

**FoCUS Committee Meeting**  
**Tuesday 13<sup>th</sup> February 2018**  
**2pm – 4.30pm**  
**Trust Headquarters, Leatherhead.**

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**DRAFT Minutes of the Meeting**

**Attendees:**

Area Group Representatives:

North West	Tracey Hayes
West	Janice Clark
East & Mid	Stephanie S
South West	David Muir (Co-Chair), Claud Norris, Alison Lancaster (Advocate for David Muir)

Surrey and Borders Partnership (SABP):

Jonathan Warren, Chief Nursing Officer & Deputy Chief Executive  
Julie Gaze, Director of Governance and Planning  
Lorna Payne, Chief Operating Officer  
Jo Lynch, Associate Director of People's Experience and Head of Nursing  
Ann Stevenson, Associate Director of Quality Assurance and Reporting, Trust  
Carers Lead

FoCUS Support Team:

Jane Ahmed, Surrey Coalition of Disabled People  
Lucy Finney, LF Solutions (taking minutes)

Other

Elaine Braithwaite, Trust Governor – observing (agreed by FoCUS Reps)

**1. Welcome and apologies**

Apologies were received from Fiona Edwards, Justin Wilson, Helen Smith, Donna Brown, Simon Telling, Rosemary Moore, Larisa Orlova and Carol Pearson.

## **2. Minutes of the previous Committee meeting – 14<sup>th</sup> November 2018**

The previous minutes were agreed as an accurate record.

## **3. Actions from November FoCUS Committee Meeting**

The Committee received a summary of the actions from the November 2017 FoCUS Committee and noted the completed actions and updates provided. The following comments were made:

**Action 6:** Jo Lynch provided FoCUS with details of what is currently sent to carers and the West group noted that the information was particularly out of date. FoCUS has raised the issue of updating information on a number of occasions and Jo Lynch agreed to follow this up.

**Action 7:** FoCUS Reps asked Ann Stevenson for an update as to what is happening with the Carers Respect Committee and how the information is being circulated?

Ann explained that there are three bits of work out of the Carers Respect programme 1) is the confidentiality leaflet coming to the Carers Action Group (CAG) next month; 2) is about how to start a Carers Respect Panel which has now been started and will run bi-monthly; 3) is about good practices in terms of carers work taking place in Older Adults services, this meeting has taken place discussing good practice and how this can be shared and will be brought to CAG next month.

David Muir asked what is provided for those with a learning disability and Ann advised that there is a learning disability lead under the CAG and they are starting to think about how they make the information more accessible.

**Action 9:** The Trust acknowledged their failings regarding the drafting of the Discharge leaflet with Jo Lynch apologising that 'they have got the process for this wrong'. It is now with Maggie Gairdner for completion.

**Action 11:** Relating to 'Questions to the Trust' from the November FoCUS Committee: It was noted that funding for the Nepalese Support Worker for the Early Intervention Service was not provided by the CCG; Carol Frost and the Early Intervention in Psychosis team have worked together to be creative with

their own budgets to ensure funding for this position and funds have come out of their normal budget.

**Action 15:** FoCUS asked how those who have been nominated for a care award would be informed of their nomination and it was confirmed that they will receive an email from SABP Communications. Nominees on the short-list will be invited to the ceremony together with the person who nominated them. The date of the award ceremony is 20<sup>th</sup> March at the HG Wells Centre in Woking.

#### **4. Carers Action Report, Ann Stevenson**

Ann highlighted key items she wished to update around including:

- Quicker and better access to Healios the online carer support.
- They have good relationships with Recovery College.
- Sharing of expertise of the carers work with Surrey County Council (SCC) Children's Services and identifying more young carers.
- Recognition that further work needs to be done on patient pathways.
- Continue to attend the Triangle of Care Regional meetings; to keep the two Gold stars already awarded to the Trust, the meetings have to be attended and progress shown. A programme is in place to review all of the Triangle of Care self-assessments within inpatients, followed by community services. They will keep looking at how they have changed and improved.
- In terms of data they acknowledge and recognise the low levels of data on Carers Assessments on SystmOne and will be carrying out a mapping exercise to see why they are so low.
- With regard to Your Views Matter the Trust are conscious that people were not happy with the pie charts or percentages shown for Quarter 2, so have moved to graphs including numerical figures for Quarter 3. The main themes coming through are about people not receiving Carer Needs Assessments etc. They are hoping work in the Carers Respect programme will ripple through to other organisations.
- In Quarter 2 the Trust were the best performing Trust in Surrey in terms of submissions for Carer Prescriptions, they have dropped slightly to the second best performing in Quarter 3.

David Muir would like to be used more, as a Learning Disability Governor, particularly in the caring field as it may be useful for someone with a learning disability to attend the Carers Action Group. Julie Gaze explained that David has not been asked to join the Carers Action Group as it is a group for carers and David is not a carer; some of the Family and Carer Governors do attend.

Ann went on to explain that there are people who have or do care for people with a learning disability and each division provides a lead, so they get the clinical interface and carers, however recognised that they may need more attendance from carers of people with a learning disability.

Janice Clark raised about Carer Practice Advisers working with the team and the whole family approach and felt there is a misunderstanding as its seen to be just about carers, but it is about how best to have a holistic approach to supporting people in an effective way. Janice recommended everyone read 'The Care Act and Whole Family Approaches' as this sets it out clearly. Janice felt that if all teams operated in this way they would grasp the importance of holistic whole family working.

Work is taking place in children's services looking at young carers, but they continue to be concerned about the low number of parent carer referrals; in the last Quarter Action for Carers Surrey had no parent carers referred to them. Whilst this will need to be worked on at the CAG, the whole Trust needs to be aware of this. Janice queried the percentage of parent carers that have been offered an assessment and how many have been identified and felt it was about how the offer is made to parents. It is not a third hand stand-alone assessment and the offer should be highlighting any needs the carer may have and how care is provided to the person they provide care for – the offer needs to be explained better.

In terms of Healios this is funded by the Carers Commissioning Group, the Clinical Commissioning Groups (CCGs) and Surrey County Council (SCC) and there is an ongoing commitment to continue funding of this service.

Under the item 'have you ever felt prevented from telling us things that could have been useful?' FoCUS would like the Trust to also ask why they may have been prevented?

Janice Clark asked about the ethnicity of all the people who use services and Jonathan Warren advised that 10% of the population of Surrey is from a black minority ethnic background. Janice continued to explain that from the Triangle of Care perspective cultural and language awareness has not been particularly good; if there were improvements in accessibility of information more carers from Black and Ethnic Minority groups may come forward for referral for carers support and assessments.

FoCUS liked the graphs used in the report but still found the writing with the graphs and in the report body too small to read and some colours too similar.

Stephanie S queried whether Care Coordinators deal with carers as opposed to Carer Practice Advisers (CPA's) and Ann confirmed that CPA's see carers who have more complex issues, usually everything should be done through the Care Coordinator.

## **5. FoCUS Report, Safe Haven Review, Lorna Payne**

Please refer to the Report circulated with the Agenda.

Lorna hoped that the Report previously circulated gave FoCUS an update on where the Trust are with Safe Havens; it aimed to answer some of the queries raised by FoCUS in the report and noted there were some good issues raised particularly in relation to privacy and how funding works in partnership with other providers.

Details of the funding provision from SABP were given in the Report and Lorna advised that at the moment they do not have a clear picture regarding the funding of the Single Point of Access (SPA) and Crisis support, however all three services (including the Safe Haven) will work together.

David Muir raised an issue regarding discharge from Frimley Park Hospital and it was agreed, as this is an individual case, that the Trust will support David to get answer to his questions outside of the meeting.

With regard to the Safe Haven leaflets Stephanie S explained that FoCUS does not think they read well, giving contradictory examples - offering urgent care in a crisis but also using terminology such as 'friendly, relaxed and meet others'. The leaflets do not signify what the Safe Havens are about and also do not mention that the Epsom Safe Haven runs a 'wellbeing hour' between 6pm and 7pm for those who may not be in crisis but need support for a short time; often those attending the 'wellbeing hour' will be asked to leave at 7pm. Lorna clarified that she will check out the position at Epsom and that it matches the Trusts intent and the subsequent explanation in the leaflet. Stephanie wished to clarify that the 'wellbeing hour' at Epsom Safe Haven works well but it is just about ensuring the paperwork is clear.

Lorna felt the feedback was helpful particularly regarding what is happening on the ground compared to what is said in the leaflet. Lorna agreed to take the

points away and look at the leaflet to ensure it matches the practice and the practice matches their intention.

On behalf of the FoCUS Reps Jane Ahmed explained that some FoCUS Reps felt that the tone of the answers from the Trust in this Report did not feel positive.

Jane also noted that many FoCUS Reps are concerned about transport and FoCUS has previously heard that if a person needs transport it would be written in their care plans, however this will be an issue for those who do not have a care plan

Janice Clark commented that the new provider at Aldershot Safe Haven has made some changes including not having the café on site, so it is not so much of an 'open house'. This demonstrates a lack of consistency across the Safe Havens and each will be a different experience for individuals which may be quite confusing. Attendance at the 'wellbeing hour' highlights that there is still a need for people to have support in the evenings even if they are not in crisis and if that is an unmet need it needs to be recognised and the Trust should start to look, with partners, at how this can be fulfilled.

Julie Gaze felt the feedback about potential variations across the Safe Havens is very helpful and did not think that the Trust have changed the intent of Safe Havens as a safe place to go as well as for people in crisis. It is acknowledged that there will be a range of people attending Safe Havens, and there will be slight differences across the Safe Havens as they are working with local partners and also commissioned by different commissioners, however recognised that the Trust need to ensure they are fulfilling the original intent and will continue to lobby to ensure this happens. Janice said that when a person is in crisis they can find it difficult going to a place where people have gathered for mutual peer support and therefore deterred them from using the Safe Haven for its prime purpose.

David Muir offered his knowledge as a Learning Disability Governor to the Safe Havens to see if he can help in any way with regard to information and how to help a person with a learning Disability in a crisis.

## **6. Discharge, Care Plans and Communications**

Please refer to the Report previously circulated.

FoCUS's concerns are around the variation in discharge processes and the links between both SABP and other services. The Trust are required to follow up with people seven days after discharge and the report circulated indicates what the Trust aim to do in terms of care plans ensuring they are up to date and follow the Standard. Some issues raised by FoCUS are relating to annual reviews and medication.

Lorna Payne explained that there will be, at times, variation in discharge processes and the Trust recognise they need to work with all clinical teams to reduce this. The process is outlined in the report circulated and care plans are monitored through staff supervision, although Lorna acknowledged this is not always perfect and the Trust are conscious of this when managing transition through inpatient, Home Treatment Team and the Community. For Working Age Adults, the Trust needs to ensure that in the pathway redesign they focus on what will make a difference to the care and the consistency of care.

Janice Clark explained that FoCUS felt that the response to questions raised in the report was not full; the letter to GPs was addressed but the whole topic of Care Plans was not addressed i.e. crisis and contingency, advance statements etc. and these different types should have been mentioned and would be expected in a more comprehensive response. Janice felt there is a muddle when talking about care plans as it is not clear where there are joint plans, clinical plans or social plans and not sure the Trust have a common understanding and language.

Lorna explained that within an individual's clinical record there can be multiple 'plans' and part of the Trust's challenge is to make sure the clinical team, in partnership with people using services and cares, ensure that the plan is understood and shared.

Janice Clark wondered what happens when, following discharge from a service, people and carers feel there is not enough detail included? Stephanie S asked the Trust to explain the paperwork that would be expected from hospital upon discharge and Lorna outlined that people should be clear about the plan going forward and this should be in writing. FoCUS have heard from a number of people that they are not receiving paperwork when discharged from hospital and Jo Lynch commented that this may be part of the planning if the person is discharged via a period under the care of the Home Treatment Team and the processes will be followed up with them; FoCUS felt it would be beneficial to tell people that this is the case - communication is lacking about what people may expect.

Jane Ahmed commented that the NW FoCUS Group asked for a copy of the CMHRS Operations Policy and having read this are not surprised that difficulties arise particularly as there is no mention of referrals in and out of the service or of the Safe Havens.

Lorna advised that the Trust are looking at the pathways across Working Age and Older Adults and there are issues that need sorting out; some of this relates to the Operational Policy, acknowledging they need to step back and fundamentally ensure they work; they are not perfect and hopes the redesign will see improvements.

David Muir asked the Trust for a presentation about the difficulties they are facing, and Lorna suggested that the Trust could do an item at Committee about 'pathways'.

## **7. Suicide Prevention Update, Billy Hatifani**

This item has been postponed due to illness.

## **8. Update on the way forward for FoCUS, Jo Lynch**

Jo Lynch met with the Reps at the end of January to discuss the way forward for FoCUS and as an outcome it was agreed that they were not quite ready to move into the new style of Committee in the short term, however will work together to see what this may look like. Jo commented that there is still interest from other parties to be involved in the Committee.

Janice Clark said that the interest from children's services is welcomed and that there are some overlapping issues.

Jonathan Warren suggested bringing in some experts (Patient Participation Lead from NHS England or Paul Binfield) and dedicating a half-day session getting inspirational thoughts about what FoCUS may look like in the longer term and asking if FoCUS started again what it may look like now? Jonathan asked for views and would like to propose to arrange something towards late spring, early summer. FoCUS Reps were positive about this suggestion and David Muir also suggested inviting Fiona Biggs from Healthwatch Hampshire who have recently designed a participation involvement type stakeholder process/group, United Communities, who are working bottom up.

Lorna Payne also supported this idea and was keen to ensure any involvement group recognise the breadth of different services and different experiences across the Trust.

Jonathan asked if Members were agreeable and asked for volunteers to help and advise Jonathan and Jo about how the day may run. Reps were in agreement to the session and Claud Norris volunteered her input; Jane Ahmed will also be involved at the Reps request.

David Muir also suggested asking Neil Churchill to come along.

Jonathan Warren asked FoCUS Reps to get in touch with the Trust or Support Team if they have any further ideas for the workshop event.

## **9. Questions on SABP Responses to Area Group Questions**

Q1: FoCUS asked the Trust for easy-read versions of the graphs and pie charts in the People's Experience Report.

Q2: FoCUS Reps highlighted the response from the Trust says they plan to improve their complaints response performance to 75% of complaints responded to in 49 days and felt this was still too long. Jonathan Warren commented that the Trust are unhappy about this as a target and will start working towards a 25-day response target, recognising that this is ambitious, but they hope to hit it by the end of the year.

Lorna advised that better processes need to be in place and as such there may be a lag and it will take time, but they are clear that they do not want 49 days to be their target.

Jo Lynch noted that there is also some good work around PALs responding quickly to issues and people are getting far more quick responses and feedback from local teams and the PALs team. In many organisations these PALS responses would be counted as complaints and would have very short response times.

Q3: FoCUS would like to ask the Trust to ensure that the details of Community Police Officers are also kept up to date on Trust notice boards.

Q4: Regarding the People's Respect Programme, Janice Clark explained that the Carers Respect Programme is about attitudes and explained undertaken around this. FoCUS feels there would be great value in doing something similar

with people who use services; it would be a good core piece of work and Janice highlighted the impact of emotion when people are giving their experiences.

Referring to the questions asked to the Trust regarding parking fines at Aldershot Centre for Health Reps felt the response showed a lack of interest and respect and would like to know if there is a more sensitive response for people using this particular service in Aldershot.

With regard to car parking, one of the things that has come to light (mainly through staff) is that the Trust didn't make sufficient provision for people coming to appointments and has slipped into not having a sufficiently robust approach with access to car parking and this can be a difficult experience for some. Lorna acknowledged that it is challenging on many sites, but the balance needs to be better.

Janice advised that Lake House produced a 'how to get here' leaflet, however it did not give information such as how far from the public car park they are or about facilities for disabled parking, whether there is an accessible toilet etc; this is information that people attending appointments would like to have. It is not good enough to give a site map as it does not give the detailed information that may be needed. Reps highlighted the fairly steep gradient walking up to Abraham Cowley Unit from the car park and queried whether appointment letters advise people that this information can be found on the Trust website.

Julie Gaze thanked FoCUS for this feedback explaining that 'Disabled Go' developed instructions and directions for the Trust and this has been re-done in the last 12-18 months, so it should have picked this up, however Julie agreed to check this.

Q5: Jane Ahmed commented that no answer has been provided about the literature issues highlighted at Farnham Road Hospital and also queried why the community meetings at ACU, which have worked well have been changed to a 'safe wards' model?

The ACU has had some operational challenges and the Trust are looking at an 'Improvement Board' to hear views; the point regarding the community meetings was noted and Reps were advised that there is a new Inpatient Manager and a new Divisional Director who want to look at everything. If FoCUS members would like to share any experiences, please let the Trust know.

David Muir explained that he had previously visited the ACU in his role as Learning Disability Governor, however there has not been a further invitation for

him to attend. Julie Gaze noted that David had been involved in a project looking at literature and making this easy read and agreed to find out if this had been concluded.

## **10. Update on Annual Plan and Future Projects, Q3, Julie Gaze**

Please refer to the document previously circulated.

Julie wished to draw attention to December 2017 when the Trust assumed responsibility for the behavioural service to children from Ashford and St Peter's Hospital Foundation Trust as part of children's work looking after children with ADHD (attention deficit hyperactivity disorder) and ASD (autistic spectrum disorder). This has increased the services provided to children and the Trust are working hard to reduce the unacceptable waiting times for children and families using these services.

Jane Ahmed addressed the waiting time for children and families reported as 18 months and the Trust commented that they are not sure this figure is correct and have had long conversations with NHS Improvements and are addressing managing capacity and getting the case load down this with the CCGs. The Trust is also raising this with their regulators and commissioners.

The Single Point of Access (SPA) is now unlikely to be fully implemented in this Quarter as conversations with commissioners continue regarding investment in the model tested. The learning through the SPA isn't lost and they will continue to lobby and champion the full model, although this is not confirmed yet.

Janice Clark informed the Trust and the Independent Mental Health Network wrote to all Clinical Commissioning Groups (CCGs) to say it should be funded and supported the style of working.

The Trust are progressing plans to improve their hospital facilities, and this includes plans to redevelop the Abraham Cowley Unit (ACU) whilst also developing options for East and Mid Surrey, although this will involve investment from CCGs to complete the scheme. They are trying to do as much as they can as quickly as they can and are prioritising what it is possible to do to improve the ACU now. They are confident they can generate enough money to do part of the work but have not secured all of the money to do everything.

It is hoped the refurbishment of the ACU will create single bedrooms with ensuite for everyone and are currently looking how can they do this and keep

the number of beds they already have. They are carrying out some remedial work in relation to dormitories in the interim to enhance a person's experience.

Stephanie S commented that funding should be spent on safety and having staff on the wards looking after their patients as opposed to new rooms particularly as the staff are constantly back and forth escorting visitors in and out. Lorna explained that how the Trust improves the experience, and how to keep people safe is something they are committed to do including how to manage the airlock. The project is looking longer term trying to give everyone a good environment.

David suggested employing a security officer to man the door and escort visitors.

## **11. Positive Reports from FoCUS Members**

The Committee noted the positive reports received from FoCUS Members.

## **12. News and Feedback from the Trust, Jonathan Warren**

Jonathan reported the following news from the Trust:

- Contracts – the planning guidance is out, and Julie Gaze recently had a webinar with Claire Murdoch the newly appointed NHS National Mental Health Director who is keen on meeting the Mental Health Investment Standard which is hopefully good news. Jonathan is not sure of the uplift, but it may be between 2-4%.
- The Deacon unit is the new learning disability inpatient service which was inspected by CQC for the first time and received some very positive verbal feedback. The Trust think it will be rated well and the feedback was lovely to hear. During their visit the CQC approached all the carers of inpatients and their feedback supported what they had seen in practice.
- Fiona Edwards is very unwell with a serious infection and is not expected to return for some time. In terms of interim arrangements Jonathan will be acting as Chief Executive and Billy Hatifani will be acting as Chief Nurse; these proposals will go to the Remuneration Committee soon.

Janice Clark spoke about the Mental Health Investment Standard and asked if they are anywhere near parity of esteem for mental health and Jonathan commented that over the last 2 years, in Surrey, we are in terms of uplift, however if this is measured as in 1 in 4 then we are nowhere near. The Mental Health Investment Standard links to the whole of the contract and there is a pot of funding around waiting times and other things.

Jane Ahmed wished to highlight that there have been a few Reps that have not been well recently and would like to acknowledge them and hoped they are better soon. The Committee echoed Jane's comments.

**13. Date of next FoCUS Committee Meeting: 8<sup>th</sup> May 2018  
(Reps 12.45pm – 1.45pm, FoCUS Committee 2 - 4.30pm)**

**Summary of actions for Committee:**

<b>No</b>	<b>Action</b>	<b>Responsibility</b>
1	Jo Lynch provided FoCUS with details of what is currently sent to carers and the West group noted that the information was particularly out of date. FoCUS has raised the issue of updating information on a number of occasions and Jo Lynch agreed to follow this up. (action 6 November Committee)	Jo Lynch
2	Carers - Under the item 'have you been prevented about asking questions' FoCUS would like the Trust to also ask why someone may have been prevented.	Ann Stevenson
3	Lorna Payne to take away points raised regarding the Safe Haven leaflets and other issues.	Lorna Payne
4	The Trust to update FoCUS on 'pathways' at the May FoCUS Committee.	Lorna Payne
5	The Trust to organise a half-day workshop on the future of FoCUS in late spring or early summer (with involvement from FoCUS Rep Claud Norris and FoCUS Involvement Facilitator Jane Ahmed.	Jonathan Warren Jo Lynch
6	The Trust to look at producing easy-read versions of the graphs and pie charts in the People's Experience Report and ensure that the print is larger.	Jo Lynch
7	Julie Gaze to check that the 'Disabled Go' information produced for the ACU picks up the points raised at Committee – such as the gradient to the ACU from the car park.	Julie Gaze
8	Julie Gaze to find out whether the project David Muir was involved in looking at making literature into easy-read has concluded.	Julie Gaze