

# Minutes of the Deaf Mental Health Sponsoring Group

8<sup>th</sup> May 2008 in London

**Present:** Paul Farrell (East Midlands SCG), Neil Thwaite (Greater Manchester West), Jeff Carhart (East of England SCG), Bob McDonald (Department of Health), Mary Kearney (London SCG), Mandy Dunn (SW London & St George's), Marie Dodd (SW London & St George's), Nick Kitson, Matthew James (County Durham), Steve Powell (SignHealth), Paul Stemman (SignHealth)

**1) Apologies:** Rosemary Granger, Bruce Dickie, Carole Jobbins

**2)** The minutes of the last meeting were agreed and there were no matters arising.

**3) Progress and review of Year One**

Steve Powell reviewed the first year of the project. He explained that joined-up commissioning of Deaf mental health services had not generally worked well after the move to PCTs. The first year had seen progress: notably a commitment from the three mental health trust CEOs to support the project, the Business Change Managers working together, the opening of a dialogue with NSCG, primary and secondary work in the North East, and the start of relationships with some SCGs. However, this still left much to do.

**4) The North West – how commissioning had changed**

Unfortunately, Carole Jobbins was not able to attend. However, there was a discussion of how commissioning and services had been turned around in the North West. Neil Thwaite said that the previous collaborative commissioning had not really worked. Under those arrangements PCT representatives would meet and then have to go back to their trusts to get approval – which was not always forthcoming. It was now far easier for the trust to deal with the SCG who had the authority and understanding. This made for a better service and more financial security. The risk was now shared between the John Denmark Unit and the SCG.

**5) Progress in the North East**

Matthew James gave an overview of the work that had taken place in the North East. The first year had been very busy. TEA monies had been pooled. A scoping and mapping exercise was underway, the university course had started, and interpreter training was being addressed. The plan was to create a 'virtual team' which would support the existing CPN and JDU input.

Nick Kitson highlighted the differences in approach, and said that a third model was really needed for those parts of the country that were starting from nothing. The North West already has a long track record of a CPN working as a mini-service, but some other regions had no such history.

**6) Supra-regional commissioning**

Steve Powell said that the project was going to draw-up a commissioning plan. This would explain what solutions already existed and what approaches were available. This could then be used by

regions regardless of what position they were starting from. The possibility of some SCGs taking a lead for neighbours would be considered.

Mary Kearney said that in London people were being flexible and reasonable and that all specialised commissioning was currently under review. Additionally, commissioners are working with South West London & St. George's to look at current provision.

There followed a general discussion about some of the areas that should be considered when creating the plan, e.g. world class commissioning, CAMHS & LD care pathway, response to polyclinics. It was agreed that such a document would be very useful for commissioners and would be distributed to members for feedback and input.

#### **7) Contracting and commissioning arrangements**

Paul Stemman spoke about attempts to have a common approach to commissioning in-patients services across the country. The three units all face a similar problem of vulnerability and exposure to risk. There are obviously a lot of factors at work. However, a system that saw some basic funding guaranteed with a top-up according to activity would be worth exploring.

#### **8) Business Change Managers**

Matthew James spoke about the work of the Business Change Managers. They had made progress and the three units were now working more closely together. However, there was still much work to be done.

#### **9) National Definition Set review**

Matthew also spoke about the National Definition Set review. NSCG had asked County Durham to lead to review. Practitioners were being consulted and a meeting had been arranged. The definition may change to make it more explicit that specialised mental health services extend beyond the three national units. The review would be completed by the end of the year. Importantly, the review was only focusing on the definition rather than questioning whether Deaf mental health services should remain a 'specialised condition'.

**10) AOB.** There was no further business.

**11) Date of Next meeting.** The next meeting will be hosted by Greater Manchester West (Prestwich site) on 21<sup>st</sup> November 2008. Lunch then meeting. Full details will follow nearer the time.

#### **Actions**

<b>Action</b>	<b>Lead</b>	<b>Date</b>
Write a guide to commissioning Deaf MH services – for consultation with providers and commissioners.	Paul Stemman	Middle of June