

MENTAL HEALTH CARERS' REPRESENTATIVES FORUM

NOTES OF MEETING HELD ON

Wednesday 20th September, 2017

At Oxlease House, Travellers Lane, Hatfield

	Present
	<p>Carers: BA, SA, RB, TG, TH, CH, NHS, VK, BL,SL, MN, DR, JW, SW, VW, NY, SH, CD (20 carers)</p> <p>Apologies: AMS, JR, LB, MY, RL</p> <p>Chair: Rod Cotterell</p> <p>Staff: Sarah Williams (SWi) (co-chair) Deryn Sparrow (DS) (notes) and Rosemary Willis (RW)</p> <p>Volunteer: Pat McManus (PC)</p> <p>Guest speakers: Dr Andrew Nicholls, Interim Head of Recovery and Dr Jo Farrow, Clinical Director both from Hertfordshire Partnership University Trust (HPFT)</p>
1	Welcome Rod welcomed all to the meeting & introductions were made.
2	Minutes of July, 2017 - Agreed
3	<p>Feedback from Carer Representatives and Carer Involvement Workers: agreed that we would start on feedback</p> <p>a) DS – Re-tender out for Out of Hours weekend crisis service Deryn sitting on panel with Carer Representative LK. Deryn briefly described current Hertfordshire NightLight service run by Turningpoint and Hertfordshire Mind Network (HMN) many carers were not aware of the service, details can be found here http://www.turning-point.co.uk/hertfordshire-nightlight . The new contract will start 1st April, 2018. - Dr Haminder Magon, consultant psychiatrist on Aston Ward, Stevenage is keen on supporting carers and would like to attend our forums. The forum was happy for her to attend a forum as an observer but feel her support would be more appropriate at support groups. It was suggested we invite her to speak at a future forum to talk about the role of the psychiatrist and how they include carers and what is expected from them. DS to Action</p> <p>b) SW – attended HPFT Involvement and Engagement Group (IEG) - shared with forum his concerns about Non-smoking policy now piloting the use of Vapes in some areas and fears not enough is known about use of these. Discussion about this CD drew attention to the Yellow Card System for Medicine safety https://yellowcard.mhra.gov.uk/ (set up after the problems with thalidomide) e-cigarettes is one of the areas they are interested in. DS to take to Physical Health Committee - Discussed at meeting 22/9/17 – This is a pilot scheme only in a few areas, they allow specific e cigarettes to be used, to support</p>

	<p>people to stop smoking, they are not prescribed, patches are prescribed when appropriate. The policy is no smoking on HPFT premises and grounds this applies to all including staff, every effort is being made to implement this.</p> <p>MN – concerns that son was going to be forcibly moved from home; now aware this is not true.</p> <p>c) CH – husband went for physical health checks at Saffron ground, but they were unable complete as didn't have patches for ECG. Also has mobility problems and concerned that promised wheelchair wasn't available and although consultant saw him in nearest room caused him problems. Action DS to take to HPFT Physical Health Committee – discussed 22/9/17 - Group were aware there have been some problems with equipment, and are appointing somebody to be responsible for checking and reordering in every building, however this is proving difficult in some areas where equipment in buildings is shared.</p> <ul style="list-style-type: none"> - Disappointing long wait for counselling, 4 months for assessment a further 4 months before start then to find there is no disabled access at Stevenage mind where due to take place – DS to speak to Mind in Mid Herts, Stevenage re this. <p>d) TH – Disappointed the Care Coordinator didn't turn up at arranged time, no explanation given</p> <p>e) RC – Adult Mental Health Services, Slippers Hill, Hemel Hempstead will be moving to a multipurpose building home which will also include Children's and Diabetic Services.</p> <p>f) TG – attended Carer Pathway implantation group – Good management plans in place but delivery of service still an issue. Pushing for mandatory Training needed for all staff particularly Clinical Staff.</p> <p>g) NHS – wife accessing deeper type of CBT/Counselling Treatment Therapy from Dr Frank Corrigan, based in Scotland, this is accessed on line/Via Skype (using Zoom, safer for skypeing). This has helped with her OCD and is Supporting her to deal with her complex post-traumatic stress disorder. This is a private arrangement funded by themselves, http://parkpsychotherapyglasgow.org/therapists</p> <p>h) SWi – HPFT Recovery conference, taking place week commencing 9th October, this year instead of one large event, a similar event will held on four days different days and in various venues county wide.</p> <ul style="list-style-type: none"> -New Leaf College autumn programme now available, they will be speaking at all the Recovery Conference events. - Child and Adult Mental Health Service (CAMHS) – Sarah is working with Rethink to produce a support programme specifically for Parents/Carers of those using this service.
4	<p>Speakers:- Dr Andrew Nicholls and Dr Jo Farrow</p> <p>To update us on HPFT Good to Great Strategy and to answer questions carers have about this.</p> <p>Sarah explained that many carers did not agree about this title as they didn't feel their loved ones had always received a good service, it needed to improve to become good before great.</p>

1. Please provide supporting evidence to show how HPFT plan to implement the Good to Great Strategy.

Andrew agreed that some people have a less satisfactory experience within the service; however, they are striving to achieve the best outcomes. They aim to achieve this by :-

- Employing people who have the right skill and values
- Leaders who involve and empower
- A workplace where people grow, thrive and succeed

The organisation looks at:-

- Getting the basics right
- Learning, innovating and improving
- Leading in their use of information and technology
- Leading networks to deliver joined up care
- Good relationship and partnership working to meet the whole person's needs.

Andrew and Jo spoke about how this was being achieved

- Actively learning from mistakes, meaningful action plans being put into place and are striving to do this in a transparent way. Carers asked how this is built into the organisation and spoke about attending workshops/meetings where they had put forward suggestions/ideas but then had no feedback, has this suggestion been implemented and how it is working, if not why not? Andrew will flag up that we are not getting feedback and carers feel that the organisation is often not always being transparent.
- HPFT are working in close partnership with many organisations i.e. Community Trusts, Acute Trusts, voluntary organisations. Working together to achieve the best outcomes possible for individuals. See 3 e an example of this.
- HPFT have difficulty recruiting/retaining staff and often have to use agency staff, this is a nationwide problem not just HPFT. HPFT are looking at ways to support existing staff more effectively, through good supervision and training.
- HPFT are committed to the Triangle of Care model, using the role of carers in partnership, carers felt this didn't always happen. Carers suggested it would be helpful if they had training, especially when they were new to services and had very little knowledge about illnesses they were dealing with or how the system works.

2. How are HPFT going to include Government CQUIN targets, including physical health checks for people with serious mental illness CQUIN, in the Good to Great strategy?

- HPFT have physical Health policy, this shows clearly that physical health checks are part of Service Users Care Plan (CPA).
- Carer spoke about concern about not having choice about where/when

physical health checks take place.

3. How are carers going to be included and involved in the Good to Great strategy?

> There are carer Representatives/ experts by experience who attend meetings to represent carers at many meetings including:-

- Involvement Engagement Group (IEG)
- Carer Pathway Implementation Group
- Making Services Safer
- HPFT Carer Council

>Carer spoke about difficulty in speaking to psychiatrist in front of Service User. Deryn informed group that in Carer Pathway states that carers should be given opportunity to speak to appropriate clinician

4. If HPFT are to get from Good to Great more therapies needs to be available such as Dialectical Behaviour Therapy (DBT) and therapy posts need to be recruited for and filled. How do HPFT aim to do this?

- Open to looking at different ways to deliver therapies i.e. using technology to deliver 1+1 therapy (see carer idea above 3(h.))
- Recruiting psychology graduates to become support workers, working alongside qualified workers, with training many are able to deliver lower level therapies. This will give graduates first-hand experience working enabling them to progress in their careers and service users will receive some of their much needed therapy.

5. If HPFT are to get from Good to Great more help and support needs to be available for people with a dual diagnosis such as counselling, Cognitive Behaviour Theory (CBT) and DBT. How do HPFT aim to do this?

- Answers to question 4 partly answer this
- Carers experience of the dual diagnosis pathway is that Spectrum are delivering but HPFT have a long way to go. Carers asked how they could get a copy of this, Andrew to arrange for this to be on HPFT Website.
- Carers would value more family therapy

Andrew emailed to say he and Jo took the following away from the forum and would respond a.s.a.p.

- i) Routine feedback mechanism re service development matters to carers required.
- ii) Performance measure required for monitoring Carer involvement.

	<ul style="list-style-type: none"> iii) Good to Great – update required including Carer involvement going forward. iv) PD Pathway - make available - on Website http://www.hpft.nhs.uk/information-and-resources/trust-policies/ v) Training / Support required for Carer's upon diagnosis vi) Triangle of Care – confirmation of coverage of this in vocational training courses - vii) Physical Health Check appointments – no choice of time offered. viii) Carer's Team – are jobs being lost? Statement on future of HPFT carer services from James Holland sent to carers on MH network 4th October ix) Dual Diagnosis Protocol – what are HPFT doing to improve staff awareness? 										
5	<p>Topics agreed for future meetings:</p> <p>What Questions would we like to put to the speaker of the next forum to enable them to deliver information required by carers more effectively?</p> <table border="1" data-bbox="512 1155 1385 1655"> <thead> <tr> <th data-bbox="512 1155 1062 1234">Future Topics</th> <th data-bbox="1062 1155 1385 1234">Date & Speaker booked</th> </tr> </thead> <tbody> <tr> <td data-bbox="512 1234 1062 1352">Supported accommodation in Hertfordshire</td> <td data-bbox="1062 1234 1385 1352">16th November Kristian Tizzard</td> </tr> <tr> <td data-bbox="512 1352 1062 1431">Benefits & Mental Health</td> <td data-bbox="1062 1352 1385 1431">23rd January 2018</td> </tr> <tr> <td data-bbox="512 1431 1062 1588">Suggested - Dr Magon to speak about the role of the Psychiatrist, their expectations of carers and how they should be involved. DS to follow-up</td> <td data-bbox="1062 1431 1385 1588"></td> </tr> <tr> <td data-bbox="512 1588 1062 1655"></td> <td data-bbox="1062 1588 1385 1655"></td> </tr> </tbody> </table> <p>Accommodation Questions:-</p> <ol style="list-style-type: none"> 1. What supported accommodation is available in Hertfordshire for people with a mental illness and how is this funded? Where can information are found about funding, what support is available and who provides/is responsible for this support? 2. What is the procedure if people are placed out of county and would like to return to Hertfordshire? 3. If the Service User is discharged back to the GP and no longer requires secondary mental health services what rights do they have to stay in the property. 	Future Topics	Date & Speaker booked	Supported accommodation in Hertfordshire	16 th November Kristian Tizzard	Benefits & Mental Health	23 rd January 2018	Suggested - Dr Magon to speak about the role of the Psychiatrist, their expectations of carers and how they should be involved. DS to follow-up			
Future Topics	Date & Speaker booked										
Supported accommodation in Hertfordshire	16 th November Kristian Tizzard										
Benefits & Mental Health	23 rd January 2018										
Suggested - Dr Magon to speak about the role of the Psychiatrist, their expectations of carers and how they should be involved. DS to follow-up											
6	AoB										

	None
7	Next Forum Date – Thursday 16th November, Lunch 12.30pm Start 1.00pm – 3.00pm Finish.