

**Psychological Health Sub-Group
1000 – 1200 on Monday 4 July 2016
at Evolve Business Centre, Houghton-le-Spring**

MINUTES

Present:	Jackie Bailey, Clinical Psychologist, Northumbria Healthcare NHS FT	JB
	Peter Blackburn, Consultant Clinical Psychologist, Gateshead Health NHS FT	PB
	Pam Boullin, Assistant Psychologist, Newcastle Hospitals NHS FT	PBo
	Mary Douthwaite, Consultant Clinical Psychologist, South Tyneside NHS FT	MD
	Kate Kendell, Cancer Network Psychology Lead (Chair)	KK
	Veronica Oliver-Jenkins, Consultant Clinical Psychologist, Newcastle Hospitals	VOJ
	Lyndall Wallace, Consultant Clinical & Health Psychologist, CDDFT	LW
	Sonia Wilson, Clinical Psychologist, City Hospitals Sunderland NHS FT	SW
	Michelle Wren, NESCN	MW

In Attendance	Naomi Tinnion, Network Administration and Support Officer, NHS England	NT
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Apologies:	Hilary Cave, Cumbria Partnership NHS FT	HC
	Clare Davies, Consultant Clinical Psychologist, South Tees	CD
	Elsbeth Desert, North Cumbria University Hospitals NHS Trust	ED
	Karen Ellis, Northumbria Healthcare NHS FT	KE
	Kate Farnell, Butterfly North East	KF
	Alison Featherstone, Network Manager, Northern England SCN	AF
	Geoff Gulston, Patient Representative, Cumbria	GG
	Nick Hartley, Clinical Psychologist, Newcastle upon Tyne Hospitals NHS FT	NH
	Sarah Howard, Cumbria Partnership NHS FT	SH
	Kirsty Kennedy, South Tees NHS FT	KK
	Leonie Llayiannis, Northumbria Healthcare NHS FT	LL
	Angela Waind, Cumbria Partnership NHS FT	AW
	Alison Woods, South Tees NHS FT	AWo

1. WELCOME AND INTRODUCTIONS

1.1 Welcome and Apologies

KK welcomed everyone to the meeting and introductions were made around the table. The above apologies were noted.

1.2 Declarations of interest

There were none.

1.3 Minutes of the previous meeting (21 April 2016)

JB asked for AOB to be amended to read “JB advised that their cancer service...”. The remainder of the minutes were agreed to be an accurate reflection of the meeting.

1.4 Matters Arising / Action from previous minutes

IAPT project: KK advised that this is now being extended to include long term and life limiting conditions in addition to cancer and confirmed that she and Elspeth Desert are taking the lead on this. As a starting point they will be conducting a survey to determine the IAPT services available for those with physical health conditions and to help identify what is required to address any

NT

gaps. The intention is to include South Cumbria within the survey, as ED's service incorporates areas within 2 networks. The survey will be circulated via Survey Monkey or equivalent within the next few weeks with a relatively short deadline for completion to ensure this piece of work is completed by the end of March 2017. KK agreed to keep the Group updated on progress.

KK

2. AGENDA ITEMS

2.1 Circulation List (Standing item)

The Group discussed the current circulation list and agreed the following changes:

- Telephone number for Mary Douthwaite to be changed to 0191 5297117/5297210
- Kirsty Kennedy to be asked for contact information for Emma Henderson
- Kate Reilly to be removed from the list
- Address for Anu Sinha to be amended as she is now based at Shotley Bridge

NT

2.2 Northern England Strategic Clinical Networks update

Network Review: MW advised that this had now been completed. The structure of the team and workplans are both currently being developed and it is hoped to have both in place by the end of July. As local priorities will be aligned to the new national mandatory priorities the Child Health and Neurological Networks no longer have the support of the Network although both are being encouraged to continue independently. MW/NT agreed to circulate a copy of the structure once finalised.

MW/
NT

Liaison Psychiatry Leads: MW advised that the Leads are currently doing scoping work around dementia and crisis care. KK asked if it would be possible for her to meet with the appropriate leads to discuss the role of this Group, further collaboration and what is happening nationally around the expansion of physical health and IAPT. MW agreed to set up this meeting.

MW

2.3 Future of Psychological Support Group – potential options after March 2017

KK advised that there were three options to consider:

- Become a Special Interest Group after March 2017
- Keep in touch by email
- Disband the Group

The Group discussed the options available and agreed:

- As the Group enables members to link up with colleagues across the Network it should be encouraged to continue to meet, although this would no longer have the administration and financial support of NESCN.
- To look into whether support would be available from SIGOPAC, to continue as a North East branch. The Group agreed that individuals who are members should log onto the BPS website to get opted in again to SIGOPAC emails. VOJ agreed to send the link to the website to NT for circulation.

VOJ

- If funding is available from SIGOPAC then there may be an opportunity to re-launch the Group and get a wider membership.
- The Group needs to have a focus as well as share best practice and innovative learning. Being independent would give the Group the opportunity to choose its focus whilst remaining realistic about what can be achieved.
- Look at support available within Trusts to arrange meetings and look for venues. The Group agreed to explore room availability within their own Trust and any rules around the booking of meeting rooms.
- Look at how attending future meetings can fit in with job plans, supervision and/or CPD.
- Consider what may come out of the appointment of clinical psychology and psychiatry leads to the updating of the NICE guidance, due to be published in 2018. KK agreed to find out the names of the new leads and circulate them around the Group.

MW advised that the Network were still unaware of what funding the new Cancer Alliances may bring but that the picture should be clearer by September. It has been agreed therefore that the cancer site specific groups will, for the foreseeable future, meet twice a year.

It was agreed that this should be discussed in more detail before the end of March 2017 to decide the way forward for the Group

2.4 Cost effectiveness of psychological services in cancer care – sharing of material

KK advised that Elspeth Desert, Hannah Wade and Pam Bouillon had all undertaken literature surveys and found some interesting pieces of information on the cost effectiveness of psychological services in cancer care. It was agreed that NT would pull this information together into one reference document for circulation around the Group.

NT

It was suggested that a future project, should this become a Special Interest Group, could be to prepare a “Why psychology is a key piece of the jigsaw” document to highlight the cost effectiveness of psychological care.

2.5 Planning of October training event

NT advised that she had provisionally booked one of the Millennium rooms in Waterfront 4 for this event but that parking remained an issue. The Group discussed venues and NT agreed to get costs for:

NT

Broadacre House in Newcastle city centre
YMCA in Newcastle city centre
Newcastle Central Library
Bensham Board Room (parking may be an issue)

The Group were asked to send any other suggestions for venues to NT.

It was agreed that the timing of the day would be 0930 – 1630 with the first hour

being devoted to a business meeting. It was also agreed that lunch should be for 45 minutes and that PB/MD would prepare a training programme for the remainder of the day.

2.6 Any other business

LW asked about the formal recording of Level 2 supervision and what staff are expected to undertake within their grade. KK advised that Kate Reilly had prepared two documents on this which she agreed to share with LW.

LW advised that she had been asked to re-submit her plan on a page covering training needs as the Board felt that insufficient funding was being requested. This had now been rewritten for submission and LW agreed to keep the Group updated on progress. She thanked MD and PB for their help in preparing this document.

2.7 Date and time of next meeting

0930 – 1630 on 18 October 2016, venue to be confirmed.

3. MEETING CLOSE

DRAFT