

Healthwatch Kingston upon Thames

Mental Health Task Group Meeting
 Monday 17th November 2014 10:00am-12:00pm
 At the Kingston Quakers Centre

Present:

Graham Goldspring, Chair	GG	Ruth Allan	RA
Alan Moss	AM	Sue Ilsley	SI
Jo Boxer	JB	Tony Williams	TW
Sophie Bird, HWK staff	SB	Phylis Prendergast-Flynn	PPF
Daniel Barrett	DB	Simon Montague Taylor	SMT

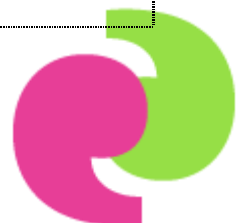
ITEM		Action
1.	Welcome and Apologies GG welcomed the Mental Health Task Group members. There were no apologies	
2.	Notes of the last meeting and actions Jay Dempsey is now the new Kingston Mental Health Parliament person to contact, and will be in post in early December. SI will contact her to update on the Task Group project work. PPF said that Shurland Wilson is more appropriate than David Bullivant to attend the next meeting to provide an overview of the day to day operations of the Discharge service. Miles Rinaldi will also be asked to attend to give an overview of the service. RA is involved in the Discharge Planning Group and will provide these contacts. Both will be invited to the next Task Group Meeting.	SI SB/RA
3.	Mental Health Personal Budgets - Ruth Allen, SWLSTG The personal mental health budgets are available for people who have a history of readmissions to hospital. The Trust is at the exploratory stage- it will take time for the benefits of the Personal Budgets to feed through. RA stated that they need to seek the views from different stakeholders- and would like HW K to be part of the steering group in gaining patient participation. SI reported on the different treatments bought by the budgets in other successful pilots - these included employing a PA, (reducing social isolation) joining an educational cause, going away on a retreat. The aim is to use the money to prevent readmissions- this will be individual to each person. RA stated there will be an ongoing process of evaluation. It needs to be a grass roots - up approach, developed with service users, carers & families. GG asked how the personal budgets will be constructed and would they be means tested- RA stated that they wont be, it is point of use principle based on the need level. Kingston CCG already has the mechanism to oversee & monitor the budget. There will be a review at key points . SI commented that there is	



	<p>a lack of communication and joining up of 3rd sector organisations in Kingston supporting mental health- networking could be better and statutory services should signpost to patients and inform them of non statutory organisations. It is not being led by Kingston Social Services as it should be.</p> <p>RA stated they would like a group of carers & family members to work together to develop the plan of Personal Care Budgets , in relation to the brokerage service which is already in operation at KCCG - direct involvement from service users.</p> <p>Ruth is to keep HWK informed of plans to form group, and will email SB with information of the next steps of the engagement project.</p> <p>SB is to send RA dates of all the Mental Health Task Group Meeting so she can attend and keep HW K updated. (SB)</p> <p>RA stated there is A Healthwatch England Learning Event - Ruth will be present to talk about personal health budgets at this event and invites HW K affiliates to come along.</p> <p>RA will contact the Kingston Mental Health Parliament to obtain their Involvement.</p>	
<p>4.</p>	<p>Dementia - Phyllis Prendergast-Flynn SWLSTG Operational Manager (Age related, Psychological Services)</p> <p>SWLSTG has set up a project to assess the different trusts operations across the 5 London boroughs. It has been running for 4 months, they have completed their initial assessment. The service model for each borough will be specific based on their needs- identified by the projects. They are including commissioners and service users in the redesign. PPF reported that there will be a single point of access - staff will screen all referrals at the Memory assessment Centre, GPs will refer. There will be a Home Treatment Team- involved in signposting patients to organisations and will manage these decisions with the GP and a Recovery Support Team to give support to provide intensive support and service to people who relapse. Currently the service is only open 5 days a week- they will change this to 7 days 8.00 am - 8.00pm</p> <p>PPF requested a slot to March Mental Health Task Group meeting to report on the Dementia Plan. They will also look at reviewing the age and following Suttons model - which is more accessible. They will aim to work with carers, the Mental Health Parliament, Adult Social Services & the Alzheimer's Society. JB raised that the Trust should communicate with HWK about the range of community orgs supporting dementia care- so that sign posting is strengthened. PPF said that they aim to enable people to live as independently as possible. SI stated that people should be fully informed of services, through health care or social care. Even if people are being needs tested and pay for their services they should still get the full advice service so they know which support organisations are available to them. PPF said that the Trust has dementia advisors at their Memory Service to sign post</p>	<p>SB</p>



	<p>patients to support organisations.. PPF will come to the March HWK Mental Health Task Group meeting to give an update and report on the new service model which will then be in place.</p>	SB/PPF
5.	<p>Update on meeting on 7th November with Paul Calaminus</p> <p>It was identified in the meeting that public opposition to the proposed relocation of the Surbiton site is causing the Trust to delay in joining up in 1 site and providing a better service. AM said that HWK needs to decide how it can combat this NIMBYism without becoming involved in political debate. TW said that people can state their views by filling in the Kingston Council - "What would you Change" survey. TW will establish where the Trust is in the relocation process.</p> <p>TW said that the Task Group has 28 days from when the FOI was first responded to, to follow up with any further queries.</p> <p>The inaccurate GP list poses a question of data quality -if their performance is measured and monitored by incorrect statistical information this is questionable. the Task Team will look into options of how to gain a true view of Practice referrals.</p> <p>In addition to the actions made in the meeting with Paul Calaminus, SB will also send these following questions to Paul;</p> <ul style="list-style-type: none"> • FOI request for Self Referral figures • Can we receive the outcomes/measures for the Learning at the Partnership Board meeting • The dates of the Partnership Board meeting so that the Task Group members can decide who attends. • Paul will be invited to the Task Group meetings • 	<p>TW</p> <p>All SB</p>
6.	<p>Discharge to primary care & Prosper - Daniel Barrett, SWLSTG Co-Production Practitioner & Prosper Lead</p> <p>DB reported that the CCG have measured Mental Discharge as poor in Kingston. Prosper is working on the Discharge project until the end of March. The project will engage the community and service providers in Kingston, analyse and aim to improve the service. The following will be recovered in the project;</p> <ul style="list-style-type: none"> • Data analyses into proportion of referrals • Analyses of locality based data- comparing different GP surgeries/ comparison between MH teams • Research into Discharge- online survey for service users, carers, trust staff, GPs <p>The project will be spoken about at various community forums. After the engagement and analyses- they will redesign how the service is structured and staff will be trained . GPs will receive training in how to support people with severe mental health conditions. There is a weekly Project Group - SB will ask DB for an overview of the project.</p> <p>SB will ask DB to attend the Task Group meeting in March when the smaller outcomes of the project will have been delivered.</p>	SB



	The project outcomes will form the guidelines on Discharge in December 2015.	
7.	Any Other Business SB will send all Task group members and visitors a list of future dates of the task group meetings	SB
8.	Dates for the next Meeting 10.00 - 12.00 Monday 12 TH January	

DRAFT

