



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

Meeting Facilitator:

Ian Callaghan, National Service User Lead, My Shared Pathway ianmcallaghan@me.com

Regional Lead:

Anbu Batumalai, Lead Occupational Therapist, Thornford Park anbubatumalai@priorygroup.com

Welcome and Introduction

We were warmly welcomed by Anbu from Thornford Park 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 South Central is Anbu Batumalai anbubatumalai@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.



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

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 explore doing an evaluation of My Shared Pathway but this is currently on hold.

The next meeting of the Steering Group is on Thursday 22nd January – please do let us know if you would like to add anything to the agenda.

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.



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

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

Ministry of Justice

We have recently had a very productive meeting with the Deputy Head of the Mental Health Casework Section about two areas of work:

- Correspondence with service users. Following a questionnaire survey 18 months ago, where around 60% of service users and 60% of RCs said they thought direct correspondence between the MoJ and service users was a good idea, it has been agreed to look at ways of taking this forward. It has been suggested that RCs are asked when corresponding with the MoJ whether a discussion has taken place with the clinical team and the service user, if appropriate, about whether sending letters directly to the service user is a good idea.
- Use of outcomes plans. Service users have said they would like to be able to contribute to the decision making processes of the MoJ and one way of doing this may be to forward to the MoJ the My Shared Pathway outcomes plan after every CPA that would include service user views. As this might require some changes to the way services and the MoJ work, it has been suggested that there might be a pilot scheme with volunteer services. Further discussions will take place about this.

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 11th March 2015 and the finalists will be announced in December.

All the details about the Awards can be found on the new Awards website at:

www.nsua.org

Presentations:



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

Rethink Mental Illness

A Senior Policy Officer from Rethink Mental Illness gave a really good overview of the work of the national mental health charity Rethink Mental Illness. This included details of the Innovation Network, which aims to evaluate some new ways of working, including in secure care. Four providers of secure care are improving the way they do their care planning, CPAs and risk and safety planning and one provider is introducing peer support. There is to be an evaluation of these interventions and the results will be shared widely.

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.

If you would like any more information about the work of Rethink Mental Illness, please do visit their website at: www.rethink.org

‘Our Service User-led Social Enterprise’ – presentation by service user

One of the service users gave a great presentation about the work of the social enterprise that has been set up at the hospital. This included producing items for the local market as well as a car washing service. Money raised goes to fund the project as well as a proportion being given to charity. They are looking to expand the initiative and will keep us informed!

Action: Ian to circulate the presentation with the minutes.

‘Our Trim Trail’ – presentation by service users and staff

Service users and staff gave a great presentation about their new ‘Trim Trail’ that they’ve developed to ‘reenergise’ ground leave. They showed some really good photos of the trail under construction together with information about the opening. It is proving a real hit with patients and we’ll look forward to hearing about its impact.



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

'My Recovery Journey' – presentation by service user

A service user gave a really inspiring and emotional presentation about her recovery journey and insights she has gained along the way. She also spoke recently at the Priory National Service User Conference in Milton Keynes that was also extremely well received. Everyone who heard her found it really encouraging indeed.

Discussion groups: Effective Communication

One of the topics for discussion that the Steering Group has suggested to be considered by the Recovery and Outcomes Groups is the theme of what makes for effective communication in secure services, both with people in services and with people outside. It is hoped that the outputs from these discussions will form some recommendations or guidance to help services and service users support good communication.

Small groups considered the following questions: What does 'effective communication' mean in a secure setting? What are the barriers and difficulties for maintaining 'effective communication'? and What could help develop better communication in secure settings? The following is a summary of the feedback:

What does 'effective communication' mean in a secure setting?

- Respect, listening, care, interest, understanding, non-judgemental, find common ground
- Good staff role models, good leadership: clinical and management
- Interacting well – eye contact, good body language, show you're listening
- Having time for the person
- Staff knowing how much they can share – relational security
- Acknowledgement – repeating back what you've heard
- Good understanding of cultural and spiritual needs
- Not enforcing views on others
- Less jargon, more facts
- Accepting that other people may not have as much experience as you
- Smile!
-
- Benefits of effective communication:
 - Makes the ward feel better, more productive, safer
 - Enhances confidence and recovery



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

- Promotes trusting relationships and positive outcomes
- Beneficial to both staff and patients
- Makes individuals feel involved and valued

What are the barriers and difficulties for maintaining 'effective communication'?

- Fear, judgement, people's intolerance
- Stress, being tired, staff over-worked, paperwork
- Not knowing what to say
- Unable to connect
- Staff attitude and being set in your ways
- Your own mood can affect others
- Ward dynamics, high emotions, past experiences
- Policies and procedures
- Restrictive practices in a secure setting
- Illness
- Victim-related issues
- Fear of saying too much stops social chatting
- Overuse of the word 'inappropriate'
- Different beliefs and values; culture

What could help develop better communication in secure settings?

- Honesty, consideration, fairness,
- Communication training as part of induction
- Supervision, support, 1:1s
- Recognition of when it goes well
- Patients confidently feeding back their observations on staff behaviour
- Understanding other people's perspectives
- Respecting boundaries
- Being assertive in giving feedback
- Communicating in a timely manner
- Being clear about decisions
- Better training 'life and times'
- Procedures need to be respected
- Passing on messages



RECOVERY AND OUTCOMES GROUP
SOUTH CENTRAL REGION
20th November 2014

- Respecting cultures
- Be clear about expectations
- Be positive and focus on this – remember the good times!
- Remembering loved ones and families

Date of Next Meetings:

Thursday 19th February 2015

Thursday 28th May 2015

Thank You:

We would like to thank Anbu Batumalai for organising the meeting and the catering team for a superb lunch.

We would also like to thank the service user that gave readings of several of his poems during the meeting, which were all excellent!

Contact details:

anubatumalai@priorygroup.com

ianmcallaghan@me.com

ian.callaghan@live.co.uk

www.networks.nhs.uk/nhs-networks/my-shared-pathway/

Twitter: @ianmcallaghan