

FoCUS

South West Surrey Area Group Meeting Wednesday 5th December 2018 1pm – 3pm

Guildford Baptist Church, Millmead, Guildford, GU2 4BE

Minutes of the Meeting

Attendees: Claud Norris (SW FoCUS Rep), Paul Earl (SW FoCUS Rep), Linda Galligan, David Muir (SW FoCUS Rep), Rosemary Moore (SW FoCUS Rep SW), Janice Clark (Carer & Families Governor & West FoCUS Rep), Alex Lepkowski

Sue Shaw (Spiritual and Pastoral Care Volunteer), Tham Dewa (Community Services Manager, West Surrey), Paul Alexander (CMHRS Manager), Anne Cornell (Guildford Older People's Community Team, SABP), Caroline Hampshire (Welcome Project), Nigel Copsey (Chaplain, Spiritual & Pastoral Care, SABP), Josiah Anyinsah (Spiritual & Pastoral Care, SABP) Lisa Musselwhite (Head of Accreditation, SABP), Jane Ahmed (FoCUS Involvement Facilitator), Lucy Finney (LF Solutions, minute taking)

Apologies: Simon Telling, TMG, Sue Shaw, Person A, Person B, Donna Davies (Advocate).

1. Welcome, introductions, ground rules

Jane Ahmed welcomed members and reminded the group about the ground rules.

2. Minutes of previous meeting (October 2018)

Accuracy

The minutes were agreed as an accurate record.

Matters arising

Jane Ahmed has visited Farnham Road Hospital following Rosemary Moore's comments and found that a FoCUS poster was out of date and has given them more current information to display. Jane also spoke to some people on the ward who asked her to raise issues on their behalf.

Actions from October 2018:

1	<p>A FoCUS Member recently found that information on the Older Adults service at Bloggs Way in Cranleigh was out of date and Zeenat will take this back.</p> <p>Completed: Zeenat spoke with Sally Hankin, Lead Admin at Berkeley House for Waverley CMHRS, who explained that the Older Adults Team no longer use that office and any information that is there is likely to be old. Sally apologised and explained that all information relating to the Older Adults team is held at their main office at Berkeley House. Sally agreed to remove any old documents the next time she is at the office and will liaise with Grace Tan, Manager at the Older Adults team, to advise her to update their welcome packs if needed.</p>
2	<p>David and Claud are still waiting to re-visit Farnham Road Hospital to look at Communication Windows and signage.</p> <p>Completed. Jo Lynch discussed with David and Jo is following up as David has requested a further visit.</p>
3	<p>It was suggested that when reporting complaint figures in the People's Experience Report they include a percentage figure against hitting the 25 day complaints response target. Zeenat agreed to take this back.</p> <p>Completed.</p>

3. Local Issues from FoCUS members

Good news and Compliments

The food on Victoria ward is good. Nothing to complain about they have treated me well.

Caroline Hampshire complimented Ann Stevenson (Associate Director Quality Assurance & Reporting) who kept one of Caroline's clients up to date on her request; the information Caroline's client received was delivered in time without the need for chasing and the promises made were made good.

Claud Norris is pleased that she almost has a support plan in place and Nikki, her care coordinator has been really good.

Rosemary Moore reported that there is a great trainee nurse on Victoria ward.

Local Issues

While Jane was visiting Victoria ward an inpatient asked for whether it would be possible to have a broadsheet newspaper on the ward instead of two tabloids; they had been told it was not possible due to cost. Can FoCUS the Trust ask whether it is possible for the ward to have a broadsheet newspaper delivered?

Janice Clark wanted to make members aware that Farnham Road Hospital is the acute inpatient service for the West of Surrey and to make sure there is relevant information available on wards relating to this area also.

Jane has received an email from a FoCUS member about the delivery of poor information for carers and outlined the example given. The person made a number of suggestions that will be forwarded to the Trust. However, they would also like to thank the Trust for their efforts. It was suggested that the points raised were forwarded to Ann Stevenson for comment.

Janice Clark advised that there is a carers pack that is currently being updated.

A client emailed Caroline some questions and would like to know the protocol for PALS responding to complaints or issues raised; what the time scale is to acknowledge a complaint has been received; what are the Trust guidelines for resolving a simple complaint and secondly a more complex one; how many complaints were received each year for the last three years and how many were logged as resolved and how many are still outstanding – if the numbers are increasing are SABP putting adequate provision in place to address these?

Janice Clark highlighted that the Trust want to see more complaints as it informs learning and people are encouraged to complain. In the West there was a feeling that writing a formal complaint letter was difficult and FoCUS asked the Trust to develop a template for a complaints letter.

Caroline Hampshire reported that it is her experience that a large percentage of messages left were not returned and the email had an auto-response.

Janice has empathy with the style the Trust uses to close down an action and it may be done when someone has been contacted but may not mean the complaint has been resolved.

4. CMHRS Update & Adjustments to Mental Health Pathway for Farnham Residents

Tham Dewa introduced himself to the group as the Community Services Manager for the West and wanted to talk about the change in where people from Farnham will receive services. Going forward those living in Farnham with mental ill-health will be supported by the Trust's North East Hampshire team instead of their Waverley team.

There has been an urgent need to reconsider boundaries where the CMHRS deliver services and the Trust have had to ask Hampshire to see people in the Farnham area. This is partly to align Trust services with the NE Hants Clinical Commissioning Group plus the demand on the Waverley Community Mental Health Recovery Service is significant and recruiting clinical staff in this area is more challenging than other areas

This had to be done quickly and Tham requested a meeting with and Janice Clark and Jane Ahmed to consult with them about the change.

The new pathway started on 26th November and the move has been done in a phased manner with new referrals going straight to NE Hants and who will know no different. Over the next few weeks they will start to look at moving the case load from Waverley to Hampshire. GPs have been informed of the change and letters will be going out to clients advising of the plan and the phased move.

Caroline Hampshire informed the meeting of the experience of one client who has been with the Waverley CMHRS for a number of years and felt they were just suddenly told that their next meeting will be in Aldershot. Tham spoke to the group about how people are being informed and is happy to speak to people about the move and the rationale.

Janice Clark spoke about the meeting referred to earlier by Tham and informed the group that she asked some in-depth questions around things that needed to be explained in terms of equal access to services. She

was satisfied in terms of access by public transport as it is much easier to get to Aldershot from Farnham rather than Godalming; Tham had done his research extremely well in terms of transport.

Janice was however concerned as the Aldershot team is a Hampshire team and wanted to be sure that they had worked through the difference in culture and were satisfied that they had done everything they could to ensure that assessments would be done by a Surrey based team and that carers would continue to be supported by a CPA (Carer Practice Adviser) based in the Waverley team.

One impact could be around the problems with Hampshire County Council and for those in Surrey working within that team it will demonstrate a better practice. Those who have been long term users of Waverley services are not disadvantaged and supported in the changeover.

Janice has spoken to Chrissie Caines who is setting up the social care pathway and who assures Janice that it will work well; she is visiting to make sure everything is going well. It may be that the FoCUS area for people in Farnham will change from the SW area to West area, however for the time being those in the SW must ensure that this change is monitored well and feedback is received and in return the West group will, through FoCUS, also monitor any changes to make sure it is going well. There must be assurances from the Trust and up to date information about how this is going.

Rosemary Moore felt that the way people are told of the changes is often worrying - verbally and suddenly – can someone, who has had a doctor for many years, continue with that Doctor? Tham commented that this can be considered on a case by case basis.

Tham agreed to feedback to the Waverley team about how they inform people about the move ensuring it is done supportively and sensitively. Rosemary said that they also need to think about how staff are told as they need to prepare also.

Janice summarised that the priority must be that people get a service and she has some understanding of why this decision had to be taken.

On a positive note they now have a substantive manager at Waverley CMHRS, Natasha Cumberland, and either Natasha or Paul will attend FoCUS meetings going forward. They also have a clinical lead in post.

Guildford CMHRS Update, Paul Alexander

Paul reported that staffing is looking much better and they now have two Occupational Therapists. There are no health vacancies at present and staffing wise things are heading in the right direction.

The plan in the New Year is to run a group every day and there will be a full group programme including New Horizons, the possibility of a PTSD group, coping skills etc. There will be a meeting next week to agree which groups will be in place.

Paul Earl asked if anyone has identified why there is an issue with retention of staff as it seems to be an ongoing pattern; also the sharing of information. Paul Alexander explained that there have been a number of locum Doctors historically in Guildford which is a problem; many staff leave to take up posts in London to gain the London Weighting allowance. The Trust need good, full time SABP staff that want to progress and they are now filling Band 5 developmental posts who can progress their careers at the Trust. Paul recognised that continuity is important and when they do not have Service Managers or Leaders in post people tend to leave. However, from a national perspective retention is a nation-wide problem across all NHS Trusts and there are lots of factors relating to this. The Trust are working hard to encourage staff to join the Trust. We all want the same thing, permanent staff, happy team and happy patients.

Janice commented that housing is also a big problem in Surrey and NE Hants may be better staffed as the housing is cheaper in the area.

Anne Cornell wanted to assure Paul Earl that at management level an awful lot of time is spent in recruitment.

5. Feedback from FoCUS Committee

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

- David will be meeting with the Trust's Communications department to review at easy-read documents.
- 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 Paul Earl and Rosemary Moore are new Reps for this area along with Reps Claud Norris and David Muir continuing in their role.
- 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 and 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. They will be recruiting people for the participation work by holding informal coffee mornings/evenings etc.
- The SPA (Single Point of Access) are recruiting staff and the launch is being rolled out in a phased manner beginning in the East with referrals from GPs and will be open to all referrals from March 2019.
- This group discussed accessing 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 had to save £1.7m from their budget which led to the closure of Windmill House. Katy Matthews, Substance Misuse Manager talked 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. They also have a two-week ambulatory programme for those coming off alcohol and transport is provided to attend this 5-day course.
- FoCUS again raised the concern about people being escorted in and out of the ACU 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.
- 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.
- The SW group asked about waiting times for referral from GPs to the CMHRS and a table was provided from the Trust.

Janice would like there to be much more understanding from the Substance Misuse service of those with a substance misuse problem and a mental health issue. Many people with a mental health issue use substance misuse as medication and this affects the medication they may

be taking for their mental health issue; this does not seem to be recognised by the service or the Trust.

Caroline Hampshire highlighted that Catalyst do have the Drug & Alcohol contract and as an organisation they are very much aware of this.

David Muir felt that the information at the FoCUS Committee was confusing and would like to hear more at area groups.

5. Spiritual & Pastoral Care, Nigel Copsey, Josiah Anyisiah & Sue Shaw

Nigel Copsey has worked in various parts of Surrey for 25 years and explained that they have a small team covering the whole of Surrey and the secure beds in Farmfield, a medium secure unit in Gatwick. They also cover the Learning Disability side and Josiah Anyinsah is the team leader.

They aim to visit all the Trust inpatient facilities, houses and homes once a week and have an open access policy and can be contacted by email, phone, through staff or talking to them when they visit a ward. If the team receive a message that someone wants to speak to them urgently they respond immediately through the on-call system. There are different levels of response but they will always try and respond within a week for initial contact which they often manage to achieve.

Referrals are taken from community teams, however the first priority is the inpatient service as they are a small team, however they often follow people from the inpatient service into the community and continue to see them for continuity. They do also try to link with appropriate faith groups and churches which is a major part of their strategic arm and they are also aware of those that are supportive of people.

Training programmes are run for faith groups where they have been trying to equip and train people from different faith communities to have a greater understanding of mental health awareness and spirituality.

They tend to talk about spirituality more than religion as data shows a high percentage of the population have a spiritual part of their lives that is important but may not be religious and they want to support people with this.

They have just appointed a minister working primarily at Farnham Road Hospital (FRH) and the Abraham Cowley Unit (ACU) and also recruited

someone to work with the Muslim and Hindu communities who will be working part-time. A Rabbi is also on call and available to see people. They have a small central admin function.

The goal and aim over the next few years is to normalise the idea that when people come on to a ward a person's spiritual assessment need is incorporated into a person's Care Plan as standard. It is Trust policy to do this but there is a big job to be undertaken training staff etc.

Josiah said that Farnham Road Hospital have a lovely multifaith room and have volunteers who come on to wards to take services. Sue Shaw commented that she volunteers once a week on Victoria ward where she spends 2-3 hours establishing if anyone has a particular need – but it can be difficult to find out this information. She also goes into the lounge area to try and talk to people and build a relationship with them to talk about their need. She also visits people in their rooms with consent if requested.

Sue enrolled on a 10-week course run by Josiah covering all aspects of mental health and spiritual care. It was a good course as there was lots of role-play involved. Shortly after this she started volunteering at Farnham Road Hospital and she also volunteers at Royal Surrey County Hospital. Sue is a humanist and does not have religious faith but can pass requests to an appropriate person should there be a need.

Paul Earl asked how an individual that has never had a religious upbringing finds support or guidance in finding religious support and what form does this take? Nigel said that nationally a Spiritual and Pastoral Care department is unusual; they can help someone search or discover and don't insist they sign up to a particular church.

David Muir asked that easy read information be available at the training workshops.

When asked how they support people wanting to link to Hindu and Buddhism in the community Josiah commented that they have links to the Diocese and as mentioned previously have recently appointed a staff member with links to Hindu communities etc.

The group thanked Nigel, Josiah and Sue for their time.

6. Care Excellence Accreditation Work, Lisa Musslewhite

Lisa is the Head of Accreditation at the Trust and attended the meeting to talk about the Care Excellence Accreditation programme which is used to quality assure Trust services.

This has been developed over 2 years and all services have to complete a twice yearly review consisting of self-assessment and peer review. This then has a RAG (Red, Amber, Green) rating tied to it and if the service receives a Green in their peer review they can move to the next step of the Accreditation process. The point is to be inspirational and aspirational and move services up to be outstanding.

Part of the Accreditation work is to be as meaningful as possible and they like to use human factors a lot and therefore would like to have meaningful engagement with people using services and carers. Insight from people using services and carers is invaluable.

Part of the Accreditation process includes both announced and unannounced observations and Lisa 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.

Janice asked if they looked at the culture within the service as they often struggle with the medical model and the social model is not always respected and valued with staff? This is where Lisa finds the observations invaluable and actually sitting in with the service is where you get a feel for the service. They have had some teams that are really good but they are able to pick up subtle things that can't be captured any other way. Observations are a strong way to get a feel for the service.

David asked about easy-read information particularly if those with a learning disability want to be involved. Lisa commented that there has been a panel for a Learning Disability team and they explore different ways to ensure their voices are heard; if someone with a learning disability

wants to sit on a panel the Trust would provide accessible information in addition to talking through what is expected with them.

7. Date of next meeting

Date of Next Meeting: Wednesday 2nd January, 1pm – 3pm at Godalming Baptist Church, Queen Street, Godalming, GU7 1BA.

Issues to go to next FoCUS Committee meeting on 12th February 2019.

Actions

1	When visiting Victoria ward an inpatient asked the FoCUS Involvement Facilitator whether it would be possible to have a broadsheet newspaper on the ward instead of two tabloids; they had been told it was not possible due to cost. Can FoCUS the Trust ask whether it is possible for the ward to have a broadsheet newspaper delivered?	Jo Lynch
2	Jane Ahmed has received an email from a FoCUS member about the delivery of poor information for carers and outlined the example given. The person made a number of suggestions that will be forwarded to the Trust. They would also like to thank the Trust for their efforts. It was suggested that the points raised were forwarded to Ann Stevenson for comment.	Ann Stevenson
3	Support team to find out information previously given to FoCUS about complaints.	Support Team
4	The SW Group would like to hear more about the Substance Misuse services at a local area meeting and suggested that Catalyst could do a joint presentation with them.	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: <u>077809 33053</u></p>
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Glossary of Abbreviations:

AMP	Approved Medical Practitioner
CAG	Carers Action Group
CBT	Cognitive Behavioural Therapist
CCG	Clinical Commissioning Group
CMHRS	Community Mental Health Recovery Service
CPA	Care Planning & Assessment
CPA	Carers Practice Advisor
CPN	Community Psychiatric Nurse
CQC	Care Quality Commission
CQUIN	Commissioning for quality and innovation
CTO	Community Treatment Order
EPP	Expert Patient Programme
ESA	Employment & Support Allowance
HTT	Home Treatment Team
IAPT	Improving Access to Psychological Therapies
IMCA	Independent Mental Capacity Advocate
IMHA	Independent Mental Health Advocate
OT	Occupational Therapist
PALS	Patient Advice and Liaison Service
PETS	Patient Experience Trackers
PICU	Psychiatric Intensive Care Unit
PPG's	Patient Participation Group
PRG	Patient Reference Group
PVR	Public Value Review
QUIPP	Quality, Innovation, Productivity, Prevention
SABP	Surrey and Borders Partnership
SCC	Surrey County Council
SDS	Self Directed Support
SHIPP	Surrey High Intensity Partnership Programme
STEPPS	Systems Training for Emotional Predictability and Problem Solving