

## County Mental Health Action Group



Meeting on 2<sup>nd</sup> August, 2017 2pm  
at County Hall, Room Swale 2, Sessions House, Maidstone, ME14 1XQ

| Attendee        | Organisation & Title                                  |
|-----------------|-------------------------------------------------------|
| Alan Heyes      | Mental Health Matters, County MHAG Chair              |
| Dave Garrick    | West Kent Mind, MHAG Minutes                          |
| Brian Heard     | SpeakUp CIC, Thanet co-chair                          |
| Maggie Gallant  | SpeakUp CIC                                           |
| Amanda Godley   | Speakup CIC, Team Leader                              |
| Brian Clark     | Carer & Swale co-chair                                |
| Ellie Williams  | Take Off, Assistant Director                          |
| Alison Marsh    | Thinkaction, Ops. Manager                             |
| Sarah Deason    | seAp Team Manager                                     |
| Nicky Scott     | Healthwatch Kent                                      |
| Anthony March   | DWP Partnership Manager                               |
| Wayne Goodwin   | Kent Police, MH Liaison                               |
| Hilary Johnston | LWK, Porchlight                                       |
| Emma Hanson     | KCC Commissioning                                     |
| Diane Marsh     | KCC, Deputy Cabinet Member for Adult Social Care      |
| Zena Watson     | WKCCG, MH Project Manager                             |
| Andy Oldfield   | East Kent CCG                                         |
| Sharon Dosanjh  | Medway CCG, Head of MH Commissioning                  |
| Nick Dent       | KMPT, Patient Experience Team Manager                 |
| Janet Lloyd     | KMPT, Patient, Public & Community Involvement Manager |

| APOLOGIES | ORGANISATION |
|-----------|--------------|
|-----------|--------------|

|               |                            |
|---------------|----------------------------|
| James Godfrey | KMPT                       |
| Carol Infanti | KCC                        |
| Nikki Oatham  | KMPT                       |
| Louise Clack  | KMPT                       |
| Jenny Solomon | Insight Healthcare         |
| Juliette Page | Involve                    |
| Matt Stone    | Sussex Partnership (CAMHS) |
| Liz Bailey    | Shaw Trust                 |
| David Rowden  | SpeakUpCIC                 |
| Chris Coffey  | Porchlight                 |

### 1. Welcome Introductions & Apologies

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

### 2. Live Well Kent (LWK) End of Year Review for Porchlight

Postponed until next meeting, where Porchlight and Shaw Trust will both give their LWK End of Year reviews. Porchlight leaflets were circulated to attendees together with the prepared presentation. Please send any questions to Hilary.

### 3. Minutes of last meeting - Previous minutes approved with no amendments.

#### 4. Action Points

| No | Action                                                                                                             | Status                                                                                                                                      |
|----|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 1  | Ask Dave Holman who would be the correct person to update the group on the Crisis Concordat/ Crisis Cafes.         | Zena Watson updated the group today on the Crisis Concordat/ Crisis Cafes. See below.                                                       |
| 2  | Invite Ivan Rudd to give an update on the evaluation of the Ashford Crisis Café.                                   | Unable to attend the August meeting. Carry over.                                                                                            |
| 3  | Ask Angus Gartshore to explain different models for East/West Kent for transferring from secondary to primary care | Angus is no longer the director of Community Recovery Service Line (CRSL) – contact Vicky Stevens, who is covering his role in the interim. |
| 4  | Invite Angus Gartshore to attend Swale MHAG to explain formula for CPNs                                            | As above.                                                                                                                                   |

**ACTION 1: Zena and Alan to contact Ben Smith (Director for Psychological Services and the Allied Health Professions at NELFT) regarding CAMHS attendance at meetings, in relation to the new Eating Disorder and Children and Young People's Service.**

#### 5. Workshop update for MHAG and Service User Forums' review

Emma Hanson, Kent County Council (KCC), Head of Strategic Commissioning for Adult Community Support

According to the transparency code, grants have to be given in a fair and transparent manner: The rolling grants system is not being changed to upset people, but because it has to be done to be a legal entity. There is a necessity of looking at what's working and what's not working well. It was noted that, for every threat, there is an opportunity to change things for the better.

There was a discussion surrounding the following points:

##### Workshop itself:

- Full and frank. Cath Wilton, the external facilitator, helped to capture useful information.
- SpeakUp are to be commended for their role, involving service users from lots of different contexts.
- Concerns were voiced over the event's organisation, the invitation process, the difficulty of getting tickets and that the service user presence was not advertised.

##### Peer support and the future of forums/MHAGs:

- There was discussion surrounding the funding and scope of service user forums, such that SpeakUp are delivering a wider range of services without extra funding, but are not commissioned to run these extra services. It was suggested that SpeakUp should develop a business case and put this to KCC.
- It was noted that, whilst SpeakUP is not officially funded for peer support, by giving people the confidence to speak up this inadvertently creates an environment where people can have a network and build long term relationships with each other. SpeakUp noted that they have been very successful starting groups and it would be 'tragic' if had to be time limited.
- Additionally, giving long-term support to people with MH conditions means people don't need to access other services.
- It was noted that lots had been spent on the service user voice, but that this is not having the traction.
- KCC does not want to 'throw the baby out with the bathwater', a lot is working well.
- Emma confirmed that Take Off should not stop looking for alternative funding for forum services that Take Off run.
- Going forwards, a number of suggestions were made:

- Making the architecture less confusing e.g. which group feeds into which other group. Aligning service user forums with the MHAGs
- Co-designing something new – health and social care should be people-powered.
- More clarity (message from Activmob report and recent workshop) and direction. More consistency between service user forums regarding what service user forums mean.
- Need a vision for the future, what they could offer as a collective and how this could be co-produced. Need a proper structure with accountability, responsibility and measurement of outcomes. Who's listening and what's changing? Right architecture and right voices needed. Sustainability & Transformation Plan (STP) - how we get people's voice into changing the system.
- The same issues are recurring in the health service – need dates, responsibilities and targets.
- Need a plan for the MHAGs by October. Ensure that MHAGs are joined up to the STP.

**ACTION 2: Emma to put together a draft specification for consultation by the end of October.**

- Peer support recognised as valuable. Peer support and service user involvement are two parts of the same whole not separate.
- Designing the future should be part of the forums.
- Healthwatch will work with KCC going forwards as an independent person to help to formulate the plan for forums and MHAGs. They have seats at all boards and have a strategic seat, meaning that organisations have to respond to them. The 4<sup>th</sup> July event was small, central and not everyone there but Healthwatch can help KCC to put this into a plan.
- The current clinical and medical model of mental healthcare – need more of a peer support model. STP is looking at this, but not a quick fix. Slovenia and Denmark are happiest places in the world. They support their communities.
- Funding is top heavy and needs reversing with money put into community services rather than secondary care.

**Being listened to and creating change:**

- There is uncertainty about how things will move forward, e.g. in terms of strategic partners, new outcomes, what is wanted from the forums. This impacts the forums moving forward and stresses forum members.
- Concern was voiced by SpeakUp about issues no longer getting resolved, no longer feeling required, not feeling listened to when things are taken forward, only having a small voice, not having the option to make positive changes, the door being closed, feeling demoralised about this and feeling frozen out.
- It was noted by Nick that there are lots of areas where the above is not happening.
- It was also noted by Alan that it is promising that KMPT are attending local MHAG meetings.
- A member of SpeakUp felt that they had a strong voice with KMPT and can go to service managers. They receive referrals from Improving Access to Psychological Therapies (IAPT), as they know that SpeakUP have something valuable for longer term support. The member was sure that if there were any issues that KMPT would listen.
- Porchlight are committed to service user involvement and are willing to meet with SpeakUp to explore how to move things forward. Porchlight have a service user involvement department and are happy to explore SpeakUp's ideas. There is not a formal relationship with service user forums in the LWK contract.

**ACTION 3: Hilary to update at the next meeting regarding meeting with SpeakUp.**

- Nick mentioned that he could help forums to be listened to and Maggie requested that he comes to forums on a regular basis.
- The carer voice was discussed.

Ellie highlighted the following concerns raised by their service users:

- Despite raising concerns on behalf of service users at the Local Leadership Meetings there is never any response or outcome.
- Lots of complaints that Canterbury CMHT do not respond to calls when people are in crisis.
- Groups at Laurel House have been cancelled due to staffing issues and funding cuts.
- Service users being told that care coordinators have double the amount of caseloads e.g. 80.

**ACTION 4: Ellie to give details to Nicky from Healthwatch to follow up on this.**

## Referrals:

- There were concerns about the lack of referrals from strategic partners to service user forums and other service providers. It was voiced that the strategic partners do not appear to know about the forums.
- KCC noted that they need evidence of this.
- Porchlight have met with all the service user forum organisations including SpeakUp CIC.

## Independence

- Emma noted that organisations need to be independent and separate from service provision, not embedded into strategic partners, KMPT, etc.
- Maggie questioned why Live Well Kent is contracted to engage internally with service users as she felt that SpeakUp, which is independent, could carry out this role. Maggie noted that part of their funding covered service user engagement but have now lost this funding. Maggie felt that this had adversely affected the voice of SpeakUp service users. Nick highlighted that Maggie's point was that the funds used for internal engagement could have been provided to forums with a dedicated responsibility to support involvement in the services of strategic partners.
- SpeakUp suggested that, as the strategic partner internal forums are not independent, this might prevent feedback being given by someone who is upset about the service and would rather talk to an independent group.
- The SpeakUP member noted that they had never been invited in by strategic partners, and suggested they could come in to Porchlight and do an independent forum.

## MHAGs - Independent chairing, reimbursement, atmosphere, etc

- A member of SpeakUP noted that they are not currently paid for chairing or for travel. A specific reimbursement query was raised. Porchlight replied that there is a process for claiming travel which was circulated at the beginning of LWK. This will be recirculated. Claim forms are brought by West Kent Mind to each MHAG. Porchlight are happy to pay for service users to go to MHAGs.

### **ACTION 5: Clarify expenses payments for going to MHAGs.**

- The following points were also discussed:
  - Independent chairing.
  - Not being able to contribute to the discussion when chairing.
  - Not needing lived experience to chair, as long as the chair is independent (general agreement on this).
  - MHAGs as quite idiosyncratic and driven by chair.
  - Good training, proper supervision and supporting of chairs.
  - Care needed when chairing, so that an action group which delivers improvements takes place, rather than a talking shop.
  - Forum alignment with MHAGs.
  - More structure for MHAGs.
  - A narrower focus of MHAGs, e.g. three targets, what we want to achieve, priorities for next few years, or focussing on something that needs changing and producing a set of plans to change it, or a focus on themes.
  - A strategic overview going forwards.
  - Changing format – e.g. participating remotely using tech, recording meetings, etc. Could help save time e.g. for carers.
  - Finding time for MHAGs around workload and extra responsibilities.
  - MHAG participation not being written into job descriptions, eg KMPT staff, but service user involvement and liaison is included in Community Engagement Strategy.
  - There have been occasions where MHAGs have been quite adversarial and personal, with people coming out upset.
  - The reappearance of unresolved issues, perhaps contributes to some attendees becoming angry e.g. at Ashford MHAG. Possible that issues are not resolved due to not being listened to. If this cannot be resolved at a local level there needs to be clear escalation routes with responsibility assigned to who is escalating it.

- But lots of local issues are being resolved, which is why there are fewer questions coming to county.

## 6. Information Sharing

**Porchlight, Hilary:** When LWK was commissioned it encouraged both short term and longer term support with a recovery focus. It encouraged organisations to build peer support to enable longer term support when needed. Eg Richmond Fellowship.

Their aim is for service user involvement to be embedded in all organisations that they work with. No one has been refused longer term support by delivery partners who traditionally provided this support. If there are specific examples of people, please feedback any issues to Porchlight.

**Healthwatch, Nicky:** Firstly, gave an example of Healthwatch's involvement in mental health – their recommendations for CAMHS, based on feedback from 304 people and professionals, were all incorporated into the tender for the new CAMHS contract. Secondly, Healthwatch are very involved in the STP and information will be coming out soon.

**DWP, Anthony:**

- Universal Credit, which is 6 benefits combined, will be rolled out across Kent by September 2018.
- Lots of claimants have mild/moderate mental health problems and it is a struggle to look at preventative options before they need secondary support. For preventative services, there is either a long wait or they are absent. A pathway needs to be developed for this.
- Janet agreed this is an example of where people's voices need to be heard. People are angry and upset. Not a provider issue, but a commissioning issue
- According to Emma, the STP is the way forward for integrating services.
- In Margate/Ramsgate jobcentres, Live Well Kent Rethink are on site once per week for direct referral to support people who suffer from mild to moderate mental health problems, which includes preventative services. This is a better way of delivering customer service than giving out a number to call. Support is needed ASAP as there is a long waiting list for KMPT secondary support, which is detrimental. A toolbox is needed.
- It was discussed that, if it works, the LWK service should act as a single portal where people don't fall through the cracks, negating the need for a long list of phone numbers, but that sometimes local provisions and direct referrals are more appropriate (e.g. nearer).
- Anthony raised that he had heard some service users did not hear back quickly from Live Well Kent. Hilary asked for specific details of cases as these can be looked into and any issues addressed.

**ACTION 6:** Hilary to contact Anthony/Emma to discuss this further.

**Medway CCG, Sharon:** In Medway there is a pilot of community street triage starting in June for a year on Wednesday, Thursday and Friday from 12pm – 11pm.

The Core 24 liaison service is being reviewed as things are not working as we would want them to. The Community Mental Health Team (CMHT) is now fully staffed and the Wellbeing café has funding for two more years.

North East London NHS Foundation Trust (NELFT) have the contract for the Medway CAMHS service, which goes live from 1<sup>st</sup> September.

**TakeOff, Ellie:** Ellie was concerned that Shaw Trust stresses short-term support and does not offer 1 to 1 support as groups can be anxiety-provoking for some people. Porchlight do fund them for this. She had a number of questions around Shaw Trust's delivery and reporting processes. Emma confirmed that that KCC ensures there is an extensive performance tracker, getting feedback and encouraging both Shaw Trust and Porchlight to survey their networks.

**ACTION 7:** Ellie to send questions to Emma to address to Shaw Trust.

**SpeakUP, Amanda, Maggie, Brian:** We are looking at how we can be better value for money and keep the service user voice at our heart. There is a Bipolar group in Thanet on 5<sup>th</sup> Sept 11-12.30

at The Media Centre. According to a worker at The Live it Well Centre in Ashford, Shaw Trust did not refer anybody to their service.

**ACTION 8: Maggie to provide Emma with the contact details.**

**East Kent CCG, Andy Oldfield:** They are working with KMPT to provide an extra 12 MH specialists for Street triage in Thanet and are working with Liaison Psychiatrists to make that 24/7. More resources are available for Early Intervention.

**KMPT, Nick:** The next meeting of The Co-Production network is on 18<sup>th</sup> September.

**seAp, Sarah:** Rethink are no longer part of the Kent Advocacy partnership. The Independent Mental Health Advocacy and community mental health advocacy in East Kent has been taken over by seAp, who are the lead partners in Kent Advocacy. Referral pathways don't change as referrals are made into the Kent Advocacy Hub.

**WKCCG, Zena:** We have reconfigured the Crisis Concordat as it is so large, and broken it into smaller groups to get things done in a more timely manner. We have been focusing on the development of the two crisis cafes, increased cover at Maidstone and Pembury hospitals for the liaison psychiatry service, and further development of the street triage service.

West Kent is working on a lead provider model with 7 clusters of GP practices within that federation and will roll this out soon. The number of MH nurses will be increased and it will be ensured they are embedded within the multi-disciplinary teams.

There has been a 6 month pilot of Crisis Cafes in West Kent, which is going very well. Individuals have visited who would otherwise have gone to A & E.

**ACTION 9: Zena to send out Concordat report, if permissible to circulate it.**

**Kent Police, Wayne:** There are legislative changes to the Mental Health Act, which will enable it to be used in private places (except dwellings). The maximum detention will be reduced and it also completely excludes the use of custody as a place of safety, thus removing any ambiguity.

## 7. Date of next meeting

The next meeting is will be on **11<sup>th</sup> October, 2017**, 2pm at Sessions House, County Hall, Maidstone, ME14 1XQ

### Action Table

| No | Action                                                                                                                                    | Responsibility           | Status |
|----|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------|
|    | <b>From April MHAG</b>                                                                                                                    |                          |        |
| 2  | Invite Ivan Rudd to give an update on the evaluation of the Ashford Crisis Café.                                                          | Dave Garrick             |        |
| 3  | Contact Vicky Stevens to explain different models for East/West Kent for transferring from secondary to primary care.                     | Dave Garrick             |        |
| 4  | Invite Vicky Stevens to attend Swale MHAG to explain formula for CPNs.                                                                    | Dave Garrick             |        |
|    | <b>From August MHAG</b>                                                                                                                   |                          |        |
| 1  | Contact Ben Smith regarding CAMHS attendance at meetings, in relation to the new Eating Disorder and Children and Young People's Service. | Zena Watson & Alan Heyes |        |
| 2  | Put together a draft specification for consultation by the end of October                                                                 | Emma Hanson              |        |

|   |                                                                         |                 |  |
|---|-------------------------------------------------------------------------|-----------------|--|
| 3 | Porchlight update at next meeting regarding meeting with SpeakUp.       | Hilary Johnston |  |
| 4 | Take Off to contact Nicky at Healthwatch regarding crisis and the LLMs. | Ellie Williams  |  |
| 5 | Clarify expenses payments for going to MHAGs.                           | Dave Garrick    |  |
| 6 | Arrange to contact Anthony/ Emma to discuss DWP issues further.         | Hilary Johnston |  |
| 7 | Take Off to send questions to Emma to address to Shaw Trust.            | Ellie Williams  |  |
| 8 | Provide Emma with the contact details of the LIW Centre worker.         | Maggie Gallant  |  |
| 9 | Circulate Concordat report, if permitted.                               | Zena Watson     |  |



T: 01732 744950

E: [mhag@westkentmind.org.uk](mailto:mhag@westkentmind.org.uk)

Minutes posted on

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

APPROVED