

County Mental Health Action Group



Meeting on 19th April, 2017 2pm
at County Hall, Room Swale 3, Sessions House, Maidstone, ME14 1XQ

Attendee	Organisation & Title	Email Address
Alan Heyes	Mental Health Matters County MHAG Chair	aheyes@mentalhealthmatters.co.uk
Marie McEwen	West Kent Mind MHAG Minutes	mhag@westkentmind.org.uk
Brian Clark	Carer Swale MHAG Co-Chair	clarkbrian743@gmail.com
Andy Oldfield	South Kent Coast CCG Head of East Kent Commissioning	a.oldfield@nhs.net
Chris Hird	West Kent CCG Commissioning Project Manager	chrishird@nhs.net
Steve Inett	Healthwatch Kent	steve@healthwatchkent.co.uk
Sarah Deason	SEAP Advocacy Team Manager	Sarah.deason@seap.org.uk
Matt Stone	Sussex Partnership Trust CAMHS	Matthew.stone@sussexpartnership.nhs.uk
Liz Bailey	Shaw Trust LWK Programme Lead	Liz.bailey@shaw-trust.org.uk
Ali Marsh	ThinkAction Maidstone MHAG Co-Chair	Alison.marsh@addaction.org.uk
Jenny Solomon	Insight Healthcare Business Development Manager	Jenny.solomon@insighthealthcare.org
Annie Jeffrey	Ashford MHAG Co-Chair	Anniejeffrey1@googlemail.com
Chris Coffey	Porchlight Live Well Kent	chriscoffey@porchlight.org.uk
Juliette Page	Involve Kent Your Voice Maidstone MHAG Co-Chair	juliette.page@involvekent.org.uk
Anthony March	DWP Partnership Manager	Anthony.march@dwp.gsi.gov.uk

APOLOGIES	ORGANISATION
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Karen Abel	Co-Chair Canterbury MHAG/Insight Healthcare
Louise Clack	KMPT
Wayne Goodwin	Kent Police
Ellie Williams	Co-Chair Canterbury Take Off
David Hough	Co-Chair Swale MHAG
Amanda Godley	Co-Chair Ashford MHAG/SpeakUp CIC
Brian Heard	Co-Chair Thanet MHAG/SpeakUp CIC
David Rowden	Co-Chair Thanet/DDS MHAG/SpeakUp CIC
Naomi Hamilton	DGS & Swale Clinical Commissioning Groups

1. Welcome Introductions & Apologies

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

2. Live Well Kent End of Year Review – Postponed to next meeting.

3. Minutes of last meeting:

Approved with one amendment on Page 6. Removed update from Julie Blackmore/Maidstone & Mid-Kent Mind as Julie was not in attendance at the meeting.

4. Action Points

No	Action	Responsibility	Status
1	Invite Angus Gartshore to attend Swale MHAG to explain formula for CPNs	Marie McEwen	Angus is attending Swale on 5/7/17
2	Ask Angus Gartshore to explain different models for East/West Kent for transferring from secondary to primary care	Marie McEwen	Angus is Attending County on 16/6/17
3	Circulate draft Terms of Reference to all groups for comment/approval.	Marie McEwen	Completed
4	Request CAMHS attendance at MHAGs.	Dave Holman	Completed. CAHMS now attending local MHAGs. Matt Stone also in attendance today.
5	Invite Insp. Goodwin & CCGs to attend next meeting to explain Crisis Concordat/Cafe	Marie McEwen	Insp. Goodwin is not correct person to deliver this. Refer back to Dave Holman.

A discussion took place regarding action 5 above around who was the best person to attend the meeting and exactly what the group wanted to know. Was it an update on the Crisis Concordat or the Crisis Cafés? This led to a discussion on the different types of Wellbeing/Crisis Cafés. Jacqui Pryke's email was read out as follows:

For clarification there is a difference between a crisis café and a wellbeing café, some of the cafes have been called wellbeing cafes, but they do have a different remit to the crisis cafes.

The Aims of the crisis café is to:

- Provide out of hours support to people experiencing mental health problems which do not require hospital admission and can be supported by suitably qualified counsellors, mental health support workers, volunteers and peers.*
- Help prevent the escalation of mental health problems and thereby avoid a mental health crisis and potential S136 admissions.*
- Form part of a crisis care pathway and help prevent unnecessary referrals to secondary mental health services, A&E departments and other emergency and out of hour's services.*
- Improve and support individual mental health and wellbeing and increase independence and self-management through education, peer support, social engagement, counselling, sign posting & care navigation.*
- Reduce social isolation, stigma and discrimination for mental health users.*

The wellbeing cafes have a more social aspect to what they do, but the crisis café is there for people who feel they are experiencing a crisis and each person will undergo an assessment on arrival. The police/ambulance services can also take people there if the individual felt they would benefit from this form of support. It is really important that it is highlighted that the majority of people experiencing a crisis are taken to A & E and over 80% of these do not require admissions, but there is no alternative place for people to go.

The following comments were made:

- No clear pathway
- Why do various crisis cafes across Kent operate slightly differently?
- Cafés only operate for a few hours so there will still be people going to A&E.
- Same for out of hours psychiatric Liaison – this was extended by Ivan Rudd as it wasn't having enough of an impact.
- set up with best of intentions but funding issues mean limited hours – no easy answer.
- The Swale one was for people at risk to prevent escalation. The pilot worked well and was just starting to build when it came to an end. Together Your Way (Sandra Bray) is looking for funding to re-start this and has met with Police & Crime Commissioner who has awarded funding to other Crisis Cafes in Kent.
- Cafés also pending for DGS, Thanet and Dover.
- Crisis Concordat has looked at other models in the country but it isn't easy to lift one of those into Kent. The Concordat reports to Health & Wellbeing board. Difficult to describe an all inclusive model. 3 regional concordat groups being proposed.

Action 1 : Invite Ivan Rudd to give an update on his evaluation of the Ashford Crisis Café.

5. MHAG Terms of Reference Review

The Swale MHAG had carried out a review of the Terms of Reference and these were circulated to all local MHAGs for comments with a view to adopting these for all MHAG groups.

However, West Kent Mind feel this would be a good opportunity to review how the MHAGs function in general and how we can maximize their effectiveness within the changing structures of mental health services. This proposal was positively received and the following points were discussed:

It was agreed that:

- The pre-meetings work very well.
- Impressive involvement by all services and it is a good foundation on which to build.
- The Swale TORs workshop was a very positive development and working together is key.
- MHAGs have the capacity to invite the right people to the meeting which gives positive outcomes.
- The MHAGs are valued by the CCG commissioners and well attended by them.
- MHAGs are useful/supportive meetings for KMPT Community and Crisis teams to engage but there needs to be more clarity about service user and carer feedback and how to support their roles.
- Identifying specific themes could focus the meetings more and it would good to have more time at each meeting to consider themes in more detail and how we might work together to find local solutions.
- It would be good to clarify the roles and purpose of other groups as well e.g. the Service User Forums as they appear to be separate to other structures.
- Young people/families could be better represented at MHAGs.
- Does the name "Mental Health Action Group" reflect what we do? The original "Locality, Planning & Monitoring Group" model was to identify gaps in services, provide feedback to commissioners to assist with their planning and to give service users and carers a voice. The term action suggest a lobbying function and MHAG is not a lobbying group.

- It was agreed that chairing the meetings is not an easy role and perhaps resources could be found for a paid independent chair rather than relying on volunteers.
- The TORs should include a clause on accountability.
- Success and learning should be included on the standard agenda and more examples of good practice

What is next? It was agreed a review would be of benefit and West Kent Mind will discuss this further with KCC

6. Information Sharing

DWP – Tony March: Employment Support Allowance Work Related Activity Component (WRAC) and the Universal Credit Limited Capability for Work (LCW) element will be removed. This will affect all new claims for people who are informed they are part of either the ESA Work Related Activity Group (WRAG) or Universal Credit Limited Capability for work (LCW) group and are not in a protected group from 3rd April 2017.

Thirteen different projects form part of the Enhanced Support Offer and will be phased in from April 2017.

Some of these include:

- **Six Community Partners** to be introduced across Kent to build on jobcentre expertise and strengthen disability understanding. Partners will provide valuable insight into the effect disability can have on employment. They will provide advice and support for work coaches and Disability Employment Advisers in all aspects of disability. In addition they will support Partnership Teams and use their local knowledge and networks to identify local support initiatives to strengthen the district provision tool and increase partnership working. They may contact you all for more info on what your service offers. These will be in post by June/July.
- Personalised peer support **Job clubs** for people with long term conditions and mental health needs. These will be delivered by Disabled Peoples' User Led Organisations (DPULO) and local Voluntary Sector Organisations to disabled people with long term health conditions who volunteer to be part of this programme. These will be situated in jobcentres in areas with the highest numbers of people receiving ESA. Medway is only place in Kent who have this.
- **Work Choice** provision increasing with 10,000 new places available for access to work and our staff are being trained.
- The new **Work and Health Programme** will be launched on 31st October to look at people who need most support. More provision for those with health and disability needs.
- **Mental Health Support Service in Access to Work:** This has proven to be a cost effective intervention designed to support those who are at risk of alling out, as well as those with a potential job offer transitioning into work. Additional places have been funded to support ESA WRAG and Universal Credit LCW group claimants overcome challenges and provide significant support to transition them into work

Universal Credit full service for Thanet starting 19th July then Sittingbourne/Sheerness in December. Others will follow in 2018. We deliver a live service for non complex applicants. Lots of work and planning has gone into this.

South Kent Coast CCG – Andy Oldfield:

- Thanet's dedicated mental health street triage started on 1st April and is a one year pilot. We are closely monitoring this. Operating on Friday/Saturday till 2am with a dedicated Police officer and Mental Health Practitioner in a patrol car.

- Successful bid for transformation funds to extend psychiatric liaison to 24/7 at Queen Elizabeth Queen Mother hospital in Margate.
- Successful bid for IAPT services for long term conditions for East Kent.

Question 1: The NHS Sustainability & Transformation Plan highlighted anticipated closures of hospitals - has any work been done to look at the impact of the closures on people with mental health needs and where they will go?

Response: This work is ongoing but no decisions have yet been made on which hospitals will close. We did have 3 acute hospitals but we now have 2 but people are still presenting there, so is about psychiatric liaison getting people to the right place. There will be things we need to do.

Question 2 : Why is 24hr liaison so difficult to achieve?

Response: The funding is ring fenced for a year only then we have to find the funding after that for it to continue. The East Kent Hospitals Trust were required to take one of two sites through the bid and it identified QEQM was the right place to start. There is the possibility of bidding for wave 2 funding but not sure if those who were unsuccessful will be given the opportunity to rebid first.

Live Well Kent – Chris Coffey/Liz Bailey: End of year Reports will be provided for the local MHAGs and a round up will be delivered at the next County MHAG meeting in May.

ThinkAction - Ali Marsh: Performance meeting identified more work needs to be done when clients are finishing IAPT but do not fit into secondary care criteria. Andy advised that the same issue has been identified in other parts of the county and they are working on it. It is a commissioning gap and needs to be managed.

Sussex Partnership Trust (CAMHS) – Matt Stone : The current contract finishes on 31st August. Three pieces of procurements happening at the moment. CAMHS and Eating Disorder services will be moving into a clear pathway and this will have an effect on the principle objectives and people using the services. Might be different staff, recruiting is moving along even if a struggle. Referrals are very high. Seasonal peaks and spikes follows national trend.

Kent Advocacy/SEAP -Sarah Deason: This contract has been running for one year. There is one change, Learning Disabilities originally sat outside the remit of Kent Advocacy but has now been brought in.

Healthwatch Kent – Steve Inett: Discussions have been had with Alan, Chris and Liz around lack of provision for people with long term/enduring mental health needs. We have drafted a joint letter asking for clarity and will discuss this with commissioners after this meeting. When Healthwatch makes an enquiry the organisation must respond, they do not have to do what we ask but they must respond.

West Kent CCG – Chris Hird: Two Crisis Cafés opening in West Kent this week. One in Tonbridge delivered by West Kent Mind opening tomorrow and will operate on Thursdays and Saturdays from 5pm-9pm. One in Maidstone delivered by Maidstone & MidKent Mind opens this Friday and will operate Fridays 5-9pm and Sundays 1-5pm.

It is worth noting that KMPT's Care Quality Commission rating has moved from needs improvement to good.

7. Date of next meeting :

The next meeting is will be on **14th June, 2017**, 2pm at Sessions House, County Hall, Maidstone, ME14 1XQ

Action Table

No	Action	Responsibility	Status
5	Carried forward from last meeting: Ask Dave Holman who would be correct person to update the group on the Crisis Concordat/Crisis Cafes.	Marie McEwen	
1	Invite Ivan Rudd to give an update on the evaluation of the Ashford Crisis Café.	Marie McEwen	



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Minutes posted on

<http://www.liveitwell.org.uk/your-community/county-mental-health-action-group/>