

**Scrutiny Review – Support to Carers
Draft Minutes
15th December 2009**

Present: Councillor Adamou (Chair), Cllr Alexander, Cllr Wilson, Barbara Nicholls, Lisa Redfern, Jeremy Walsh, Duncan Stroud, Anne Daley, Michael Edelstein, Freda Wilson, Nisha Mansood, Ashley Thomas, Eve Featherstone, Nick Bishop, Cenk Orhan, Melanie Ponomarenko (minutes).

Apologies for absence	Susan Otití , Carmel Keeley
Urgent Business	None
Declarations of Interest	Cllr Adamou declared an interest as her daughter is a social worker.
Barnet, Enfield and Haringey Mental Health Trust	<p>Jeremy Walsh, AD</p> <p>An overview of the Mental Health services in Haringey was given.</p> <p>BEHMHT has a full time Carers Assessment Post who is active across the MHT services in trying to identify carers. A recent example of this was a Carers Lunch at Tynemouth Road.</p> <p>The referral forms used by BEHMHT are shared with other organisations to ensure that the information collected across the organisations is consistent.</p> <p>In May 2009 Home Treatment Teams conducted a survey in order to try and identify carers. This took the form of a questionnaire given to clients they visited. The Mental Health Carers Association is working with BEHMHT to look at the Questionnaire and improve it in order to get more responses in future.</p>

Discussion around the resourcing of the Home Treatment Teams. The Panel were informed that an extra five members of staff per Home Treatment Team had been recruited this year.

Discussion around what happens once a carer has been identified.

An assessment is offered to the carer, engagement with the network around the carer is undertaken both in a formal and informal sense, available services for the carer are considered. The information is then uploaded onto Framework-I in order to enable services to be commissioned.

For those that do not want an assessment there is a need for continued engagement to ensure that they can access support should they wish or need to in the future.

Acknowledgement that this part could be tighter.

With mental health service users there is generally always someone within their network who is a carer for them.

The BEHMHT is reconfiguring at a senior level from January 2010 (Service Line configuration). This is in preparation for Payment by Results and does not effect the service provision.

The link person for Haringey will be Lee Saunders, Assistant Director at BEHMHT who will be making links with Haringey Council's management.

Discussion around the closure of acute wards and the impact that this has had on being able to identify carers as well as the extra burden taken on by carers in these situations.

BEHMHT acknowledges the increase in pressure and responsibility which has come about due to the move to treating people in the community. This was another reason for the above mentioned survey.

There will always be a need for acute provision of mental health services but it is often better alternatives for people outside of the acute setting where they can be given advice and support which may help them work through issues and be better prepared should there be a next time.

Cllr Wilson visited the Mental Health Carers Association approximately a year ago and felt that there was a revolving door for many mental health services users coming in and out of the services. Feeling that there are only two options – one of 24hour care and the other not very much support in the community. Noted that there can be a gap and that this is being worked on currently.

A future vision would be developing the Home Treatment Teams to provide as much support as needed at home for example in a sitting service to give people the sense of 'containment' that people need and often want in time of crisis. Acknowledgement of the resource requirements of this.

Acknowledgement that there is more to be done to ensure that carers are fully supported and identified when the cared for person is admitted to St Ann's as seeing a loved one in a psychiatric ward can be very traumatic.

An example of how this is being addressed is through a carers group at St Ann's.

Discussion around what happens when someone is discharged and the physical environment that they may return to which is also a concern for the carer.

The point of discharge is critical for both the carer and the cared for person as the carer picks up the burden at this point.

The first seven days after discharge is when a person is most likely to commit suicide.

There are a number of support services to assist the carer and cared for person through this process including links with Housing Officers and a Practical Support Team on each ward.

There is a desire to commission more of these kinds of services. Acknowledgement that there is more to be done to provide a continuum of support structure.

The Mental Health Carers Association acknowledges examples of best practice by the

	<p>BEHMHT and is working with them to improve services. However:</p> <ul style="list-style-type: none"> ○ It is felt that more needs to be done to routinely identify, offer assessment and involve carers in care planning. ○ A well-ordered and systematic approach does not exist at present. ○ Best Practice needs to be part of a coherent system. ○ A Strategic view and strategic planning by the BEHMHT is not apparent ○ Carers are not always able to get crucial information e.g. date of discharge, information on medication, dates of visits etc. <p>BEHMHT acknowledges that there are issues around access to information and that this is something that needs to be looked into as there is inconsistency with who gets what information.</p> <p>There can be tensions between aspects of the partnership and services which needs to be worked through. It is often Carers who pick up on this tension and it has an impact on them in their caring role.</p> <p>There is a need to ensure that engagement is robust in the future.</p> <p>Acknowledgement from Adults that there is more work to do to ensure that the partners are working together strategically and in a coordinated way.</p> <p>There is a commitment from all partners to improve services but there is work to be done to reduce fragmentation.</p> <p>Discussion around the lack of anything on the BEHMHT for carers when this was last looked at. BEHMHT have recently revamped their website and in this the Carers information dropped off accidentally. This is worked on to ensure that carers are clearly signposted.</p>
NHS Haringey	Anne Daley and Duncan Stroud presented on behalf of NHS Haringey in Susan Otití's

absence.

There is no ring-fenced money for carers services in NHS Haringey's budget. The money identified was part of the general government uplift.

NHS Haringey currently has a number of financial pressures which it is having to juggle, including swine flu.

The Joint Leadership Team is currently trying to improve joint working across the partnership and decrease duplication.

Discussion around whether services would be reviewed and re-commissioned to other providers where necessary. Contracts are reviewed on a regular basis and as part of an ongoing process.

Noted that NHS Haringey's commissioning intentions are laid out every year and that specifications can be included at this time. Query as to whether carers and carers organisations are consulted as part of this.

NHS Haringey has working relationships with a number of voluntary and community organisations and bodies in Haringey. This includes the Carers Partnership Board, the Older People's Partnership Board and Age Concern.

Once the Haynes Trust is up and running relationships will also be developed here.

Commissioning Intentions for 2010/2011 are currently being put together. Noted that this is a long process and last year it was not agreed until the summer.

Carers Breaks will be considered should the budget allow.

There is no targeted approach relating to BME Carers apart from in relation to long term conditions.

	<p>Anne Daley will send further breakdown of ethnicity data to the panel.</p> <p>NHS Haringey is currently trying to build more relationships with the voluntary and community sector and look at the potential of linkages with community services.</p> <p>Increased investment in community services would be the desired way forward, however this has to be balanced with acute funding. Looking at ways to try and stop people from coming into the acute setting so that money can be freed up and spent elsewhere.</p> <p>NHS Haringey currently provide space for the Carers Centre at Hornsey Health Centre free of charge.</p> <p>GP Registers GPs are expected to know who has caring responsibilities at their practice. GP database has two questions relating to carers on it. Anne Daley is currently in discussions with Clinical Leads to look at issues raised previously around the information carers have access to with regards to the person they are caring for. Issues of confidentiality and the impact on the carers are being considered as part of this piece of work. Different GPs have a different approach to this. NHS Haringey is trying to get a clearer picture of the full situation.</p>
