



Agenda

Title of Meeting: Mental Health Partnership Board Meeting

Date: 15th April 2013

Time: 2pm – 4pm

Venue: St Andrews Church, Bedford

Contact: Gemma Halfpenny – 01234 276249

No	Item	Please tick box below if there is an attachment ↓	Lead Person
1.	Welcome and Apologies		Simon
2.	Minutes of the Last Meeting and Matters Arising		Simon
3.	Update from Groups: <ul style="list-style-type: none">• Housing• Personalisation• Employment• Patient Experience		All
4.	User and Carer Updates		All
5.	Carers Together Event Feedback		Anona, Simon and Chris
6.	AOB		All
7.	Date of Next Meeting: 30 th May 2013, 2pm, St Andrews Church		Simon

Minutes

Title of Meeting: Mental Health Partnership Board

Date of Meeting: 7th March 2013

Attendees: Chris Bradley-Rushe, Simon White, Gemma Halfpenny, Anona Hoyle, Wilf Deacon, Carys Martin, Judy Baxter, Marek Zamborsky, Joyce Tucker, Richard Gillard, Alex, Alison Taylor, Emma Robinson and Anthony Matthews.

Apologies: Alison Fisher, George Hunt, Glen Orkisz, Carl Bernard, John Bruynseels, Caroline Holman, Lee Miller, Jane Hainstock, Gill Mason, Michelle Bradley and Sharon Rogers.

No	Item	Actioned by
1	Apologies and Welcome Simon welcomed everyone to the meeting and apologies were noted.	
2	Minutes of the last meeting & Matters Arising The minutes of the 29 th January 2013 meeting were discussed. CM raised that there were lots of inaccuracies in the carers assessment, and information is missing – CM to feedback. SW stated that it is very important that this is followed up. CBR not aware of this- so CM and SW to pass information to them. CBR suggested coming back to Carers in Bedfordshire to do another workshop. Item H- it is classed as a care home and is registered with CQC. SW to feedback any outcomes from Inspection Report. CBR- there is a block contract with the PCT. CM concerned about the number of rooms to bathrooms. MB is now leading on the dementia work streams and will add timescales. Strategy- consultation with CCG- does it need to go more widely? Shorter version strategy- MZ hasn't produced yet. Richard- Seems a lot of things would done a lot better from the bottom up. SW- key part of the strategy is personalisation and personal choice. Richard- Peer support- greater recognition. Clarity needed on where the actions come in- can look into pointing out areas in the strategy. SW to follow up with Emma re: sponsor easy read strategy.	CM SW
3	Update from Groups Housing Members are calculating data. CB pulling together the description of need. Questionnaire is not public yet for providers. Dawn Allen from Housing Options is also involved. What do we have and what do we need? 2 schemes- Andrew Kyle and Jim Pollard are pursuing 2 schemes. Supported living environment in BBC- Lisa Sparks and Andrew Kyle are leading on and overall is doing well. CMHT and CB if there is a need for respite- need to consider responses from the questionnaires. A rehabilitation service has started- reviewing currently what is on the ground. Have been commissioned to come back with a report and to	

	<p>proceed from the report.</p> <p>WD stated that there is a communication issue. MZ added that everyone will have the opportunity for their opinion. CM added that mental health inpatient rehabilitation is unnecessary.</p> <p><u>Personalisation</u> Building on the targets achieved by SEPT- MZ to pursue further. DP's difficult to access, 75% of mental health Service Users are having them.</p> <p><u>Employment</u> Gill Mason to report at next meeting. AH & GD are attending SEPT regarding direct payments and is ongoing. CM to feedback issues to CBR and SW.</p> <p><u>4.Patient Experience</u> QIPP has been renamed "Delivery for Patients" – Mental Health and Learning Disabilities change programme. MH redesigned- two section steps 1-3, counselling, and support for mild to moderate issues- Steps 4-5 secondary care services.</p> <p>Autism programme- adult patients- 01.04.2013 new service, diagnosis, can be seen locally, support services from Autism Bedfordshire, launch date to be confirmed.</p> <p>Alex discussed his experiences being a service user.</p> <p>Joyce feedback issues around her friends father who is experiencing problems with the memory assessment clinic, no-one could come to him to get him assessed. It was an appointment based clinic, has an extra nurse who does do visits for those who can't get there but does not happen at Bedford Hospital.</p> <p>Memory assessment service- currently working with the GP's.</p> <p>AM discussed Step 1-3 and 4-5. 1-3 are draft proposals, clinical needs, taking on board assessment strengths, triage solutions, is currently in draft. First 10% target in planning to hit target. Steps 4-5 are working with SEPT on how to identify capacity in services. London Road, Cedar House, what is being delivered in there. What outcome is expected from the services in the GP surgeries? CMHT leads more accessible. Better rehabilitation paths for those who are ill to come back in to the community.</p> <p>AT said that psychiatrists are not coming to review diets anymore- college of psychiatry issue. Could Matthew look into this? Would be part of a step 1 and 2 issue.</p>	<p>CM</p> <p>AM</p>
<p>4</p>	<p>Input from Service Users We have been informed that carers would like a forum. This has been booked for the 9th April 2013 at the Corn Exchange in Bedford. There will be a question and answer panel consisting of leads from SEPT, BBC, NHS and Carers in Bedfordshire. One of the issues being discussed is 'what do carers want from a forum'? Looking for support to promote this event, Questionnaire's will be made available for those who cannot attend the forum.</p> <p>Joyce queried on what is classed as a carer? AH advised that young carers, parent carers, anyone who cares for a loved one or neighbour etc are being encouraged to attend the Carers Event.</p> <p>SW- carer's packs that have been put in GP's surgeries has really helped to identify who is a carer. Relatives of those in care homes are not classed as</p>	

	<p>carers.</p> <p>SW- reviewing the personal budgets and what they are doing. What do we want from this board? This should provide a vehicle for users and carers to represent and feedback to providers and organisations. Venues have now been changed and now no longer at Borough Hall.</p> <p>Richard asked if he could invite people, SW agreed that anyone is welcome. Richard supplied feedback from the SEPT stakeholder event, a lot of Service Users were not aware of it. CBR is attending on the 20th.</p> <p>CBR said that the stakeholder event was publicised on Twitter, Facebook, and the SEPT event page of their website- although it did not go to members of the trust or the board. The 10th June 103 at 11.30am is the next event at the Day Resource Centre. A light buffet lunch will be provided. Lots of service users and carers attended the last one. It is a quarterly meeting.</p> <p>SW asked if this group was needed at all if there is already a SEPT forum and a Service User and Carer Forum. The SEPT group is about here and now.</p> <p>SW asked if this group could be linked in with one of the forums that SEPT hold. CBR advised that this is the model SEPT are using to engage and listen and that it is a service user lead engagement forum – if things need to be raised formally they can be done in private. CBR is happy for the minutes of the meetings to come to this group for information. The Mental Health Partnership Board has the strategic responsibility and all agreed they are happy for this Board to carry on.</p> <p>AH said that Bedford Borough Council has a User and Carer Advisory Group and any service user or carer can attend. GH to send flyers and terms of reference to the groups.</p>	
5	<p>User and Carer Updates</p> <p>ER- review of day care services- timescale so can share with service users. SW to find out and feedback, not likely before the end of March 2013. Draft report did not address the terms of reference.</p>	GH SW
7	<p>AOB</p> <p>Richard confirmed that MIND did some workshops, performed a play on self harm, has written a poem and distributed.</p>	
8	<p>Date of Next Meeting</p> <p>15th April 2013, 2pm at St Andrews Church, Bedford</p>	

Putting People First

User and Carer Advisory Group

Terms of Reference

Terms of reference for the Putting People First User and Carer Advisory Group

1. Purpose

- 1.1 The advisory group is for people who use social care services and carers from Adult Social Care in Bedford Borough Council who wish to influence the development of Adult Social Care services and Health Personal Health Budgets.
- 1.2 The advisory group is an opportunity for users and carers to be involved and influence how services are developed particularly in relation to the personalisation agenda. Members can share their views, make comments and recommendations.
- 1.3 The advisory group will look at issues arising from First Contact, Self Directed Support, Reablement, access to good information, and a range of services to support personalisation. For example, members can help us by testing out and / or giving us feedback on some of our processes (such as assessment questionnaire).

2. Membership

- 2.1 To be a member of the user and carer's action group people need:
 - To be either a current user of services or have used services in the past
 - To be (or to have been) a carer
 - Live with/or care for someone in the Borough of Bedford.
- 2.2 The group will continue to seek representation:
 - From the range of experts by experience
 - From different communities in Bedford Borough
- 2.3 We will seek to offer support to members of the group in order for them to participate and attend. Members will also take responsibility to inform the chair about their special and individual support needs.
- 2.4 Each person represents themselves or the agreed representative of a group or organisation.

Putting People First

User and Carer Advisory Group

Terms of Reference

3. Attendance

- 3.1 New members can join the advisory group at any time.
- 3.2 The group recognises that members may not be able to attend every meeting.
- 3.3 Members are encouraged to invite new people to join the group. There is currently no restriction on numbers wishing to do so.

4. Frequency of Meetings

- 4.1 The whole group will meet initially once a month for 3 months and then quarterly.
- 4.2 Members of the group may form a sub group for particular pieces of work (such as Mystery Shopping)
- 4.3 The group will meet during the life of the Putting People First – Personalisation Board.

5. Accountability and Information Sharing

- 5.1 The group will report back to the Putting People First – Personalisation Board.
- 5.2 The work of the group will contribute to the achievements of the strategic priorities and outcomes of the Health and Wellbeing Strategy by helping to decide which services should be provided and delivered.
- 5.3 Four members from the group will be representatives on the Putting People First – Personalisation Board.
- 5.4 The group will feed into the other project groups as required.
- 5.5 Information from the meetings will be sent to all group members in appropriate formats.

6. Facilitation

- 6.1 The group will initially be chaired by John Bruynseels / Anona Hoyle from Bedford Borough Council. Co-Chairs will be selected for from the members of the re-launched group. We will look to ensuring the group is Chaired by members in the future.

What people think of us...

“The whole team at Impact are friendly, easy to talk to and totally committed to supporting others and improving mental health services. They have helped me to get back on track this year.”

Luton Service User 2011

“Helping Impact to improve services has helped my wellbeing and focus on my recovery. Impact do a great job and are always ready to listen and support you.”

Leighton Buzzard Service User 2010

“Impact have supported me in getting a job after nearly 4 years of unemployment. They are patient and understand because of their own experiences with mental ill health.”

Dunstable Service User 2011

“I will always sing the Impact groups praises for their respect for life with mental health. I went to them as a volunteer in July 2010 and they helped me feel like I had a purpose. I am now working full time thanks to the team.”

South Bedfordshire Service User 2012

Charity Registration Number: 1135479
Companies House Number: 07137263

Contact us

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“Peer support is a system of giving and receiving help, founded on key principles of respect, shared responsibility and mutual agreement of what is helpful.”

Mead, Shery and MacNeil, Cheryl;
Peer support, a systemic approach.

Follow us on:



The Impact Peer Support Programme is sponsored by...



The Impact Peer Support Programme

Offering: Recovery Opportunities, Hope, Trust, Advice, Support, Information and Friendship

“Peer support is not like clinical support. In peer support we understand each other because we’ve been there, shared similar experiences.”

Copeland, Mary Ellen and Mead, Shery (2004)
Wellness Recovery Plan and Peer Support

About Impact MH

Impact MH (IMH), is a mental health, user led charity based in Bedfordshire. For over seven years, IMH has delivered a service that has helped build and sustain meaningful communication and partnerships between service users and service providers, improving mental health services now and for the future. In more recent years IMH has increased its communication and support services to people, in the form of Peer Support with huge success and great benefits.

Peer Support Programme

IMH offers a Peer Support Programme that helps enable your recovery from mental distress and the impact this may have on your life.

Peer support is one of the best forms of therapy and genuinely involves other people who have experienced mental distress, offering insight and understanding by drawing on their own experiences to help you.

The Peer Support Programme can complement the professional support you may be receiving from trained mental health workers, and help increase your recovery opportunities.

What we can offer

A six week peer led programme providing activities and information sharing sessions.

Opportunities to meet new people and make friends.

One to one Peer Support to establish or join Community Interest Groups through IMH.

Themed Pop-ins, once every two weeks, to meet up with friends and listen to visiting organisations.

Information, advice and signposting to Mental Health and other services.

Opportunity to access the IMH Volunteer Induction Programme.

Telephone and email support.

A chance to develop new skills and make a difference to the lives of others through IMH and other organisations.

Peer advocacy when attending appointments or completing forms.

Links to wider community services and activities.

How this can help you

- 1 Increase recovery opportunities.**
- 2 Improve mental & physical wellbeing.**
- 3 Understand your mental health.**
- 4 Access information and advice.**
- 5 Improve self-esteem and confidence.**
- 6 Help others to help themselves.**
- 7 Meet new people and make new friends.**
- 8 Work with us to challenge inequalities.**

Referral

If you are interested in joining one of our Peer Support Programmes, please complete our referral form, which you can obtain by:

1. Contacting Impact HQ on 01582 611079.
2. Emailing us at admin@impactmh.org.uk
3. Downloading from our website, www.impactmh.org.uk
4. Speaking to a member of your local Community Mental Health Team.
5. In some areas, your GP may also hold copies of the Impact referral form.

Once you have completed the form and returned it to Impact, a member of our team will contact you within seven days and arrange to meet with you. The meeting will look at what YOU want to achieve, what your aspirations and expectations are, in order to ensure this is the right programme for you and that we can offer you the right support.

There will be time to review and talk about how you are getting on during the programme; so don't worry if your situation changes, we understand and will continue to support you.

All you have to do is make a start!

THEY THINK THEY ARE SANE

Statistics show that there are a high number of people with mental health problems.

However, the real problems are caused by the people who think they are sane.

They think they are sane, but they send children to war, to kill and to die,

In Iraq, Afghanistan, Vietnam ...

They think they are sane but they murder dissenters:

John Lennon, David Kelly, John F. Kennedy, Martin Luther King ...

They think they are sane but they poison our lives with their greed and their lust for power.

The above piece of work was inspired by the first year drama students from The University of Bedfordshire. On the afternoon of Friday 22nd of February 2013, They put on a play at Bedford Mind. I was lucky enough to be in the audience. When I heard them talk about the huge number of people who have mental health problems I immediately thought: It's not the people with a diagnosis of mental illness we need to worry about. It is the people who think they are sane. It is the people who are so perverse that they destroy society. It is that very destruction of society which results in mental illness. Ironically, the people with a diagnosis of mental illness are often the most sane. They are so sane they cannot stand the madness they see all around them. They are so sane that the perversion of modern life, which they are faced with every day, causes them to crack up.

Much I have said above might seem a little far-fetched. However, before you make up your mind on the matters discussed in my poem, above, please see the work of the late Barrister, Fenton Bresler, concerning the death of John Lennon. Please also take a look at the work of Naomi Klein and Naomi Wolf, such as the books *The Shock Doctrine* and *The End of America*, together with Harold Pinter's Nobel Prize acceptance speech. You can find online videos about these matters with the help and assistance of my website. Please see web address:

<http://www.richardgillard.webs.com/YouTubeIndex.html#WritersAndThinkers>