

Canterbury Mental Health Action Group

Meeting held on 3rd March, 2015, 2.00pm



At Thanington Resource Centre, Thanington Road, Canterbury, Kent CT1 3XE

PRESENT

ORGANISATION & EMAIL ADDRESS

Ellie Williams – Chair	Take Off
Sue Sargeant – Minutes	West Kent Mind
Karen Abel	Insight Healthcare
Clive Wanstall	East Kent Carers Council
Mark Kilbey	Take Off
Ron Woolven	Depression Alliance Self Help
John Watts	Canterbury Umbrella
Debbie Stewart	Canterbury & Costal CCG
Angela Shaw	Thinkaction IAPT service
Ellie Bennett	KCC Primary Care Mental Health Service
Liz Frost	Carers Support
Jan Budd	Chaucer House Centra Care and Support
Hannah Herlihy	KMPT Research & Development
Amanda Lailey	KMPT Liaison Psychiatry Team, Kent & Cant
Athene Lane-Martin	Kent Community Health Trust

APOLOGIES

ORGANISATION

Ben Edmonds-Taylor	SEK Group
Rebecca Smith	SEK Group
Anna de Brauwier	Canterbury Umbrella Centre
Hannah Costin	Canterbury Umbrella Centre
Jill Knight	KMPT Community Mental Health Team

1. Welcome Introductions & Apologies

The Chair welcomed the group and apologies were noted as above.

2. Minutes from last meeting - Approved with the following amendment:

Ron, DASH asked for the description of his group to be amended on page 3 to reflect that it is not an art therapy group but a group that has done some art therapy.

3. Action Points

- a) from Sep 2015 meeting :
- Question asking why OXLEAS & SLAM do not attend Concordat meetings or MHAGs? Debbie confirmed we have been trying to get in touch but they haven't attended.

From Nov 2015 meeting:

Concerns that with KMPT overspend of £2.3 million there will be cuts to services to recoup this. Louise Clack was invited to attend next meeting.

ACTION 1: Amanda Lailey to provide the correct contact person to address this question.

- b) County MHAG (Dec 2015): Transport protocols. The current Transport Policy does not cover things such as ensuring there is adequate food/water etc. **Debbie Stewart noted that there are protocols in place for travelling but will discuss this with Louise Clack and feedback at the next meeting.**

County MHAG (Feb 2016): Minutes from the meeting have been circulated and are available at: <http://www.liveitwell.org.uk/your-community/county-mental-health-action-group/>

1. Parity of esteem - The transport system for getting to London is much better than getting around Kent will KMPT put transport assistance in place for people travelling to and from Dartford?
Transport issue from Canterbury has been emailed to Malcolm McFrederick at KMPT asking for a response.
2. There is gap in IAPT services and want to keep this on agenda.
Andy Oldfield confirmed that commissioners recognise this is a long standing issue and are in discussions with KMPT to take this forward. Lynne provided a report with 20 cases within two month period where service users had fallen through the gap. This could be partly to do with IAPT services being too quick taking people in and the disjointedness after that if they are not suitable for the service. Andy agreed to take the information back. There is a need for a level of understanding within CMHTs about what IAPT can and cannot provide.
Ron was concerned that this has been going on for 5 years. Karen reiterated that case studies have been presented at County and the Commissioners have acknowledged there are grey areas. This is something which is being addressed.

4. Service User & Carer Questions

a) Question raised at the pre-meeting:

1. Would like to know specifics of delivery by Strategic Partners and why there are adverts for new staff now when the service is starting in April. Would have expected them to hit the road running.

Alan met with Shaw Trust who provided him with a chart showing new commissioning intentions. He presented 15 questions which were raised at the County meeting and their response will be circulated when received. Main discussion centred around:

Concerns over data and information about service users being transferred to Shaw Trust. This is not appropriate. Shaw Trust have agreed to gain this data themselves directly from the service users.

Mobilisation. People need to be supported through transition. Shaw Trust agreed to look at funding the current services for the next 3 months through transition. There are rumours of people leaving Ashford LIW. The LIW centre is owned by KCC so the building will continue to exist and services will be provided out of it.

ACTION 2: Sue to contact Shelley Southon for an update about the Ashford LIW.

Care Navigators – they are recruiting now and this will be dependent on need, it will be client focussed and client led.

Q – Have they got a management tree?

ACTION 3: Sue to circulate the mental health experience of the clinical lead.

Q – There have been no consultations with organisations/service users/carers in preparation of Shaw Trust's map. Porchlight have engaged but nothing from Shaw Trust. Take off are already doing peer support or brokerage work and have not been consulted at all. Gone from reasonable (although not satisfactory level of engagement) to none.

A – We need to look at how we can move it forward now.

Q – Will there be an engagement day?

A - They have had one event but people had more questions than answers when they left.

2. Carer & Service user expenses are being withdrawn. How can these expenses be funded?

This was brought up by Swale at the County meeting. Invicta previously held the expenses fund for Swale and there was an action point to follow up with SEAP who have been awarded the Advocacy contract for the whole of Kent. KCC has a legal duty to have carers/services users attend so it would cause them a problem if no one came. KCC should have told or discussed with forums removal of fees beforehand.

Take Off raised the fact that the fees were not part of the tender. They had been told "We are looking for you to find innovative ways to fund this in the future"

Subsequent to the meeting, Porchlight have agreed to pay expenses for su/carers attending MHAGs in the areas for which they are strategic partner and will ask KMPT/CCGs to fund attendance at their meetings such as Patient/Carer consultative committees etc. We are awaiting a response from Shaw Trust.

3. Planning permission has been submitted for a new private psychiatric hospital in Maidstone to be run by Cygnet Healthcare. Concerns over costs of beds and impact on local staffing.

This has already been raised at County. Andy Oldfield is meeting with Cygnet and will report back at the next County meeting on 20th April.

b) **Question going forward to County MHAG** : None – all questions are already being addressed.

5. Information Sharing:

1. County MHAG Update: See draft minutes <http://www.liveitwell.org.uk/your-community/county-mental-health-action-group/>

2. Provider updates/new members:

Canterbury Umbrella Centre – John: The centre is now having to close on Saturdays so is only open from 10-2 Monday to Friday. There is uncertainty around services until the Shaw Trust contracts have been confirmed.

Insight Healthcare – Karen Able: They have won the East Kent IAPT contract and are working on a higher profile. Insight are already well known in West Kent. Meeting on a monthly basis with Commissioners.

Thinkaction – Angela: Now have coverage in Faversham and are moving into Herne Bay. Their Time for You group is targeting a Feel Well Live Well programme for mums who are 30 weeks pregnant with children up to 2 years old. It is running for 7 weeks from 12th May from Spring Lane Neighbourhood Centre.

Primary Care Social Care Service – Ellie: Each CCG area will have 2 social workers who are able to receive referrals from anyone including GPs, charities, self refer. They deal with people with mental distress and social care needs and a diagnosis is not necessary. Screening can be by telephone or face to face to sign post or carry out Care Act assessment. They can then be referred to the strategic partner or to Kent Enablement and Recovery service (KERS).

Chaucer House Supported Living – Jan: They are still taking referrals and have a couple of vacancies.

KMPT Research & Development – Hannah: She is conducting a new piece of research in KMPT.

The Relatives Education and Coping Toolkit (REACT) study is an exciting new study led by Lancaster University which aims to evaluate the effectiveness of an online toolkit for supporting relatives/close friends of people with psychosis or bipolar disorder. REACT was co-designed with relatives, consists of easy to navigate modules, peer support forums and is supported online by REACT Supporters (experts by lived experience). If you are a relative (or close friend) supporting someone with psychosis or bipolar disorder, aged 16 years or over and living in the UK please visit www.reacttoolkit.co.uk for more information or to register for the study. Information is also available at: <http://www.liveitwell.org.uk/local-news/canterbury-and-coastal/>

Clive was concerned that it would only capture a percentage of people as not everyone uses computer, he has heard good and bad about it. Hannah confirmed that is why it is so important to research.

KMPT Liaison Psychiatry Team – Amanda: Only been in post for 4 weeks. The team sees anyone in Kent and Canterbury Hospital. There is a Minor Injuries and an Emergency Care Centre, but no A&E. They currently only provide 8 hours of cover but there are ongoing conversations to extend hours. They have lots of assessments into primary care and want to build links with IAPT services. It is about early intervention and important to get help at the right time. Mark agreed it has been a big improvement.

Kent Community Foundation Trust – Athene: She has been trying to point out to colleagues that physical health can affect mental health. Have been doing stress training, mental health awareness and making every contact count for professionals.

Take Off – Mark: He has started a peer support crisis group for people at risk of taking their own lives. It runs every Sunday from 4pm to 8pm, time of most need, with peer workers and group conversations. Referrals are only from CMHT for up to 5 people and need to be received by Thursday. It has to be by referral only as it would not be fair to the other people. Michelle Webb, CMHT Service Manager has been incredibly helpful. Funding has been received for several months and CCG will support this with more money. He is hoping to run it over whole weekend. There is a Cook & Eat group and it is completely staffed by service users. Amanda asked whether Psychiatric Liaison could also refer. Mark will discuss this with her.

Peer Support Project (TOPS) is CCG funded and operates in 5 hub surgeries in Canterbury, Herne Bay, Whitstable, Faversham and Sandwich & Ash. Referrals are from GPs. They have 15 peer workers trained to do the projects.

Also a number of self help groups (all with a minimum of 3 trained facilitators) including bi weekly for dementia carers between 11-1pm on Saturday with max of 6 people. Lots of carers have been identified but there are not the opportunities for more personal conversations. Also eating disorder, borderline personality depression group, student anxiety, young person's mental health (ages 18-25) and women's creative group.

Partnership with Cycle/Recycle from Herne Bay. Cycles will be serviced in the yard and donated pedal cycles will be worked on during three afternoon sessions a week. These will later be sold from the premises.

DASH Canterbury – Ron: - Membership is still increasing and the group is celebrating its 1st anniversary soon. There are a number of talks coming up over the next few months: Pete Holloway, area lead for Swale mental health team, Erica Terry Smith on animal therapy with people, Umberto Crisanti on Acceptance and Commitment Therapy (ACT) and a Mindful yoga teacher to be confirmed. Also running three 1 day mindfulness retreats on Sunday 12th June, 3rd July and 31st July. Please contact Canterburdash@mail.com for more information.

3. Canterbury & Coastal Clinical Commissioning Group Commissioners' Report has been circulated and is available at <http://www.liveitwell.org.uk/local-news/canterbury-and-coastal/#MHAGInformation>. Debbie added the following:

Shaw Trust now have the Strategic Partner contract for recovery and social inclusion across Canterbury and Ashford.

Psychiatric liaison. There was previously no provision for under 18s but from 4th January there is now provision 9pm to 12pm for 7 days a week. CAMHS was sharing their office but is now in the children's ward.

Sussex Partnership is working with CCGs looking to align elements of their service around CAMHS neuro development service. This has been extended to March 2017.

Clive asked whether he can see out of area bed numbers across Kent.

ACTION 4: Debbie to provide out of area bed numbers.

4. Staff changes:

Pippa Barber has left KMPT. Clive said that she held a key position in charge of all the wards and have had a good relationship with her from a carer's perspective. Really important that new person engages.

Chief exec, Angela McNab is going to Camden & Islington Foundation Trust at the end of March. Clive said they had a good dialogue. New chief exec has been identified and is in place end of May/beginning of June.

6. Working Group

Jasmine, Maxine, Angela, Debbie, Athene, Ellie and Amanda agreed to form a working group to organise an event for World Mental Health Day on 10th October. Karen and Anna both offered to provide room to meet.

7. Date of next meeting

5th May, 2016 at 2pm at Thanington Resource Centre, Thanington Road, Canterbury, Kent CT1 3XE.

Meeting finished at 3.30pm

Action Table

No.	Action	Responsibility	Status
1	Provide the correct contact person to address KMPT overspend question	Amanda	
2	Sue to contact Shelley Southon for an update about the Ashford LIW.	Sue	Completed
3	Circulate the mental health experience of the clinical lead at Shaw Trust	Sue	Completed
4	Provide out of area bed numbers for whole of Kent	Debbie	Sent to Clive



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Minutes posted on: <http://www.liveitwell.org.uk/local-news/canterbury>