



Rethink Carers Lancashire

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Newsletter

April 2019

c/o Rethink Mental Illness, Paul's House, Tower Street, TA14BH

Key meeting Friday May 10th, Brindle Community Hall, 10.30 – 3 pm.

This will help us understand how mental health care is currently being delivered across Lancashire, and particularly how clinical care and social care can be integrated. Hopefully many of our members will by now understand the impact of the Care Act 2014 in promoting a thorough assessment of social care needs for our loved ones. But the downside of the fall-out from this has been a split in service provision, so it's difficult to see who is now responsible for which aspects of care.

To try to address this, we've invited senior managers to explain to us how things might change in the future. In the morning Sue Moore, Director of Strategic Development for Lancashire Care NHS Foundation Trust, will answer our questions and give us the most up-to-date picture of the current situation. In the afternoon, Charlotte Hammond, who leads on Lancashire County Council's mental health services, will be back to give the social care perspective, and update on progress on carer assessments and respite care.

If you have any questions for either (or both) of these visitors, please send them in beforehand, preferably by Friday May 3rd, to give time for the issues to be researched and accurate information provided.



Lunch will be as at the last meeting, either meat and potato pie or cheese pie, £5 to include all teas, coffees, biscuits, etc. £1 for those who don't want the lunch.

ORDERS FOR LUNCH TO BE SENT BY **FRIDAY MAY 3RD**, PLEASE.



Don't forget the monthly Accrington meetings, 6 -8 pm at Elmfield Hall, open to any carers who can get there: **May 8:** Lee Daley, a community banker for Natwest, will be talking to us about bank fraud and the implications for those vulnerable to exploitation. **June 12:** Visit from the NW Ambulance Service

NEWS FROM LANCASHIRE CARE NHS TRUST

Caroline Donovan joined Lancashire Care as **Chief Executive** in April 2019 having been the Chief Executive of North Staffordshire Combined Healthcare NHS Trust which was awarded a rating of Outstanding by the CQC under Caroline's leadership. Caroline is a registered nurse and passionate about delivering high quality patient-centred services. Her experience of Public Health supported her deeper understanding of partnership working across and beyond health and social care. She strongly believes in the importance of accountability to communities and service users and carers.



We understand that a new Director of Nursing and Quality has also just been appointed – more information as soon as it's official!

As the only Lancashire-wide mental health carer group, we shall of course continue to foster a constructive relationship with the Trust, whilst at the same time maintaining our independence and not being afraid to speak out as a 'critical friend'.

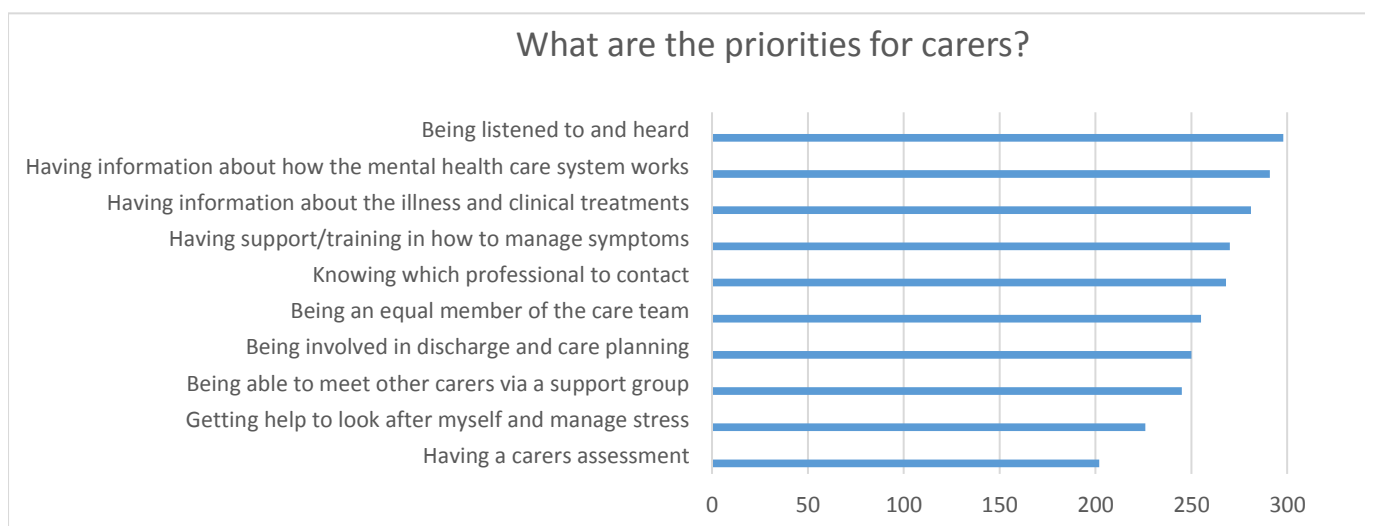
INFORMATION BOOKLET: Three of our members have worked on the new East Lancs information pack to be given to all new service users and carers. This is now at the final draft stage and will be available very soon. It's hoped that this can be adapted and rolled out to other areas, and we'd like to thank Allison Mellor, Service Manager at Pendle House Nelson, and Clare Benson, Lead Nurse, for driving this forward.

RECOVERY COLLEGE: Learn new skills to support your health and wellbeing. **Free courses are being run for people in Lancashire to help them keep, stay and live well as part of an exciting new project that is being run by Lancashire Care NHS Foundation Trust along with their partners.** The courses, which are being run by the Lancashire Recovery College, began on 28 January and cover a range of topics that also include sessions on artistic meditation, stress, how to relax and dealing with gambling. One of the courses, Wild Wellbeing, will be held at the picturesque Brockholes Nature Reserve with the Lancashire Wildlife Trust to help people connect with nature. The courses are free and available to anyone over the age of 18 with initial venues in Chorley, Preston and South Ribble. Courses will also be run in East Lancashire and then eventually cover the whole of Lancashire. The Recovery College courses are a safe and friendly space for people to learn and share, if they wish, without feeling judged. They are also interactive and specially designed to make sure attendees do not feel they are back in school. Participants will be challenged to look inwards, and to reflect on how they perceive the world to enable them to break down barriers. Find out more at <https://www.lancashirecare.nhs.uk/lancashire-recovery-college>

THE HARBOUR: some of you will have seen, and been worried by, the local news programme criticising the Blackpool hospital for unsafe practices. The TV journalist interviewed a 'mental health support group' who remained anonymous and described instances of fights and drug use on the wards. This was not a Rethink group, and those of our carer members with experience of The Harbour have said they didn't recognise this picture of the hospital. There has been a suggestion that this news item was provoked by political infighting on Blackpool council, and it wasn't pursued by the BBC after the initial programme. It's important to be aware that the media can't always be trusted to give an accurate account.



CONFIDENTIALITY: thanks to everyone who responded to our survey for the confidentiality training programme by letting us know what your *real* priorities are. Results are below – not much of a surprise to us, but professionals were shocked to see that having a carers assessment was bottom of the list. Carrying out a carers assessment is one of the performance targets for mental health services, but we wonder why this is so, given the low value most of us ascribe to this.



Development of this training is in its final stages – LET US KNOW IF YOU'D LIKE TO BE INVOLVED

DATE FOR YOUR DIARY FRIDAY OCTOBER 4, 2019, 2-4 PM, BRINDLE COMMUNITY HALL



All our group members are invited to a free tea party to celebrate ten years of Rethink Carers Lancashire.

We'll be looking at the progress we've made in this time, will welcome Mark Winstanley, Rethink's Chief Executive, plus Eileen and Matthew from the Group support team, and hopefully some of the professionals whose support has been especially helpful to us.

If you'd like to suggest someone to invite, would like to come, or can help get things ready beforehand, please let us know as soon as possible.



Complete our new survey to help ensure people with severe mental illness receive the support they need across all aspects of their lives. Last month we told you about our event in parliament for MPs to explain what the new NHS Long Term Plan means for everyone severely affected by mental illness. We welcomed the plan as it responded to so many of your concerns about how people who are most unwell are waiting the longest for care. However, improving the lives of people severely affected by mental illness goes beyond clinical support: issues like loneliness, debt, housing, and employment have a significant impact on mental health too. We often hear that the services and social support people need to help with their recovery isn't there when people need it. This has to change. We are campaigning for better, more joined up services to be available for people with mental illness and carers. If you or someone you care for have experience of needing support in any of these areas - whether you've received it or not - we want to hear from you. Will you take a few moments to tell us more by completing our online survey? **You can find the survey here:** www.rethink.org/survey

Could you design our 2019 Christmas Cards?

We're looking for artwork to make our 2019 range! We will choose up to three designs that will be made into Christmas cards. The cards will be sold on our Rethink Mental Illness online shop, and at Members Day in November, and they will be promoted on our social media channels (Facebook, Twitter and Instagram), in our e-newsletters and on our website. All money raised from card sales will support our work, such as supporting groups. Christmas Cards Gloss finish on the outside, matt finish inside Dimensions: 14cm x 14cm Inside of card: Blank for your own message. Artists will be credited if they wish. If you would like more information, please email Bernice.Williams@rethink.org

**RETHINK
NEWS**

Nursing and Midwifery Council research

Mel Islin, Rethink's Physical Activity Programme Manager, works with a research and evaluation organisation called Traverse, who are evaluating the impact of all the Richmond Group physical activity projects. They are working on another research project with the Nursing and Midwifery Council. In May 2018, the Nursing and Midwifery Council (NMC) reviewed the role of patients and the public when judging whether a nurse, nursing associate or midwife is fit to practise. They now want to make sure that fitness to practise processes are person-centred – to make sure that any concerns are properly addressed, as quickly as possible and to ensure that they are transparent about what action has been taken and why. The NMC have commissioned Traverse to help understand how best to put this patient-centred approach into practice by gaining the views of various service users. They are looking to carry out some interviews with people who have accessed mental health services (either currently or very recently) to discuss their experiences and their perspectives and have asked whether we can help find people who would be interested in giving their views. They would like to sit down with at least 6 individuals to have a 1:1 chat. They are offering people £70 for their time.

IN THE NEWS

Children's mental health support is often inaccessible, report reveals Anne Longfield, the Children's Commissioner for England, has published a report looking at the amount spent on preventative and early intervention mental health support for children in England. The Children's Commissioner's research is the first time any organisation has collected data to show how much is being spent by areas in England on preventative and early intervention mental health support. It reveals that local areas, which included both local authorities and NHS spending, allocated a total of £226 million for such services in 2018/19, just over £14 per child. The report shows there were wide variations between areas in how much funding is available: the top 25% of local areas spent at least £1.1 million or more, while the bottom 25% spent £180,000 or less. This postcode lottery comes at a time when the Government has made more funding available for children's mental health nationally as the number of children in need of support and treatment from children's mental health services has increased over the last decade.

"Backdoor policies" denying people with mental illnesses access to ESA Anti-poverty charity Zacchaeus 2000 Trust say this threatens doctor – patient relationships, puts patients at risk of damaging their health further, and leaves them in serious financial difficulties. Like thousands of others, Louis was too ill to work and needed the vital income ESA provides – but his claim was refused. Louis was blocked from claiming ESA as he awaited his hearing, due to a misleading letter sent from the DWP to his doctor without Louis' knowledge. Louis had to rely on food-bank vouchers, went into debt, accrued rent arrears and faced an increased risk of eviction. Louis is not alone. The Zacchaeus 2000 Trust say such letters are sent to the GP of every claimant after they have been refused ESA - before they've finished the appeal process. 88 percent of the charity's clients win their appeal and are declared entitled to ESA again. "It is not for the DWP to interfere with the GP and their patient," said Raji Hunjan, Zacchaeus 2000 Trust Chief Executive. "Sending these letters directly to the GP, without even informing the patient, is putting doctors in a position which both undermines their role and puts their patients at risk."

Government unlikely to meet pledge to end 'out of area' mental health treatment next year Individuals continue to be uprooted away from their families for mental health care. The number of people being sent hundreds of miles away from their families for mental health treatment rather than cared for locally has increased over the last twelve months. In April 2016, the government said within four years it would eliminate the practice of uprooting individuals due to local bed shortages, which is generally thought to impede or delay recovery. Some 7,655 new mental health "out of area" placements (OAPs) occurred last year. 96 percent of these occurred not because specialist care was available elsewhere, but because of a lack of local provision. Vicki Nash, Head of Policy and Campaigns at Mind, said: "The NHS has promised to completely eradicate inappropriate out of area placements, and yet we can see that the number of these placements between September and December last year increased from the same period the year before. This is disturbing. We are nearing the NHS's own target of zero out of area placements by 2020/21, but the figures are going in the opposite direction. There is a huge amount of work still to do to get the numbers down. Too many people with mental health problems are being forced to travel hundreds of kilometres from their friends and family to receive the treatment they need. This can worsen people's chances of recovery, as well as being expensive for the NHS and the taxpayer. In December 2018 alone, 250 people were sent 300km or more away from home to get help. We urgently need to see investment in mental health services reaching the frontline, so that people can get the treatment they need, when they need it, close to home."

Personal budgets for mental health issues: a blessing or a burden? Over a million people will spend public funds on their own behalf through a personal budget, according to a new report from the public services think tank Reform. Personal budgets give patients and other public service users freedom over how to spend an allocation of public money. Widely used in the NHS and social care, their use is increasing. The Reform research finds that personal budgets have been a good tool for tailoring public services to the needs of individual users. Personal budgets for people with mental health problems are not new, says Reform; this group have been able to access direct payments since 1990. They have been piloted through various programmes, both in social care and health, yet their roll-out has not been as widespread as with other user groups. For England's local authorities that provided figures, only 0.4% of the community care budget was spent on direct payments for people with mental health problems: fewer direct payments than to any other group. In 2011–12, only 14.6% of eligible mental health service users received a personal budget, compared to 58.8% of people with a learning disability, 47.9% with a physical disability, and 45.2% of older people. In contrast to social care, where personal budgets have substituted core services, in mental health they have been offered in addition to existing services. There is some evidence, says Reform, that personal budgets in mental health can help people achieve better outcomes, with studies reporting increases in social engagement, community participation, and positive-risk taking. A report by Mind highlighted the transformative power of receiving a personal budget. Alex, who became depressed following a stroke, used his to personal budget to pay for a multitude of goods, services, and classes that helped enrich his life; "It's a fantastic idea, giving people the opportunity to experiment with alternative treatments and giving people a better chance to find something to suit their individual needs", says Alex. The Personal Health Budgets Evaluation also found promising evidence of cost efficiencies, showing reduced demand on community and acute health services, fewer inpatient visits, and reduced pressure on A&E and GP services for this group.

