

County Mental Health Action Group Meeting on 22nd February 2018

Locality Questions

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Ashford	The children's section 136 provision runs out at the end of March 2018. What will be happening after this date?
Canterbury & Coastal	What is being done to reduce the current waiting list for Psychological Therapies in Secondary Care and what alternatives are available?
Dartford, Gravesham & Swanley	None
Dover, Deal & Shepway	<p>1. We have received reports of difficulties when contacting Coleman House CMHT by phone. Thanet CMHT's phone system has been upgraded due to similar issues. Are there any plans to upgrade the phone system at Coleman House?</p> <p>2. To address the issue of set limits on IAPT sessions, SKC CCG has agreed to share their IAPT contracts with Thanet MHAG. Could the other CCGs in Kent also consider sharing these contracts with The MHAGs, to clarify the number of sessions that these services are commissioned to provide?</p>
Maidstone Weald	None
South West Kent	<p>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?</p> <p>How can KMPT/KCC/Healthwatch Kent ensure that they reach these people and give them a voice?</p>
Swale	<p>With over 300 patients discharged from Secondary MH Care back to Primary Care in Kent, what is being done to address deficits in post-qualification GP training for mental health conditions, what is the timescale for any improvements and what evidence can be used to gauge any improvements?</p> <p><i>(A similar question was raised at the December Swale CCG Listening Post. All responses to questions raised at the Listening Post have been made available on the CCG's website.)</i></p>
Thanet	What are acute and crisis teams doing to plug the gap in dual diagnosis assessments?