Making Recovery Real in Moray Partnership Meeting

Tuesday 29th June 2021 10:30 - 12:00

Present: Pauline Forbes, Martin Kirwan, Susan Johnston, Chris Ritchie, Tracy Grant, Fiona Imlach, Nadine Weiland-Jarvis, Lucy Morrison, Ailsa Innes, Paul Johnson, Holly Hendry, Heidi Tweedie, Susan McRitchie, Louise Penfold, Becky Poyner, Jarrod Leach, Pamela Cremin, Aimee Wright

Apologies: Darren Bruce, Anne Pendery, Kirsteen Pyett, Elidh Brown, Annabel Ross

Chair: Pauline Forbes

Minutes: Aimee Wright

Organisations / Perspectives formally represented:

Lived experience of MH challenges. - Young people & adult perspectives. tsiMORAY Police Scotland Moray Wellness Service (Penumbra) DBI Service (Penumbra) Scottish Recovery Network Circles Advocacy SAMH Aberlour Child Care Trust Children 1st Quarriers Care Support Service Moray North East Suicide Prevention Team Moray Wellbeing Hub CIC HSCM (Health & Social Care Moray)

- Commissioning
- MH social work
- Psychological services
- Public Health Coordination

Actions from meeting:

- All: Consider key questions to ask the community during conversation café events.
- All: Review webpage and send development feedback by email.
- **Heidi/Aimee:** Upload terms of reference to webpage, along with public minutes and news story.
- All: Suicide terms of reference to be reviewed and feedback by email to Paul Johnson by close of play 13th July.
- **Paul:** Set first meeting date for task group, following TOR agreement.
- Louise: Check Moray information is up to date in suicide app.
- All: Email Pam with Intelligence on any gaps in service.
- Heidi: Email to discuss survey options and questions for partners survey 2021.
- **Kirsteen/Susan**: Arrange meeting to discuss Health and Social Care workforce training.
- Aimee: Email all partners for volunteer to chair next meeting.

Agenda for Next Meeting:

- Supporting people who are intoxicated and suicidal Anne P
- Webpage and communications Update Heidi

Previous Meeting Minute:

- All minutes agreed.
- Minute from 18/05 wrongly omits apology for non attendance (communicated to group 17/05) from Martin Kirwan.

Meeting Topics:

1. CHIME In

Holly Hendry, Network Officer North (Scottish Recovery Network): Feeling Hopeful, partnership in great place, terms of reference in place and admin support working well. Lovely to connect with all.

Chris Ritchie, Champion and Director (Moray Wellbeing Hub): Hopeful and excited massive brains captured in this group.

Susan Johnston, Area Public Health Coordinator Health Improvement (Health & Social Care Moray): Current standing in, hopeful new appointed area public health coordinator will be attending next meeting, feeling excited and enjoyed last meeting.

Martin Kirwan: Feeling hopeful and great to be reconnected, feeling a little unclear around identity due to change of roles. Background in suicide prevention great to see it driving forward. Also a little unclear on identity of group as mission has expanded form original group.

Ailsa Innes, Advance Practitioner Mental Health Team (Health & Social Care Moray): Feeling connected a lot happening at present with different agencies/family members/services users all working together.

Tracy Grant, Services Manager (SAMH): Feeling connected to group and surprised how much the group has grown, not a bad thing.

Pauline Forbes (Penumbra): Feeling connected, very happy with the admin support.

Louise Penfold, Suicide Prevention Development Officer (SAMH): Feeling hopeful.

Aimee Wright, Administration Support (Moray Wellbeing Hub): Happy and optimistic.

Becky Poyner Community Liaison Offer (Moray Wellbeing Hub): Sense of connection and happy to be apart of the group.

PC Jarrod Leach (Police Scotland): Work with the Moray Council Community Safety Hub, feeling optimism and pride in services Moray offers and the way Moray is spoke about in other partnership meetings.

Pamela Cremin, Integrated Service Manager for Mental Health Services and Drug and Alcohol Services in Moray (Health & Social Care Moray): Feeling connected and pleased to see good group membership with great diversity. Topics covered are all upstream work and prevention and intervention is powerful and meaningful. Exciting time for Making Recovery Real in Moray Partnership.

Paul Johnson, Drug and Alcohol Partnership Manager (Health & Social Care Moray): First meeting for a while looking forward to reconnecting to group and taking forward exciting

opportunities from Scottish Government. New area of work in Suicide Prevention looking forward to sharing expertise with other partners in group and also supporting each other with common interests.

Fiona Imlach, Senior Family Wellbeing Worker (Quarriers): Feeling hopeful around suicide prevention, has lived experience on subject and passionate to share services.

Nadine Weiland-Jarvis, Support Manager DBI Moray and Aberdeen (Penumbra): Feeling hopeful and optimistic. DBI are starting process of 4th Pathways for GP referrals. Hopeful with Covid-19 restrictions easing face to face can resume over next few months when appropriate.

Susan McRitchie, Social Worker Unpaid Careers (Health & Social Care Moray): New in post and hopeful that the correct support is in place for unpaid careers.

Heidi Tweedie, Champion and Director (Moray Wellbeing Hub): Delighted to see so many members and big topics coming up.

2. Matters Arising

A few actions from the last meeting. Most are covered in the body of the meeting all happy to discuss as they arise.

MMR Partners Meeting on conversation cafes took place and went well, will begin to roll out in the coming month. Plan to roll out across different localities will discuss in more detail at next meeting. Dates being finalised this week and Heidi will look for partners who are keen to join and participate in events via email.

Teams conversation took place between Nadine and Aimee new Teams link to follow after today's meeting with new meeting link.

3. Webpage Review and Communications Update

Some partners have not had the chance to review webpage in advance of meeting, those who have looked found it very useful and accessible.

Action for all to look at webpage and send development feedback via <u>hello@moraywellbeinghub.org.uk</u> email.

4. Terms of Reference Finalisation

All partners have now received Terms of Reference and Group Agreement. It is a process that was developed by a small working group at end of last year and brought back to the MRR partnership to be finalised. Elidh Brown sent to Pam and Simon to be agreed for accountability and this has now been illustrated by diagram in document.

Great example on how the Partnership can work on specific focused projects.

Important to see the empowerment coming through and people working together to share their expertise, knowledge, and speciality.

Heid would like to thank all who contributed and worked hard on creating this document hopefully, it is now clear to a wide audience. This can now be included on the webpage and in a news story to promote along with the public minutes.

5. Commitments and Strategic Delivery

During the remobilisation from the pandemic everyone is coming together. It is a significant time of interest from the government and partners in making sure mental health provisions are responsive and accessible to all. Services to recommission, such as the wellness centre, drug and alcohol direct access service.

Recovery and renewal funding coming in from the Scottish Government. Pam would like to discuss with MMRP to ensure collective decisions are made on what should be invested in across Moray.

Mental Health Strategy was written in Moray in 2016 and then the national pandemic hit. Exercise took place in 2019 to ensure it was still relevant, all agreed principles are still relevant.

All to consider key questions to ask the community during the conversation cafes taking place over the summer.

6. Suicide Terms of Reference, Membership and Survey

Paul Johnson has been asked to support the delivery around suicide prevention. Based on discussions that have taken place Paul is looking at how to raise the profile of the work already happening in Moray. A lot of strong commitment in Moray to drive this forward. Looking for ways to enhance current work and work together to understand areas for development. All agree current strategy in place is relevant and new strategy is not required but may need a few tweaks or revisions.

Importance of linking up drug and alcohol with mental health. Looking at some exciting commissioning opportunities.

Consideration into the current understanding of the specific quantifiable actions that are being delivered around suicide prevention. Paul suggests looking into quantifiable actions and document the explicit work that is being done.

Tasking work is required to help in driving forward the specific actions that might be needed to deliver and enhance the current work. Suggestion of a task focused working group to link the work around a survey to establish the explicit work and identify any gaps. Small task force group to be created.

The survey will need multiagency engagement, hopeful to receive information back from those who are providing services and views from the public. MMRP have good links to community groups, and links to the public to support promotion of survey.

Terms of reference shows the reporting line from the task force group would lead into MMRP.

Paul is an excellent asset to the MMRP to lead on this work. Paul is open to working together co-productively in preparation for us today and the terms of reference for the suicide prevention working group that would sit under MMRP.

Take some time over this if you can. The actions suggested are welcomed however there are some tweaks and a bit we need to clarify, but it's a great start Paul has done with the terms of reference and survey. Exciting to get the working group moving forward and celebrate tangible/explicit work already being done and gaps we can identify together to solve.

If anyone would like to attend the working group please get in contact with Paul Johnston. Martin Kirwan would like to volunteer to participate as he has great expertise in training for suicide intervention and prevention very keen to get back to face to face. No timeline for this to return yet awaiting approval from Public Health Scotland. Hopeful to offer some courses towards the end of the year and next year.

Great examples of online courses from SAMH 1 hour course - introduction to suicide, Moray Wellbeing Hub 3.5h SIPP was delivered last month and was very successful with 18 attendees and also a number of individuals including parents attended ASK workshop around children and suicide ages 5-15. This will be used to reflect on and create a SIPP around young people, an identified need as well for a version of something for young people by young people.

Timeframe for completing this work 13th July 2021. First meeting date to be set following the completion of terms of reference. Membership may need to be reviewed after first meeting.

Pam unable to be a part of the group, suggests it is for people to feel empowered to engage and join the group bringing diversity of skill set. If there is a skillset missing Pam is happy to discuss and find the right person with the right expertise to join group.

Heidi is happy to support having lived experience appropriate membership. Membership should be inclusive to members of this partnership. Heidi is unsure how she will be able to support all the suicide awareness work going forward short term as funding has ended. Heidi is in the process of trying to find resources to support MWH on this topic. Pam has advised this is something they could look at as part of the recovery and renewal funding, maybe some opportunities.

7. Suicide App Update

The material has been sent to the app developer and will come out in the July update. Louise will double check the Moray updates have all been made. More promotion merchandise will also be available to promote closer to the time.

8. Government Future Funding and Linked Primary Care Working Group

Post pandemic the Scottish Government wish to renew mental health delivery across Scotland. Subject to a new fund – Renewal and Recovery funding, Pam sent letter received to partners. This is an initial tranche of money specifically for the Grampian wide service for child and adolescent mental health, around psychological therapies, reduction of wait times and improving access for people. Likely to invest in primary care psychology with the funding. Service remobilised at start of April, looking into how the service is taking on referrals. New system in place in terms of how service is accessed, self-referrals go through the psychology resilience hub and new triage system. People have three assessment appointments and then accepted to a primary care psychology service or sign posted to other metal health pathways. No waiting list but have received a lot of referrals. Letter is very descriptive around psychological therapy but will include investment in DBI. Looking to role out within GP practices and there may be some issues arise around capacity.

Post covid demand is likely to be high due to individuals different set of circumstances.

Would be good if everyone can have a think around where the tranche should be invested. £86000.00 in the first fund this year, might have to add further investment to DBI and capacity.

At the national Health and Social Care Conference the new health minster advised more funding tranches will be coming with the Recovery and Renewal fund. Letter expected with further details in next few weeks. Need to look at where we allocate this funding.

During and post pandemic the referrals to secondary care are steady. Seeing a lot more people who are more mentally ill, is that due to people not having upstream treatment? And then becoming mentally ill? Long term patients are presenting more illness than have been previously. Is this due to the pandemic experience and services unable to reach in same way have in past?

Teir 3 and Teir 4 are doing very well. Required upstream in the community and in the pathways (Tier 2) care when people need it to prevent further illness that requires specialist intervention.

Referrals that come into general practice have a 30-50% rejection rate due to not meeting criteria for specialist service. Sometimes this is down to choice as traditionally people would of preferred to see a psychiatrist rather than some of the other options available such as wellness centre or DBI.

We require to reengage with the population of Moray who use services, partners and lived experience to agree where funding should be invested.

Mental Health in Primary Care general practice have come together to discuss the upstream of intervention and prevention. To ensure everyone is signposted to the right place.

Alcohol and substance issues associated with individual's coping decisions are present in most police reports alongside expression of suicidal thoughts, plans and actions. Close discussions are happening around this as a priority area. This is explicit in the new Medication Assisted Treatment Standards, and future priorities for Moray in the ADP Delivery Plan.

Public protection thinking about how we support families, need to become more integrated with more workstreams.

Choice of service is something currently being worked on as part of the pathways that the GPs have a sense of ownership for. One challenge noted is awareness and lasting use of the tool. We are getting better at this but always improving at MWH. Really need all partners help to ensure their sections are up to date and appropriate level for the tool. More banners will be going out in the community this summer.

Tracy highlighted a discussion that had taken place around gaps in services, lack of services for young men and men. Men's shed isn't operating face to face. Also lack of technology and technology usage and ability. Heidi advised there are great people who can support with the role out of devices, however the challenge is around connectivity in rural areas.

Louise advised SAMH are currently running a peer research pilot to look at incorporating the views of lived experience of suicide prevention from all different walks of life. Very early

stages and is being supported by See Me and being run through our lived experience sub group – Chris, Heidi, Pauline and Nadine sit on the sub group.

Partners from MMRP group to send Pam an email where they believe there to be any gaps in service with intelligence and Pam will reflect on this.

9. Anchor Ligature Work at Ward 4

Anchor ligature work at ward 4 required as health and safety have served an improvement notice on NHS Grampian around removing anchor weight baring ligature points in patient adult wards in mental health. NHS Grampian have a process to identify ligature points that patients could use to harm themselves while receiving acute care. Modification has taken place and have been removed or upgraded. Despite the work already undertaken Ward 4 still doesn't comply with legislative requirement. Some of the work required is significant as it includes the ceilings, windows and A/C replacements. Will have to empty ward on a temporary basis, need to option appraise how to manage inpatient services in Moray. Are the services going to have to be decanted to other units in Aberdeen or Inverness or 24/7 mobile crisis response team to manage people at home with some beds available in other places for those in most need.

Pam is looking for representation for a ligature programme group in Moray, take forward option appraisal and agree what to do with service temporarily while work gets carried out. Tracy is happy to volunteer to be apart of the group. Ailsa is also interested in this and looking at who could represent encase she is called to other commitments.

Remobilised service development groups within the service, Kirsteen has been leading and looking for some lived experience and carer support.

Overall importance is to maintain Mental Health access for people in Moray and agree right pathways for inpatient beds. Usually would be able to move across the site to different locations within the hospital however this is not an option due to legislative compliance.

10. Partner Survey 2021:

As administrative hosts MWH are keen to support survey but not yet clear what we want as partners for 2021. Focus on partners themselves or community? What are we asking? We are starting the community outreach for the summer next week and would be useful to plan what happens next on listening to experiences out there. Heidi to follow up discussion with email.

This will not affect suicide survey or working group.

11. CHIME Out:

Ailsa: Feeling more connected and hopeful of partnership working. Huge step in the right direction.

Aimee: Hopeful and Connected and a little frustrated with technical issues.

Martin: Great to reconnected, hopeful and empowered, looking forward to contributing to group and suicide and prevention.

Becky: Feeling connected and looking forward to work over summer.

Chris: Really excited, looking forward to work to come.

Fiona: Hopeful and connected.

Heidi: Hopeful, frustrated by technology, excited to hear lots of actions.

Jarrod: Thanks and fantastic meeting, enthusiasm.

Nadine: Connectedness, nice to be involved in Moray.

Louise: Connectedness.

Pam: Connected and feeling of empowerment from partners.

Paul: Thanks for opportunity, looking forward to getting on with work.

Pauline: Connectiveness, great meeting.

Next Meeting – 10th August 2021 1030 -1200 Next Chair – TBC Minute – Aimee Wright