

## **Making Recovery Real in Moray Partnership Meeting**

Tuesday 13th June 1:00-2:30pm

Online, Teams

**Present:),** Kirsteen Pyett (Health and Social Care Moray), Carol Smith (Moray Wellbeing Hub), Tracy Grant (SAMH), Jonathan Davis (Police Scotland), Jan Marwick (Scottish Recovery Network) Holly Hendry (Scottish Recovery Network) Eilidh Brown (tsi Moray), Karen Dunnett (Penumbra DBI), Jade Archibald (Penumbra DBI)

**Apologies:** John Webster (Police Scotland), Lynn Dowsett, (HSCM) Ailsa Innes, Kirsteen Carmichael (Health & Social Care Moray); Martin Kirwan

**Chair:** Heidi Tweedie (Moray Wellbeing Hub)

**Minutes:** Carol Smith (Moray Wellbeing Hub)

### **Organisations / Perspectives formally represented (strike through not in attendance at meeting):**

Lived experience of MH challenges.

- adult perspectives.

tsiMORAY

Police Scotland

DBI Service (Penumbra)

Scottish Recovery Network

~~Circles Advocacy~~

SAMH

REAP

~~Arrows~~

Findhorn Foundation

~~Children 1<sup>st</sup>~~

~~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

- Mental Health Practitioners

Digital Centre of Excellence

<b>ACTIONS FROM THIS MEETING</b>	<b>OWNER:</b>
1. Carol to follow up on pathways updates with tech team at MWH	Carol
2. All to think about communications to community regarding ward 4 decant	All
3. All to bring ideas of how the group can adapt given present funding circumstances	All

<b>AGENDA FOR THIS MEETING:</b>	<b>OWNER:</b>
1. Chime In	All
2. FIXED – overview of terms of reference	Chair
3. Update on Actions	All
4. Events planning/ Any other business	All
5. Provisional - Discover Pathways Overview	All
6. Chime Out	All

**Previous Meeting Minute:**

Agreed in advance by email and amendments contact [carol@moraywellbeinghub.org.uk](mailto:carol@moraywellbeinghub.org.uk)

Public versions available at <https://moraywellbeinghub.org.uk/making-recovery-real/>

## **1. CHIME In**

Kirsteen P – hopeful for connection

Carol – hopeful for connection

Holly – hopeful, nice to connect and see faces I haven't seen in ages

Jonathan – Sipp officer, connected today, have Aberdeen and Moray meetings today, and calling colleagues in Ireland too

Jan – SRN, just started, feeling connected,

Tracy – service manager for SAMH, 5<sup>th</sup> teams meeting today, extremely connected but extremely overloaded

Heidi – feeling full, hopeful for an action focused meeting

Eilidh - My CHIME: connections, lots of connecting threads today

Karen Dunnett – penumbra joined 1:30 hi we are also hoping to see lots of Connections in Moray and see what is out there to offer the people we are supporting

Jade Archibald – joined 1:30 penumbra

### **Next Meeting Chair & Time Confirmation**

- Tuesday 18<sup>th</sup> July **10:30 – 12 noon** on Teams
- Chair – TBC

### **2023 Dates: – all meetings scheduled for 10:30am – 12 noon.**

1. Tuesday 18<sup>th</sup> July
2. Tuesday 22<sup>nd</sup> August
3. Tuesday 26<sup>th</sup> September – in person TBC
4. Tuesday 7<sup>th</sup> November
5. Tuesday 12<sup>th</sup> December – in person TBC

## **3. Actions**

- 1. Carol to get monstars, pens, leaflets to Kirsteen C for Healthpoint stalls**

DONE

- 2. Carol to contact UHI re space for MH Week**

Not available, could not proceed with anything for MH week this year

- 3. Carol to take suggestions about pathway updates to MWh tech team**

discover pathways. – Mikeysline – not on there, can we also add in something more about what to do with someone – safety planning on google, e.g. Samaritans risk assessment, to help self-direct someone if needed. Roman Kemp – documentary, showing scenario. **Creating a 'safety plan' | Samaritans. ACTION**

growth deal links to pathways – Heidi will give update later on this.

#### **4. Invite Carmen to next Meeting**

Carmen is on mailing list so receives notification, checked and the mailing did go through to her email  
Heidi can give update on SPCG

#### **5. Discuss how best to review outputs from developments days to document deliverables**

Spoke at previous meeting about looking at deliverables that we could use to focus us for going forward

#### **6. Follow up on Social Isolation and Loneliness Fund application – Heidi**

Didn't manage to put in an application for this one.

#### **7. Collate QR codes for Street Pastors bus**

Hold for Eileen Rennie updating

#### **4. Events planning/ Any other business**

Holly Hendry – SRN, have changed quite a bit since last attended, org has grown, now have an ops manager, project coordinators and officers. Recently recruited some new people. Developing new programmes. Making Peer Practical – action based for small orgs, grass roots, starting to deliver peer support, support 10 orgs. Share learning is another programme – thematic 1 – peer led in the community 2 – peer support and services 3 – peer support and training. 3<sup>rd</sup> programme – commissioned by scot gov, to deliver creating hope in peer support, building community led peer support. Process of codesign and co delivery, shared learning, networking events, shining light on practice and innovation across Scotland. Bringing everyone around the table to deliver together.

Kirsteen C – MH & W now fully staffed after a long recruitment process, have 5 FT equivalent practitioners., each GP practice has one attached to them. Trying to prioritise creating equity amongst delivery and accessing appointment. Sticking with 1 hour appt, has been queried that could shorten appt time to see more people. Is flagging up gap for brief short-term help. Need help to make the connections to social prescriptions. Need is high for service, different wait times at each surgery.

Interim Service Manager – offer has been made, in negotiations. 12-month secondment, hopefully be in position by mid-summer.

Elidh – PB Just transitions roadshows coming up, end June 1<sup>st</sup> week of July, chance to be out and about in the community, opportunity to connect with communities. Still have the CMH W fund to promote as is still running. Hopeful will be less hectic, had 4 funding streams running at the last roadshows, not as hectic this time round. Next H & W meeting is next week. Reflect on last C & YP

forum – presentation and screening at the start, looking at something that reflects change and change that is needed, how well do environments help C & YP and how can they help the curriculum, how can PA and sport fit in. really positive meeting

Tracy – very busy, still working without a waiting list, seeing people when they request, SAMH centenary year, exciting plans coming soon. Still working with YPI – Buckie High School and Gordonstoun, presenting later this month. New member of staff starting later in June.

Jonathan – SP in Moray is now really cracking on. Highest rate of suicide in Moray, steepest rate of increase. Attempted suicide calls to police have doubled in the last year. Clearly something going on in our communities that we need to look at. Nelson St. Aberdeen – officer coming from Tulliallan, pilot areas identified to carry out additional training to these new recruits. College is focused on legislation. Need to look at how to engage with someone who is so distressed, how to meet their needs. Continue to map service in Moray – how and where we share information, ways of improving this, looking to work together to support each other, facilitate each identify the gaps and fill those. Personally, have now completed ASSIST. Incredible course, really hard. Have an additional 6 trainers in the NE now, looking forward to getting courses set up for further training. Contributing factors – relationship breakdown, mostly in men high percentage for death by suicide, chronic illness, higher in males also, chronic pain in females very high. Most prescribed - men given anti-depressants, women sleeping pills and sedatives. Cost of living having an overarching increase in stress and distress in communities. We are better at tracking contributing factors in females than males, feel there is something we are missing in society causing distress in society.

Karen – mental Health & wellbeing practitioner for DBI for Moray and Aberdeenshire, really busy just now supporting short term is quite difficult, people coming at such a high rate of distress, guessing there is a shortage of things in Moray, finding it difficult to signpost to things in Moray. Hoping to make lots of connection with what is out there in Moray. Trends – cost of living, not knowing how bills are going to be paid, Jade added that relationship issues are high, trauma, money worries on the increase, emotional wellbeing, and life coping skills. Lot of people feeling very desperate and seems to be a wide gap to signpost people to to help with this. KC advised significant shift for penumbra team now covering Moray also, numbers so high for covering additional areas. Congratulated on doing this.

KC – promotion of self-management, community-based support so important, test of change social prescribing for mainstream community-based resources. Wondered how male MH groups are going, Walk and Move and R4G men's group.

H advised from speaking with Will, not sure that numbers have picked up Steve from SoBS also indicated that numbers are low.

H advised peer support drop ins numbers really low, test of change at Forres going better. Chime for Wellbeing also had low numbers, even with connecting with MH & W practitioners.

Tracy – referrals, a lot of them coming in are for young men, trying to get them to a place to be able to engage with the groups, so much work to do to be able to get people to a place to be able to join these groups.

K just worries if not much of an uptake these groups will not keep going.

H – with what K noted about the MH & W P – potential for linking up with community connector from MWH. Brought Sport project, led by sports development team, have 9 clubs across Moray signed up, reducing barriers for people with low mental health joining. Active recovery football –

doing well, also walking football expressed lots of grief within their members – men losing their wives.

J – really encouraging to hear that there are so many groups. J attended seminar in Glasgow, SAMH, no evidence whatsoever that preventative steps for men in terms of SP actually work. So much of that is because, males worth is portrayed by what society deems they're value. Important to do meaningful activities, give a reason to keep on living this is how they are defined. Gender barrier with 'health' getting access to primary care, prescription. Suggest shift to 'fitness' Sit on a healthy living, group, programme for providing service for those referred from dietician, 1 male attended, said they had aerobics, men don't tend to attend these.

H – update from Moray Wellbeing Hub. Early access front door growth deal – plumbing for digital service for self-management, living labs, Karim usually updates us on this. Taking in learning from other things, will have something to test in future. Creating conversations rather than just signposting. Think need to weave the gender barrier Jonathan has mentioned to the next meeting. Discover pathways – need to get up to date numbers on use, it is well used within community, don't have a specific resource for this, just updating as and when can.

Ward 4 decant – due to ligature work required and MRI being added to Dr Gray's. Have been looking for accommodation for 18 bed and 8 bed older person ward replacement while work goes on. Muirton through in Buckie – current older people ward, needs some remedial work to then house those 18 beds required. Seafield facility in Buckie – some remedial work required for it to be able to home the 8 other beds. Take to MRRP – any actions/ suggestions to communicate to the community about this. Wanted to make sure this was not a shock to the community and increase distress and becoming another factor increasing overwhelm. MWH is a mechanism to share this info and link with MRRP, still the critical friend to have lived experience voice there. Richard Lochhead had mentioned in press also. Want community to realise but not shout it at them that this is happening. Will be doing sessions for the workforce, 'a day in the life' of the workers to see what happens on the ward. Asked if previous inpatients could have input into this, yes. SAMH, quarriers, circles could support, engagement.

Alistair Pattison is happy to come to any groups, to give an update on what is happening. Any thoughts around this – please get in touch with Heidi.

Community Research network – do have partners keen to take this forward. MRRP currently linking in with this. Carmen has offered admin in kind. No funding for MRRP from August. MRRP are behaving like a CRN, collecting data but would not be feasible to run the CRN and MRRP through same funding, may be able to support MRRP with funding if going ahead.

K – is there a role for the community connectors to bridge gap when family member having an in-patient stay.

E – SPCG have been asked, HSCM have been asked, IJB are aware, feeling very low on list of priorities. What are the opportunities to be able to sustain.

K – Carmen advised that MRRP are meeting all the objectives from Scottish Government, will be written into strategy, just no timescale for this to happen though so we need to think about what to do for now. Do we rebrand and become a CRN?

H – think this is an iteration of language and partnership working, network with have core partners, then supporters.

J – understanding of statutory services and 3<sup>rd</sup> sectors working together not totally sure of this. Partnership is great in what it does, lack in the evidence as proof. Lots of avenues to explore, e.g. how meaningful activities impact wellbeing factors. Network could be doing the research to identify needs and another strand is ‘doing’

H – asking to sit with discomfort for now and think about how we adapt. Not here for the next meeting, KP also on annual leave. Heidi needs to go away and work on ‘mashing’ ideas, Elidh would like to contribute where she can with mashing Jonathan happy to help with statistics.

## 5. Discover Pathways Overview

Update following meeting:

Data prior to April sat on a separate database and would not be comparable to current reported data, out Tech consultant now record these in a different format. Positive engagement figures, range is 500-1300 over March/ April/ May.

Points to note:

- Independent living pathway created early 2023
- Urgent access available on all pages and been accessed on average 80 times per month, this was the highest viewed page.
- New pages will have inflated hits due to us testing out development
- an average of 21.3 people per month accessed Mental Health & Wellbeing Support, Mental Health Therapists and Specific anytime support closely following in numbers.

## 10. CHIME out – unable to all chime out due to venue requiring room urgently.

- Kirsteen – potential
- Holly – informative, trust in the process
- Jonathan – perseverance
- Heidi – perseverance
- Carol – excited
- Karen – enlightening
- Jade - hope
- Elidh - awesome

<b>PROPOSED AGENDA FOR NEXT MEETING:</b>	<b>OWNER:</b>
1. Chime In	All
2. FIXED – overview of terms of reference	Chair
3. Update on Actions	All
4. Events planning/ Any other business	All
5. Provisional - Discover Pathways Overview	All
6. Chime Out	All

<b>FUTURE/ RECURRING AGENDA ITEMS:</b>	<b>OWNER:</b>
1. Supporting people while intoxicated and suicidal share Ayrshire model – recurring	Anne P - recurring
2. Child & Parent Survey Findings to be shared with group when available	Paul
3. Update on PH MH Network meetings	Kirsteen C/ Paul
4. When considering events – consider suicide prevention week for next year – aim for a walk in each locality	Heidi/ All