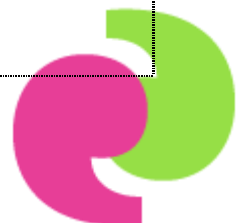


Mental Health Task Group Meeting
29.07.15
At Kingston Quaker Centre

Present:

Graham Goldspring, Chair	GG	Sophie Bird (HWK Community Engagement Officer)	SB
Alan Moss	AM	Sue Ilsley	SI
Anne Blanche	AB	Stephen Hardisty (HWK Manager)	SH
Jo Boxer	JB	Tony Williams	TW
Miles Rinaldi, SWLTG MH Trust	MR		

ITEM	Action
<p>1. Welcome and Apologies GG welcomed the Mental Health Task Group members. Apologies were received from Mari Cameron Taber. Simon Montague Taylor was not present to deliver the MH Parliament update and there was no update to be provided by GG on the Kingston Hospital Dementia Strategy Steering group so more time was allocated to the other 2 items on the agenda.</p>	
<p>2. Notes and actions of the last meeting</p> <p>A correction was pointed out regarding the Minutes from 29th June MH TG meeting - In item 1 has been amended: (The community mental health team <i>performs</i> less favourable than others in London, changed from <i>is</i> less favourable.)</p> <p>MH Financial Reports/budget information required from the CCG - SH explained this is a difficult task and still being gathered. (See AOB) SH will discuss the Kingston Wellbeing Service at AOB.</p>	
<p>3. Miles Rinaldi, Discuss SWLStG Discharge from secondary to Primary care policy report</p> <p>September is the official sign off date for the report. MR gave an explanation of the policy report; It was created because of negative feedback from staff and patients regarding peoples discharge from MH secondary to primary care. There was a survey designed to find the problems and identify the solutions.</p> <p>Findings of the survey</p> <ul style="list-style-type: none"> • Patients reported being discharged from the CMHTs with nothing but a letter. • Carers were not involved in the discharge process • GPs were also only receiving a letter of notice of a patient's discharge, no conversation or other information from the CMHT. 	



- 38% of patients being discharged to primary care were being re admitted to the CMHT

In response SWLSTG did a consultation into the service- the outcomes are detailed in the report.

- Patients receive many assessments when admitted to the CMHT but they don't actually get active support to aid their recovery.
- Communication is not good between SWLSTG CMHTs and GPs- they don't have a good working relationship.
- GPs have been very difficult to engage In this consultation; not many GPs agreed to participate in the consultation despite 10 of them recently receiving training in MH and attaining a mental health diploma.

Findings of the consultation

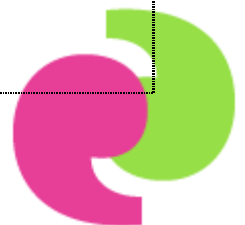
- Discharge needs to be a shared decision between the CMHT, patient, and carer.
- The CMHT needs to look at what support there is for people in the community
- MR stated the further in advance the service users and carers know about the discharge the better - this is what they are aiming for across all the CMHTs.

Current update on the policy

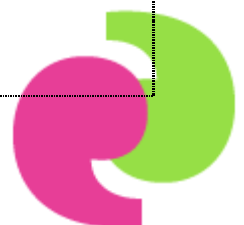
- The CMHTs have had the report to work on now for 6 weeks, the Trust is getting feedback on it from the CMHTs and indirect feedback from the patients and Carers.
- The next stage is for the Trust to do an audit of the progress made so far, once the policy has been signed off there is still flexibility for it to be tweaked for improvements- and different Boroughs have different needs- its ongoing progress.

Input from the MH TG

- HWK is developing a grass roots led MH service user network- this will aim to tackle Kingston's reputation for being poor in service user involvement.
- The Quaker Centre and HWK should be a base for SWLSG to access service user feedback.
- There needs to be an easy access list of support and services available for carers, patients and GPs in Kingston.
- The discharge standards need to be made available to patients and carers in an accessible format - so they know the standard of service they should be receiving.
- When patients are discharged it should not solely be MH services which are used to support the patient and carer but a whole life needs perspective such as housing,



	<p>benefits, work and training - without these important factors being taken care of the patient and carer will not be successful in the discharge. It is important that the Care Coordinators are aware of these mental health deterrents. There should be emphasis placed on supporting the patient to get involved in mainstream activities in the community - not just MH based.</p> <ul style="list-style-type: none"> • There used to be periodic meetings between the community psychiatric teams and GPs - this worked well and it should happen now. • Its not just discharge for the patient - its discharge back to the carer- the carers take back ultimate responsibility for the patients health. The policy must align to the Care Act legislation in putting carers' needs on the same level of importance as the patient. • It is a concern that GPs are not demonstrating they are fully on board with this policy. All elements of the services should be fully involved in this policy - a recommendation is that there should be whole system ownership - the Carers Partnership Board, MH Planning Board, MH Network and the Kingston Local Medical Committee should comment on, approve and endorse this policy document. This would be evidence that they are on board and have agreed to action its requirements. <p>Actions</p> <ul style="list-style-type: none"> • MR will propose the Whole System Ownership approach to SWLSTG and report back to HWK the response to this idea. • They will produce leaflets to explain the discharge policy to patients and carers. MR will send these to HWK to be circulated to the TG members. • MR will send the policy document to the Carer Lead at SWLSTG to ensure Carers are given sufficient support to meet the requirements of the Care Act. • SB will send MR an invite to the next MH TG meeting on September 21st where MR can report back on the actions. 	<p>MR</p> <p>MR</p> <p>MR</p> <p>SB</p>
<p>4.</p>	<p>Discuss the Enter & View preparation meeting with Jonathan Mason July 7th, and plan the Enter & View visit and questions</p> <ul style="list-style-type: none"> • SB circulated notes from the visit to Tolworth Hospital. • It will be more difficult getting information from patients at Tolworth (especially Jasmynes ward) - we will need to be flexible in our approach to talking to people. • Info gathering from patients can not be completed survey style - it must be discussion based to get peoples views 	



	<ul style="list-style-type: none"> • We will complete the visit in October/ November in order to give enough time to fully prepare for the visit. • We need to plan it so that family members / carers are aware of the visit so they can come along and give their views. • Lilacs Ward visiting times -4- 5pm and 6 - 8pm. It may be best to do an afternoon visit - a slot outside of visiting which goes into visiting time so we have opportunity to speak to both patients and visitors • There are no visiting times for Jasmines Ward • SB will send MHTG members a list of points based on the meeting and tour of the Hospital- outlining what we will plan to look at the Enter & View visit. The group will then view the list and send their input. • Jonathan Mason has still not replied to the request for information following the meeting- GG will produce a letter to be sent to JM to chase up a response. • Melanie Cressie from Alzheimer's Support Kingston could offer support to train up TG members on how to gather feed back from people with dementia. SB will ask her to come along to TG meeting, come and provide TG members a training session in how to communicate with people with dementia. 	<p>SB/ALL</p> <p>SB/GG</p> <p>SB</p>
<p>5.</p>	<p>Any Other Business</p> <p>Proposals from SH</p> <ul style="list-style-type: none"> • Despite being asked for various pieces of information, Kingston MH Commissioners have not responded to HWK's requests. GG will draft a letter to Commissioners outlining this is a concern as Healthwatch is a statutory body and has the right to access the information. • We should consider a future visit the Kingston Wellbeing Service. • It would be useful if HWK members could attend all the Trust Board meetings. SH will send out an email to all active affiliates detailing this. 	<p>GG/SH</p> <p>SH/ALL</p> <p>ALL</p>
<p>6.</p>	<p>Dates for the next Meeting</p> <p>The next meeting will take place on Monday 21st September 10.00 - 12.00 at Kingston Quaker Centre</p>	

