

**Canterbury & Coastal Mental Health Action Group**  
**Meeting held on 5<sup>th</sup> January, 2017, 2.00pm**



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

<b>PRESENT</b>	<b>ORGANISATION &amp; EMAIL ADDRESS</b>
Karen Abel - Chair	Insight Healthcare
Sue Sargeant – Minutes	West Kent Mind
Carol Boorman	Canterbury & Coastal CCG
John Watts	Canterbury Umbrella Centre/Carer
Anna De-brauwe	Canterbury Umbrella Centre
Clive Wanstall	East Kent Carers' Council
Steve Furber	Faversham Umbrella Centre
Roger Newman	Insight Healthcare CBT Therapist
Leonie Down	KMPT Acute Service Line, OT lead
Amanda Lailey	KMPT, Liaison Psychiatry
Noreen Searles	KMPT Stop Smoking Service
B Durell	MCCH
Lindsay Topham	Shaw Trust Live Well Kent, Network Development Manager
Luwji Mahenga	Shaw Trust Live Well Kent, Community Navigator
Mark Kilbey	Take Off
Paul Woodford	Turning Point Canterbury, Service Mgr
Lyanne Nicholl	West Kent Mind Development

<b>APOLOGIES</b>	<b>ORGANISATION</b>
Liz Frost	Carers First
Lisa Whitehead	Centra
Penny Miller	Centra
Ellie Williams	Co-Chair Canterbury & Coastal MHAG/Take Off
Sharon Hassan	KMPT Community Mental Health Team Service Manager
Ben Edmonds-Taylor	SEK
Anna Bate	ThinkAction

**1. Welcome, Introductions & Apologies**

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

**2. Minutes from last meeting – Approved without amendment**

**3. Action Points**

**a) Local**

1	Send email to group inviting providers to send updated information to the Live It Well website	Email sent 13/12/16
2	Andy Oldfield to address question of KMPT overspend	Response from Andy: "KMPT, like all other NHS Trusts, are expected to operate within a specific budget, and when this is exceeded are expected to make every effort to bring the budget in line before the end of the financial year. Where this has not been possible it means that they

		will start next year with a deficit; in effect moving the need to save in to next year's budget. The good news is that the good work undertaken by KMPT and commissioners to address the overspill admissions (out of area beds) issue has led to no overspill admissions from any part of Kent for 5 weeks now, and KMPT are determined that this position will be maintained for the rest of the year and beyond."
3	Invite Paul Haith, General Manager, CAMHS to attend the next meeting.	Paul Haith unable to attend the January meeting. Awaiting confirmation for March.
4	Forward invitation to East Kent CCC and PCC to the group.	Completed

- b) Taken to County MHAG – For full responses see draft minutes <http://www.liveitwell.org.uk/your-community/county-mental-health-action-group/>

*What is KMPT's policy on personality disorder following the conference on Monday that was organised by them to discuss this?*

Personality Disorder Policy: It was presumed this meant pathway rather than policy. John Rea/Lona Lockerbie were not able to attend today but hope to attend the next meeting. Lona confirmed that the service is being reviewed and KMPT are in the process of pulling together some options for varying models for the pathway, including the specialist service. This is taking a little time as they need to have clarity about how each model will improve access and address all areas of need. We need to do this bit of work internally in the first instance.

#### 4. Service User & Carer Questions

- a) Questions raised at the pre-meeting:

1. Street Triage. Clive reported that this was driven by concern from the government that someone picked up on the street should not end up in a police cell if they have mental health issues. A partial service has been launched operating for 3 days from Sunday to Tuesday 4pm to midnight, which Police analysis showed were the most common days for people being picked up. Nicola Jones, CCG, Health and Safety DGS is heading up the project. A senior health care worker is placed in the police control room to provide a triage service and give advice and support to callers and signpost them to the correct services. A qualified mental health nurse is also available to go out with the police to provide assessments.

This is a joint exercise between KMPT, Kent Police and CCGs to capture data according to key performance indicators. Service development is underway to determine areas of highest need. Clive is attending a meeting on 27/1 in Gravesend and will come back with an update.

Leonie added that work is being done on how to liaise more closely with the police. There is now a designated police officer at the hospital.

**ACTION 1: Ask Karen Dory Rees for an update on the street triage service**

2. Positive feedback on the Canterbury Umbrella Centre Xmas Dinner. All credit to staff who provided meal for £4 and a present. Anna de-Brauwe also wanted to thank Sainsburys, TSB, Bookers, Police as well as other organisations that supported this event.
3. A service user went to Laurel House for an assessment and a letter was received summarising the meeting (with a copy sent to the doctor). The carer raised concern about the confidentiality

of the contents, for example if the circumstances had been different and another service user had discussed domestic abuse would their carer have been able to see the contents?

Amanda Lailey confirmed they had 2 ways of sending documentation; an action plan with bullet points for the service user and an overview of assessment to go to the GP and CMHT. If there were any concerns about domestic abuse then a phone conversation would take place with the GP as a follow up.

#### **ACTION 2: Clarification of content of the letter from CMHT**

4. Further to the July MHAG, Clive again raised the question of financial support for East Kent Carers Council. EKCC meets regularly in Canterbury every month and gets regularly called on by various organisations including KCC to provide input. They are used as a valuable resource but have to pay their own expenses (hall hire and travel) which were previously met by TakeOff. It was suggested that they contact Carers Support but Liz Frost confirmed that their organisation is funded to support carers in a caring role, not in campaigning. Is there any capacity to help support the carers' group financially? Catronia confirmed previously that Shaw Trust is not set up to specifically support carers but will follow up.

#### **ACTION 3: Follow up with Liz re carers support for Clive**

5. What provision is being made at Laurel House for disability (wheelchair) – activities are going on upstairs.

Subsequent to the meeting, Carol Boorman confirmed that she attended a MH Local Operational Meeting on 6/1/17 and raised this issue. She has been assured by KMPT that there is a disabled access at the side of the building and that no classes are held upstairs.

#### **b) Question going forward to County MHAG:**

What initiatives are happening in the different localities for street triage and engaging with the police? Invite Karen Dory Rees to give update on street triage service.

### **5. Information Sharing:**

1. **County MHAG Update:** See draft minutes <http://www.liveitwell.org.uk/your-community/county-mental-health-action-group/>
2. **Commissioners' Updates** - Canterbury & Coastal Clinical Commissioning Group and KCC Commissioners' Reports have been circulated and are available at <http://www.liveitwell.org.uk/local-news/canterbury-and-coastal/#MHAGInformation>.

#### **Carol Boorman, Canterbury & Coastal CCG:**

- No adult patients in out of area beds since Nov 2016. There were bed vacancies at St Martin's just before Christmas.
- There is a new constitutional standard for the Early Intervention Team to deliver appropriate intervention treatment in psychosis within 2 weeks, for the first episode.
- Local engagement. The Canterbury & Coastal MHAG co chairs are not aware of the monthly local performance meetings.  
Subsequent to the meeting, Carol Boorman confirmed that invitation would be sent to the co-chairs.

- Eating Disorder Service is moving towards procurement for an all age eating disorder service.
- ADHD. The CCGs have agreed to support reviews of prescriptions to those adults with ADHD via their own GP practices, supported by the specialist provider South London & Maudsley (SLaM).

### 3. Provider updates/new members:

**Liaison Psychiatry, Amanda Lailey:** There has been a reconfiguration of the service following Kent & Canterbury Hospital's provision of a minor injuries unit (MIU) with a GP led primary care unit with no A&E provision.

South East Coast Ambulance Service (SECAMB) has been instructed to take anyone with general abdominal pains, intoxication or primary mental health problems to the William Harvey (WHH) or Queen Elizabeth the Queen Mother (QEQM) Hospitals instead of the Kent & Canterbury Hospital (K&C). This has resulted in a drop in urgent referrals at K&C and an increase in referrals at WHH and QEQM, leaving the team in Canterbury in the position of having valuable skills which are not being used.

The team was commissioned to provide 8 hours per day across all 3 sites and throughout the hospital, not just in A&E. As of March 2016 this was 8am to 4pm every day which was extended to 8am to 8pm with the same staff.

Hours at the William Harvey and QEQM have now been increased to 8am to 11pm with 7 staff members at each. Kent & Canterbury is from 9am to 5pm with 2 clinical nurse specialists and one Consultant Psychiatrist.

Amanda now has a new role from 02/1/17 as East Kent Liaison Psychiatric Quality and Development Lead with a focus to improve the quality of assessments and drive the service forward to be 24 hours by 2021. She will no longer be able to attend the meetings but is still happy to answer any questions.

**Canterbury Umbrella Centre, Anna:** The centre is open from 10am to 4pm from Mon to Fri offering a number of services including crisis management, benefit advice, health & wellbeing. On 25/1 launching an after hours Millennial Breaking Barriers group with students from Kent University aimed at discussing issues important to students and diminishing stigma. All programmes are on their website: <http://canterburyumbrella.co.uk/>

**KMPT Acute Services, Leonie:** There are 2 films now available about therapeutic staffing; one to aid recruitment and one to explain initiatives in acute services. They ran a dual diagnosis forum which was well attended and they are hoping to continue.

**Live Well Kent, Lindsay:** There have been 448 referrals in the Canterbury & Coastal area since 1<sup>st</sup> April which represents 30% of the whole contract. 293 have signed up to the Live Well Kent programme. There is a fairly even split between Common Mental Illness (CMI) and Serious Mental Illness (SMI) at 55/45 when it was expected to be 75/25. Most help was needed with Employment, Housing and Finance benefits & debt/legal/advocacy which was also not expected so they are having discussions with other organisations such as Citizens Advice Bureau.

**Faversham Umbrella Centre, Steve:** We are still yet to sell the building so waiting to kick start services. We want to find a site in the short term.

**Take Off, Mark:** We have trained another 4 peer workers, so now have 16 in Canterbury. We are running self help groups, details on our website: [www.takeoff.works/](http://www.takeoff.works/) Groups have been oversubscribed with a leap in referrals and self referrals. We are not funded for a lot of things as we are waiting for decision from Shaw Trust but have some funding from CCG for a Crisis group which runs every Sunday 4pm-8pm and ran every Sunday last year including Christmas

Day and New Year's Day when there were 12 people in total across the 2 groups. Kent Police are also talking about supporting it to run midweek in the evening. Most of our groups run in the evening. The Northgate project offers a cook and eat group every Wednesday and the People's Health Trust have continued funding for another 2 years for this and IT group. Millfield Estate, Faversham allotment has been signed up for. Sanctuary Housing have cleared the plot and we are hoping to use some money from sale of the Faversham Umbrella Centre to create a community garden and make use of the existing building.

**Turning Point, Paul:** The Drug and Alcohol contract is currently up for renewal. It is with the Commissioners and we are waiting for a decision at the end of January. It will be for 8 years but for less money.

**Insight Healthcare, Roger:** We are one of 4 IAPT providers in Kent and offer a service for 17 year olds and above. In East Kent we also work with IESO, 24/7 online CBT provision partner and want to develop further East Kent provisions. We have a project to start working with Kent Refugee Network. We have won the Medway contract, which KMPT lost, and split our service in 2 between Medway and our HQ in Faversham. HQ. West Kent services are looking for a single IAPT provider and will also be tendering for that. We use interpreters for deaf people and also for other languages.

## 6. Working Group

A new working group needs to be decided on. There was a suggestion around building better links with students/young adults but nothing was decided upon.

## 7. Date of next meeting

2<sup>nd</sup> March, 2017 at 2pm at Thanington Resource Centre, Thanington Road, Canterbury, Kent CT1 3XE.

Meeting finished at 3.38pm

## Action Table

No.	Action	Responsibility	Status
1	Ask Karen Dory Rees for an update on the street triage service	Sue	Attending May MHAG
2	Clarification of content of the assessment letter from CMHT	Sue	Email sent 16/1 and 16/2
3	Follow up re financial support for East Kent Carers Committee	Liz	Shaw Trust to contact Porchlight and attend EKCC meeting.

## Administration :

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