

South West Kent Mental Health Action Group

Meeting on Thursday 22nd March, 2018, 2pm to 3.30pm
Tonbridge & Malling Leisure Trust, Angel Centre, Angel Lane, Tonbridge TN9 1SF



PRESENT	ORGANISATION
Ali Marsh, Chair	ThinkAction/Co-Chair Maidstone MHAG
Sue Sargeant, Minutes	West Kent Mind, MHAG Co-ordinator
Jo Copley	West Kent Mind, Edenbridge
Simon Drinkwater	West Kent Mind, Edenbridge
Wioletta Antolik	Shaw Trust, Support Manager
Tracy Sandland	West Kent Mind
Alison Skulczuk	TWMHR, Finance and Business Development
JT	Service user
Heidi Adamson	leso Digital Health
Steve Sargeant	Mcch, Wellbeing Facilitator
Martine McCahon	West Kent CCG
Scott Joiner	Live Well Kent, Network Development Manager

APOLOGIES	ORGANISATION
Lynn Spicer	Primary Care Mental Health Service
Phil Davis	DWP Disability Employment Advisor
Linda Riley	Service Users Involvement Group (SUIG)
Jill Grainger	Tunbridge Wells Mental Health Resource (TWMHR) Reachout Co-ordinator

1. Welcome, Introductions & Apologies

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

2. Health & Work Programme, Wioletta Antolik

The new Health & Work programme (WHP) is a new government funded service, starting from January 2018 and delivered by Shaw Trust in the Home Counties Central Region of the UK and West London. It recognises that everyone is different and therefore the participants' journeys into work will be unique to them. The WHP looks to enhance all aspects of the individual, not just focus on employment outcomes. The measure of success is based on earnings received, not hours worked. This enables the participant to get with less hours to start with and build their hours gradually, if that's what is best for them. Skill and experience is important but also a person's mental health & wellbeing, housing, finance etc. We work with a participant to help them achieve their goals. Their main point of contact is a Support Manager who coordinates the journey into work and provides access to various resources, including online portal and vacancy match. Experienced volunteers and the internal Health and Wellbeing Team provide added value support. The WHP participants are actively involved in the co-production of their action plan. We encourage the participants to take responsibility and ownership for their journeys into employment.

Time is rewarded, ie if someone wants to share skills by helping in local communities they get a time credit to spend with local partners. This is in development but we have partnered with Spice, a local organisation.

We are integrated within local communities and health provisions and our delivery sites are in community and outreach locations as well as from our local offices. The locations covered by myself are Tonbridge and Sevenoaks, as well as surrounding areas in West Kent. My colleagues are also present in Ashford,

Canterbury, Dartford and Gravesend, Folkestone, Maidstone, Margate, Ramsgate, Sittingbourne, Whitstable.

If someone wants to work in next 15 months but has barriers to that happening they can be referred. To be eligible, they have to be in receipt of a benefit such as Job Seekers Allowance (JSA), Employment Support Allowance (ESA) or universal credit and referred by a work coach at the Job Centre.

We work with them for 15 months and then if they enter employment we can support them for a further 6 months. The Programme is voluntary for the majority of participants although 20% will be mandated from April 2018.

4. Minutes of last meeting – approved without amendment:

5. Action Points

a) From South West Kent MHAG:

From September 2017:

6. *Contact Pat Morgan at Highlands House re sharing of GP questionnaire and results.*
This has still not been received. Carry forward.

A Protected Learning Time (PLT) event with a mental health theme was held recently in Tunbridge Wells. It was attended by 60 GPs and 100 practice staff and included presentations by West Kent Mind, Live Well Kent, Thinkaction and the Alzheimers Association. Really good feedback was received and it is being replicated in Maidstone on 17th July?.

Scott has spoken to several GPs about why they don't refer to providers and discovered that some of this is due to encryptions within their systems. LWK are looking to put an extra layer of security to ensure this is made easier and for GPs to receive updates.

LWK is also offering to deliver services, including information sessions, from GP's surgeries and to team up with carers' organisations.

From January 2018:

1. *Add update to CCG report with information about the STP.* Martine will ensure this is included.
2. *Send any examples of housing problems before 1st March.* None received.

- b) **Response to question taken to County MHAG:** *It is increasingly difficult to find out information or engage with services without using email or the internet. Linda (SUIG) would like to make KMPT and KCC aware that people with mental health difficulties, who do not have access to the internet or are not computer literate are, for various reasons, being excluded. Other means need to be found to communicate with these people. Can Healthwatch Kent be aware of this when conducting their review? How can KMPT/KCC/Healthwatch Kent ensure that they reach these people and give them a voice?*

Linda's full statement was read out and there was agreement on the importance of reaching these people with KMPT, Department of Work & Pensions (DWP), Live Well Kent and Healthwatch all providing responses about how they are trying to do this.

A full response can be found in the February 2018 County MHAG minutes available at:
<https://westkentmind.org.uk/mental-health-action-groups/mhag-county>

4. Service User and Carer Questions

- a) **Raised at today's pre-meeting:** None

Take to County: There is a lack of funding for supporting clients with longer term needs in the community, ie longer than the current 1 year Live Well Kent Programme. Local providers are struggling to meet these needs through their own resources. How are KCC intending to address this need in the future?

5. Information Sharing:

1. County MHAG Update:

The minutes and local questions are all available at <https://westkentmind.org.uk/mental-health-action-groups/mhag-county>

2. Commissioners Reports: These reports were circulated separately and are also available <https://westkentmind.org.uk/mental-health-action-groups/mhag-south-west-kent>

a) West Kent CCG, Martine McMahon

- West Kent CCG has submitted various bids to NHS England through the Sustainability & Transformation Partnership (STP) for various pots of money. The suicide prevention bid has been successful and they are waiting to hear about two others: to expand the peri natal service offered by MIMMS and for individual placement support (IPS) helping people into and retaining employment.
- Martine gave an overview of the Better Together mental health and wellbeing conference which was held on Tuesday 13th March in Maidstone. It was a well attended and positive event covering all ages and included: NELFT, the children's mental health provider, peri natal services and older people's mental health services including dementia. There were presentations from professionals and some powerful personal experiences which you can watch or download

You can now download the presentations or watch the event by visiting:

<http://www.kmpt.nhs.uk/BetterTogether>

1. North East London Foundation Trust (NELFT):

- The children's & young people's mental health services (CYPMHS) contract started on 1st September, 2017 and the new model is completely different. It has taken a while to get up and running as they are now being asked to deliver evidence based care and have had limited capacity.

They have put additional capacities into their crisis service which now provides a direct telephone number for children in mental health services, offering 24/7 support.

Question: How is the care being measured?

Response: With different tools and questionnaires and they are concentrating on ones which have been validated but are still finalizing this. They are working with Thinkaction and Fegans to make sure the same outcome measures are being used across the systems by voluntary providers and service providers.

- Eating Disorder Service. New guidelines have been introduced and the culture is also changing around people waiting and not being turned away. A few months ago 100 adults were waiting to be seen and this has been now been reduced to 15.

ACTION 1: Martine to confirm the measurement tools used for eating disorders.

They are not just relying on people delivering service out of an office. Since 1st September 2017 staff have also been given the technology to work in the community. The

development of digital technology also includes an app which has been tested in Essex and is being made available shortly.

2. Physical & Mental Health. A consultant from psychiatric liaison team talked about the mental health expertise being provided in hospitals both in A&E and for inpatients on the wards. 5% of people attending A&E have a mental health problem. There are lots of different reasons for attendance such as:
 - People with physical and mental health illnesses
 - Psychiatric complications of a medical illness for example side effects of medication.
 - A psychological response to physical illness.
 - A physical manifestation of psychological distress. ie looked like a stroke but was actually stress related.

The goal is to have people staffing psychiatric liaison 24/7 and the requirement is for this to happen in 50% of acute hospitals of which there are 6 in Kent and Medway. This has been achieved in Medway since October 2017. QEQM has a service available but not 24/7. There are also discussions around providing the service in either Pembury or Maidstone from April 2018.

Supporting body and mind together in a proactive and preventative way could lead to people spending less time in hospital and they are committed to working with KMPT to provided an evidence based service.

Question: Is any work being done around why there is an increase in mental health problems?

Response: The current statistic for children of 3 in class of 30 having a mental health challenge is being updated to include more recent numbers on prevalence.

Jo Tomkin, KCC has conducted research on adversity, ie domestic violence, parents with mental health challenges, parents who are abusive or have drug and alcohol problems, trauma. Evidence shows children who have experienced several adverse events over a period of time are more likely to have mental health challenges. 50% of adults would have developed these problems before the age of 14, and 75% before 21.

There is also research around poverty and deprivation.

It may also be more about awareness.

Comments re conference:

- The 9 am start makes it difficult for people to get to using public transport
- Not all organisations had been asked to have a stand, can this be made easier?
- The next 5 Year Forward View (5YFV) is being developed it could be based around neuro development or adult eating disorders. The current one ends in 2021.

The Sustainability & Transformation Partnership (STP) came out of the current 5YFV and is about collaboration across health and social care.

In the last 3 years, the King's Fund national think tank has been writing about changes happening internationally in the US and New Zealand with collaborative working across services and the community.

The Health and Social Care Act made changes in 2012 which transferred decision making about services from the primary care trusts to clinical commissioning groups (CCGs) with a GP or Consultant lead. Competition was encouraged to get better quality services.

There was no legislation but 44 footprints across the UK including Kent & Medway.

Glenn Douglas is now the accountable officer across all the CCGs for strategic commissioning. Health and social care, commissioners, providers and voluntary sector are now all working together although the CCGs still have statutory accountability.

Lauretta Kavanagh is the management lead for mental health and Martine McMahon and Kim Solly are also working 2 and 3 days a week respectively on the project.

A recent presentation on mental health to the STP board focused on the following:

- Delivering mental health
- Promoting wellbeing
- Integrating physical and mental healthcare in GP's surgeries, hospitals and emergency care

ACTION 2: Martine to circulate the STP presentation.

b) Live Well Kent (LWK), Scott Joiner

- We are putting out 4 tenders across Ashford, Canterbury & Coastal and West Kent for projects which have been piloted for money management, bereavement and loss, art therapy and natural environment.
- In the next 6 weeks tenders for a young people's service and carers will be available under the Innovation Fund with funding by KCC being matched by LWK. Closing date 13th April. Announcements being made on 3rd May with services starting on 4th June.
- Provider network has been doubled in the last 6 months.
- We are holding an open day in 18th May, Maidstone Village (for network, providers, press, CCGs and service user to trial what is on offer, ie art therapy. Transport will be available from Maidstone East for service users.
- Anxiety and depression courses will still be run but will be changed from 6 week courses to short term high impact courses. A huge improvement has also been seen by running them outside.

The service is free and we encourage people to use different services across the county. Our goal is to help people to feel closer to their community and other people.

3. Provider Service Update/New Members:

West Kent Mind, Tracy: We are working in conjunction with LWK and going forward we are offering working in the environment and art based projects from start to finish of the recovery journey.

Mcch, Steve: The Wellbeing Programme is part of the Live Well Kent service and is being rolled out in Sevenoaks, Tonbridge and Tunbridge Wells for the next financial year. It consists of wellbeing and solution focussed sessions each running over two 5 hour days as this has been found to show more progression than the previous 6 week courses. The wellbeing sessions cover the 6 ways to wellbeing while the solution focussed sessions are designed for people with mental health problems who struggle to move on with their lives, helping them to look for strategies to move on in a positive way. There will be an opportunity for one to one sessions at the be time at the end of there

leso, Heidi: We are working towards the West Kent IAPT service's official launch event on 11th April, 2018. This service sees a partnership between ThinkAction, leso and Maidstone & Mid Kent Mind.

Thinkaction, Ali: The waiting lists are gradually going down and we are working towards clinical need led sessions rather than the set 6 session model being offered by previous providers. We are also working on support for long term physical health conditions as part of the 5 year forward plan delivering services working in physical health hubs.

Mental Health Resource, Alison: We run wellbeing services at the Hub and in the community, and advocacy across West Kent. A new allotment project is running in Sherwood and we are looking to hold community events there as well. We also have a work and wellbeing course using cognitive behavioural therapy, CBT, to help to improve the confidence of people who have been out of work or want to get into work. There is no referral criteria around benefits.

Our Serenity Café is being well received. It is a crisis café running in Tunbridge Wells on Thursday and Saturday evenings, alternating with West Kent Mind's Solace Café which runs in Tonbridge on

Friday and Sunday evenings. This funded from the Kent Police Commissioning Fund which has grants available for mental health services that relieve pressures on the police.

6. Task & Finish Group

None agreed.

7. Vacant co-chair positions

There is no current co-chair which leaves two vacant positions. The role is heavily support by the admin team and involves chairing the bi-monthly South West Kent MHAGs and also attending the bi-monthly County MHAGs in Maidstone, which are a great opportunity to hear first hand what is happening in Kent and to talk directly to decision makers. If there are 2 co-chairs then this responsibility can be shared. If anyone is interested please contact the admin team at mhag@westkentmind.org.uk

8. Date of next meeting

24th May, 2018 at 2pm at The Camden Centre, Market Square, Royal Victoria Place, Royal Tunbridge Wells, Kent TN1 2SW

Meeting finished at 3..29pm

Action Table

Action No.	Action Point	Responsibility	Status
	From September SWK MHAG:		
6	Contact Pat Morgan at Highlands House re sharing of GP questionnaire and results.	Linda Riley	
	From January SWK MHAG:		
1	Confirm the measurement tools used for eating disorders.	Martine McMahon	
2	Circulate the STP presentation.	Martine McMahon/Sue Sargeant	

Administration :

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Minutes posted on: <https://westkentmind.org.uk/mental-health-action-groups/mhag-south-west-kent>