

**FoCUS**  
West Area Group Meeting  
Thursday 11<sup>th</sup> January 2018  
1pm – 3pm  
High Cross Church, Knoll Road, Camberley, Surrey, GU15 3SY

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Minutes of the Meeting

**Attendees:** Nina Cornwell, Janice Sands, Janice Clark (FoCUS Rep & SABP Governor), David Muir (SABP Governor & FoCUS Rep for SW), Ian Penfold, Donna Brown (FoCUS Rep), Leanda Hargreaves

Jacque Pond (Engagement Officer, Healthwatch Surrey), Rachel Bremner (Action for Carers), Lisa Tilsten (Hart Rushmore), Rob Berry (SABP Coms team), Sarah Wickens (People's Experience Project Coordinator, SABP), Carol Gibson (PALS and Complaints SABP), Catherine Wheeler (Carers Practice Adviser), Faye Nel (Surrey Heath CMHTOP), Jane Ahmed (FoCUS Involvement Facilitator), Lucy Finney (LF Solutions, Minutes).

**1. Welcome and apologies**

Apologies were received from Colette Lane, Jane Low (CPA), Amanda Emerson (CPA), Tony Hall and Carol Frost (CMHRS Manager), Fiona Maxwell-Stuart.

Jane Ahmed welcomed Members to the meeting, introductions were made, and Members were reminded of the meeting rules.

**2. Minutes of the previous meeting and matters arising (December 2017)**

Accuracy

The date of the minutes needs to be amended to December 2017.

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.*

### Actions from December's Meeting

There were no actions to follow up.

### **3. Updated November FoCUS Committee Actions**

Jane ran through the actions that had been updated since the last Committee meeting.

Janice Clark spoke about the ongoing account of the Discharge Leaflet and the actions those who drafted it have taken so far. The draft received, after being looked at by clinicians in the Trust had changed the content and tone of the leaflet significantly which was every disappointing for all those involved in its original draft. Jane and Janice made their concerns known and there will now be a meeting with Directors Billy Hatifani, Jonathan Warren and Anne Stevenson the Trusts lead for carers and a carer Governor to discuss how there can be greater scrutiny around all this type of work in terms of accuracy before it reaches the Communications team. Much information is developed locally and at times this information is not correct. Members felt it was good news that this is now being looked at by senior people in the Trust and Governors.

Regarding the future of FoCUS and the proposed new People's Voice Committee, Jo Lynch and Sarah Wickens will be attending the Reps meeting on 22<sup>nd</sup> January to discuss this further with them.

Action 6: FoCUS received information that is sent to carers from SABP and picked up that this information is very dated. Some services are using very outdated literature which does not have the correct information. It is felt that going forward every piece of literature should be dated and have a version number included. Some services have stocks of paper that aren't used.

#### **4. Local Issues – Good news, Compliments and Issues**

##### Good News/Compliments

Janice Clark reported that Helen Rostill (Director of Innovation and Development) and Judi Mallalieu (Director of Transformation and Partnerships) are the mental health leads for the STPs and it has been agreed with Helen Rostill that the Carers Commissioning Group for Surrey will produce a statement re carers for the mental health work stream.

Frimley Heath STP is holding two workshops for carers, one in Berkshire and one in Ash and it is hoped that mental health carers will attend. The event in Ash is on the 24th Jan youth centre from 10am to 2.00pm. Members were pleased that mental health carers can attend to talk about issues.

Jane updated that Healthwatch Hampshire are holding an event next Tuesday 16<sup>th</sup> January in Fleet and details have been circulated.

Jacquie Pond spoke about Healthwatch Surrey explaining that they work across a series of priorities and one of these is around mental health. During February and March this year Healthwatch will be specifically focussing on discharge plans for those who have been inpatients in a mental health setting. They hope to talk to people either confidentially or more widely in a group about their experiences; they will also hold some drop-in sessions. Jacquie asked Members to pass this information to anyone who may wish to talk to someone in a safe environment about discharge plans.

After compiling people's actual experiences over these two months, they will produce a report that will be circulated to providers and commissioners, so they can be aware of what is happening on the ground. Jacquie left several cards detailing ways she can be contacted.

David Muir asked about transport to any groups they may be running and Jacquie said that she can confirm this at the end of January.

Jacquie explained that Healthwatch Surrey have an 'escalations panel' and as such want to receive experiences that may need to be escalated. Whilst the piece of work Jacquie is here to talk about today is specifically around mental health discharge, Healthwatch want to know about any experience anyone has within health and social care.

The Group understood that each county has their own Healthwatch and Janice explained that this area is particularly tricky as people are using cross border services and there will be some overlap which Jacquie was aware of. Janice referenced other Healthwatch work on generic discharge and felt it could go further looking at the impact on carers at the point of discharge and hopes that this piece of work will also include carers. Jacquie confirmed she very much wants to hear the experiences of carers and acknowledged that some carers live in Surrey but care for people in other areas and vice versa. If Healthwatch hears a vital piece of information/evidence, they would not discard it based on postcode.

Faye Nel asked about the remit of the project and Jacquie confirmed it is around inpatient mental health care from 18 years upwards as CAMHS will be looked at separately.

As a small incentive vouchers are available for people who participate to be entered in to a prize draw.

Rob Berry reported that the extended 'Hope' service won a national children's and young people's award at the weekend.

### Local issues

Some Members highlighted their experiences of the link between the CMHRS and Frimley Park Hospital continuing to be poor; Donna outlined her experiences of this. Donna is concerned about the process of Psychiatric Liaison discharging back to the GP. What is the process?

Rachel Brennan advised that this is a problem that she is also aware of from those she speaks to - people being discharged from the CMHRS to the GP for ongoing care. Rachel has been told by many families that the person they care for does not receive a discharge assessment prior to discharge from hospital. It is understood that there should be a 7 day follow up from the CMHRS or Home Treatment Team (HTT) or GP and this has not been happening in a number of cases. It was also reported that Psychiatric Liaison are not interacting with the Safe Haven as well as they used to.

Ian Penfold talked about poor experiences with the Hollies recently particularly relating to one occasion when they arrived for an appointment only to be told that the psychiatrist was ill. FoCUS would like to ask the Trust that if someone is off sick can there please be a

respectful phone call as early as possible to the person or the carer informing them of the cancellation; it can be very stressful for the carer to get the person they care for out, find and pay for parking etc and the lack of communication may make them feel not valued. Rachel has had several carers report of similar instances.

Other experiences included stories of many people missing annual reviews of medications as they are not receiving paperwork regarding this review. This relates to both working age adults and CMHTOP.

Leanda suggested it is about communication and has experienced ongoing issues with communication. This is very crucial to everything and staff should be mindful of individual's situation.

Janice Sands gave her experience of someone waiting for an urgent review in older adults in Woking which kept being delayed and in the end, they gave up.

Donna Brown reported that she has recently incurred two fines from the car park at the CMHRS in Aldershot, both due to circumstances beyond her control. Other FoCUS Members had also heard of similar experiences which can cause stress and anxiety for those attending the CMHRS. FoCUS felt there needs to be flexibility in terms of issuing penalty notices particularly for those whose appointment runs over or is running late – should the Trust then be responsible for paying any fine incurred?

FoCUS are also concerned about whether the payment machines are accessible for people as they do not comply with the Equality Act; the keypad is small and entering a registration number can cause unnecessary worry for the person. Whilst FoCUS are aware that the Trust do not operate the car park they would like the Trust to be aware of these issues and raise them with the car park authority to try and alleviate some of the stress, anxiety and worry about returning to their car in time. Some suggestions included clearly accessible 'top up' machines located inside Aldershot Centre for Health or the being able to pay by card and only paying for the time you are there, taking away the worry.

## **5. CPA Update, Rachel Brennan (Action for Carers Surrey)**

Rachel attended the meeting to update about the Carer Practice Adviser role within the CMHRS and how their role has changed in terms of the

support they offer carers. The Carer Practice Advisers (CPA's) no longer carry out carer assessments but will be there to support carers when appropriate. They also support staff members to carry out carers assessments and will be involved in more complex carers assessments.

Janice Clark asked if carers assessments are routinely undertaken by the Care Coordinators and Rachel explained that she is aware of a number of people who have not had this, particularly those who have a discharge coming up. It was noted that no carer assessments have been completed under CAMHS and commissioners are following up on this. There appears to be a lack of consistency in regard to carer assessments in the CMHRS's.

Care Coordinators can be a range of staff and Janice asked if Rachel noticed any difference in quality in relation to those who undertook them? Rachel has noticed that some of the new and locum staff do not complete a full carers assessment, however it is difficult to say if it's down to one profession but something they will be looking into further.

Ian Penfold shared his experiences of his carer assessment (from his local council) and felt that the assessment should be based on the carer needs not the needs of the person they are caring for. Rachel advised that if it is not meeting his support needs he should go back and say that he needs an updated carers assessment.

Leanda Hargreaves suggested that the carer assessment is renamed 'carer needs assessment' as often people think it is an assessment of the care they are giving.

Rachel explained that the Social Care assessment process is a formal assessment and they listen and support the carer in an assessment to tell them about their lives and what their needs are. The CPA's assessment of their needs that is recorded and agreed with the person. Surrey County Council do not assess carers financially their services - carer services are free of any charging. They want to meet the needs of the person who is being cared for so as to alleviate the impact on the carer. A carer can have an assessment in isolation but if what they tell them evidences high needs of the person they are caring for they promote an assessment for them as well (on the appearance of need) as supporting their needs will lessen the impact on the carer - each situation is different. This is whole family thinking and working, which they promote.

Janice Clark said that without doing a Carers assessment eligibility to statutory services cannot be established; if there is found to be eligibility there is requirement to provide these services and every local authority must ensure they have the resources to provide for assessed and eligible needs. If the carer does not qualify for a statutory service there is still a duty to provide a prevention service which includes information and referral to places such as carers support, wellbeing services etc.

The carers can also expect an assessment for their life outside caring as well as their needs in their caring role. This could be support with their work or their health, referral to IAPT etc. There is also a duty to provide advocacy to people that are vulnerable and have access to complaints and appeals if they don't qualify and wish to appeal this.

Donna Brown asked how the carer knows they need a care assessment? Rachel advised that as it is a legal responsibility the Care Coordinator will contact the person, however if the person is not under services the carer can contact adult social care about this. If someone has been assessed for Direct Support the social care team should look at who their carer is, and they should be automatically offered a carers assessment. Rachel updated about an on-line request for a carers assessment which will soon be open to carers over 18 years of age (but not for parent carers).

Rachel will be providing carer training to CPA's, starting in the Guildford and Waverley teams and all staff on Farnham Road Hospital wards.

There are also rights for people who use services, and many don't know about their rights to a Care Act Assessment. Janice suggested information about people's rights and what they can expect from a Care Act Assessment be a topic for a future FoCUS meeting.

Janice asked about referrals to the new carer support service being provided by Action for Carers Surrey and Rachel confirmed that they receive about 100 Carer Prescriptions per week and a lot of the carers who phone in have their queries answered by the Carers Information Centre team, however in Rachel's area there are between 30-36 referrals each week for enhanced support for carers.

It was noted that the CAB are at the wellbeing centre every Monday to help complete forms etc.

The Group thanked Rachel for her time.

## **6. Questions to PALS on the People's Experience Report**

The people's Experience Report now replaces the Expert Report and will be published every 6 months.

Tracey Pettit attended the meeting and asked for feedback or questions, talking through her Compliments, PALS and Complaints section.

Janice highlighted on page 5 that it states 60% of people were satisfied with the services and 60% of carers satisfied; this is a higher level of recommendation than level of satisfaction – how does that happen? Carol explained that they were two different questions.

It is good to see the CQC ratings and it would be good to see what is happening as a result of the 'requires improvement' areas. FoCUS Members would also like the report to indicate what each residential home is LD, the name of the wards individually etc.

The Carers Respect programme is about attitudes and where things have gone wrong and come to a common understanding. FoCUS would like to ask the Trust if it is possible for another piece of work to be done for people who use services and respect in the same vein as the Carers Respect Programme?

Rachel has received feedback from carers about how the Carers Respect Panel has been put into action and how carers were invited to participate in these panels? It was noted that there will be a number of panels during the year that carers can attend to talk about specific issues. FoCUS will ask the Trust to inform them when these panels are taking place and is there an action plan with timescales from the action plan in the Carers Respect programme document?

Ian Penfold queried whether there is there overlap with people placed in different kinds of environments and questioned the analysis of these ratings. Staff advised that information was taken directly from the CQC and visiting their website will provide further details on the ratings. Some Members felt that the information was a bit too simple and would like to see wards listed.

Members reported huge improvements on Victoria ward which has been totally turned around.

Recovery College – great news that it is so valued by carers and people using services.

## **7. CMHTOP Update, Faye Nel**

The services have gone for National Accreditation and the Royal College of Psychiatrists meets this month and the Trust hope to hear the outcome by the end of January.

At Theta the Clinical Commissioning Group (CCG) has met with all the services to do quality visits which have been positive.

The young onset dementia group has started at Theta supported by the Trust and the Alzheimer's Society. This group has been designed by the people who attend and it's going well.

Signage at Theta continues to be an issue.

Faye will be supporting Rachel's services to hold an event in April for carers around how to manage symptoms of mild and early onset dementia looking at problem solving all the things carers find difficult with dementia.

Janice Clark reported that they have the beginnings of the Ash Parish dementia alliance offering activities for people at early stages of dementia and their carers.

## **8. Tips on what to pack for a hospital admission**

A recent BBC news item suggested some items a person may pack to make their inpatient stay more comfortable. The Trust have suggested that FoCUS Members may like to make their own 'local' list and asked members for their suggestions, which were as follows:

- Pack a pillowcase to smell something familiar.
- Routine and predictability – have a bag that is already packed.
- The carer having a list of things you would like in hospital.
- Written list of contact phone numbers for friends and family.
- Use the 'message in a bottle' for a list of medication.
- As the Trust is now smoke free, be prepared to take a non-tobacco product.
- Personal hygiene products for women.

- A4 sheet containing what a person's condition looks like, medication and how best the person can care for you; this helps the medical profession.
- Communication passport contains all these details for those with a learning disability.
- Take along your care plan and crisis and contingency plan. Also, if a psychiatrist and care coordinator has signed an advance statement it may be used more quickly on the ward.
- Would it be useful to have something similar to the 'red bag' for those who go in and out of hospital frequently?

Janice Clark talked about 'Johns campaign' who are of the belief that carers should not just be allowed but should be welcomed, and that a collaboration between the patients and all connected with them is crucial to their health and their well-being, this includes access to relatives out of visiting hours, being part of the care team, reduced parking etc. The Trust are about to complete signing up to it for older people's inpatient services.

The 'Red bag' system will be launching next month. Everything that is important and pertinent to that person goes to in to the red bag and this goes to any setting a person may be in.

#### **9. Date of next meeting:**

The next meeting will take place on Thursday 8<sup>th</sup> March 1pm – 3pm, Theta Building, Lion Way, Frimley, GU16 7ER.

#### **Issues to be taken to the FoCUS Representatives/ Committee Meeting:**

#### **Next FoCUS Committee meeting February 2018:**

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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| 1 | Relating to Question 9 (questions to the Trust) from 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. Correction to be made in the minutes. |
| 2 | Some Members highlighted their experiences of the link between the CMHRS and Frimley Park Hospital continuing to be poor. FoCUS has also been made aware of problems when people are                                                                                                                                                                                                                                                                   |

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|   | <p>discharged from the CMHRS or Psychiatric Liaison to the GP for ongoing care. Can the Trust please confirm the processes in place for handing back care to the GP to ensure all parties are kept informed and up to date?</p> <p>It also appears that many families report that the person they care for has not received a discharge assessment prior to discharge from hospital. It is understood that there should be a 7 day follow up from the CMHRS or Home Treatment Team (HTT) or GP and this has not been happening in a number of cases. It was also reported that Psychiatric Liaison are not interacting with the Safe Haven as well as they used to.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 3 | <p>FoCUS Members have heard about poor experiences at the Hollies recently particularly relating to people arriving for appointments only to be told their psychiatrist is off ill. FoCUS would like to ask the Trust to ensure that if someone is off sick community teams please make a respectful phone call as early as possible to the person or the carer informing them of the cancellation; it can be very stressful for the carer to get the person they care for out, find and pay for parking etc and the lack of communication may make them feel not valued.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 4 | <p>FoCUS heard stories of many people missing annual reviews of medications as they are not receiving paperwork regarding their review. This relates to both working age adults and CMHTOP.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 5 | <p>A FoCUS Member recently incurred two fines from the car park at the CMHRS in Aldershot, both due to circumstances beyond their control. Other FoCUS Members had also heard of similar experiences which can cause stress and anxiety for those attending the CMHRS. FoCUS felt there needs to be flexibility in terms of issuing penalty notices particularly for those whose appointment runs over or is running late – should the Trust then be responsible for paying any fine incurred?</p> <p>FoCUS are also concerned whether the payment machines are accessible as they do not comply with the Equality Act; the keypad is small and entering a registration number can cause unnecessary worry for the person. Whilst FoCUS are aware that the Trust do not operate the car park they would like the Trust to be aware of these issues and raise them with the car park authority to try and alleviate some of the stress, anxiety and worry about returning to their car in time. Some suggestions included clearly accessible ‘top up’ machines located inside Aldershot Centre for Health or the being able to pay by card and only paying for the time you are there,</p> |

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|   | taking away the worry.                                                                                                                                                                                                                                                                                               |
| 6 | FoCUS suggested that the carer assessment is renamed 'carers needs assessment' as often people believe it is an assessment of the care they are giving.                                                                                                                                                              |
| 7 | FoCUS understand that the Carers Respect programme is about attitudes and when things go wrong, coming to a common understanding. FoCUS would like to ask the Trust if it is possible for another piece of work to be done for people who use services and respect in the same vein as the Carers Respect Programme? |

### Actions – General

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| 1 | Information about people's rights and what they can expect from a Care Act Assessment be a topic for a future FoCUS meeting.<br><b>Completed and noted as a future topic.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                              | Jo Lynch<br>Lucy Finney |
| 2 | <i>For Information:</i><br>FoCUS Members liked the new People's Experience Report, however found the section on the CQC ratings to be lacking detail. Some FoCUS members suggested there were no metrics included and would also like to see the details of wards etc.<br><b>Completed. If it would be helpful, I can provide the public Trust Board CQC update to the group. Also, the Trust would like to include a FoCUS page in the next experience report. It would be good to know what metrics/details people would find helpful to see (the CQC You said, We did document has been circulated in the interim.)</b> | Jo Lynch                |
| 3 | Can the Trust tell FoCUS if there is an action plan with timescales from the action plan in the Carers Respect programme document?<br><b>Completed. All of the actions from the Respect Programme are on the Carers Action Plan.</b><br><br><b>With regards to the new carers pack this will be going to the next Carers Action Group in March we will then have a completion date.</b>                                                                                                                                                                                                                                    | Jo Lynch                |
| 4 | Please can the Trust inform FoCUS when the carer respect panels are taking place and how carers can                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Jo Lynch                |

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|  | <p>be involved?<br/> <b><i>We have had a communications drive with the Carers Respect Programme and have advertised widely. This has been through the e-bulletin, Trust intranet and Partnership People, we have also had a poster developed for display in the teams.</i></b></p> |  |
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## Contact details for your Support Team

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| <p><u>For Member support please contact:</u><br/>         Carol Pearson and Jane Ahmed at the Surrey Coalition of Disabled People<br/>         Tel: 01483 456558 Text: <a href="tel:07780933053">077809 33053</a><br/>         Email: <a href="mailto:carol.pearson@surreycoalition.org.uk">carol.pearson@surreycoalition.org.uk</a><br/>         Email: <a href="mailto:jane.ahmed@surreycoalition.org.uk">jane.ahmed@surreycoalition.org.uk</a><br/>         Address: Astolat, Coniers Way, Burpham, Guildford, Surrey, GU4 7HL<br/> <a href="http://www.surreycoalition.org.uk">www.surreycoalition.org.uk</a></p> <p><u>For Meeting support please contact LF Solutions:</u><br/> <a href="mailto:lucy@lf-solutions.co.uk">lucy@lf-solutions.co.uk</a> Tel/Text 07727 273242</p> |
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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                  |
| 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  |
| 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                         |
| SMS   | Short Message Service i.e. text message       |
| STP   | Sustainability and Transformation Plans       |