



**RECOVERY AND OUTCOMES GROUP**  
**NORTH WEST REGION**  
9<sup>th</sup> September 2014

**Meeting Facilitator:**

Ian Callaghan, National Service User Lead, My Shared Pathway [ianmcallaghan@me.com](mailto:ianmcallaghan@me.com)

**Regional Lead:**

Colleen Fahy, Recovery First

**Welcome and Introduction**

Ian welcomed everyone and everyone introduced themselves.

**Minutes from Last Meeting:**

These were reviewed and there were no questions.

**National Updates:**

**Feedback from the Steering Group**

The Recovery and Outcomes Steering Group meets every quarter in Birmingham following the nine Recovery and Outcomes Groups around the country. The meeting is attended by all the Regional Leads together with some service users. The Regional Lead for North West is Colleen Fahy [Colleenfahy@priorygroup.com](mailto:Colleenfahy@priorygroup.com)

As well as reviewing the regional Groups and planning for future ones, there are several sub-groups.

**Main Messages and DVD**

The 'Main Messages' sub-group, led by Sally Gendle and supported by Cygnet Healthcare, has just produced a 'Main Messages about My Shared Pathway' document, which aims to introduce the principles of My Shared Pathway and how it might be incorporated into Care Planning and CPA processes. The document may be downloaded at:

<http://www.cygnethealth.co.uk/service-users/my-shared-pathway.html>

We have also produced a 'Key Messages about My Shared Pathway' leaflet and poster aimed more at service users and these are attached with these minutes.

**Action: Ian to circulate the leaflet and poster with the minutes.**



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In addition, Cygnet have sponsored the production of a second My Shared Pathway DVD introducing the main elements of My Shared Pathway. It is 30 minutes long and can be viewed in the same place on the Cygnet website or viewed and downloaded at:

<http://vimeo.com/cygnethealthcare/mysharedpathway>

Please do feel free to download and copy both the Main Messages document and the DVD as many times as you would like.

**Other sub-groups**

Another sub-group called 'Looking After My Future', aims to bring together people interested in developing resources for service users moving out of hospital.

**Action:** If you are interested in joining the 'Looking After My Future' group, please let me know.

We are still hoping to restart the work with the MoJ and explore doing an evaluation of My Shared Pathway but this is currently on hold.

The next meeting of the Steering Group is on Thursday 9<sup>th</sup> October.

**Clinical Reference Groups and Commissioning**

There are 3 Clinical Reference Groups (High/Medium Secure, Low Secure and the Forensic Pathway Group). These groups advise NHS England on what services to commission and consist of clinicians, commissioners and Patient and Public Engagement (PPE) representatives. Ian and two other service users from other regions are PPE reps on the High/Medium and Low Secure CRGs.

The Recovery and Outcomes Groups are always on the agenda for the High/Medium CRG and are a stakeholder, so our views are well represented.

The CRG listened to the feedback from the Recovery and Outcomes Groups about what service users would like to see as next years CQUINs (the Commissioning for Quality and Innovation quality improvement scheme) and two of our suggestions have been included. These are 'Collaborative Risk Assessment' and 'Supporting Carer Involvement'.

Some of the other CQUINs include improving Physical Healthcare, the Friends and Family Test, Quality Dashboard and Pre-admission formulation, i.e. improving communication with service users prior to admission.



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**Action:** Please let Ian know if there are any issues you would like raising at the CRG or with commissioners.

**Rethink Mental Illness**

Rethink Mental Illness are now undertaking the secure care work of the Innovation Network, which include improving care planning and CPA, collaborative risk assessment and management, and peer support. These interventions will all be evaluated over the course of the next two years and there will be updates during that time.

Rethink Mental Illness are also planning a big piece of work in secure care that aims to give service users a better voice in improving services by collecting life stories from service users. The Head of Campaigns, Lara Carmona, recently sent this message to all the Recovery and Outcomes Groups:

**“Rethink Mental Illness is preparing a massive piece of work to transform secure care. We know that not enough is being done to improve the voice of people using services in secure care settings. We want to change that.**

**We are very interested in your involvement in our project and we would like to know how we might best work with you.”**

We will be hearing more about this work at future meetings.

**Action:** Please let Ian know if you would like to be involved in the Rethink Mental Illness campaign.

**Quality and Outcomes Group**

There is a national group looking at more clearly defining outcomes and outcome measures and how they might be linked to care packages and their cost. This has links with My Shared Pathway and the electronic outcomes tool being developed by Partnerships in Care. The outputs from the afternoon interactive workshop at the National Recovery and Outcomes Conference will be fed directly into this work.

**National Service User Awards 2015**

The next National Service User Awards take place on Wednesday 11<sup>th</sup> March 2015 and the nominations are now open!

Nomination forms can be downloaded and all the details about the Awards can be found on the new Awards website at:



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[www.nsua.org](http://www.nsua.org)

We had winners of the Awards from East London NHS Trust this year along with another finalist and it would be great to have even more from the London area next year!

**National Recovery and Outcomes Conference – 16<sup>th</sup> July 2014**

The first National Recovery and Outcomes Conference took place on 16<sup>th</sup> July at the National Motorcycle Museum in Birmingham and was a great success! With over 100 service users from around the country and 300 delegates altogether, there's already been great feedback. We used electronic voting pads to get instant feedback throughout the day from the service users and this proved very popular!

We were delighted to have been able to have support from Partnerships in Care and NHS England, whose Head of Public Voice, Olivia Butterworth co-hosted the morning session with Ian Callaghan. We had great presentations by Geraldine Strathdee, the National Clinical Director for Mental Health, who is a very inspiring supporter of secure care. We also heard from Geoff Shepherd, the Recovery Lead from the Centre for Mental Health and ImROC about their project looking at recovery in secure care.

We also had two inspiring presentations by winners of this year's National Service User Awards: one from Cygnet Kewstoke about the MAAP: My Awareness and Action Plan that has been developed to improve the understanding of patients and where they are in their recovery; and the other from Millfields Unit in East London about their innovative Personality Disorder Training Course. Many people said these really were the highlight of the day!

In the afternoon, following a warm up session dancing to 'Happy', there was an interactive workshop about how to make outcomes and outcome measures more relevant and meaningful for service users. Feedback from the day will help inform the national Quality and Outcomes work currently being undertaken by the Care Pathways and Packages Project, who very kindly provided the funding for the conference.

Following a great presentation from Quazi Haque and Liz Allen about 'PathNav' the Pathway Navigation System being developed by Partnerships in Care, we had the results from the afternoon's interactive workshops. These will all soon be available in a report about the conference that will also have all the results from all the voting pad sessions, together with feedback and evaluations from the day.

**Restricted Items Project**



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Ian informed everyone of the 'Restricted Items Project' that is being carried out by a trainee forensic psychiatrist from East London Trust, who is drawing up some guidelines for better ways to assess potentially 'restricted' items and is keen to hear the views of service users and staff. She was unable to attend the meeting today, but her presentation is attached with these minutes.

**Action:** Ian to circulate the presentation with the minutes

**Presentations:**

**'Rethink Mental Illness and IMHA in North West'**

Helen Hayhurst and Pietro Allen from Rethink Mental Illness advocacy services in the North West gave a really useful presentation about the work of the Independent Mental Health Advocacy and how this service could be used by people in secure care.

Helen and Pietro have kindly agreed for us to circulate their presentation with the minutes.

**Action:** Ian to circulate the presentation with the minutes.

**'Trim Down, Shape Up!'**

A service user along with Jason Bonney from ABL Health Ltd, told us about the great scheme that has been running and has helped people to lose weight in a fun and motivational way. Everyone who has participated in the 12 week scheme has lost weight and many have achieved their 5% weight loss target. The hospital are hoping to continue the scheme to be run by patients and staff.

For further details, please do contact Jason at: [jbonney@ablhealth.co.uk](mailto:jbonney@ablhealth.co.uk)

**'The Secure Transitional Recovery and Pathway Development Group'**

Gary Thorpe from Ashworth Hospital told everyone about an exciting project that is just getting off the ground. The Secure Transitional Recovery and Pathway Development Group held its first meeting on the 15<sup>th</sup> October and it was a great success with over 80 attendees from over 20 organisations from all over the country. Gary's presentation is attached here, but hopefully we'll be hearing feedback about the meeting at the next group in November.

**Action:** Ian to circulate the presentation with the minutes.

**Discussion Groups – 'Collaborative Risk Assessment'**



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As part of this year's CQUIN (Commissioning for Quality and Innovation) scheme, services are being asked to improve the involvement of service users in their risk assessment and safety management. This was discussed in small groups in answer to the questions: 'Why should service users be involved in their risk assessments?', 'What is difficult about doing this?', 'How can these difficulties be overcome?' Feedback included:

*Why should service users be involved?*

- 'Because it's about the patient' and 'Service user may know what works best'
- Two way opportunity for explanation and contribution
- Handing back control and responsibility
- Effective care planning
- Preparing for discharge and promotion of hope
- So service users can know their own risks and can work on them
- Develops coping strategies with staff to reduce risk
- Helps to see progress and increases motivation
- So things don't seem punitive
- To avoid making assumptions
- Working collaboratively means you are working well – not in a detrimental way

*What is difficult about this?*

- Content of discussions can be quite difficult
- Capacity and understanding
- 'Trust' and 'Big Brother'
- Time it requires
- Who makes the ultimate decision – nurses/medics/security?
- Criteria for decision making not clear or fit for purpose?
- It can be frustrating
- Blanket rules, not being reviewed enough
- Treated like children
- Important that they follow the right process

*How can these difficulties be overcome?*

- 'Do with, not to!' and 'Individualised'
- More information for patients around decision making



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- What do the MoJ say – what is their criteria?
- More detailed information about risks
- Regular reviews and discussions with MDT team
- Try to use the least restrictive method
- Second chances
- Empathetic staff attitudes
- Community meetings
- Use role play to explain

**Date of Next Meetings:**

**Thursday 26<sup>th</sup> February**

**Thank You:**

We would like to thank Lisa Mullineux for organising the meeting and for a superb lunch!

**Contact details:**

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