

KIRKCALDY & LEVENMOUTH CHP

LOCAL MENTAL HEALTH PARTNERSHIP

Date: 12th March 2008

Present: Roslyn M Blair (Chair) Fife NHS Addiction Services
Vera Scotland, Carer Representative
Stuart Pryde, Fife Families Support Project
Jackie Hancock, Adult Psychology, NHS Fife
Dr. Chimene Taylor, GP

Apologies: Dr Judith Burgess, Psychiatrist, NHS Fife
John Dow, Today Group
Sharon Rodger, Fife NHS Mental Health Service

In attendance: Fiona Boyce (minutes)

1. Welcome and apologies

1.1 Roslyn welcomed everyone to the meeting and noted apologies given.

2. Minutes of Previous Meeting

2.2 Stuart pointed out that item 5.9 (previous minutes) should be voluntary organisation rather than carers.

2.3 With the change above, the previous minutes were agreed to be a true record.

3. Matters Arising

3.1 John Dow phoned Roslyn regarding the Pathway funding and a post has been advertised. John is going to raise this himself at the Mental Health SIG next week as it was his understanding the there was meant to be 1.5 posts, with the half post being filled by a carer or service user but that post has not gone out to advert. Only the permanent post for professional has been advertised. John will feedback to the group at the next meeting.

ACTION: John Dow

3.2 The DAPL Bid was unsuccessful at the last meeting and Roslyn has contacted Martin Denholm to inform him of the decision. Aileen White, North East Fife, LMHP contacted Roslyn to clarify the funding which was authorized for the Today Group because it may effect the funding that they may have authorized in North East Fife CHP. If they do not go ahead with the funding for the Today Group then there is a possibly that they will have £10,000 unallocated and if DAPL wanted to submit their bid to them to

work out of Glenrothes & North East Fife as apposed to the Central Region, they would consider it. Roslyn has passed this information on to Martin Denholm.

- 3.3 Roslyn has sent 2 emails to Graham Monteith, CAMHS to invite him to join the group but no response been received as yet. Roslyn says is very unusual and believes there must be a problem with emails therefore Roslyn has now sent a letter to him and is awaiting a response.

ACTION: Roslyn

- 3.4 Through a conversation with the accountant, Roslyn was informed that the ACE (Advice, Co-Ordination& Empowerment) project funding has been main streamed through Psychology but as yet this has still to be confirmed. Jackie has a meeting with Les Bissett in the next few weeks to discuss funding and will feedback to the group and the next meeting.

ACTION: Jackie/Oonagh

4. New Representative for Mental Health Strategic Implementation Group

- 4.1 Billy Moyes has other commitments and is now unable to attend the Mental Health Strategic Implementation Group meeting therefore Roslyn asked if there were any volunteers within the group who would like to attend. Roslyn pointed out that the NHS was well represented therefore Roslyn suggested the 3rd representative should be a voluntary sector or a carer representative. Vera offered to be the 3rd representative and the group unanimously agreed. Stuart stated that he will give Vera his full support if required. The next meeting is on Thursday, 20th March at 2pm in Cameron Hospital Boardroom. Roslyn will forward relevant documents on to Vera.

ACTION: Roslyn

5. Action Plan

Roslyn distributed a partial template of the action plan to the group members at the meeting. There are still 12 more items to be added from the Carers Priorities document. Circulate Carer priorities document to Dr Taylor.

ACTION: Roslyn

Roslyn will compile all information discussed at today's meeting into the action plan and will circulate by email. There are still 4 big areas (Service User, GP, Adult Psychiatry & CAMHS) to input into the action plan before editing can begin and look at priorities.

The group agreed to complete the sections relevant to their area for the next meeting.

- 5.4 Summary of additional action plan items:

- 5.4.1. ACE – Non-recurring funding and priority for talking therapies component of Delivery for Mental Health.
- 5.4.2 Child Psychology issues – Jackie received an email from the Head of Child and Family services Primary Care. They aim to employ clinical associates in applied Psychology for people who have done a 1-year MSc. in Cognitive Behavioral Therapy in GP Surgeries for brief interventions with Children and Families at Primary Care level. They would like on-going funding to support this. There are long waiting lists in Child Psychology.
- 5.4.3 Primary Care – The adult section of Primary and Secondary care put in a bid last year for a Psychologist to work with the Local Mental Health Teams in Kirkcaldy and Levenmouth which didn't get funded. There is no-one currently working in Levenmouth for sever and enduring mental health at the moment so this is a gap in current service.
- 5.4.4 GP Issues – Day hospitals are an issue as patients with sever mental health problems get discharged and referred to day hospitals for further support but because it is in Kirkcaldy and it is a long way to come, they fail to engage. Senior Nurses in GP Surgeries would be beneficial. Accommodation/lack of facilities continues to be a pressure. It would be ideal to have a new build one-stop shop (including diabetes, smoking cessation etc to prevent stigmatizing) in the Levenmouth area.
- 5.4.5 Adult Mental Health - Dementia support is a current gap in service as when people have been discharged from hospital there is no follow up help, especially for carers.

Ken pointed out that Mental Health is still a 9-5pm service. 24-hours is more realistic to cover all needs (out of hours service). There are no teams to prevent admission, no community safe houses or support to people in their own homes. None of these resources are currently available. A scoping exercise is currently in place evaluating an out of hours nursing service dealing with admissions at night and a Doctor covering a wider area similar to the self harm team. A report will be available in a few months.

- 5.4.6 Stuart informed the group that there is a scoping exercise to look at the differences between volunteering and befriending vs. paid support. He will keep the group informed.
- 5.4.7 Substance Use – Promoting integrated practice between mental health and substance use services should be a key priority for the action plan.

6. A.O.C. B

There is an Acute Nursing Forum on 2nd April 2008 in the Boardroom of Stratheden. Stuart and Ken are attending and will bring information back to the next meeting. Roslyn asked if it could be noted that 1 or 2 Specialist beds for substance use should be considered in any redesign.

ACTION: Stuart/Ken

7. Dates of next meetings

9 April 2008	Seminar Room, WBH	10am -12noon
28 May 2008	Seminar Room, WBH	10am -12noon
9 July 2008	Seminar Room, WBH	10am -12noon
10 September 2008	Seminar Room, WBH	10am -12noon
26 November 2008	Seminar Room, WBH	10am -12noon

Minutes taken by Fiona Boyce