**Minutes from the Co-Production Network Meeting held on Monday, 9 March 2020 from 10.00am to 1.00pm at Canada House, Barnsole Road, Gillingham ME7 4JL**

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| **Members:** |

Nick Dent Patient Experience Manager (chair staff)

Dr. James Osborne Consultant Psychologist, Lead for Psychological Practice, Secondary Care Psychology & Specialist Personality Disorder Services

Sue Gadson Occupational Therapist Clinical Lead, Older Adult Inpatient Services

Sarah Rodgers-Smith Locality Manager DGS/ Swale Community Recovery Care Group

Louis Coelho Carer

David Hough Expert by Experience Research Group, Service User Representation Forum (co-chair)

Kamila Lobuzinska Patient Engagement Coordinator (notes)

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| **Apologies:** |

Cheryl Ives Canterbury & Coastal Rethink Carers Support Group

Darren Foot Exert by Experience Research Group

Steve Armitstead Engagement Worker, User Voice, MEGAN CIC

Celia Ede Carer

Zena Watson Commissioner, NHS West Kent CCG

Jacqui Davis Mental Health Programme Manager Kent and Medway Sustainability and Transformation Partnership

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| **Welcome, Introductions and apologies** |

Nick Dent welcomed everyone to the meeting and introductions were made. Apologies for absence were received and noted as above. Noted that we did not have a quorum and the meeting could proceed but no decisions could be made.

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| **Minutes of the previous meeting** |

The minutes of the last meeting were agreed as an accurate record of the meeting.

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| **Action Log and Matters Arising from the minutes** |

Outstanding actions from the previous meeting:

* Louise Jessup attended a master class around coproduction and she is awaiting a presentation from Imroc; to share that document with the group – **ongoing**
* To invite the Recovery College reps to the next meeting – **ongoing**

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| **Past Work** |

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| **Personality disorders workshop and developing PD services** |

James Osborne is a Lead for Psychology services across the county and a clinical lead for Personality Disorder pathway.

KMPT held a workshop in January focussed around the language/terminology of the new Personality Disorder pathway, safety and the interface between acute and community pathways for this client group. A number of people who have received a personality disorder diagnosis or are caring for someone who has a diagnosis were involved.

David Hough asked how many service users attended that workshop; they had 30% of people with lived experience attending which added a strong voice to the conversation; it was also facilitated by an external partner rather that an internal person.

James advised that the agenda was set up around language; they focused on labels for Personality Disorder diagnosis; some people from audience liked their diagnosis whilst some people felt they were treated differently; David shared a comment that his diagnostic label is not considered good but the treatment he receives is fantastic; Nick added that many service users on his table were comfortable with language and diagnosis, and these are people who have been through the Brenchley Unit and had a good understanding what the label means; James added that they were trying to define the PD pathway, learn more about the experience of treatment and the journey of using the PD pathway; and consider staff’s experience of terminology and the pathway

James wrote to delegates with the top five ideas from the workshop; he also did a national benchmarking and found out most Trusts have not deviated from PD terminology although some moved to complex emotional needs or difficulties; David added suggested that a new term could bring new ways of supporting people, Sarah Rodgers-Smith added it could lead to less stigma and a structured pathway for people.

James presented an Intervention of treatment graph to support people with PD; they plan to structure the PD pathway to have more psychological support; different interventions were discussed; the Trust offered these interventions before but there wasn’t a clear pathway

James advised that this graph needs to be translated to more meaningful language for service users and statutory groups; he asked to group to support that request; **Action James** to share that document with the group; David suggested organising some local events around it

James mentioned that we need to have better mental health provision in primary care and in the next 2-3 years we will see a drive in those interventions in primary care; he aspires to co-produce this and would like to invite someone with Personality Disorder diagnosis to go with him to events to talk about their experience, it would be nice to have a lead around PD pathway so voice is co-produced; Nick will raise it with Expert by Experience Research Group members

Nick added that engaging with non-statutory sector would be good, providing some training would be welcomed by voluntary organisations, many of whom had asked to attend the workshop thinking that it was training, and also highlighted that the KMPT Recovery College would be a good vehicle to provide that training

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| **Coproduction in Swale** |

Sue Gadson, Occupational Therapist Clinical Lead, Older Adult Inpatient Services talked about the co-production project in Swale around diagnosis of early set of dementia; they hold a focus group for individuals with diagnosis; as a result of that project they developed an evening group for individuals with an early set of dementia and their partners (the group decided the venue and time); they have also liaised with Age UK and invited them to their group meetings; this group is running for over a year now; Sue added that they also have a group for people with physical impairments; their members organize a walking football and it’s been going for 3 years now; KMPT facilitate these groups only; members of that group co-produced care plan leaflet for Older Adults; ‘Your Care Plan’

Sue highlighted that what is missing from their work is a wider co-production; they are trying to involve KCC; David suggested that a leaflet explaining this group objectives and the service users involvement booklet could be shared with her group members; he would be happy to visit that group

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| **BAME project update** |

An update was given by Nick Dent on this Quality Account priority: to improve experience of KMPT care for BAME service users. The new plan was to conduct telephone interviews of BAME clients and write up report but Information Governance would not allow release of BAME service user contact details due to confidentiality. The group is now considering organising workshop/event with BAME service users invited by their care coordinators, BAME staff network members, and BAME project participants, to discuss issues and recruiting clients via care coordinators etc. in the new financial year.

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| **Discharge project update** |

An update was given by Nick Dent; Quality Account priority: To improve service user experience of Discharge planning and process.

* Discharge from inpatient care back into the community; My Safety Plan and Discharge checklist developed, it was piloted on Fern Ward in January; staff very positive, particularly with discharge checklist; Fern Ward continued after the end of pilot; aspire to spread across acute and on older adults wards
* Discharge from secondary care back to primary care); 4 session Transfer group piloted at Thanet Community Health team, The Beacon; group started on 6 February; evaluation will include participants feedback at beginning and end of group and interviews with referring staff; report will be drafted; a few people who attended that group didn’t know they were being discharged; people needs to be aware they are being transferred out of KMPT care

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| **Looking forward** |

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| **Engagement in Smokefree Trust** |

The group received a request fromMichele Streatfield, Lead Nurse, Physical Health; KMPT is a smoke free trust, which means for the purposes of health and wellbeing, we do not allow our patients, visitors or staff to smoke on trust property and surrounding areas; the Trust offer a variety of Nicotine Replacement Therapy (NRT) and support; they are currently reviewing the smoke free policy and ask for any suggestions by this group

* David Hough has attended the Smoke free group for two years now, there are some difficulties with implementing the policy (i.e. policing people who smoke); the aim of the policy is to stop smoking, support people and promote cessations

It is hard to say to inpatients that they cannot smoke; there are legalities for people requesting leave to have a cigarette; it was suggested that the Smoke Free group attend the Patient and Carer Consultative Committees

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| **Supporting Trust leadership development** |

Nick Dent advised that Workforce Information and Organisational Development are seeking a patient to join the Leading the Way programme for the Understanding the Landscape session on 25 June; they also secured some funding to record stories of various staff and stakeholders as part of a ‘standing in their shoes’ project - these would be short insights into the lives and experiences of those people, recorded and then used in various training activities for staff; Nick asked network members to let him know if people are interested in participating

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| **Co-production workshop, meeting the needs of BAME service users** |

Nick mentioned Working in Mental Health with People from Black, Asian and Minority Ethnic Groups report written by Hari Sewell; the plan is to invite Hari to support a workshop for BAME service users and staff to consider the experience of BAME service users currently receive, and where we can make improvements; this will be arranged in a new financial year

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| **AOB** |

Sue enquired about Lifesize programme (audio visual programme used by the Trust) and how to use it, it was suggested to contact IT department

Sue said that teams attending recruitment fairs, going to schools and it would be good to have a person with lived experience supporting that work; Nick mentioned Participation and Involvement Strategy which aims to have a recruitment campaign and get more people involved; the Trust also have a Payment Policy for people with lived experience undertaking work for the Trust

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| **Date of the next meeting** |

Please note that face to face meeting will not be held until the current contact restrictions have been lifted. For more information please contact [kmpt.patient.experience@nhs.net](mailto:kmpt.patient.experience@nhs.net).