

# North of England Mental Health Development Unit

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**Welcome** to the June edition of our newsletter.

It's been another busy month for us here at the North of England Mental Health Development Unit, with work on the South of Tyne health needs assessment project for people with severe mental illness progressing well - we have completed the research stage, with an excellent response from over 200 local people willing to take part in the research. We're now in the process of collating the results before making recommendations back to NHS South of Tyne and then planning and delivering a series of mental health awareness sessions.

This month has also seen us commissioned by NHS North of England to carry out a piece of work to confirm the existing commissioning arrangements for primary, secondary and tertiary mental health and learning disability services for adults. With 72 Clinical Commissioning Groups across the North of England it is essential that

these new organisations have the information they need to take over the complex commissioning of mental health and learning disability services.

Our 'spotlight on' item this month features North East *together* - the service user and carer network for the North East. This insightful article provides an excellent glimpse into the wide-ranging activities of the network and reminds us of the importance of such an organisation working hand in hand with mental health service commissioners and providers.

We finish as usual with our round-up of national policy news.

Until next month, here's hoping for some summer sunshine.

With very best wishes

**Dave Belshaw and Paul Johnson**  
**Directors, NEMHDU**



Supporting better mental health

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## Spotlight on.... North East together

North East *together* - or NEt - is the *network* of mental health service user and carer groups and individuals across the North East of England. It offers a platform for involvement, collaboration and influence for each and every service user and carer, and is led and guided by them.



We share the vision that, working together, service users, carers, and paid workers in the involvement field can make an impact for change and influence improving the delivery of mental health services across the localities, region and nationally.

Our broad base of 'experts by experience' covers the whole of the North East region and all areas of adult mental health.

We have robust links to the major statutory and voluntary health and social care organisations as well as smaller community groups and individuals within the user and carer movement in the region.

We have a democratic service user and carer led structure which enables us to include individuals, local groups, sub-regional networks and to link directly into the National Survivor User Network for mental health (NSUN). NSUN is an independent, service-user-led charity that connects people with experience of mental health issues to give us a stronger voice in shaping policy and services and has supported regional networking for three years. This has enabled pan regional networking between individuals and groups to happen in a more consistent and effective way.

### *Delegates at North East together annual event:*



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## Spotlight on North East *together*—continued...

As we evolve, our working groups are beginning to influence change on a local, regional and national level.

### What has been achieved by North East *together*?

- Regular communications to members from NEt and NSUN via newsletter and e-bulletins
- Sub-regional meetings (south and north of the region) every month and a pan regional meeting every month
- An 'issues log' documenting local issues/concerns/ideas that is collated and communicated to North East commissioners and service planners.
- Meetings with North East commissioners
- Annual regional event
- Leadership course, run annually in partnership
- Research projects in partnership with the Mental Health Research Network
  - Care coordination – Is there a pathway to recovery through care coordination
  - Emancipatory action research with mental health service users, carers, and professionals
  - ABC study of mood disorders
- Region wide anti-stigma campaign
- Welfare Reform Campaign
- History and Art exhibition - Mind the Gap
- Play – “Next swan down the river might be black”, a professional play on MH themes and set on an in-patient unit, written by local SU who's a playwright. Arts Council funded and staged in mainstream theatres Feb-April 2012
- Workshops at Europsy – an annual European mental health conference
- Schools work. Lesson plan for teachers compiled and delivered by service users and carers to 13yr olds in every school in Newcastle and North Tyneside.
- Devising Psychosis workshop format piloted with EIP (Early Intervention in Psychosis) service users and teams.
- Involvement with interdisciplinary studies and projects at Northumbria , Newcastle and Durham universities, enabling the consideration of mental health from different perspectives (e.g. literary, philosophical, political, artistic)

### What has changed through campaigning?

NEt working groups are beginning to influence change on a local, regional and national level. For example, the user and carer Welfare Reform Action Group (WRAG) submitted evidence to the Parliamentary Scrutiny Committee. The WRAG also offers local and regional peer support on welfare issues.

At a more local level NEt campaigned for the continued provision of eating disorder services across the region, successfully influencing commissioners to this end.

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## Spotlight on North East *together*—continued...

### How NEt is making a difference

NEt demonstrates that service user/survivor initiatives can be well organised and professional and achieve demonstrable outcomes whilst retaining the values and principles that ensure the membership can set agendas, lobby for what is important to it and improve the experience of people who have a mental health issue and/or need support.

Network members are able to organise collective action and provide evidence of need, what works and what does not work.

### What we want to do more of:

- Exchange information, share ideas and learn from each other by bringing together the many and varied grass roots perspectives from mental health service users and carers.
- Support, grow and link user and carer led organisations, groups and individuals throughout the region, addressing all mental health issues from the generic to the specific.
- Work with all communities and cultures to improve mutual understanding of different views and perspectives of mental health.
- Promote education and anti stigma campaigns in order to raise awareness and greater understanding of mental health difficulties and social wellbeing.
- Bring together service users and carers as individuals and as groups to have a strong representative and wide reaching influence in the shaping of mental health services and policies.
- Work in partnership as equals with present and future commissioners and providers of mental health services, including Northumberland Tyne and Wear NHS Foundation Trust and Tees Esk and Wear Valleys NHS Foundation Trust to ensure best practice, uphold high quality services and foster enterprising and innovative ways of working.

### Contact details

For further information about North East *together*, please contact:

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*Delegates at North East together annual event*

## Policy News

The next few pages give a quick round-up of recent national policy announcements and publications, with links to the relevant pages on the Department of Health and partner organisation websites.

### **Employers urged to offer flexible working to support mental health needs**

26 June, 2012

Thousands of individuals with mental health needs could be offered more flexible working under a new initiative launched today by Health Minister Lord Howe. Lord Howe set out how leading companies and organisations including EDF Energy and EEF The manufacturers' organisation have signed up to a new Responsibility Deal pledge to help manage and support employees with mental health needs in the best way possible. The approach, which has been developed as part of a new health & work pledge, is set out in a simple guide including suggestions such as:

- taking a flexible approach to start/finish times and shift patterns
- allowing paid or unpaid leave for medical appointments
- offering a phased return to work
- providing a quiet space for breaks
- offering job sharing

<http://www.dh.gov.uk/health/2012/06/mentalhealthpledge/>

### **The 2012 Local Health Profiles published**

26 June, 2012

The 2012 Local Health Profiles give a snapshot overview of health for each local authority in England in a user-friendly format. They are a valuable tool for local government and health services in helping them understand their community's needs, so that they can work to improve people's health and reduce health inequalities. Produced by the Public Health Observatories of England, health profiles are available as interactive maps and charts.

<http://www.dh.gov.uk/health/2012/06/2012-health-profiles/>

### **Department of Health publishes interim Winterbourne report setting out actions to improve care and support of vulnerable people with learning disabilities;** 25 June, 2012

The Department of Health has published an interim report as part of a review of events at Winterbourne View private hospital and a wider investigation into how the health and care system supports vulnerable people with learning disabilities and autism. The review was set up by Care Services Minister Paul Burstow following the BBC Panorama programme, broadcast on 31 May 2011, showing abuse of patients at Winterbourne View.

<http://www.dh.gov.uk/health/2012/06/interimwinterbourne/>

### **Introducing Health Education England published**

22 June, 2012

Introducing Health Education England developed by the Health Education England Transition Team aims to raise awareness of the role of Health Education England (HEE) and Local Education and Training Boards.

<http://www.dh.gov.uk/health/2012/06/introducing-hee/>

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## Policy News—continued

### **New working group to help families juggle work and caring responsibilities**

21 June, 2012

Care Services Minister, Paul Burstow, has announced a new government and employers working group to help give carers the support they need to stay in work alongside their caring responsibilities. The new joint working group was announced today at the Government and Employers for Carers' Summit hosted by Paul Burstow and BT as part of Carers' Week. The group will explore how employers, statutory services and providers can work better together. It will look at how reform and innovation in the social care system, and stimulation of the market in care services, could help provide staff with the support they need.

<http://www.dh.gov.uk/health/2012/06/new-working-group-to-help-families-juggle-work-and-caring-responsibilities/>

### **Alzheimer's Society training programme in care homes aims to reduce antipsychotic prescriptions**

18 June, 2012

An Alzheimer's Society training programme, supported by funding from the Department of Health and the HC-One care home group, is being rolled out to 150 care homes across the UK. An initial trial of the Focussed Intervention Training and Support (FITS) programme found it reduced the use of antipsychotics in care homes by 50%.

<http://www.dh.gov.uk/health/2012/06/fits/>

### **Health and Social Care Act explained**

15 June, 2012

A series of factsheets on the Health and Social Care Act 2012 explain particular topics contained in the Act, including its key themes. They include case studies of the policy in action, or answer frequently asked questions about the topic. The factsheets were first published in October 2011 and have since been updated to reflect the changes made during the Act's Parliamentary passage. The factsheets fall into three groups: overview; key policy areas in the Act; cross-cutting themes of the Bill.

<http://www.dh.gov.uk/health/2012/06/act-explained/>

### **Consultation deadline extended on proposals to secure shared decision-making**

15 June, 2012

The consultation on detailed proposals to secure shared decision-making and choice for patients has been extended to Friday 31 August. By extending the deadline for this secondary consultation, the aim is to ensure that everyone who wishes to respond will have sufficient time to do so.

The consultation proposes a model of shared decision-making all along the patient pathway, which should be relevant irrespective of patients' conditions, their clinical pathway or progress along it. The model indicates where patients would be expected to have more say in decisions about their care in primary care; before a diagnosis; at referral to secondary care; and after a diagnosis had been made.

<http://www.dh.gov.uk/health/2012/06/choice-extension/>

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## Policy News—continued

### **Functions of clinical commissioning groups**

13 June, 2012

This document is an update to 'The functions of GP commissioning consortia: A working document' published in March 2011, to reflect the final content of the Health and Social Care Act 2012. It will be helpful in informing the planning and implementation of CCG responsibilities. It provides an accessible guide for emerging clinical commissioning groups (CCGs) and sets out:

- the key statutory duties of CCGs – the 'must dos'
- the key statutory powers – the things that CCGs have the freedom to do, if they wish, to help meet these duties.

<http://www.dh.gov.uk/health/2012/06/ccg-functions/>

### **David Behan announced as the new Chief Executive of CQC**

8 June 2012

David, who is currently Director General for Social Care, Local Government and Care Partnerships at the Department of Health, will begin his role as Chief Executive in July and will replace Cynthia Bower who resigned in February.

<http://mediacentre.dh.gov.uk/2012/06/08/david-behan-appointed-chief-exec-of-cqc/>

### **Social enterprises to receive £19 million investment over next year announced**

7 June, 2012

Today the Department of health announced investment of £19m over the next year for social enterprises. The money will be used to support frontline staff to run services that provide what their local population really need. The Cabinet Office and Dept of Health committed to help fund and assist more doctors, nurses and other public sector workers to run services tailored to their local community.

<http://www.cabinetoffice.gov.uk/news/19-million-social-enterprises-department-health-cabinet-office-join-forces-back-public-service-mutuals>

### **Importance of sport and exercise medicine outlined in new guide**

28 May, 2012

A new guide on sport and exercise medicine (SEM) outlines how it delivers improved quality of care and productivity. SEM is the first new medical specialty for more than 25 years and its establishment was a London 2012 Games bid commitment. 'Sport and Exercise Medicine: A Fresh Approach' emphasises the importance of SEM in chronic disease management, the prescription of exercise to those patients with co-morbidity, the diagnosis and management of musculo-skeletal injury and the education and training of allied professionals in these skills.

<http://www.dh.gov.uk/health/2012/05/sport-medicine/>

### **Change to the requirements for a second opinion appointed doctor's opinion for a consenting patient on supervised community treatment**

23 May, 2012

The rules about when the treatment of patients on supervised community treatment (SCT) has to be approved by a second opinion appointed doctor (SOAD) change on 1 June 2012. Section 299 of the Health and Social Care Act 2012 changes this aspect of the Mental Health Act 1983. The effect of the changes is that SOAD approval is generally no longer necessary if the patient is able to consent to the treatment in question.

<http://www.dh.gov.uk/health/2012/05/supervised-community-treatment/>