

Mental Health Partnership Board

AGENDA

Date: Wednesday 25 March 2015

Time: 2.00 pm

Venue: Whiteleaf Centre, Aylesbury HP20 1EG

No	Item	Timing	Page
1	Apologies for Absence/Changes in Membership		
2	Minutes Of the meeting held on Thursday 2 October 2014 to be agreed as a correct record.		3 - 8
3	Mental Health Commissioning Strategy A verbal update will be provided as the final document has yet to be agreed by the Adult Joint Executive Team.		
4	Mental Health Crisis Care Concordat This will be a verbal update as this will not be 'signed-off' nationally until the end of March. The update will be that the Declaration and Action Plan in relation to the Crisis Care Concordat have been uploaded onto the national website (www.crisiscareconcordat.org.uk) and will be available at the end of the month.		
5	Social isolation and loneliness		
6	Service Users and Carers Workplan		
7	Service Directors Meeting Jackie Prosser will update Members.		
8	Executive Partnership Board Update The minutes of the last Executive Partnership Board are attached.		9 - 16

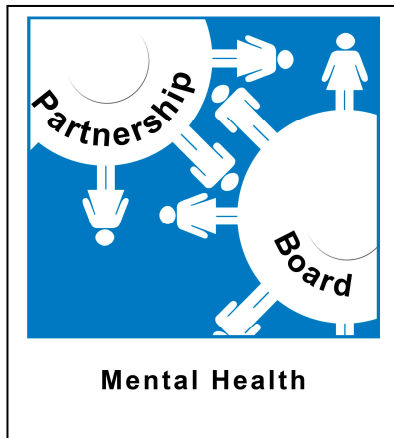
9	<p>Current consultation</p> <p>“No voice unheard, no right ignored” – a consultation for people with learning disabilities, autism and mental health conditions</p> <p>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/409816/Document.pdf</p>		
10	<p>Dates of Next and Future Meetings</p> <p>The next meeting is due to take place on Wednesday 20 May 2015 at 2pm at the Whiteleaf Centre, Aylesbury.</p> <p><u>Future dates</u></p> <p>15 July 16 September 18 November</p>		

If you would like to attend a meeting, but need extra help to do so, for example because of a disability, please contact us as early as possible, so that we can try to put the right support in place.

*For further information please contact: Liz Wheaton on 01296 383856
Fax No 01296 382421, email: ewheaton@buckscc.gov.uk*

Members

Kurt Moxley, Senior Joint Commissioner - Mental Health, Chiltern CCG, Aylesbury Vale CCG and Buckinghamshire County Council (C)
Stephen Archibald, Carers Bucks
Daniel Herbert, Advance Support
Pat Milner, Adult and Mental Health Resource and Commissioning
Alastair Penman, Oxford Health Foundation Trust
Simon Price, Wycombe Mind
Gillian Hudson, Shaw Trust
John Pimm
Abdul Sattar, Comfort Care
Jackie Gough, Oxford Health Foundation Trust
Rachel Fryer, Oxford Health Foundation Trust
Kim Maskell, Oxford Health Foundation Trust
Sheelagh Jones, Hightown Praetorian & Churches Housing Association
Mandy Carey, Bucks Mind



Mental Health Partnership Board

Minutes Thursday 2 October 2014

Members in attendance:	
Kurt Moxley	Senior Joint Commissioner - Mental Health, Chiltern CCG, Aylesbury Vale CCG and Buckinghamshire County Council
Stephen Archibald	Carers Bucks
Daniel Herbert	Advance Support
Pat Milner	Adult and Mental Health Resource and Commissioning
Rachel Fryer	Oxford Health Foundation Trust
Chris Burnett	Wycombe Mind
Naseem Mercury	SUCO Representative
Others in attendance	
Debi Game	Bucks SUCO
Derys Pragnell	Public Health Principal
Maureen Keyworth	Democratic Services



No	Item
1	Apologies for Absence/Changes in Membership Apologies were received from Samantha Robinson and Simon Price.
2	Minutes The minutes of the meeting held on 20 June 2014 were agreed. The following was noted: Item 2 – matters arising The Chairman informed members that he had not invited Maxine Forster to the meeting because a separate Dementia Partnership Board had now been set up and

any dementia-related issues would be dealt with at that meeting. Stephen Archibald asked whether they could still invite Maxine to the meeting and this was agreed. Debi Game said she had been working on the membership of the DPB.

The Chairman said the Dementia Plan of services was being put together and Health & Social Care was looking at investment into the plan from April onwards. In answer to a question about how this work would fit in with the work being done by Oxford Health it was noted that the working being done in Buckinghamshire was around involving service users and carers, with a focus on the work of Oxford Health. Debi Game said she had attended meetings and provided details of people and voluntary organisations who would be interested in working in Buckinghamshire.

With regard to whether members wished to have their names included in the public minutes, it was noted that they wished to be referred to as SUCO representatives.

Action: Clerk

The Chairman had written to Marcia Smith regarding who was responsible for information on benefits and would continue to chase for a response. Pat Milner agreed to obtain contacts within the Benefits Team.

Action: Pat Milner

With regard to financial help in relation to the Chairman said he would look into what was needed. This had been discussed at previous meetings.

Action: Chairman

With regard to a flow chart around Mental Health Services, Debi Game said Jackie Gough had given a pathway for access into services which had been circulated along with a briefing note. Debi had met with SUCO members regarding training but there was nothing further to report at present.

The Chairman said John Pimm had been in touch regarding Mental Health First Aid and he would be meeting with Sophie Gorman to get some background on this and also talk about how SUCO can help shape training and who it should be delivered to. It was suggested that any training could also be made available to GPs. However, it was noted that GPs may not be in favour of two day training sessions but that nurses could be released for training on how to spot stress and signs of mental health. It was noted that Carers Bucks was doing work in surgeries and work was also being undertaken with universities as well as presentations to student nurses, who found it useful, rather than just relying on text book information.

Debi Game asked whether Mental Health First Aid training was being offered and it was noted that Bucks Mind have been commissioned to do this and have a list of organisations that are about to deliver this. However, it did not meet all needs so they were looking at other types of training to fill the gaps. Pat Milner suggested also contacting Wycombe Mind.

3. Buckinghamshire Mental Health Joint NHS and Social Care Integrated Plan 2013/15

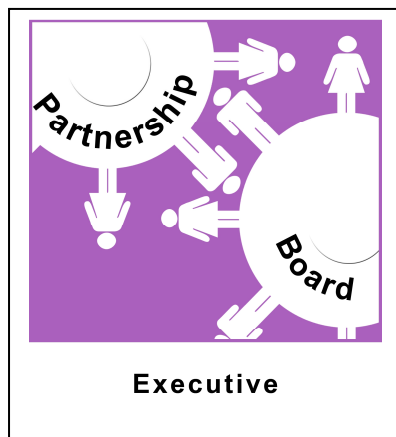
The Chairman said a strategy was being written which would supersede this

	<p>document and it was hoped it would be signed off by the end of November. Information given by service users has been included in this document. The strategy will cover mental health services from birth to death.</p> <p>The Chairman said he would speak to Maxine Foster regarding having a Dementia presentation at the Older People’s Partnership Board.</p> <p style="text-align: right;">Action: Chairman</p> <p>4. Service Users Priorities and Work Plan With regard to putting together a directory of information, Stephen Archibald had been unable to find the name of the nurse who was compiling this as part of her Masters Degree and the Clerk agreed to find the contact details.</p> <p style="text-align: right;">Action: Clerk <i>(Addendum: subsequent to the meeting the details were sent to Stephen Archibald)</i></p> <p>In this connection, it was noted that Samantha Robinson had replaced Jackie Gough on the Mental Health Partnership Board.</p> <p>5. Update on the Priorities for the Partnership Board The Chairman said there had been discussion at the Executive Partnership Board on how to present the priorities for each Partnership Board. It was noted that the EPB wanted more discussion on cross cutting themes rather than reporting back on each PB and the first item to be discussed will be Loneliness and Social Isolation. It was suggested there should be an evidence based review on loneliness in order to see what work has already been done on this.</p> <p>Debi Game said SUCO was working on having a better link between the Health & Wellbeing Board and the EPB.</p> <p>The Chairman informed members that Rachael Rothero was currently Interim Strategic Director for Adults and Families Wellbeing and Susie Yapp was doing Rachael’s work.</p> <p>At the last meeting it was agreed that further investigation would be made into the Hants site in relation to information on medicines and medicine management. Rachael Fryer agreed to take this up and report back to the Board.</p> <p style="text-align: right;">Action: Rachael Fryer</p>
<p>3</p>	<p>Care Bill presentation</p> <p>The Chairman read from a presentation on the Care Act, the changes and who it affects. It was agreed that the presentation and notes would be circulated to all members.</p> <p style="text-align: right;">Action: Clerk <i>(Addendum: the presentation was emailed to members on 3 October)</i></p> <p>The presentation included information on stakeholders, key elements of the Act, timescales for implementation and the wider context.</p>

	<p>In discussion the following was noted.</p> <ul style="list-style-type: none"> • There did not appear to be any information on what happens regarding care needs prior to a person's 17th birthday. • With regard to the cap on care fees of £72,000 it was noted that there would be extra charges in relation to what is termed as hotel costs, i.e. what a person would pay normally for accommodation and daily living needs. • The Better Care Fund was NHS money but has now been passed to Local Authorities. It is not new money but pooled resources. Discussions were still taking place on what the money can be used for and the Plan will be written by the CCG who will also agree on how the money is spent. • There did not appear to be any support for filling in forms where people have difficulties. It was suggested that this would be developed and that some members could help to trail the system. Reference was made to those with a different ethnic background and Debi Game said there was an obligation on the Local Authority to do this. However, the challenge was to make it accessible given the April deadline.
<p>4</p>	<p>Service users priorities and work plan update</p> <p>Debi Game said two meetings had been held and there had been discussion about the protocol for training and she was happy to provide input on what training looks like against current training being delivered, but she had not heard anything since.</p> <p>Debi said Mental Health First Aid would be a good start if service users and carers could fit into this and draw out who it should be delivered to.</p> <p>With regard to access to information, SUCO was part of the process of looking into what provision of good information access looked like. It could be that an honorarium would be available to those wishing to trial and investigate systems and they were making good progress on this. A member of the Board said they were looking at different areas such as Dementia care and Mental Health and they had made a positive input.</p>
<p>5</p>	<p>Update on Priorities for the Partnership Board</p> <p>The Chairman gave members a briefing on the Mental Health Crisis Care Concordat. This is a government initiative which all statutory organisations are required to sign up to in relation to improving outcomes for people experiencing mental health crisis. The Concordat was shown to members and local statutory organisations, such as Oxford Health, Buckinghamshire Health Trust, CCGs, and the Ambulance Service and Police will all be asked to sign up to.</p> <p>Behind this is an Action Plan relating to areas to focus on. The document will be published on the website once it has been agreed. It will cover areas such as:</p> <ul style="list-style-type: none"> • Conveyance. Is patients are being dealt with under the Mental Health Act, how they are conveyed to hospital. • The use of an appropriate place to take patients to and the need to stop using police cells. The mental health and acute Medicine relationship between Oxford Health and the A&E department at Stoke Mandeville • The Local Authority and Approved Mental Health Professional resources • Crisis accommodation and whether it is viable locally • Mental Health training for Police and Ambulance workers • Recovery strategy and tracking of service users • Social Care and Health interface

	<p>It was noted that not all organisations had signed up as yet and the deadline to all to sign up was the end of December.</p> <p>Debi Game asked when it would be appropriate to feed into the Strategy so services become seamless and complementary and it was noted that this would be in part of the strategy.</p> <p>The strategy would include items, actions and timescales for completion as well as outcomes.</p>
<p>6</p>	<p>Executive Partnership Board Update</p> <p>As discussed earlier in the meeting, there was now a change of focus for the EPB. It was suggested that instead of reporting on what was said at the EPB meeting, members could discuss topics to take to the EPB. The MHPB could also re-look at its priorities to see if they were still relevant. A SUCO representative said she attended the Service Directors' meeting and offered to feed any issues into the EP from the MHPB.</p> <p>Debi Game said a discussion paper could be developed to include anything to raise at the EPB in relation to this Board.</p>
<p>7</p>	<p>Dates of Next and Future Meetings</p> <p>The proposed meeting dates for 2015 were agreed. The next meeting of the Board will be held at 2.00pm on 21 January 2015 at the Whiteleaf Centre, Bierton Road, Aylesbury HP20 1EG.</p> <p>Dates of future meetings (all meetings will be held at the Whiteleaf Centre):</p> <p>25 March 20 May 15 July 16 September 18 November.</p>

Chairman



Executive Partnership Board

Minutes

1 December 2014

Members in attendance:	
Emily Everton	Assistive Technology Partnership Board
Steve Goldensmith	Prevention Partnership Board
Stephanie Moffat	Aylesbury Vale District Council
Kurt Moxley	Mental Health Partnership Board
Sue Pigott	Talkback
Bharti Quinn	Interim Lead Commissioner for Service Users and Carers
Christopher Reid	OPPB and PSD PB
Bob Smith	South Bucks District Council and Chiltern District Council
Others in attendance:	
Debi Game	SUCO
Helen Wailling	Democratic Services Officer



No	Item
1	<p>Welcome and apologies</p> <p>Apologies for absence were received from Zita Calkin, Ian Cormack, Maxine Foster, Elaine Jewell, Ainsley Macdonnell, Ryan Mellett, Jean Rein, Tracey Underhill and Adam Willison.</p>

	<p>Emily Everton was in attendance as a substitute for Adam Willison.</p> <p>Steve Goldensmith chaired the meeting.</p>
2	<p>Minutes of meeting held on 22 September 2014</p> <p>The Minutes of the meeting held on 22 September 2014 were agreed and signed as a correct record.</p>
3	<p>Action Sheet</p> <p>Dignity Update – concerns raised at last meeting about self-funders in care homes and people on direct payments.</p> <p>Chris Reid reported that he had raised this at the meeting of the Dignity in Care Strategy Group meeting the previous week. Healthwatch did not single out clients whose places were commissioned by BCC, and looked more widely at provision in a care home (they did not discriminate). No distinction was made in the feedback either between BCC clients and self-funders.</p> <p>Challenging Behaviour Project</p> <p>The template for this work had been circulated to Board members. Debi Game told members that there was a lot of anecdotal evidence about challenging behaviour. The purpose of the study was to identify good practice and also concerns. Where there were concerns, evidence would be obtained so that Healthwatch could use their ‘enter and view’ powers in the homes concerned.</p> <p>Bharti Quinn asked if this study would feed into the work of the Quality in Care Team. Debi Game said that they had held long conversations with the Quality in Care Team. Once the questionnaires had been completed (the closing date was that day), morning events would be held for service users to talk about their experiences.</p>
4	<p>Feedback from Partnership Boards and SUCO</p> <p>Mental Health Partnership Board (MHPB)</p> <ul style="list-style-type: none"> • Information, advice, support on benefits. Will be on agenda for next meeting of MHPB. This could feed into the BCC work on the implementation of the Care Act. • Training – service users were very keen that training reflected their journey. Mandy Carey (Bucks Mind) had been commissioned to do mental health first aid training. Three SUCO representatives would be attending ‘training the trainer,’ and then would be meeting with Bucks Mind to look at training. • From 1st April 2014 a new Mental Health Strategy would be needed. A draft strategy was now being circulated, and had been to JET Adults. The

Strategy would go out for consultation from January to March 2015.

- Mental Health Crisis Care Concordat – this was about how people in a crisis with mental health issues could access services. Buckinghamshire has its own version of the Declaration, and this was currently going round to each organisation for agreement. An Action Plan would sit behind the Declaration. The governance for the Concordat would go through the Health and Wellbeing Board.

Carers Partnership Board

- Respite beds, especially re: availability and flexibility of reserving beds (they could not be booked in advance). There were also issues regarding communication between partners and providers, about how respite can be used better. Carers Bucks now had an arrangement with Fremantle for carers to book respite. This could be used as a model for the whole of Buckinghamshire.

There was a lack of understanding about availability of beds, and where they were located etc. Bharti Quinn had taken this away as a piece of mapping work.

Homes did not keep beds empty for respite.

A small pilot was currently being carried out with mental health respite beds, where carers bought a number of beds as a group.

This was an issue which affected carers in all client groups

- Carers' needs analysis, particularly around 'hidden' carers. In the Care Act there were implications for carers (they would have a legal footing regarding assessment for care and support). Some work was being carried out currently to identify and understand where the issues were. The work was being done in partnership with public health and Carers Bucks about 'hidden' carers. This work would feed into the priorities for the Carers Partnership Board, which would then feed into the Carers Strategy 2015. Bharti Quinn had carried out briefings for carers about the Care Act across Buckinghamshire, and feedback was that carers were very interested in this.

Learning Disability Partnership Board (LDPB)

- A report (Bubb report) has been published highlighting the support or rather the lack of support for people with learning disabilities and even though Winterbourne has been some 3 years ago there still seems to be a trend whereby people are placed into residential care/treatment places rather than offering or giving them the opportunity to have a home, a social life and to meet people within their local community.

This links in with the work Talkback and the Partnership board has been talking about around Loneliness and social isolation and so this is a real area of concern and needs some real work – real projects- real time spent on it to develop alongside everyone (voluntary and council and health) to ensure that we do everything that is possible to prevent people being treated in such a way.

- Work around health checks. There is still some confusion for people in regards to what these are and who invites or asks you to attend for a health check.

- Health passports - these were intrinsic for communicating. Funding was available to re-launch the health passports. This needed to be joined-up with partners. Zita Calkin was aware of this work. Bharti Quinn suggested that contact be made with public health about this work. Debi Game said that she would send through some information sent to her by the Bucks 50 Plus Forum.

Older People's Partnership Board (OPPB)

- Older People's Champions' Forum – there was a plan for the Forum to be relaunched in 2015. The issue for the OPPB members was to understand what the purpose of OPCF was, and there was a concern that there would be duplication with the OPPB. The concerns had already been raised with the Deputy Cabinet Member for Health and Wellbeing. A close eye would be kept on this.
- Roll out of information, advice and guidance part of the Care Act. The key message from the Older People's Conference held in spring 2014 had been a need for better quality information and a single point of access. Bharti Quinn would be coming to the OPPB meeting in January 2015 to speak about this.

Physical and Sensory Disability Partnership Board (PSD PB)

- What is the plan around the implementation of the Care Act (i.e. involving partnership boards in this work)?
- Disabled Street Parking – where kerbs were not dropped, it made access to street parking very difficult. There was a request for BCC to be more proactive when renewing pavements and roads. The PSD PB was looking for reassurance that there was an active requirement for kerbs to be dropped when works were planned on highways / pavements. This was also a wider issue (e.g. accessibility when housing estates were planned). This linked into the Paralympic legacy work. Steve Goldensmith was working with Andrew Clark and Ian Barham on this and a workshop was being planned for 2015, hosted by AVDC

Prevention Partnership Board

The three 'burning issues' were:

- Social isolation and exclusion
- IAG, particularly welfare reform and the implications of this
- Transport

Service User and Carer Organisation (SUCO)

The number of service users and carers on each partnership board were now as follows:

- Carers Partnership Board – 8
- PSD Partnership Board – 7
- Older People's Partnership Board – 5
- Mental Health Partnership Board – 8
- Assistive Technology Partnership Board – 4
- Autism Partnership Board – 7
- Dementia Partnership Board – 5
- Dementia Network Group – 7

The link between the partnership boards, the Executive Partnership Board and the Health and Wellbeing Board needed to be looked at, particularly as SUCO was encouraging service users and carers to be involved with the Boards.

A number of service users and carers were involved with the Local Account meeting. There had been some drops in service satisfaction, which needed to be analysed – **Action: Marcia Smith**

5 Dignity Update

Chris Reid told members the following:

Dignity Campaign – leaflet and poster

- The dignity leaflet and poster were now finalised, and contained the standard principles of dignity. They also had four telephone numbers which each covered a different area of service.
- Chris Reid had met with those responsible for each telephone number and had agreed a shared protocol.
- The poster would be sent to GP practices and hospitals etc.
- If members wanted copies of the leaflet or poster they should contact Bev Frost.
- The leaflets were also being circulated via Community Practice Workers.

Healthwatch Enter and View Project

- Four care homes had been visited so far, and feedback had been well-received.
- Commissioners would receive detailed feedback reports from the visits.
- A public version of the feedback would be available on the Healthwatch website.
- The target was to visit 16 care homes by the end of March 2015, plus two domiciliary care providers.

Steve Goldensmith asked if Healthwatch had a great enough profile to be able to influence. Chris Reid said that this would be a question for Alex Care. Healthwatch had had a change in leadership recently, with a new Chief Executive (Richard Corbett).

Stephanie Moffat said that Healthwatch had attended a scrutiny committee. Members on the committee had had a low level of knowledge about the work of Healthwatch.

	<p>Debi Game noted that Healthwatch had been in existence for over a year.</p> <p>Sue Pigott suggested that Richard Corbett attend a meeting of the Executive Partnership Board (EPB). Debi Game said that she had previously encouraged Alex Hannaford to attend EPB meetings, but that Alex Hannaford had now left Healthwatch.</p> <p>Steve Goldensmith suggested that Healthwatch attend an EPB meeting to speak about their role and their plans – Action: CR to speak to Richard Corbett.</p> <p>Bharti Quinn said that she would speak to Alex Care in the meantime.</p>
<p>6</p>	<p>Break</p>
<p>7</p>	<p>Loneliness / Social Isolation as a cross-cutting issue</p> <p>Angie Sarchet had sent her apologies for this meeting.</p> <p>However Steve Goldensmith was able to update members as follows:</p> <ul style="list-style-type: none"> • Prevention Matters worked with a particular group of individuals in regard to social isolation. • Good social contact had a larger impact on death rates than giving up smoking or alcohol (data to be circulated – Action: SG). • Social media (e.g. Mumsnet) stimulated meetings between people. • Evidence showed that going back to old relationships was best. • People in relationships could feel lonely too. • Public Health had released a report on social isolation, which could be circulated – Action: SG • Research showed that people in residential care could be some of the loneliest people. • People’s sense of loneliness had increased by 20-30% over the past ten years. • People could build their own barriers to engaging. <p>Debi Game referred to IAPT (Improving Access to Psychological Therapies) and said that people accessed this service due to mental health issues, rather than because they were lonely.</p> <p>Debi Game also said that volunteering increased self-worth.</p> <p>Bharti Quinn said that there were a lot of issues for carers regarding</p>

	<p>social isolation, and that some work might be needed specifically in relation to carers. Challenging behaviour could create issues for carers.</p> <p>Steve Goldensmith said that carers were mentioned a lot in reference to loneliness, often in the context of loss.</p> <p>Debi Game said that carers might not feel that they had time to look at their own issues.</p> <p>Sue Pigott said that loneliness was raised all the time for those with learning disabilities, especially since the changes to day services. Talkback had run a 'Time to Talk' service two years previously, and was still running this, even though funding had ceased.</p> <p>Transport, especially in rural areas, was an issue.</p> <p>Those with learning disabilities did not necessarily want befrienders.</p> <p>Stephanie Moffatt said that the Health and Wellbeing Board had run a workshop on loneliness, but was not sure what had come out of that. Chris Reid said that this highlighted the lack of communication between the Health and Wellbeing Board and the Executive Partnership Board.</p> <p>Debi Game said that questions around isolation needed to be embedded, e.g. from GPs and Community Practice Workers in assessments.</p> <p>Sue Pigott asked if loneliness was mentioned in the Health and Wellbeing Strategy.</p> <p>Bob Smith said that it was picked up by the 'Five Ways to Wellbeing' campaign. Debi Game said that some people felt that the campaign was patronising.</p> <p>Kurt Moxley said that the Chief Medical Officer had since discarded the 'Five Ways to Wellbeing.'</p>
<p>8</p>	<p>Presentation on the Care Act</p> <p>Steve Goldensmith took members through some slides about the Care Act and said the following:</p> <ul style="list-style-type: none"> • At least one in three people would have a care need at some point in their lives. • The Care Act had two phases of implementation. The first phase, which was required by April 2015, included the requirement for the Council to provide a comprehensive information, advice and guidance service to all, regardless of financial status.

	<ul style="list-style-type: none"> • There was also a duty to provide independent financial advice, and to provide an advocacy service (an advocacy service was already in place in Buckinghamshire). • There was a right to assessment for all adults, including carers. • Bharti Quinn was leading on developing a strategy for AIG. • Due to a tougher legal framework for safeguarding, a restructured safeguarding team was now in place. The MASH (Multi Agency Safeguarding Hub) had also been set up. Safeguarding for adults was now on a similar footing to Children’s safeguarding. • Personal budgets would be available for all, and direct payments would be available for carers. • There were new duties for care and support of prisoners. There was not currently a social care service for prisoners in Buckinghamshire (although there was a health service in place). A trained team would be put in place and Bharti Quinn was writing a specification for this. • The second phase of the Care Act, which would be required to be in place by April 2016, included a cap on care fees of £72 000 for those of state pension age. More guidance on this would be published in April 2015. • The Council would need to set up care accounts for those who were eligible, to record the progression to the cap. • There were new requirements around charging, and a new Charging Policy would go to consultation in December 2014. • Currently the County Council provided care and support to approximately 44% of Buckinghamshire residents. After the introduction of the Care Act, they would need to provide care and support to 90% of residents. This would have a huge impact. <p>Sue Pigott asked if there had been any consultation on the Care Act for stakeholders. Bharti Quinn said that there had been a huge consultation exercise before it became an Act. The project lead for each area at BCC should be engaging with stakeholders. There would be national communications on the Care Act in January 2015.</p>
<p>9</p>	<p>Date of next meeting</p> <p>2 March 2015, 1:30pm, Mezzanine Room 1, County Hall, Aylesbury</p>

Chairman