

Lancashire Mental Health Partnership Involvement Group
 Wednesday, 23rd February 2011
 Integrate, Preston

MINUTES

Present:

Waheda Ahmed	BME Carer Representative – Lancashire
Tracey Callaghan-Hayes	Project Manager – LP Team
Ian Clift	Carer Representative – North Lancashire
Rebecca Davis	Network Director - Mental Health Commissioning
Brian Gumbley	Service User Representative – Central Lancashire
Maureen Hindle	Service User Representative – East Lancashire
Angela Radcliffe	Carer Representative – Fylde Coast
Pat Rolph (<i>Minutes</i>)	Project Support Officer – LP Team
Rosemary Trustam (<i>Chair</i>)	Independent Volunteer

Apologies:

Debbie Nixon	Strategic Director for Mental Health
Marjorie Twist	Carer Representative – Central and West Lancashire

In attendance:

Kris Barker	Consultation Coordinator CRACS – Pendle Valley Council
Mike Hammond	Engagement and Communications Manager – NHS East Lancashire

No.	Item	Action
1.	<p>Introductions and apologies</p> <p>Rose welcomed members to the meeting and noted the group's ground rules.</p> <p>It was with regret that the Partnership Team had received notice of Rod's resignation from the group, however it was noted that Rod had kindly offered to support the group by continuing to edit future editions of the Feedback newsletter.</p>	
2.	<p>Minutes of the previous meeting</p> <p>The minutes of the previous meeting held 13th January 2011 were agreed as an accurate record.</p>	
3.	<p>Matters Arising</p> <ul style="list-style-type: none"> ▪ In respect of inviting people to attend future meetings Rose advised this should be put on hold due to the current priorities. Rose noted that Paul Wilson from 'Bootstrap' was on long term sick leave. <p><i>Tracey arrived</i></p> <ul style="list-style-type: none"> ▪ Lancashire Commissioning Support Function – Rebecca gave a brief update advising that the team had and were continuing to meet with the different Lancashire GP practice based commissioning groups to consult on the proposals for a new commissioning support function. Feedback received was positive so far around the preferred option '1b', but there remains no expectation about the final outcome, and whether or not future funding for the team will be agreed. ▪ All remaining action points were noted by Pat as completed. 	

4.	<p><i>Kris Barker arrived</i></p> <p>Further Engagement – E-Survey</p> <p>Rose welcomed Mike Hammond and Kris Barker to the meeting.</p> <p>Mike advised there was a need for further engagement as part of the Lancashire Mental Health review, as requested by the joint Lancashire Health Overview and Scrutiny Committee. This would be conducted with the use of an online survey.</p> <p>Kris Barker explained the logistics of how the ‘Feedback E-Survey’ would be conducted across a four week period. Papers copies would also be circulated with freepost envelopes to allow people without internet access to participate in the survey.</p> <p>A set of draft questions around mental health and dementia services had been prepared, and Involvement Group members were invited to contribute their views.</p> <p>A lengthy discussion took place and amendments were suggested and agreed. The distribution of the survey was also discussed.</p>	
5.	<p>‘Technical Appraisal’ Process</p> <p>Rebecca gave a brief summary of the background to the Technical Appraisal process and advised of the forthcoming PCT Board Seminar planned for 20th April 2011, and how ongoing work will continue with LCFT. Rebecca expressed her thanks to Brian and Maureen for theirs and Marjorie’s involvement in the work of the Technical Appraisal Group (TAG).</p> <p>A lengthy discussion took place about the Evaluation Plan produced by LCFT and the need for further work on the plan. When a final version of the Evaluation Plan is produced this will be scored by GP members of the TAG, and by the Involvement Group at their meeting in March. The next meeting will be dedicated solely for this task, the date of which would be confirmed by email after today’s meeting.</p>	<p>Action PR Actioned 15.03.11</p>
6.	<p>Social Inclusion Outcomes Framework</p> <p>Tracey gave a verbal update on the Social Inclusion Outcomes Framework and the use of the Recovery Star, advising that all three public events had now taken place. Despite the low numbers in attendance, from everyone that had attended all outcomes were positive. Some service users agreed to be filmed by video to give an account of their experiences.</p>	
7.	<p>Feedback on LCC proposed cuts and Consultation</p> <p>Rose gave some feedback from an event that she and Brian had attended around the current consultation, and there were concerns around the care bandings and increased charges for care.</p> <p><i>At this point Tracey left the meeting.</i></p> <p>The discussion continued around specific detail and included; the care budget, reduced expenditure, re-modeling of Learning Disabilities, implications for care homes, housing benefit and other examples. The effects of the economic climate on people’s wellbeing were noted as an area of extreme concern.</p> <p>Rose offered to represent the Involvement Group in providing a formal response of their views on their behalf, and this was agreed.</p>	<p>RT</p>

8.	<p>LCFT Contract Monitoring</p> <p>Rebecca gave a brief summary about the CQUIN measures included in the contract monitoring process for LCFT including the measures set by members of the Involvement Group around; patient experience, outcomes, awareness and the number of carers' assessments.</p> <p>The CQUIN measures link to Tracey's work around the social inclusion outcomes framework in the collection of data. Rebecca apologised for not having had the opportunity to look into the outcomes of the carer's assessment training DVD package.</p> <p>Cultural awareness had not been included within the CQUIN measures but LCFT had developed a race equality training package which was to be delivered through the PCT BME Community Development Workers (CDWs), however some CDWs were no longer in post.</p> <p>For patient experience, World Class Commissioning (WCC) had been responsible for collating a large amount of information, but the WCC process was concluded in 2009/10. However the Care Quality Commission (CQC) continues to gather data.</p> <p>Four out of the six CQUIN measures within LCFT's contract were as a direct result of the work of the Involvement Group.</p>	
9.	<p>Feedback newsletter</p> <p>Pat explained that due to the current work capacity of the team including the work in producing the E-Survey, it had not yet been possible to produce a draft newsletter. Future topics had been agreed at the group's previous meeting.</p>	
10.	<p>Meetings</p> <ul style="list-style-type: none"> ▪ Involvement Group meeting schedule – the schedule for future meeting dates will be considered once the outcomes of the Commissioning Support Function are known. ▪ Offers to attend future meetings still available: <ul style="list-style-type: none"> ○ LINKs – future 'Health Watch ○ Supporting People ○ Katherine Allen 	
11	<p>Any other business</p> <ul style="list-style-type: none"> ▪ Pat thanked everyone for their continued contributions and involvement during the current TAG process and around such uncertain times. ▪ Brian advised that a public march was being organised in protest of the current NHS reforms and would be taking place on Saturday, 26th March. 	
	<p>Date, time and venue of next meeting – this was confirmed as solely to support the TAG reps with the scoring</p> <p>Confirmed as: Friday, 25th March 2011, 11am-2.30pm at County Hall in Preston.</p>	