>	Jo Lynch Georgina Foulds
4	<p>With regard to the workstream as part of transformation that is looking at the model of rehabilitation with the organisation FoCUS members notice there are no people who use services on the working group and FoCUS would like to suggest that the Trust include a person who uses services on this group.</p>	Jo Lynch
5	<p>FoCUS would like clarification as to whether the Trust are proposing to take all lay members (carers and people who use services) off the Quality Committee, only leaving Governors?</p>	Jo Lynch
6	<p>FoCUS Members noted that the notice board in the inpatient wards used to display a named community police officer, however this does not seem to happen now. Can the Trust advise FoCUS if this can be put back in place?</p> <p>FoCUS Members feel there are lots of rules and</p>	Jo Lynch

	<p>regulations regarding the police and it would be good to know more information about the police and mental health in the community services and wards. There is no information displayed that tells people what to expect on a Section 136, whether someone can call the police when in hospital, leaflets to let the family know what to expect etc. FoCUS would like to hear more on this at a future area meeting.</p>	
7	<p>FoCUS has recently heard that Elaine Braithwaite (Lead Governor for the Trust) has been suspended after highlighting some errors relating to the Trust's Quality Account. Subsequently Elaine has been banned from attending FoCUS and CAG meetings. FoCUS would like the Trust to explain why Elaine is not able to continue to attend FoCUS and CAG meetings.</p>	<p>Jo Lynch Julie Gaze</p>
8	<p>Substance Misuse inpatient: can the Trust confirm that those who have been an inpatient at the substance misuse unit in Maidstone will have transport provided for them to go home after their stay? Completed. Bridge House do pick people up from the train station at Maidstone and take them to the train station when they leave. We assess the transport needs of all individuals and if anyone needing admission to Bridge House requires support in order to get there we will provide it. I-access will always ensure anyone who needs an inpatient detoxification can access the treatment they need. If a person goes to Bridge House using public transport we refund their fare if they are on benefits.</p> <p>Currently only 2 people have been to Bridge House, neither had transport problems. Most people are appropriate for and are attending the ambulatory detoxification service at either Farnham Road Hospital or Wingfield at Redhill. We refund public transport costs or provide taxis in order that people can access the service.</p>	<p>Katy Matthews</p>

Contact details for your Support Team

For Member support please contact:

Carol Pearson and Jane Ahmed at the Surrey Coalition of Disabled People

Tel: 01483 456558 Text: [077809 33053](tel:07780933053)

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

For Meeting support please contact LF Solutions

Lucy Finney / Office

Tel / Text: 07727 273242

Email: lucy@lf-solutions.co.uk / office@lf-solutions.co.uk

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