

EAST LoTHIAN JOINT MENTAL HEALTH PLANNING GROUP

**Wednesday 22nd July 2009, 2 pm
Boardroom, Edenhall Hospital**

MINUTES

Present:

Ian Johnston	Clinical Director, ELCHP (Co-Chair)
Paul Noyes	Planning & Commissioning Officer (Mental Health), ELC
Neil Mayfield	Consultant Psychiatrist, Herdmanflat Hospital
Gary Smith	Providers Forum Representative
Tony Segall	Centre Manager, Carers of East Lothian
Laurelle Edmunds	Carer Representative, Carers Of East Lothian
David Haldane	Clinical Services Manager, Mental Health, Herdmanflat Hospital
Angela Kenney	Housing Strategy & Development Officer, ELC
Morgan Flynn	GP, North Berwick
Nikki Moran	Development Worker, ELIG
Claire Faulds	IHTT
Thomas Miller	Unison (Health)
Patricia Graham	Consultant Clinical Psychologist, Edenhall Hospital

In attendance:

Rohan Bruce	Minutes
Sam Maclean	ELC for item 7

Action

- 1.0 **Apologies**
Linda Young, Fiona Graham, Gerry Power, Linda Irvine, Lesley Aitkenhead.
- 2.0 **Minutes of the previous meeting**
The Minutes of the meeting held on 24th June 2009 were approved.
- 3.0 **Matters arising**
 - 3.1 **Websites** - This will be an item of work for the group for the future once current changes have been implemented and time can be given to this.
 - 3.2 **Exercise Prescription** - Gary confirmed that research has started and trying to recruit participants.
Funding - to be confirmed. Communication ongoing

4.0 Mental Health and Wellbeing Programme Board Update
Feedback from meeting 3rd June by David Haldane
Main issues for East Lothian

- 4.1 Beds move - now imminent 4th? September. EL to be with Mid on Hermitage ward.
Peter Le Fevres is leading a group looking at how consultants work, and whether they are going to use the inpatient community model.

At present the wish for us is that we continue to have consultants both in and out of hospital, rather than just one or the other. To ensure continuity of care doesn't suffer.

Local issues are being considered that are a knock effect from the bed move:
Discussion about a 'safe' place to see distressed patients for assessment.

Also discussion taking place about place of safety in the context of the Psychiatric Emergency Plan (PEP) revision.

- 4.2 Dementia Plan - Katie McWilliams presented this to the project board. Plan has been circulated - The JMHPG need to consider the implications for EL in the context of the MH and older persons strategies.

5.0 TAMFS

- 5.1 Paul circulated details of a Lothian event on 25th August

6.0 Local Strategy and Implementation Plan - Updates / Progress

- 6.1 CMHT Update + bed move
+ The Acute bed move is currently scheduled for the 4th September.
6.2 Staff all know informally, and will know by letter on Friday.

Four staff going with the ward to Edinburgh. Three trained nurses and one health care support worker. One fixed term position that will hopefully go with the ward too - therefore five staff in all. Need to keep link with staff / patients during change over.

Need to set up process of when people stopping admitting into Garleton and admitting onto Hermitage at REH. Meeting with Andy Wells - is essential.

DH

There are still elements that will have to be worked through, but situation generally on schedule.

Claire has been involved in reviewing intensive home treatment - this will be brought to the next meeting.

CF

There have been issues with the allocation process that need to be worked through. Getting education out to colleagues and service users about what CMHT is absolutely paramount.

Need to get communication group back together again and re-invigorate the knowledge about what CMHT is about.

DH /
FG

A key issue being addressed relates to clarification of the place of safety / and a safe place for assessments.

A place of safety is when the police are involved, this will go to the REH, this was agreed through the strategy and the police have been written to. - This was always the plan.

The other thing that's come up is the amount of people seen at Garleton as safe place for various reasons, a replacement 'safe place for assessment' needs to be found.

A paper about out of hours will be tabled using the LUCS facility for out of hours and the weekends at Roodlands.

DH

Nikki asked if there any spare money in endowments in EL at the moment to give a bit of a face lift to this area in the REH, so there is a bit of an EL 'thumbprint' on it when patients move into it. It would be nice for it to look good for people to be moving into it - for patient benefit.

LI / NM

The planning group gave a note of thanks to the staff that had agreed to accompany the move. It was agreed and commented on that praise was due for maintaining continuity of services at this time etc. Thanks to everyone involved was extended.

Service users / carers need clarity as to how their medical / consultant cover will be provided. A clear statement is needed on this.

IJ

6.3 Cameron Cottage Update

This is going well. Now had seven admissions, majority from ward, and one from rehab. All feedback has been positive.

There has been much more turnover and the age group of patients seems to have changed to a younger group more focused on rehabilitation.

Work with housing and paying rent and prevention of homelessness has worked well. Approx 50% + have moved into their own tenancy. The addition of the mental health social worker has been very positive.

Given that Cameron residents now have more complex and severe illness it's has been noted that it is important that support is available in a crisis. Claire - had talks with Bill Riddle. Cameron residents all have CPNs therefore are known about. Awareness would be raised if anything were 'bubbling'. - To clarify IHTT support would be out of hours, in hours it would be the CMHT.

Need to keep the focus on movement - managing this with a monthly meeting at Cameron, which Bill is chairing, to keep an eye on things.

- 6.4 **Social work posts** - Two posts advertised for. Two posts offered, but only one filled. Post will be advertised again soon (beginning of Aug). Post looking to be filled at the end of the year.

Group concerned as to time delay and asked about short-term options such as agency staff / temporary cover. There seemed to be thoughts that there may be a worker coming to the end of a temporary contract who could be approached.

Ian will contact Linda Young

IJ / LY

- 6.5 **Peer Support Update**

'Pilot' is still ongoing at Garleton ward. Two peer support workers, one off sick but due to return soon. Positive feedback all round. These posts will technically transfer under the management of Claire when Garleton moves, that will cross over to CMHT but day to day management for the peer support workers will be through Claire.

Discussion around how these staff will be used when the beds change.

- 6.6 **Day Services**

There have been a number of changes made a Tynepark in trying to focus on closer work with CMHT; there is now a room that can be used by CMHT members. There is now a café up and running. A lot more people coming in and out, a lot more new faces. Garden set up with allotments. Wood workshop. No complaints so far.

David mentioned that the CMHT Minibus is coming to the end of its natural life and can't see any reason to have a mini bus anymore. No plan to renew that once it fails its MOT. This bus is used for some Tynepark groups' discussion needed with Tynepark.

DH /
FG

- 6.7 **Psychology**

Patricia reported that An EL strategy has been produced and mapped based on Scottish government psychological therapies matrix.

Mention of the clinical associate post based at CHANGES - post open for last 4 months, hasn't been advertised - again difficult to get it through HR.

There should be money that's available that's not being spent on that post. The post being empty is impacting on CHANGES a lot. Norman authorised the vacancy - therefore need to chase up Morag Barrow.

Standard evaluation of the service - keen to drive this forward. Liaising with Richard Murray.

7.0 Sam McLean - Procurement

7.1 Presentation and Discussion about EL Council procurement plans for specialist support.

Sam stated that the council is trying to get alongside stakeholders and look at provisions and changes of buying care at home and support services. A 'user intelligence group' is proposed and nominations required.

SM

Nicky said she would try and represent the service users. Somebody from CMHT needed - David agreed to provide someone.

Tony voiced concerns re: quality and user feedback, joint feedback. Need to make sure that the service we are being provided is the service that we want.

Its recognised that people with special needs need a number of providers, rather than one or two working across a large patch. The council is open to this for the next phase.

There is a need to look at the support being provided, is it the right support. Is generic support cheaper, therefore allowing for crisis support from more specialised services, and thus what is different from MH from learning disability for example that we would want special skills or special areas of expertise. Will continue to be looked into.

Please send a copy of the JMHPG minutes to Sam..

PN

8.0 Draft Housing Scotland Bill - Angela

8.1 Paul sent out a summary paper, which summarises the Housing Scotland bill.

Presentation and Discussion re: reformation of right to buy laws and modernisation of how housing is regulated. This was generally welcomed from a MH point of view.

Any comments to Angela.

9.0

Carers

- 9.1 Tony concerned that COEL invoice for carers post has not been paid - Linda been invoiced directly, but no payment. Ian email to chase up.

IJ / LI

Meeting with Fiona Graham and Stuart Cameron to look at evaluation of the carer support post has been very helpful. Issue to bring back to JMHPG is evaluation, is there an intention to do a full evaluation of all the changes rather than service by service.

9.2 Carers Planning Group

Need to look at how we get feedback from this group into JMHPG. There have been some recent developments in respite for carers that have not been brought to JMHPG.

Suggestion that Vanessa strong comes to JMHPG to discuss respite plans.

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ELIG

Nikki brought various questions to the group from service users:

Q - Crisis centre - what is the situation with this?

A - A crisis centre has never been planned for EL it is very much a city model.

Q - Local MH was promised £1 million 5 years ago, where is it?

A- There have been many developments in EL as part of the strategy: IHTT, Cameron Cottage, psychological therapies and psychology developments. Linda Irvine could be approached for full breakdown.

Discussion about concerns of Garleton closure.

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Acute Patient Forum

Hasn't been one. Difficult process. Patients unwell. Perhaps take to REH and invigorate it there.

- Nikki agreed to support this at the REH

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AOCB

- 12.1 Self Management Fund - Tony update

This is a Scottish government funded initiative through long-term conditions alliance. There have been preliminary discussions between COEL, CAB and Stepping Out. Meeting held prior to this meeting about developing that proposal further.

Seems to be enthusiasm from CMHT perspective. Will have more to report at next meeting. Basically is about improving self management, linking in locally and learning across CHP too. Giving people more info earlier in diagnosis - more resources etc to live with diagnosis etc, and for family. Make professionals aware that patients need that info - how effectively can they use their time.

- 12.2 Angela - a couple of meetings ago was asked to produce indicators for David. Has set up a group of 5 local authorities, 4 in Lothian plus borders, Fife also included.

Work still in progress on this.

- 12.3 This was Neil's last meeting - thanks extended to him for all his work and best wishes for his new post.

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Date of next meeting - 26th August 2009

Paul Gave apologies for this but will circulate agenda and papers as usual.