

Minutes of Meeting

7th October 2009

Classroom, Education Unit, Western Isles Hospital

Members Present:

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| Ernie Garden | Chair | Emelin Collier | Head of Planning & Development |
| Neil Lawrie | CPN Team Leader (Lewis & Harris) | Kathryn Chisholm | Mental Health Occupational Therapist |
| Anne Hutchison | Mental Health Collaborative Manager | Karen Toovey | Lead Officer - Mental Health & Adult Protection |
| Norrie MacRitchie | CPN Team Leader (Uist & Barra) | Prof Richard Collacott | Professor of Rural Health and Wellbeing. |
| Elaine Campbell | Choose Life Coordinator | Mike Hutchison | Head of Mental Health & Learning Disabilities |
| Niall Shaw | Chair - Catch 23 | | |

Chair welcomed Prof Collacott to the meeting.

1. APOLOGIES

Apologies were received from Del Gunn, Paul Dundas, Elizabeth Shelby, Kenna Campbell, Steven Black, Elaine Anderson and Joan Tilley.

2. APPROVAL OF MINUTES

The minutes of the last meeting were approved as an accurate record of that meeting by Neil Lawrie and Anne Hutchison.

3. MATTERS ARISING

3.1 Issue:

Discussion: There were no matters arising.

Decision:

4. Action Points

Issue:

Discussion: Please refer to action points

Decision:

5. Penumbra Update

Issue: Penumbra situation update

Discussion: Neil Lawrie and Rebecca Mahoney along with others met to discuss the referral process and agreed that a single shared assessment will be used. The revised service will be launched

on the 15th October and Nigel Henderson will be in attendance. The revised service is still joint funded by NHS Western Isles and Comhairle nan Eilean Siar. They have reviewed the finances to make sure that the service can still be provided in the Western Isles. The Partnership are very happy that some form of service is continuing.

Niall Shaw stated that WIAMH are hoping to formalise the lease with Penumbra, and that there will be an SLA between WIAMH and Penumbra. Which will help improve the relationship as it will make arrangements more formal.

Decision:

6. Review of Mental Health Services

Issue: Update on the progress of the review

Discussion: Linda Watt came and spoke to the Partnership at a special meeting. The report is still to be presented to the Board. Mike Hutchison presented it to the CHASCP Committee, it has also been discussed at the CMT. It was suggested that a Project Team should be set up to take the recommendations forward. Some of the issues may take longer to resolve than others. The CMT agreed to start looking at some of the internal issues first. Some progress is being made prior to the Project Team being set up. The Medical Director is meeting with the GPs on Monday to ask them to take on the Psychiatry out of hours on call. There is a need for this to be coordinated and a need to build up on the skills base of current staff and offer training to some staff before 1st November, this may increase the admission rates rather than lessen them. Mike Hutchison stated that he has not been privy to some of the in depth discussions regarding this. The issue of the Psychiatry on call rota is a very important issue. The average on call rota is a 1:14 rota here it's a 1:2 or sometimes a 1:1, which is not acceptable. Some of the out of hours contact is very trivial, and very rarely anything that would need the Mental Health Act. GPs are not recognised under the Mental Health Act and that issue will remain, which could cause problems. Could some of the nursing staff be upgraded to Consultant Nurses and then they could go onto the rota and are recognised by the Mental Health Act, they would only require increased training. GPs can admit under the Emergency Section for up to 72 hours. Karen Toovey stated that they have been in touch with the Mental Welfare Commission with regard to there being no rota for the MHOs. Emelin Collier stated that the lack of a Nurse Consultant was picked up in Dr Watt's report and has been strongly recommended. Dr Watt is saying that there can be a Specialist Nurse Consultant, which local people have been asking for for years. Rural Health has been regarded as a specialism for many years. The Project Team will be looking at this in more detail. There is a very competent nursing workforce in the Western Isles. The Project Team would also have to look at the resources which are currently in place and how to use them more effectively. How can we address the issues that have come out of Dr Watt's report? There are pieces of work which can be developed sooner rather than later. The Project Team will be set up once the report has been approved by the Board and it will involve all agencies.

There are no systems in place to capture the amount of times the Consultants are called out. Most of the contact out of hours for the Consultants have been in A&E.

Some of the out of hours workload will be passed on to the CPNs, they are also not happy about not being able to access a Psychiatrist out of hours. Out of hours there is very little work for the CPNs so they may not carry on with the out of hours service. Having a nice APU Ward altered the views of families so they were more happy to have their family member admitted to the unit.

The Consultants were hoping for a reduction in their on call time with support from a mainland board and not no on call at all.

The Project Team would also take forward the recommendations of the Clisham Project and implement them. It is anticipated that there will be big changes in how staff function and the use of the RMNs.

It was stated that Mental Health Occupational Therapy did not appear to be captured in the report as an existing service, therefore not sure what will happen in the future. Kathryn Chisholm was not involved to any of the development days regarding the report. The role of AHPs within mental health has not been included. Ms Chisholm has been working well with all AHPs and they should have been included.

There is nothing new in the report that has not been discussed already over the last few years. One positive thing which has come out of this is Mike Hutchison's appointment. However the Job Description was written up before the report but was not acted upon until the report came out.

Decision:

7. Mental Health Manager Post

Issue: Update on post.

Discussion: The Job Description was circulated before the meeting. There is a challenge ahead for the manager and there are a lot of historical issues which need to be resolved. Mr Hutchison stated that he needs more support to be able to tackle the issues and will be meeting with Nigel Hobson to discuss his requirements.

Decision:

8. Lead Officer for Mental Health & Adult Support and Protection (Western Isles)

Issue: Update on post.

Discussion: The job description for this post was circulated and Karen Toovey gave a verbal update. There was a lot of discussion regarding this post which is only for a year. Karen Toovey is coordinating the Adult Protection Training for the Western Isles.

Decision:

9. Mental Health Implementation Review / Mental Health Nursing Review

Issue: Update on the reviews.

Discussion: The letter following on for the last review was circulated with the papers. The Board are meeting the targets with regard to Suicide Prevention and have STORM trainers trained. Emelin Collier attended the CHASCP Committee meeting where they have these targets as CHASCP targets whereas they are NHS Western Isles targets. All managers need to realise that 6% of their staff need to attend the training as 6% of the population need to attend the training. The CHASCP Action Plan is out of alignment with the NHS Western Isles objectives and Comhairle nan Eilean Siar objectives. Suicide Prevention Awareness Week was very successful. The launch of the week was well attended, as well as the Thursday evening event. Nationally they were delighted about our activities which were held that week and congratulations to Elaine Campbell for organising the week. It was a really good example of Partnership working. Financially the Choose Life project is managing without getting the funding back for Comhairle nan Eilean Siar. Suicide Prevention was featured in the Stornoway Gazette for three weeks in a row which was really good publicity. There has been a reduction in suicide in the Western Isles but cannot pin point what that is down to.

There is a huge training programme regarding the Introduction to Child and Adolescent Mental Health and self-harm. It was stated that targets are difficult to measure, therefore outcomes should be looked into. It would be interesting to get feedback from people who

have attended the ASIST training. There has been feedback from people saying that they have used the ASIST model and will continue to use it.

The CAMHS section of the review went really well. There is now a CAMHS module within the Lews Castle College which will become an accredited course.

With regard to antidepressant prescribing the Board will not meet the target as there is no Prescribing Advisor. The SMR04 data is still unreliable which is an issue. With regard to the Dementia target the Board is on target to meet it.

With regard to the Mental Health Nursing Review the comments which were received from the Scottish Government were negative. £5,000 has been received this financial year with regard to the Mental Health Nursing Review but there is no account of what the previous funding was used for. Therefore someone needs to take account for that.

At this point in the meeting a further discussion took place regard the Suicide Prevention Training target. The target is to have 1500 people trained by 2013, at the moment there are 550 people. The Scottish Government ask what specific groups of staff have attended the training. Therefore managers will be targeted to ensure that their staff attend the training. The public sector should be leading the way with regard to the training. Managers have to give their staff two days away from their duties for the training. It was stated that STORM training is mandatory training for all front line staff.

Decision: It was agreed to put the Suicide Prevention Training on the agenda for the Single Operating Division.

10. Mental Health Collaborative

Issue: Update on the progress of the Collaborative

Discussion: Anne Hutchison stated that she held a training day at the end of September which will look at alternatives for admission to the APU Ward, currently there is no admission criteria for the ward. The group were also looking at a strict admission criteria and looking at the inpatients that are on the ward just now and how to get those patients back into the community. There is still no analyst in post and will be a while before they will be up to speed with everything.

Decision:

11. ICPs

Issue: Update on the progress of the ICPs

Discussion: With regard to the submission for 1st level accreditation, the Board were unsuccessful and have been given the opportunity to resubmit. There is still no progress with regard to the ICP coordinator post. Mike Hutchison has agreed to take this forward. A4C have asked for the post to be rewritten. Mike Hutchison has received other templates for the post which can be used to get this post through.

Accreditation is needed before the ICPs can be put into place. IT, governance and stakeholder involvement are all needed before the Board can receive accreditation.

Decision:

12. Mental Health Occupational Therapy

Issue: Update on service.

Discussion: Kathryn Chisholm has completed the visit to Uist and has put in a plan for the first clinic in November. This will be a pilot for 9 months to look at workforce planning. Ms Chisholm has received lots of support from the staff in Uist. Ms Chisholm is now supporting the Clisham Ward and supporting the staff with the activities they are offering. The art group

went really well, as well as the photo group and there will be an invite to their opening. Already some of the clients are engaging with mainstream events which is very positive. Kathryn Chisholm will put a report to the Partnership for the next meeting as she has now been in post for a year.

Decision:

13. Draft - Psychiatric Emergency Plan

Issue: Update on the Psychiatric Emergency Plan

Discussion: There is no update on this plan.

Decision:

14. Clisham Project - Leadership Programme

Issue: Update on the Leadership Programme

Discussion: This is a long term project and will link in with Dr Watt's report. The final Clisham report will go to the CMT and the Board. The garden is opening this week and it is now a safe area for patients to go out into.

The next stage is looking at the internals of the ward to bring it up to an acceptable standard. There has been money allocated for the alternations.

It is proposed that there should be one community mental health team for all mental health. This would have to include all staff from APU, Clisham and the community. Everybody could work across the whole sector and use staff more effectively. There were 12 patients on Clisham who did not have to be there and could be moved. There are 10 to 12 beds between Clisham and APU and there will be no respite beds. There will be enhanced input from the Voluntary Sector which will fit into Dr Watt's recommendations. The increased use of technology will help the team from the Butt to Barra and link into Specialist Areas on the mainland. The Clisham Project are looking a developing a Mental Health Resource Unit which will have its own separate entrance. There will be two designated beds in Uist & Barra Hospital and a flexible bed in St Brendan's.

Dr Collacott stated that his role is developing the research agenda within Remote Health and Wellbeing. There are currently four staff in the Lews Castle College Research Unit. Their aim relates to research and will act collaboratively with other organisations. They have established a collaborative partnership with the University of Edinburgh, which will last for a few years. They also have a number of research projects which they are working on. They are hoping to renew the research which took place in Uist about 20 years ago and common mental illnesses in the Western Isles also the health needs of people who move into the Islands. Also they are looking at issues relating to alcohol abuse in the Western Isles, is it just a case that it is more visible here.

Decision:

15. Child & Adolescent Mental Health Service (CAMHS)

Issue: Update on the service.

Discussion: There is no update at the moment.

Decision:

16. Correspondence Received

Issue:

Discussion: There was no correspondence received for the Partnership.

Decision:

17. Documents Received

Issue: Towards a Mentally Flourishing Scotland: Policy & Action Plan 209-2011

Discussion:

Decision: It was agreed to make this an agenda item for the next meeting.

18. Minutes of other meetings

18.1 Mental Health CMT

Mike Hutchison stated that the CMT admin post has been frozen and therefore there is nobody to service the meetings, therefore the group have not met. The Terms of Reference for the Mental Health CMT were agreed in principal at a previous meeting. The CMT will take direct responsibility for the HEAT Targets and all other targets.

18.2 Learning Disabilities Partnership

18.3 WIAMH

18.4 Older Adults Mental Health Forum

It was agreed that this group needs to be re-established. The Clisham Project is very similar to this group so it fell by the way side. There is a need to reconvene an appropriate group.

18.5 Older People's Partnership

18.6 Inpatient Forum

It was noted that the Inpatient Forum has not met for a while. Mike Hutchison is hoping to discuss this with Nigel Hobson. This may be discussed at the Mental Health Implementation review. Michael Cook was the Chair of the group and it is vital that it is up and running again. Mike Hutchison will be happy to Chair this group if he had administration support. There is no point in the group meeting if the actions from it will not be taken forward.

18.7 Clisham Project

19. AOB

19.1 WIAMH

Niall Shaw stated that he is no longer Chair of WIAMH and that Rebecca Mahoney has taken over the role. WIAMH are currently reviewing who attends which groups, therefore Mr Shaw is not sure of who will be attending the Partnership.

19.2 Chair of the Partnership

Ernie Garden stated that the next meeting of the Partnership will be his last meeting as Chair therefore the Partnership need to think about this before the next meeting.

19.3 Mental Welfare Commission

There was an information visit by the Mental Welfare Commission and they have stated that they can support the Western Isles if needed. They are concerned about the smoking arrangement in Clisham Ward. They have made an informal report following the visit. The recommendations from the report has been presented to the CMT.

19.4 CPA Arrangements

It was noted that the CPA arrangements need to be reviewed and a group will be meeting to discuss this.

21. DATE OF NEXT MEETING

Date: Wednesday 18th November 2009

Time: 9.30am

Venue: Meeting Room 2, NHS Board Offices

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