

FoCUS
East & Mid Surrey Area Group Meeting

Monday 5th March 2018
1pm – 3pm

Reigate Baptist Church, Sycamore Walk, Reigate

Minutes of the Meeting

Attendees: Marion Price, Mary Whitfield, Kate Steele-Newman, Stephanie S, David Murphy, Val Murphy, Chris Linde, Helen Smith

Caroline Hewlett (Senior Manager, SCC), Juliette Flynn (Senior AMHP), Sarah Wickens (People's Experience Project Coordinator, SABP), Jane Ahmed (FoCUS Involvement Facilitator), Lucy Finney (LF Solutions)

Apologies: Clifford Wright, Don Illman

Jane Ahmed welcomed Members to the Group and introductions and apologies were noted.

1. Minutes of previous meeting and matters arising (January 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 January's meeting

- 1 Ongoing from Action 3 of the December minutes. Jo Lynch to circulate further information about 'Organisational Forgiveness'.
Completed and circulated to Members.

- 2 Ongoing from Action 5 of the December minutes. The Trust were unable to distribute lists of staff names but are happy to circulate types of roles and where they work.
LF followed up with Jo Lynch who is awaiting a response from Human Resources Department.

- 3 FoCUS Members felt the 'Understanding Autism and ADH' Members Event was a really good event to hold, however, the location, Aldershot, is a long way from Redhill and anywhere in the East of the county, particularly when travel expenses are not paid/offered. Given the interest in the subject FoCUS would like to suggest the Trust run another session in the East to give others an opportunity to attend. Please can the Trust also circulate the presentations given to FoCUS.
Completed. There has been a lot of interest in this event, which took place on 6th February, and it is fully booked with 100 people registered so the Trust were thinking that they may do something further around this in East Surrey, but this will depend on how well the event is received next month. They can certainly make a note to send the presentations to FoCUS after the event and will let FoCUS know whether there will be another event arranged in due course.

- 4 A FoCUS Member was recently informed by a Social Worker/AMHP at Gatton Place that both the Trust and Surrey County Council are no longer taking up the position of Benefits Appointee. Can the Trust tell FoCUS who should be approached to assume this role if required by a user of Trust services?
Completed. Surrey County Council are still able to act as (or apply to appoint) an appointee or deputy. They follow the regulatory position as set out by the Department of Work and Pensions and will still act as Corporate Appointee where necessary.

A Corporate Appointee would only usually be appointed if there is no-one else suitable i.e. no other relatives/friends able to carry out the role.

- 5 Some FoCUS Members felt that the Home Treatment Team in Epsom need a base in Epsom as they are currently in Redhill and can take some time to get to Epsom in an emergency.
Completed. The East and Mid Home Treatment Teams (HTT) were merged during November 2017 and the team is now based at Gatton Place. The reason was to enable a more flexible use of

resource and an enhanced team infrastructure.

The HTT's are required to respond to referral within 4 hours and this is monitored closely by our commissioners. To date we have not experienced any breaches as a result of the team merger.

The HTT is not an emergency service, so situations that require an immediate response would be dealt with by the emergency services such as the police and ambulance.

- 6 Pretima Seeruthun to find out if the Psychiatric Liaison leaflet is available electronically for circulation to FoCUS.
Completed. There is no electronic leaflet available, however Pretima has asked all the Psychiatric Liaison leads to supply FoCUS with their leaflets.
- 7 Slides from the Mount Browne Training Day to be circulated to FoCUS. **Completed.**
- 8 Members asked whether SABP provide mental health training to the Police service who deal with a number of mental health patients and are often not sure how best to look after them. Please could the Trust advise FoCUS whether regular training is in place for Police officers to inform them about mental health issues and places of safety such as the Safe Haven?
Completed. Thanks – regular training is in place. Our AMHP's are very involved in this work. We have monthly operational meetings with Surrey Police and have one Police Officer seconded to SABP to support the joint work. The Crisis Concordant work oversees the collaboration. We have been working closely over the new Section 136 of the Mental Health Act changes. The Police now have to speak to a Mental Health professional before they use their powers under Section 136 – they are advised of Safe Havens through these conversations, the training and through the Mental Health lead for Surrey Police.

Stephanie S felt that two days training for Police Officer is not enough and Caroline explained that they do carry out regular training days on a rolling programme of half day sessions throughout the year. There is also different levels of training for different ranks in the Police. Marion Price said that on the learning disability side the Police and

Surrey County Council have produced literature and videos which the Police are able to refer to.

- 9 FoCUS Members were disappointed that there are still no Recovery College courses running in Tandridge or Redhill, can the Trust advise if these will be in place in the near future?

Jo Lynch has followed this up with the Recovery College and advised them of the concern – they are actively seeking Tandridge locations to hold the college so we should see that flow through.

- 10 Regarding the People's Experience Report FoCUS were concerned that the response rate for completing questionnaires was low and not a true reflection or assessment, particularly regarding the statement that food is good. What are the Trust doing to ensure that questionnaires are completed and do all the CMHRS's and inpatient wards have working iPads?

Completed. The Your Views Matter surveys are reflective of individuals experiences at the time therefore will never reflect everyone's experience. Clearly, this person experience around the food was good and that experience is valid. We have set up a new system where all the I pads are monitored and checked. We have recruited volunteers to work into our inpatient services to support increasing the number of surveys being completed as we also wish to make sure we are increasing response rates. You will also be aware of the work surrounding food in our inpatient services which some of the Reps have been involved in through their role as Governors led by Lorna Payne.

- 11 FoCUS Members would like to suggest a talk from the Early Intervention in Psychosis team at a future meeting.

Completed. This has been noted as a future topic for discussion.

2. Feedback from FoCUS Committee, February 2018

Jane Ahmed ran through the summary and the following was highlighted and discussed:

- Carers Respect Programme: Ann Stevenson updated about the three pieces of currently being worked on.
- FoCUS received apology from the Trust about the difficulties with the Discharge Leaflet.

- Ann Stevenson talked about the Carers Report and FoCUS highlighted that the writing in the document and graphs is still too small and the graph colours are not good.

Mary Whitfield also felt that the analysis of the data at the end of the Report is poor noting that it says 'our information that we collect is telling us that we are not recording when our carers have assessments' – can the Trust please explain to FoCUS how they know this? The analysis also states that the Trust are aware that referrals via Carers Prescription tend to be from one team – how will the Trust ensure this happens in all teams? FoCUS noted that Reigate did not make a single referral to the Carers Prescription, however, Juliette was concerned about this figure as Reigate CMHRS have been doing these. Juliette agreed to take this back and update FoCUS.

FoCUS felt that the explanation at the end of the report is not terribly helpful and it would be better to have an analysis under every graph and include details of what actions will be taken from the results.

- Safe Haven Review: David Murphy asked when the laptops at the Safe Haven will have the privacy screens fitted? The report does not mention being able to get a Band 6 worker available for every Safe Haven – Redhill could not open recently as a Band 6 worker was not available and a referral from East Surrey Hospital A&E to the Safe Haven and it could not happen as there was no-one there to do it. How often as Safe Haven's not manned as per what the contract says?

FoCUS would like to know if there is a Nepalese Support worker at the Aldershot Safe Haven and if not how do they support those Nepalese who attend?

FoCUS heard at Committee that the Trust will agree to pay to transport if a person is unable to travel safely to the Crisis Overnight Service. However, a FoCUS Member recently heard that a person at a Safe Haven needed transport to the Crisis Overnight Service and this was not available as there is no budget. Can the Trust confirm that this is now happening and how - i.e. will the Safe Haven have an account with a Taxi firm or have cash to pay them directly?

- Discharge, Care Plans & Communication: It was noted by FoCUS Reps that the report back from the Trust was not as helpful as FoCUS would have liked and this was acknowledged by the Trust. Marion Price spoke about discharge from general hospitals for those with a learning disability as they need the services of Surrey and Borders; Marion felt that SABP are doing a good job in this area and overall, they have a good service for people with a learning disability.
- Update on the way forward for FoCUS: it was agreed that FoCUS are not quite ready to move into the new style of Committee at present and the Trust suggested FoCUS Reps meet with some experts in participation to see what the way forward may look like.

3. Local Issues

Compliments and Good News

Stephanie S reported that the Safe Haven in Epsom have been brilliant and the CMHRS Team in Epsom and her Care Coordinator have been really good and would like to thank them for their support.

FoCUS heard that staff at the Crisis Overnight Service are really very good and accommodating but felt that it doesn't work as a crisis house as it is a residential setting.

Local Issues

Members asked about the Crisis House closing and the new Crisis Overnight Service and this was explained.

Marion Price wanted to ensure that Members were aware of the Sustainability and Transformation Partnerships (STPs), both Surrey Heartlands and Sussex and East Surrey and members reported that they were aware of these and their aims.

FoCUS would ask the Trust, as a matter of urgency, to issue a position statement on the Langley Green bed contract which Members now understand ends in March 2019 and will not be renewed. What with the STP and no movement on hospital provision locally in the East the Trust must let people know what is happening as it is a huge issue for people in the East.

FoCUS would like to ask what screening healthcare assistants working for the Trust undergo i.e. DBS checks etc?

A discussion took place about assaults on wards both patient attacking another patient and a patient attacking a member of staff and queried why the Police are only called if a patient attacks a member of staff but not when a patient gets attacked by another patient – what is the difference? Whilst it was recognised that an inpatient is likely to be unwell if they call the police, often they will want to talk to staff who say that they have the situation in hand - what about the safety of the patient, people have the right to feel safe on wards? Members queried whether families and carers are advised if there is an incident on a ward and Caroline Hewlett explained that this would happen if the person has agreed they can know about their care.

FoCUS would also like to ask the Trust about protocol when someone goes AWOL from a ward.

4. Mental Capacity, Caroline Hewlett

Please refer to the attached presentation.

Caroline attended the meeting to talk about mental capacity and Deprivation of Liberty Safeguarding.

Caroline explained the following:

Mental Capacity Act: The ability to make a particular decision or take a particular action for yourself at the time the decision or action needs to be taken, these can be more routine decisions about daily activities or more serious and significant decisions such as moving home or refusing medical treatment. Mental Capacity is always decision specific and time specific.

The underlying principles are always to presume people have capacity unless there is a reason to assume they don't i.e. they may be intoxicated in which case they can wait until the person has capacity or if they have a learning disability take the time and effort to communicate in appropriate way for them. Decisions made are always the least restrictive and, in the person's, best interest.

The definition is an impairment or disturbance of mind or brain which can be temporary or permanent.

The Act relates to people aged over 16 but there is a children's Act that covers under 16s. The basic test for capacity looks to see if the person can understand and retain information long enough to make a decision, and whether they can weigh that information as part of making a decision or communicating the decision.

Mental Health Act: They have two sets of professionals involved, Approved Mental Health Practitioners (AMHPs) and doctors the role is to coordinate the process and arranging the assessment. Doctors will make a recommendation and the AMHP will make an application based on this or not looking at risk to that person and risk to other people.

The principles of the Mental Health Act are that decisions must be taken with a view to minimising the undesirable effects of mental disorder, be the least restrictive, respectful, participation, effectiveness, efficiency and equity.

Advance Statements and Advanced Decisions: An Advanced Decision is when a person is capacitated saying what treatment they want or don't; this usually covers physical conditions and can be overruled by the Mental Health Act under Section 3, whilst taking the person's decision into account. The exception is if a person gives a validated Advanced Decision for refusing Electroconvulsive Therapy this must be respected and can only be overruled for urgent, necessary treatment.

An Advanced Statement is when a person who is capacitated making their intentions and decisions heard when they are ill such as who they would like involved in their care etc.

Juliette Flynn noted that the Approved Mental Health Practitioners (AMHPs) can be asked for advice and ensure the principles of the Act are followed.

Deprivation of Liberty Safeguards (DoLS): Surrey created DoLS after an incident in the mid 90's. When this first came in to effect there was an argument around what would 'normally' be expected for people with certain conditions, however there is new case law that says if it's a 'normal' deprivation for anyone it's a deprivation for everyone. DoLS is for people in supported living or in hospitals and is around care and support - does person lack capacity to consent to be in that place?; are they under supervision and control and has the state been involved? Caroline would not expect to see many in working age adults, but they are starting to see increases around learning disability as there is the added requirements of

'irresponsible or aggressive' so more may be seen in the Learning Disability Service.

When asked about Alzheimer's Caroline explained that some people can be treated under the Mental Capacity Act and some can be treated under the Mental Health Act.

Kate Steele-Newman asked whether they have too much control over clients and sometimes decisions may have serious consequences for individuals. Caroline responded that if you look at legislation and the Care Act it is around what the person wants, and I may not agree but if someone has full capacity and they make a decision Social Services would support them. Adult services work differently to Children's services who have a lot of powers so cannot comment on the way children's services work, but it is a different legislation.

Mary Whitfield asked whether the Trust are looking at NICE guidelines issued in December about making decisions. Caroline noted that they are making changes to the Deprivation of Liberty Safeguarding and any new national guidelines would be included, but they are guidelines and do not undermine what legislation says.

The Group thanked Caroline for her time.

5. CMHRS Update

Juliette Flynn updated the Group that Sussex Partnership has given notice to SABP regarding the inpatient beds Langley Green Hospital and the Trust are currently processing this, unfortunately Juliette had no further information at this time.

They are currently recruiting to all vacancies in the Trust and a rolling recruitment programme including adverts for posts in both social care and in SABP is taking place.

Jane Ahmed informed the Group that she has begun going to all CMHRS's to give talks and will continue this work.

David Murphy asked whether Carer Practice Advisers will now be coming to each meeting and it was noted that they have been invited and will attend where possible but will be dependent on capacity. David felt that they should have the capacity to attend.

One Member asked what the Trust is doing for survivors of abuse, what services are they providing other than mental health? Sarah Wickens suggested talking with the Member about what the Trust can offer, and this was agreed.

FoCUS would like to invite the Enabling Independence Team to come along to a future meeting.

6. Date of next meeting

The next meeting will take place on Tuesday 3rd April 2018, Holy Trinity Church, Carlton Road, Redhill, RH1 2BX.

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

Next FoCUS Committee meeting: 8th May 2018

Actions – General

1	<p>Carers Report to FoCUS Committee:</p> <ul style="list-style-type: none"> • FoCUS felt that the analysis of the data at the end of the Report is poor and not helpful; it may be better to have analysis under each item/graph and to also include details of what actions the Trust will take from the results. • The analysis of the data states ‘our information that we collect is telling us that we are not recording when our carers have assessments’ – can the Trust please explain to FoCUS how they know this? 	<p>Jo Lynch Ann Stevenson</p>
2	<p>The Carers Report to FoCUS Committee noted that Reigate CMHRS did not make a single referral to the Carers Prescription. Juliette Flynn agreed to check this information and report back to FoCUS as she felt it may be incorrect.</p>	<p>Juliette Flynn</p>
3	<p>Safe Haven Report to FoCUS Committee:</p>	<p>Jo Lynch</p>

	<ul style="list-style-type: none"> • The report says that staff laptops at Safe Havens will have privacy screens fitted, please can the Trust tell FoCUS when this will happen? • The report does not mention being able to get a Band 6 worker available for every Safe Haven – Redhill could not open recently as a Band 6 worker was not available and meant that a referral from East Surrey Hospital A&E to the Safe Haven could not happen. How often are Safe Haven’s not manned as per what is stated in the contract? • FoCUS would like to know if there is a Nepalese Support worker at the Aldershot Safe Haven and if not how do they support those Nepalese who attend? • FoCUS heard at Committee that the Trust will agree to pay to transport if a person is unable to travel safely to the Crisis Overnight Service. However, a FoCUS Member recently heard that a person at a Safe Haven needed transport to the Crisis Overnight Service and this was not available as there is no budget. Can the Trust confirm that this is now happening and how - i.e. will the Safe Haven have an account with a Taxi firm or have cash to pay them directly? 	
4	<p>FoCUS would ask the Trust, as a matter of urgency, to issue a position statement on the Langley Green bed contract which FoCUS Members now understand ends in March 2019 and will not be renewed. What with the STP and no movement on hospital provision locally in the East the Trust must let people know what is happening as it is a huge issue for people in the East.</p>	Jo Lynch
5	<p>FoCUS would like to ask what screening healthcare assistants working for the Trust undergo i.e. DBS checks etc?</p>	Jo Lynch
6	<p>Assaults on inpatient wards:</p> <ul style="list-style-type: none"> • FoCUS is aware that assaults may take place on inpatient wards but would like to ask the Trust why the Police are only called if a patient attacks a member of staff but not when a patient gets attacked by another patient – what is the difference and is there a Policy/Protocol around this? • Whilst it was recognised that an inpatient is likely to be 	Jo Lynch

	<p>unwell if they call the police, often they will want to talk to staff who say that they have the situation in hand - what about the safety of the patient, people have the right to feel safe on wards?</p> <ul style="list-style-type: none"> • FoCUS would also like to ask the Trust about protocol when someone goes AWOL from a ward. 	
7	Invite the Enabling Independence Team to present at local area meetings.	Jo Lynch

Contact details for your Support Team

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

Glossary of Abbreviations:

AMP	Approved Medical Practitioner
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