



4Es STAKEHOLDER ALLIANCE

Equality, Experience, Engagement & Enablement

Issue 9: 20 October 2015

“Working together for the common good”

Welcome to the latest edition of the 4Es newsletter. This newsletter is produced after every meeting, in line with our 4Es meetings so that we can share our collective work to improve engagement, access and equal outcomes for all groups. This document also serves as our meeting notes and actions. In this issue you will learn about the session that took place on Tuesday 20 October 2015 at the Erewash CVS, Long Eaton.

Welcome and setting the context

Ifti Majid, Acting Chief Executive and chair for the meeting, welcomed all present and asked the a selection of attendees to share something positive in their lives.

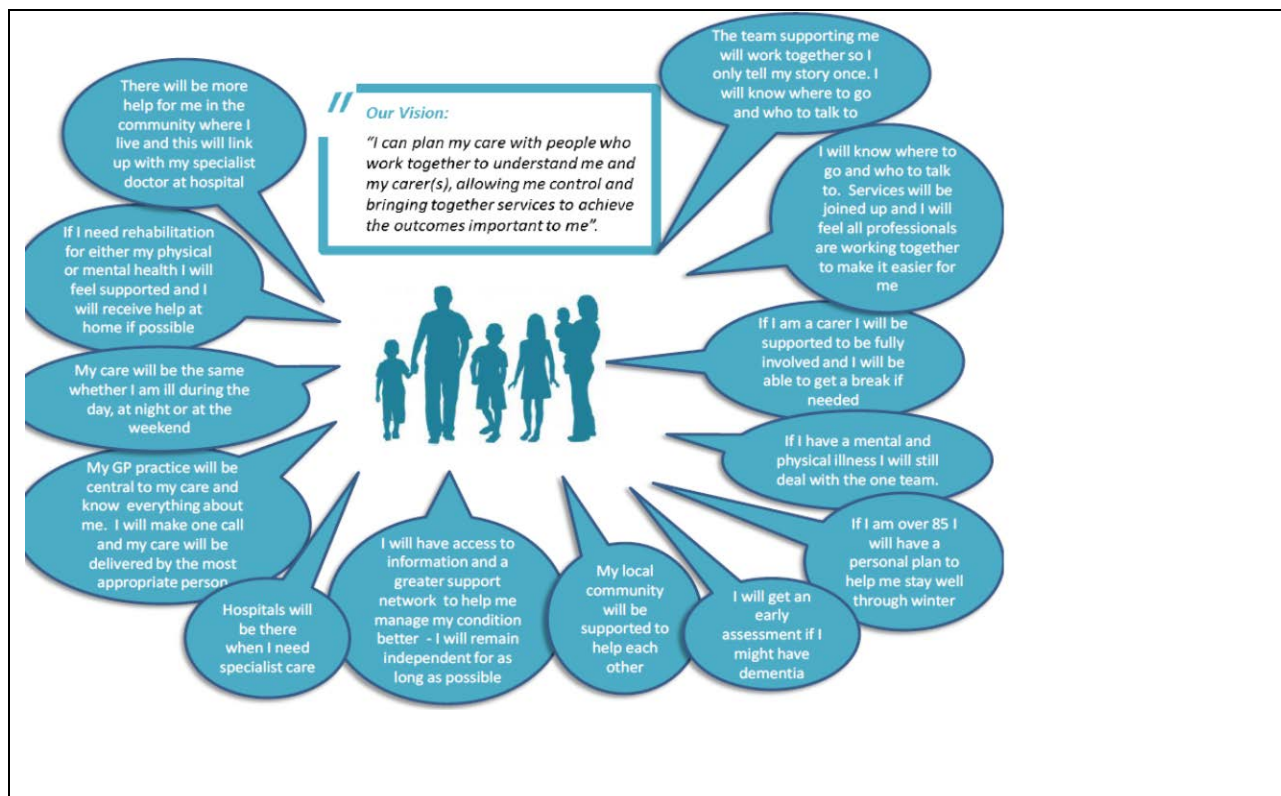
Erewash Vanguard

Presenter: **Rakesh Marwaha**, Chief/Accountable officer NHS Erewash CCG:

Rakesh shared a series of patient stories that demonstrated key health challenges for the population of Erewash. Key health outcomes for Erewash CCTG are to reduce rates of the following:

- Alcohol consumption (particularly teenagers)
- Smoking (particularly in pregnant women)
- Obesity (particularly in school aged children)

Rakesh explained that Erewash was part of the national Vanguard pilot on MCP (Multispecialty Community Provider), through this Erewash have created a vision with clinical leads, the public and local patients



This builds on Erewash's previous note to aid signposting and referral within the constituency, including the development of primary care hubs and a care home service model.

The Vanguard mission is to develop thriving, capable and healthier communities, through the hubs in Ilkeston and Long Eaton.

In 2020 Erewash will be characterised by:

- Strong inclusive communities
- Shared ethos between the people in the community and their trusted professional staff of self-care and shared decision making
- Responsive and accessible support services
- Integrated services that wrap around people and their family and carers, reducing the need for bed-based care.

4E's members asked the following questions:

How do you reach out to people who only get help when they are really ill and there is no outreach available in the interim? It was noted that there were not enough GP's and nurses in the community.

Work is to be completed by 2020. The hope is that the model will deliver what communities need as far as outreach is concerned as well as continuity of care.

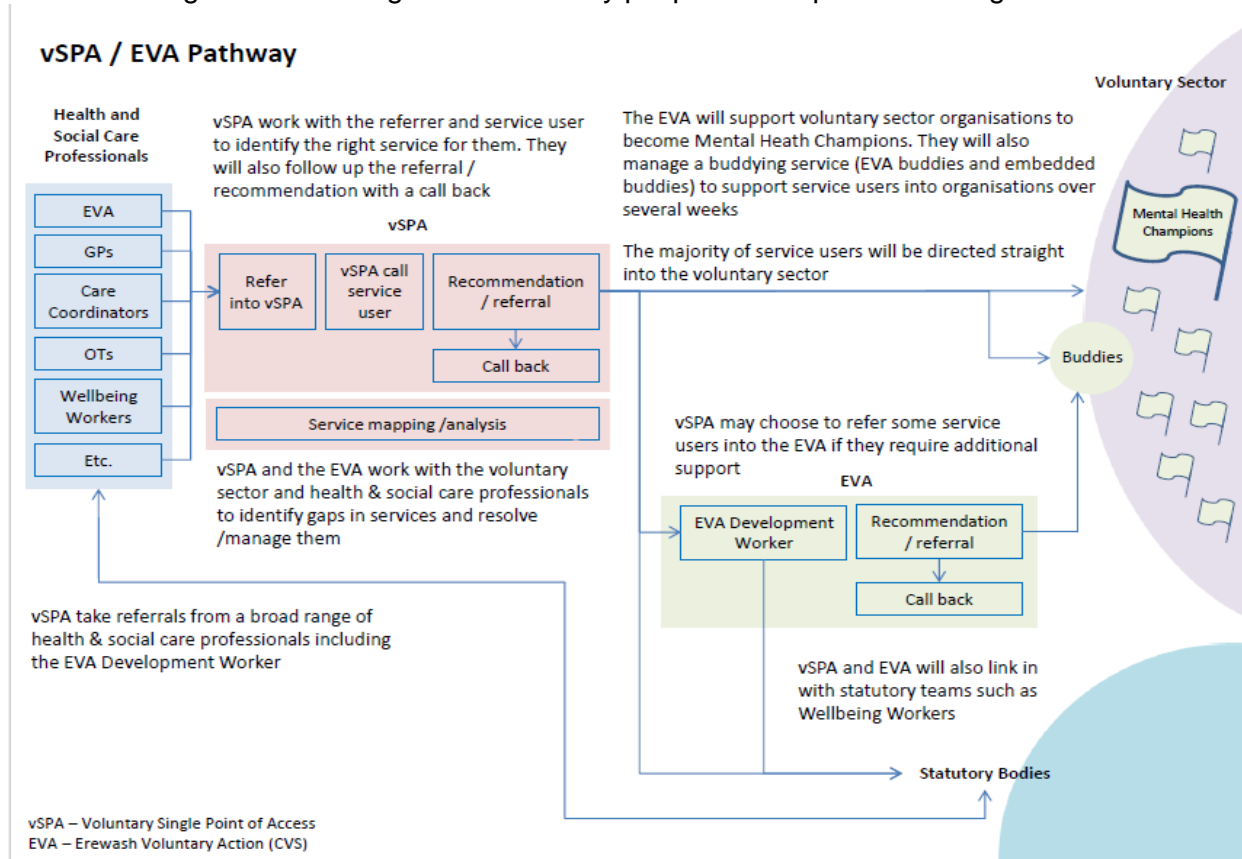
Would people get assistance from the Vanguard regarding DWP as there is an increase in crisis because of the benefits situation? We need to support and invest in local communities and healthcare. Healthcare as we know it will change.

Please see more information at this link: <http://www.erewashccg.nhs.uk/erewash-mcp/>

Erewash Mental Health Innovation Project

Presenter: **Kate Burley:** Mental Health Senior Commissioning Officer, NHS Hardwick CCG
Stella Scott: Chief Executive Officer, Erewash Voluntary Action – CVS
Pete Newby – VSPA – NDVA

One year ago, there was a review of mental health services in Erewash, which revealed only 24% satisfaction with local services. We know that the number of mental health referrals in Erewash is higher than average and that many people also experienced long term conditions.



Work stream 1

Improving Access into the voluntary sector through enhanced coordination of services and befriending support for people to access localised support

Progress:

vSPA has an additional worker and is now able to promote the service to more potential referrers in Erewash and handle more calls. Referrals have increased in the first 9 months. vSPA will inform the project of where demand for service is currently not available.

Erewash Voluntary Action has recruited a Development Worker as part of the project. They have also developed a buddy scheme to assist people to attend groups. They have identified non mental health groups that want to become mental health champions. They will attend Mental Health First Aid Training.

9 additional groups in Erewash are able to support people with mental ill health. Marketplace Event 21st October and 3 more through the course of the project

Work stream 2

Outcome based reporting

Progress:

Derbyshire Mental Health Forum working with Mental Health Champions to collate scores to show value of the sector. Recommendations from the pilot will be made in April/May 2016.

Work stream 3

Improved effectiveness of smoking cessation and health prescribing schemes for people with SMI (Severe mental illness)

Progress:

The project team are working with Healthy Mind Healthy Body programme and Live Life Better Derbyshire to co-develop and co-deliver a smoking cessation course for people with Severe mental illness. There is Making every contact count training for services in Erewash.

Work stream 4

Links with specialised services

Progress:

Work from this project is feeding into the formation of DHcFT's Neighbourhood Model, particularly the role of the Occupational Therapists

The question was raised about who is going to support the buddies?

It was noted that they will be supported by the Occupational Therapists from the mental health Trust. Sara Bains also suggested that peer support would also be a good means.

Stella Scott noted that there would be support from the volunteer centre too.

Smoke Free Services' Taking the FRESH approach '

Presenter: **April Saunders:** Acting Physical Health & Wellbeing Lead

Smoking in Mental Health Services

- 20% of general population of GB are thought to smoke
- This rises to more than 40% in those with a mental health diagnosis, and may be higher in those with a severe mental illness (SMI)
- Those with a mental health condition tend to be disadvantaged in smoking cessation support, but just are as likely to want to stop
- Many Trusts have already become smoke free.

Derbyshire Healthcare will become a smoke free Trust on 9 March 2016. This follows detailed discussions with our staff and service receivers who on the whole have been very positive about the move.

Different types of NRT (nicotine replacement therapy) will be available to people on the Trust's inpatient wards. The best method of NRT will be prescribed for an individual in line with their medication requirements.

No final decision has been taken yet regarding e-cigarettes, but the Trust is considering best practice evidence in this area. Smoking cessation support will also be offered to Trust staff, as

part of our commitment to improving the health and wellbeing of the local population

Two carer representatives have now been identified to attend the FRESH focus groups, following feedback at the 4E's.

Action Matrix

Ref	Action	Update and progress
1	1.1 Volunteering strategy including options appraisal 1.2 Monitor and present REGARDS data for volunteers	Tabled for February 2016 meeting Jo Downing
2	Complaints analysis by REGARDS/equality groups	200 complaints have been received by the Trust during 2014/15. Top issues include: Clinical Care and staff attitude. Age: under 20's and over 60's staff attitude complaints were more prevalent. BME numbers were low but interesting and Ann is in the process of analysing these statistics further.
3	Carer's update	Communication with and between services has been identified as the main difficulty for carers Wendy Slater outlined her priority to engage with carers through: <ul style="list-style-type: none"> • Carers newsletter • Development of a carers strategy • Updating the carers policy • Carers and cake sessions A booklet regarding sharing confidential information is being developed in addition to posters aimed at reaching carers on inpatient wards. Wendy confirmed that carers champions would be neighbourhood based.

Summary and Close

5 things we need to do:

- 1 Feed back to Rakesh and his team about the list of priorities **(ALL)**
- 2 Circulate details of website to share comments on April's presentation.
- 3 Identify carers representative to attend FRESH group **(Ifti Majid to ask Jayne Storey to write to carers group, asking them to identify a representative)**
- 4 Check neighbourhood alignment and report back **(Sara Bains to link with Kate Burley)**
- 5 Jargon busting e.g. difference in term of care co-ordinators (primary care is different to mental health care) Share differences **(Wendy Slater)**

4Es Stakeholder Alliance Meeting Dates 2016

4Es meetings are to be held on a quarterly basis from 10:00am to 12:30pm.

- 23 February 2016 – (Chesterfield Central neighbourhood) St Thomas Centre, Chatsworth Drive, Brampton, S40 3 AW
- 21 June 2016 – (South Derbyshire neighbourhood) Old Post Centre, High Street, Newhall, DE11 0HX
- 18 October 2016 – (Amber Valley neighbourhood) – Belper town FC Christchurch Meadow. Bridge Street, Belper, DE56 1BA
- 20 December 2016 – Derby (Derby City neighbourhood) TBC

Attendance and Apologies

Attendance:

Ifti Majid (Acting Chief Executive DHCFT)
Marie Hickman (DHCFT)
Christine Williamson (Membership Champion)
Mark Todd (Chairman, DHCFT)
Anna Shaw (Deputy Director Communications & Involvement DHCFT)
Sandra Austin (Committee, DC SDMHCFT)
Margaret Lamboll, (SDMHCFT)
Shirley Houston (Engagement Officer, DHCFT)
Jose Rodgers (Carer, North Derbyshire Mental Health Carers Forum)
Tess Martin (DHCFT, Campus project Mgr)
Sara Bains (Recovery & Wellbeing Lead, DHCFT)
Wendy Slater (CPA Manager DHCFT)
Lew Hall (Trustee, Derbyshire Mind)
Maura Teager (NED DHCFT)
Peter Dawson (Peaks & Dales Advocacy)
Stella Scott (CEO Erewash Voluntary Action)
Honor Simpson (Making Space)
Pete Newby (VSPA Manager NDVA)
Carmel Swan (Service Manager, Mind)
Anne Reilly (DHCFT, Complaints/Patient Experience)
April Saunders (DHCFT, Physical Health)
Kate Burley (Snr Commissioning Officer, Hardwick CCG)
Caroline Maley (DHCFT, Non Exec Director)
Allan Bannister (Derbyshire Voice)
Samragi Madden (Quality Assurance and Compliance Officer, Healthwatch Derby)
Carolyn Gilby (DHCFT, Acting Director of Operations)

Apologies:

Robin Ash (British Deaf Association)
Kathryn Lane (General Manager, DHCFT)
Maira Kerr Public Governor
Harinder Dhaliwal (4Es Co-ordinator, DHCFT)
Adbullah Shahjan (Chaplain, DHCFT)
Malcolm Greave (Carer, North Derbyshire Mental Health Carers Forum)
Angela Kerry (Manager, Derbyshire mental health forum)
Alex Cope (Member of MHAG)
Sharran Holmes - British Red Cross
Robin Ash – BDA
Kate Majid – (DHCFT)
Ed Komocki (DHCFT)
Rais Ahmed (DHCFT)
Karen Billyeald (DHCFT)
Karen Ritchie – Healthwatch Derbyshire
David Tucker (DHCFT)
Philomena O’Hanlon (DHCFT)
Kath lane (DHCFT)
Dawn Longden-Whiting (Making Space)
Julia Hodder – YMCA
Amie Elliot – Governor

The 4Es Stakeholder Alliance Newsletter is intended to give an update for stakeholder members about what was discussed at the previous meeting.

If you would like to attend the 4Es Stakeholder Alliance meetings or would like to be added to the circulation list of this newsletter and regular email updates from the group, please contact Shirley Houston, Engagement Officer, by emailing shirley.houston@derbyshcft.nhs.uk or telephone: 01332 623700 ext. 33302



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