



Name of meeting	SURREY LOCAL IMPLEMENTATION TEAM (LIT)											
Date meeting held	Wednesday 14 January 2009, 10 to 12.30											
Meeting Location	Park House, Leatherhead											
Invited Members	Diane Woods	A	Donal Hegarty (Chair)	✓	Janine Sanderson	A	Stanley Riseborough for Fiona Edwards	✓	Dr Jill Rasmussen	A	Maya Twardzicki	A
(✓ attended A apols)	Stuart Craig	✓	Michael Sellors	✓	Megan Aspel	✓	Clive Stone	✓	Anthony Byrne	✓	Mike Wilson	A
	Diane Luck	A	Dr M Attard	✓	Dr Malcolm Hawthorne	✓	Andy Edeleanu	✓	David Rye	✓	Dominic Parkinson	✓
	Geoff Upfold	A	Sandra Roach (SHA)	A	Don Illman	✓	Anne Heath	✓	Debi Davis	✓	Tracey Hayes	✓
	Emma Daniells	✓	M Varrichand	✓								

AGENDA ITEM	ACTIONS & NOTE OF DISCUSSIONS	WHO and When
1. Apologies	Apologies were made as set out above. <i>(For noting: notwithstanding apologies being tendered by Diane Woods and Fiona Edwards, concern was expressed by some LIT members as to the effect their absence had on questions and discussion arising during this meeting.)</i>	
2. Minutes and Matters Arising	The minutes of the meeting of 12 November 2008 were confirmed, subject to the following comments : Page 2 – Item 3 Presentation : Darzi Review. In order to keep abreast of the Review direction, it was felt that further discussion was required on its impact in terms of Surrey needs. Noted that a clinical advisory board was being set up which would include all the stakeholders involved. Page 4 – Item 4 Policy and Performance : Healthcare Commission Ratings. Noted that, following the return to the previous structure involving Adult and Children's Services, a newly appointed Director of Adult Social Care, Sarah Mitchell will take up this appointment in March 2009. Page 5 – Item 5 Local Stakeholder Group Reports : Mid and East Surrey. Noted that arrangements were in place for groups of service users to meet with the	

	<p>Working CMHT on the implementation of the new CPA policy and that Dr Rachel Hennessey had also agreed to discuss the implications of the new Mental Health legislation, including the new CTOs.</p> <p>Page 8 – Item 5 Local Stakeholder Group Reports : North West Surrey. With respect to delayed discharges, it was noted that a programme was under way to develop a whole systems approach for pathways back into the community and that workshops were to be held on the actual signing off of delayed discharges and on the co-ordinating of the pathways.</p> <p>Page 9 – Item 6 LIT Business Items – Update Reports : Crisis Helpline Noted that the Line had been agreed and was awaiting detailed specifications. (Further discussion on this matter is noted under Item 6 LIT Business Items – Crisis Line Update.)</p>	
<p>3. Presentation:</p> <ul style="list-style-type: none"> ▪ Suicide Audit Outcomes and Strategy – Emma Daniells 	<p>The following comments and questions arose from the presentation given by Emma Daniells on this subject, noting that the data presented was necessarily based on past information :</p> <ul style="list-style-type: none"> • Noted that the next Suicide Workshop was due to be held on 11 February at Cedar Court and that the attendance list for this workshop was still being developed to ensure an appropriate cross section of interested parties. • Strategies were being examined for support and/or counseling to be put in place for the elderly with chronic conditions often isolated within their own homes and seen to be a vulnerable group. • There was an awareness of the potential increase in the number of vulnerable people with the current economic climate, noting also Surrey’s high level of people with alcohol issues. • A training video with interviews containing 3 people’s experiences with suicide was available as a useful tool in health promotion and preventative work. • The lack of support for the victims left behind and the impact on their lives was identified as a need. • A Surrey wide suicide prevention strategy was being developed and would be distributed in due course, noting that it would also have a quarterly audit system built in. • The absence of any form of reviewing process for GPs was noted, a factor which was being worked on in order to obtain more detail about the personal details of suicides, including possible information on what drugs may have been directly implicated. 	

<p>4. Policy and Performance:</p> <ul style="list-style-type: none"> ▪ NSF Financial Mapping ▪ NSF Local Performance Report Q2 <p>Reference Links :</p> <ul style="list-style-type: none"> ▪ Operating Framework/Vital Signs and Strategic Commissioning Plan ▪ Adults Acute in-patients care services action plan 2008-2010 (<i>First Draft work in progress document</i>) 	<p>Confirmation was noted that the financial mapping had been undertaken and submitted to the Department of Health.</p> <p>Report circulated. It was noted that the 10 year implementation plan would finish this year during which time Surrey had incrementally moved from Amber to Green in most areas. The following comments were made :</p> <p>9 – Learning Disability. Protocols dating back to 2004, which had been signed off, were now in need of review. Meetings were now taking place with Mental Health to implement joint working to ensure people with a learning disability also being seen by Mental Health Services were properly catered for with funding responsibility proving to be one of the main issues. Referrals also needed to be seen within a wider context than just those to local community mental health teams and should include teams such as Early Intervention and Assertive Outreach.</p> <p>2 – Crisis Resolution. The Green traffic light was challenged as this was not available 24 : 7. Written comments on any deficits were called for and these would be submitted to Jo Young for a response at the next meeting.</p> <p>11C - Community Development Workers. Access to GPs, often via difficult receptionists, was flagged as a concern as A & E was then the last resort and access to dentistry and eye testing for children and the elderly was also seen as problematic leading to the suggestion of a mobile service for the latter. This issue was due for discussion at the next meeting, noting also the need for attendance by some of the workers and for preparation for the meeting in terms of identifying all the issues surrounding arrangements for registering.</p> <p>1 – Primary/Secondary Interface . It was hoped to go to tender in the Spring in terms of setting up IAT services to cover Primary/Secondary work with a view to having things in place by October 2009. Noted that the specific criteria relating to the traffic light system would be re-circulated.</p> <p>20 – Personality Disorder. The opinion was expressed that this traffic light was still Red as the attitude was still prevalent that people with a diagnosis of PD were not part of the service. Agreed that e mail comments would be submitted to Donal Hegarty to enable a response to be given to this view at the next meeting.</p> <p>Comment was made indicating that people’s individual experiences were often different from the green, largely commissioning related indicators in the traffic light system and that possibly another factor should be incorporated to capture this</p>	<p>Stanley Rise - borough</p> <p>Donal Hegarty/ Emma Daniells</p> <p>Donal Hegarty</p> <p>Michael Sellors/ Donal Hegarty</p>
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	<p>element.</p> <p>With respect to the Darzi Report, it was agreed that there would be report back to the next meeting on progress with an offshoot of the NSF called New Horizons.</p> <p>Noted that report back would also be made at the next meeting on a national workshop being attended by Donal Hegarty looking at outcomes from a mental health perspective, including debate on processes and inputs and how you define what makes a difference. (Donal Hegarty)</p>	<p>Dr Haw-Thorne</p> <p>Donal Hegarty</p>
<p>5. Local Stakeholder Group Reports</p> <ul style="list-style-type: none"> ▪ Guildford and Waverley ▪ Surrey Heath and North East Hampshire ▪ Mid and East Surrey ▪ North West Surrey 	<p>Noted that the report on the last meeting had been submitted to Jeanine but was not available at the meeting. Attempts were still being made to get at least one new service user to attend the meetings.</p> <p>The next meeting was scheduled to take place in the next two weeks.</p> <p>The next meeting of this group, at which it was hoped at least two service users would be in attendance, was due to take place the day after this LIT meeting and all the items raised by the representative at the last LIT meeting would be pertinent to discussion. Up to this point there had not been sufficient service users attending to hold an election.</p> <p>Discussion had included the Crisis Line and respite beds. Elections had been held for chair deputy chair and service user rep. Since the deputy was also a service user he would stand in for either if they could not attend.</p> <p>During the course of discussion it was confirmed by Donal Hegarty that £100 000 had been paid for 3 respite beds in Green Lane with building work due to commence soon. Donal Hegarty agreed to attend the next stakeholders' meeting to report back on this aspect. With regard to West Surrey it had been agreed that respite beds would be developed but not necessarily in a crisis house.</p> <p>The limited opening hours of the community mental health team had been discussed with the opinion expressed that it should be open 7 days a week for longer hours. Cross representation with other stakeholder groups and teams such as CAMHS and Learning Disability had also been suggested. It had also been noted that the North</p>	<p>Donal Hegarty</p>

	<p>West was one of the only areas having a mental health forums in addition to the stakeholder groups (Guildford has a MH forum).</p> <p>Clive Stone agreed to report back with an update on the status of the Waverly CMHT at the next meeting.</p> <p>The availability of rehabilitation accommodation was raised at the LIT meeting and Donal Hegarty agreed to give a presentation to the next LIT meeting encompassing the whole accommodation strategy, including crisis beds, and how the whole system linked in order to support discharged service users.</p>	<p>Clivel Stone</p> <p>Donal Hegarty</p>
<p>6. LIT Business Items-</p> <p>Update Reports</p> <ul style="list-style-type: none"> Improving Access to Psychological Therapies (IAPT) Advocacy (DH) 	<p>In the absence of Janine Sanderson, deferred to the next meeting.</p> <p>However, note was taken of serious reservations expressed by Andrea Edeleanu in relation to the deferment of this item owing to the fact that there had been no co-design events or the opportunity to take a view on the PCT plans before they went to tender on what was a large investment. Agreed that Donal Hegarty would discuss the possibility of setting up an opportunity for LIT to express its views on the proposed plans with Janine Sanderson.</p> <p>It was reported by Donal Hegarty that the PCT had funding in their budget in order to develop advocacy services related to the new Mental Health Act, particularly relating to tribunal hearings, but that this service at the moment only covered North and Mid Surrey and not the whole of Surrey. An Advocacy Focus group is to be set up in February 2009 with a view to commissioning for implementation in April 2009 with the constituency of the groups still to be formulated. Note was also being taken of a user perspective on this looking at, for instance, the support system used by WWAG in Walton and Weybridge, seen as a form of advocacy, which operated a network system of service user mutual support. Investment in training up service users as advocates in their own geographical areas was also being investigated.</p> <p>Distinctions were drawn between IMCAS funding for advocacy services related to mental capacity and the two other advocacy services, one as outlined above and the</p>	<p>Donal Hegarty</p>

Comment [A1]: I can't quite remember whether it was Stanley or I who also expressed concern that since the PCT was planning to disinvest in certain services in order to progress IAPT, the LIT should have an opportunity to see what would not be commissioned as well as comment on the IAPT plans

<ul style="list-style-type: none"> • CSIP Funding. <p>Items for Action/Decision</p> <ul style="list-style-type: none"> • NSF Self Assessment, Themed Review and Service Mapping Action Plan 	<p>to influence the decision before it went out to tender were reiterated by Andrea Edeleneau. In response, it was pointed out that when the tender had been put together there had been representation from Health, Social Services, the PCT and the voluntary sector at a time before the introduction of LIT. Noted that Andrea Edeleneau indicated she was not comfortable in putting her name to a project where no paperwork had been placed before the meeting.</p> <p>Deferred</p> <p>Document circulated and responses to be lodged with Jeanine Sanderson.</p>	
<p>Any Other Business</p>	<p>Langley Green</p> <p>Serious concern was expressed by Don Illman on the manner in which service users in the East had been treated with respect to the closing of Langley Green, particularly with regard to not being kept abreast of events as they happened. In response it was pointed out by Stanley Riseborough that disappointment at its closing had been shared by all but that a number of dates and assurances had been given in terms of transfer which had not been met and the absence of a safe pathway forward, a statutory obligation, in the end had had to be acknowledged. The decision had only been finally reached quite late as up to that point, it had appeared that the outstanding issues might be resolved.</p> <p>Further problems were expressed around hospital beds at Langley Green which were not being occupied and the fact that this hospital could not continue to run with these unoccupied beds, which were now in danger of being handed over to Brighton.</p> <p>Agreed that this item would be placed on the agenda for further discussion.</p>	<p>Janine Sanderson</p>

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