



SDVSMHF

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**Minutes of the Joint Countywide Forum Meeting
on 30th March 2010 at the Coney Green Business Centre in
Clay Cross**

Attendance

Kathy Kozlowski (Chair)	Amber Trust/ SDVSMHF
Angela Kerry	SDVSMHF
Roger Kerry	NDVA
Georgina Horobin	Derbyshire County PCT
David Gardner	Derbyshire County PCT
Dorothy Lane	Amber Trust/ SDVSMHF
Sinead Dalton	Derbyshire Mind
Rona Rawson	Derbyshire Federation for Mental Health
Ruth Stretton	SDVSMHF
Lyn Orchard	Erewash Mental Health Association
Ronnie Long	Erewash Mental Health Association
Nayyer Bhatti	Amber Trust
Arwel Davies	Metropolitan Support Trust
Lee Fletcher	Metropolitan Support Trust
Sharon Lovell	Rural Action Derbyshire
Audrey Essex	British Red Cross/ SDVSMHF
Sharran Shaw	British Red Cross
Stella Collishaw	Faith in Action, Derby Diocese
Pam Sutton	Cruse Bereavement
Rebecca Harrington	P3
Kim Heappey	Derbyshire Alcohol Advice Service
Elaine Jackson	S Derbyshire & Derby City Mental Health Carers Forum
Siobhan Spencer	Derbyshire Gypsy Liaison Group
Muzelley McCready	Derbyshire Gypsy Liaison Group
Debbie Newton	Derbyshire Coalition for Independent Living
Amanda Farquhar	Derbyshire Rape Crisis
Cathy Cleary	First Steps Derby
Kath Cawdell	Community Action Derby
Lee Harrison	Rethink
Charlotte Roystone	Rethink
Barbara Marriot	North Derbyshire Mental Health Carers Forum
Gwen Wallace	North Derbyshire Mental Health Carers Forum
Paula Quick	Peak & Dales Advocacy
Peter Dawson	Peak & Dales Advocacy
Janette Smeeton	Life Matters Advice & Counselling Centre
Teddi Carlson	Derwent Rural Counselling Service
Jacqui Marsh	Alzheimer's Society

Barbara Marriott
Mark Smith
Lynn Smith
Ewan Wallace
Reg Londt
Cheryl Mason (**Minutes**)
Bryony White (**Minutes**)

North Derbyshire Carers Forum
Grapevine
SAIL
North Derbyshire Mental Health Carers Forum
Chesterfield Over 50's & NDMH Carers Forum
SDVSMHF
NDVA

Apologies:

Jackie Carpenter
Jean Eckman
Bev Miller
Wendy Beer
Debbie Kinsella
Pam Wood
Dave Waldram
Vivienne McCalla
Eileen Cheeseman
Sally Plummer
Philomena Temple
Margaret Reeve
Rob Hanlon
Angela Quinn
Lynn Tory
Anne Taylor Davies

Derbyshire Housing Aid
British Red Cross
Derby Relate
Derbyshire Mind
Turning Point
South Derbyshire CVS
Derby Depression Club
Derby City Council
Stepping Stones Day Care Centre
Alzheimer's Society
Rethink
Derbyshire Autism Services Group
AIM
Amber Valley CVS
Relate
North Derbyshire Forum for Mental Health Carers

1. Suicide Awareness – Presentation by Sharon Lovell, Rural Action Derbyshire

Kathy Kozlowski opened the meeting and introduced Sharon Lovell from Rural Action Derbyshire.

Sharon explained that the Suicide Awareness Training project is funded by the Big Lottery Fund and is targeted at vulnerable groups. It will consist of half day training sessions for workers and the general public. It will be tailored to the voluntary sector for both staff and volunteers and Sharon will be working with SDVSMHF to organise dates and distribute information and booking forms.

Sharon is currently developing information packs and recruiting facilitators. Members should contact Sharon if they wish to be involved in this.

The project is funded until 2012, however Sharon explained that the training can be tailored and cascaded down to organisations and individuals after this date. This means that it can be rolled out to the voluntary sector over time and larger organisations may wish to buy in the training.

Click on the following link to download the Public Observatory Report which provides an update on suicide trends in the East Midlands:

<http://www.empho.org.uk/viewResource.aspx?id=11787>

Action: Sharon to send an electronic version of her presentation to Cheryl to circulate to members.

2. Meet David Gardner, Derbyshire County PCT Lead Commissioner for Mental Health

Roger Kerry introduced NHS Derby County Commissioners, David Gardner and Georgina Horobin, and thanked them for attending the meeting.

The new name of Derbyshire County PCT is 'NHS Derbyshire County'. There will be a leaving event for Graham Saxton on the 9th April 2010 at Park Hill and all who know him are welcome to attend.

David provided an overview of the funding arrangements for the county. He explained that there is £2.25 million spent on voluntary sector contracts, excluding Rethink care homes. In contrast, £18 million has been spent on just 122 private out-of-county beds. David emphasised the need for proper governance within the NHS to avoid such a high spend on low volume cases and ensure this money is invested in community services as stated in our strategic vision. The Commissioning Team are considering ways of re-investing in voluntary sector alternatives. For example David is currently awaiting approval for a scheme developed with mental health partnerships for a voluntary sector caseworker with a brokerage role to move people into community living from residential, nursing home and hospital care. He will report back to members on progress via the Countywide Forum meetings.

He pointed out that all PCTs are expected to lose 15% of their workforce this year and 15 % next year (staff that do not have direct patient contact). This perhaps most graphically indicates how tight the financial circumstances are expected to be in the NHS in this coming financial period.

David highlighted the five priority areas for the PCT: primary care psychological therapies, stroke, dementia, carers and equalities (reducing life expectancy and other geographical inequalities within Derbyshire).

2.1 IAPT

There is a recognised need to support smaller organisations and to work on better partnerships between the IAPT providers and the voluntary sector. David, Angela and Roger have discussed this and are keeping a watching brief on it. David said concerns have been expressed about the knock on effect of creating an unsustainable demand. From 1st April, IAPT funding will be changing from block to tariff, i.e. providers will only receive payment for successful treatments, and this should encourage appropriate referrals.

2.2 Stroke

The high number of deaths in the county as a result of stroke highlights the need to improve the pathway through stroke care back into the community. Pathways is a key concept presently. Commissioners wish to purchase a pathway of care. Stroke care particularly has highlighted this but its true of other areas. Voluntary sector organisations need to demonstrate how they support people after hospital and how they fit into the pathway.

2.3 Dementia

This is the only area other than IAPT to receive significant new money for mental health. There is a need for earlier diagnosis. Dementia Care Advisors are needed and this could be a key role for the voluntary sector. There is a strong argument for partnership working between the Derbyshire Mental Health Services Trust (memory clinics) and the voluntary sector.

2.4 Training

There is a need for basic mental health awareness training for non-mental health organisations, such as librarians and reception staff. Funding is available however there is a shortage of people to deliver this training. An oversight group will be developed for this purpose along with a new coordinator post. David emphasised that this provides a great opportunity for the voluntary sector to get involved.

2.5 Contracts/ Grants

David announced that voluntary sector organisations with contracts of less than £100k will receive an uplift of 1%. There is no new money and therefore commissioners need to cut expenditure and make efficiencies. The commissioning

team has reduced in size. This means that they can only work on priority areas. Commissioners will see members via the Countywide Forum meetings and SDVSMHF/ NDVA but direct contact may well be reduced. The thresholds for contracts and grants will remain the same and there will be more joint working with the local authorities. Mental health/ learning difficulties contracts will only be used for larger funding amounts.

2.6 Autism

The Autism Act comes into operation this year and commissioners are looking into the requirements of this act. It is recognised that better diagnostics and aftercare is needed. Commissioners are working on a strategy and will be organising events to publicise this.

2.7 Personality Disorder

This will include women who are victims of abuse. Improvements for offender health care are required and the Bradley report has a lot to say about this.

2.8 Eating Disorder

The voluntary sector has an underdeveloped structure for Eating Disorders and last year, two Derby groups received new money to cover loss of funding from the Big Lottery and Comic Relief. This was achieved through savings made elsewhere and not as much as either the providers would like to the commissioners think is needed for a proper stepped care model. The PCT has approved in principle increased funding for the mental health community eating disorder service but this is subject to the money coming out of tier 4 (hospital beds) costs in the independent sector. It is likely that the only funding approved by the PCT in the future will be for these type of 'invest to save' initiatives.

2.9 Crisis Houses

Casualty admittance costs the PCT £2000 per bed! David argued that this money could be better invested in other types of support to ensure better value for money and personalised care for the person. David emphasised that partnership working is needed between the voluntary sector and the Mental Health Trust to progress this idea.

Action: Voluntary sector organisations should send any ideas/ suggestions to David Gardner on crisis house and similar alternatives to admission.

2.10 Delivering Race Equality

Derby University are currently carrying out a review of the whole DRE Agenda and the results are due to be published at the end of April 2010. The report, which will be publically available, will be used to determine the future of the delivering race equality programme in Derbyshire.

2.11 Advocacy

Mental health advocacy is to be reviewed this year currently there are 4 providers with IMHA being provided by Derbyshire Mind. These services are likely to be going out to tender this year and all providers will be considered. There will be a budget of £280,000 for this service.

Angela Kerry asked David to provide voluntary sector organisations with early notice of the tender process to enable them to form partnerships and compete with larger organisations. She also pointed out that any review of the current advocacy service should be independent and transparent. David responded that there will be a meeting between all advocacy groups, before the specification stage, to provide commissioners with information about what is needed to provide an effective advocacy service. This will form the basis for the service specification.

Action: David Gardner and Angela Kerry to arrange this meeting.

2.12 Members Questions

Q. Mark Smith (Grapevine) asked 'If an organisation is part of a pathway, where does the extra funding needed come from? Is it realistic to widen the mental health spectrum, to include autism, stroke etc, with recycled money?'

A. It will depend. The number of people going into Foundation Hospitals would reduce if they received psychological therapies (IAPT), the recycled money may need to come from other budgets than mental health as per the example with casualty. This is not easy but we do need to think of ways of tapping into alternative funding and demonstrating the pathway is part of that.-but its accepted that there will not be sufficient funding to develop all the things that could be done and that is frustrating.

Q. Reg Londt (Chesterfield Over 50's) 'Both political parties are committed to drastic cuts. Will mental health be protected?'

A. There is no protection announced. New Horizons does not set targets, it gives ideas and principles. Public health funds may help provide some mental well-being projects envisaged in New Horizons There was some 'Social Prescribing' money left over from the 'Healthier Communities' project and some activities may be supported by local authorities as part of the well being strategy.

Ruth Stretton (SDVSMHF) 'Mental health awareness training will soon be delivered to non mental health providers and it is hoped that this will help bring about a change in culture and enable people to access social prescribing.

Q. Gwen Wallace (N Derbyshire Mental Health Carers Forum) 'Service Users needs continuity of care and commissioners should keep this in mind. Care plans work well for some but not all and things often go wrong in the coordination of services, particularly when people move out of area.

A. Commissioners are aiming to reduce the length of 'out-of-area' stays and bring people back to local sources with a care co-ordinator. The CPA policy is not wrong, the delivery of the policy at individual level can go wrong and there has been some incidents of a breakdown in communication between NHS workers and the voluntary sector workers and supporting people staff. There are also lots of examples where it's working well. Information sharing is essential!

Q. Barbara Marriott (North Derbyshire Mental Health Carers Forum) 'How will you bring people back from out of area?'

A. David Gardner – The Trust do realise that the PCT spends 18 million on these services and they are thinking about it commercially and getting people back makes financial sense to them. They are therefore planning what they can do to create local services as an alternative. In addition we have a preferred provider contract now with hospitals that includes requirements to get people home as soon as possible. It introduces new outcome measures such as the outcomes star and length of stay.

3. PCT Development Fund and Contingency Fund - Georgina Horobin

Georgina Horobin explained that 154 voluntary sector organisations are funded in partnership with Derbyshire County Council for mental health related activity. The 'end of contract' times are being staggered and some contracts have been extended to allow Georgina more time to draw up new ones and to spread the workload across the year

She explained the funding options, as follows:

- A non-tendered service has a funding agreement
- A tendered service has a contract
- A contribution to core funding is a grant

On 16th April 2010, there will be a joint meeting with Derbyshire County Council to look at the 154 organisations in Derbyshire and decide which of the above funding options they receive. Georgina will write to all organisations with the final decision.

3.1 Contingency Fund

Georgina explained that NHS Derby County has a contingency fund that all organisations can access and there is money in the pot that needs to be spent. The fund can be used to cover the following circumstances/ events up to £10,000:

- long term sickness
- maternity cover
- unforeseen experiences (uninsurables)
- moving costs
- property repairs
- legal costs

Applications are usually successful and over the last two years, no-one has been refused funding. Requests for funds above £10,000 will be subject to a decision by the committee.

Action: Georgina to send amended application forms to Angela to distribute to Forum members.

3.2 Development Fund

This year there is £58,000 available in the Development Fund (£29,000 unspent in 2009/10 plus £29,000 this financial year). Previously organisations have been able to bid for money for training, equipment, premises, new equipment, IT etc up to £5000.

In 2010/11 the use of the fund is likely to change and is likely to be made available to support innovative projects across the sector which are around the key priority areas e.g. stroke, autism etc. Bids for this type of project can be between £7000 and £10,000 per organisation (to be authorised by the Committee) and the closing date is the end of September 2010. More information will be available in May 2010.

Georgina stressed that, when submitting bids for these funds, organisations need to be clear about the baseline and should highlight the outcomes of their project. They should also be aware that they are competing with non-mental health organisations for this money.

3.3 Members Questions

Q. Angela Kerry (SDVSMHF) 'Has the PCT made a commitment to ensuring that savings made in the area of mental health are redirected back into mental health?'

A. David Gardner – If money is not spent it goes back into the general pot. However, any under-spend in non-mental health areas has been put into mental health e.g. IAPT. Because there is financial uncertainty, no promises have been made to protect budgets.

Q. Cathy Cleary (First Steps) had a query regarding their contract.

A. Georgina Horobin explained that an external financial body based at Wakefield now deal with PCT finances and the code is 'PMayes'. Members should contact Georgina if they have sent an invoice but haven't received their payment. Angela Kerry highlighted to members that all organisations should invoice the PCT to receive their funding and not assume that it will automatically be sent.

Q. Gwen Wallace (N Derbyshire Mental Health Carers Forum) 'There needs to be a link between policy and practice. How do we achieve this? Could we elevate the status of the care programme approach as it needs monitoring closely?'

A. David Gardner – Contracts need to be more specific and should be combined with good practice and measured outcomes.

The Care Programme Approach is pivotal in making this work however it comes under the auspices of Derbyshire Mental Health Services Trust and is not appropriate for discussion within this Forum, ie general commissioning not voluntary sector specific. However, the voluntary sector can be instrumental in recording the evidence when outcomes are not met.

Georgina Horobin pointed out that there are Assurance Groups who meet regularly to monitor contracts. Sue Hall is the main contact at the Quality Department at the PCT.

Action: Georgina to send the structure of the Assurance Groups to Angela to distribute to members

4. Suggested Topics and Dates for Future Meetings

Peter Dawson (Peak & Dales Advocacy) suggested input from Derbyshire LINK to look at ways in which the voluntary sector can link with the rest of Derbyshire.

Georgina Horobin suggested discussing the DRE and advocacy reviews.

5. Any Other Business

5.1 The 1in4 '10 Steps to Wellbeing' posters are available on request from Raj Kang at NHS Derby County. There are also banners which can be ordered. Please contact Raj on Raj.Kang@derbyshirecountypct.nhs.uk to enquire.

5.2 The 'Southern Derbyshire Health and Social Care Forum' covers wider county issues and will shortly be publicising funding opportunities. There is also an active Health and Social Care Forum in the city run by Kath Cawdell at Community Action Derby. She can be contacted at kcawdell@cvsderby.co.uk

Angela thanked David Gardner and Georgina Horobin for attending the meeting and she also thanked all members for respecting the roles of the commissioners and asking relevant questions.

6. Date of Next Meetings

The next SDVSMHF meeting will be on Tuesday 4th May at YMCA Derbyshire from 2pm to 4pm. Please submit any apologies as soon as possible to cheryl.mason@sdvsmhf.org.uk

The next NDVA Voluntary Sector Mental Health Forum will be on Wednesday 2nd June – venue to be advised.

Meeting closed at 3.40pm.

April 2010 / CM (SDVSMHF) & BW (NDVA)