

Psychological support group – Minutes of Meeting

23rd June 2015

Christie NHS Foundation Trust, Trust meeting room 6

Time: 2-4pm

Attendance	Representation
Padraig McDonnell	UHSM
Anne Crook	Christie
Bill Bodell	St Ann's Hospice
Helen Tuzio	Bridgewater - Wigan and Leigh Hospice
Norma Armston	Patient/carer representative
Michelle Eckersley	CMFT
Robin Muir	Bolton FT
Sam Parkin	Beechwood Cancer Care Centre
Lisa Evans	CMFT
Tania Hawthorn	Christie
Caroline Lloyd	SRFT
Apologies	
Vanessa Hickson	Tameside
Anna Dalton	Pennine Care North - Bury
Angela Kelly	SRFT
Aruna Hodgson	Wigan & Leigh Hospice
Diane Finch	Trafford Macmillan well-being centre
Pat Jones	CMFT
Sarah Burlinson	Oldham
Wendy Shuell	Bolton FT
Claire Rehan	Bolton
Colsom Bashir	Christie
Helen Knight	East Cheshire Hospice
Maggie Parkman	Stockport
Fay Mitchell	East Cheshire Hospice

Agenda Item	Action
<p>1. Apologies Apologies were noted.</p>	
<p>2. Minutes from the last meeting Members agreed that the minutes were a true and accurate reflection of the last meeting.</p>	
<p>3. Manchester Cancer User Involvement Team Michelle Leach, who has recently joined the Manchester Cancer team as a Macmillan User Involvement Manager presented to the group. Michelle explained that 4 User Involvement Managers and a User Involvement Team Lead (Tanya Humphreys) have been recruited. Each of the User Involvement Managers will be aligned with a pathway manager to work on the user involvement aspect of each cancer pathway.</p> <p>The team are focussed on developing a suite of users who can get involved with Manchester Cancer and the pathway boards. If anybody in the group knows of anyone affected by cancer who would like to be involved with Manchester Cancer, please forward their details to Michelle – michelle.leach1@nhs.net</p>	ACTION: ALL
<p>4. Matters Arising PM informed the group that a meeting had taken place with the SCN (Lancashire & South Cumbria equivalent). The outcome was that both groups are happy to work together, to share issues and to use the partnership to strengthen their voice. Another meeting is scheduled for November to discuss further how the two groups can work together.</p> <p>Level 2 refresher survey findings. HN sent out a questionnaire to health professionals who had done level 2 training in the past, what their needs are, what they thought about it and what they want going forward. Unfortunately there was not a great response.</p> <p>69 surveys were received but only 27 could be analysed due to incomplete data. However there was some discrepancy with board members confirming they completed questionnaires but they are not showing in the results (ie. SRFT, UHSM & Bolton). HN to investigate.</p> <p>The group felt that a further breakdown of the questionnaire results was needed. The group asked if it was possible to pull any data from the incomplete surveys received. If not, could the questionnaire be re-issued?</p> <p>Main concerns identified from the results were:</p> <ul style="list-style-type: none"> i) Supervision is an issue, both the quality of sessions available and the quantity of supervision available, with some Level 2's having no access to supervision. It was felt by the group that this should be highlighted as a safe guarding concern, possibly put on the 'risk register'? ii) Referring was also flagged as a problem as it is not always clear where to refer. 	<p>ACTION: HN</p> <p>ACTION: HN</p>

<p>In conclusion the questionnaire results have thrown up some fundamental questions with regards to improving resources, improving access to training and ongoing supervision, and improving referral pathway knowledge. The group felt there is a need to press on localities that don't appear to be doing anything to increase access and consider generic pathways that are available to the solution. A Breakdown of the individual results is needed that can then be circulated to the Provider Board for further discussion.</p> <p>Level 2 Training Specification Different options have been considered and a draft paper written.</p> <p>The paper suggests that training is centralised with one provider providing the training and the admin support. It is not clear who would take the role and who would provide funding. The proposal is for a 2 day training course with 2 facilitators.</p> <p>The paper will be presented to the Provider Board (date to be confirmed).</p>	
<p>5. Northwest West Psychological Professions Network- Clare Baguley Deferred to the next meeting</p>	
<p>5. Psychological Support Annual Report The following gaps were identified in the Annual Report:</p> <p>Section 1.2 - Outlining gaps in membership & plans to address these?</p> <ul style="list-style-type: none"> • There is no GP representative in the group. Hodan/Manchester Cancer to source a list of GP's that might be interested. • There is no patient/carer representation – MC User Involvement team • PM suggested the following statement for the AR – <i>'we recognise a need to improve membership and will strive to work in partnership appropriate professional groups & service users'</i> (to expand). <p>Section 3.1 Information Need for Level 2 training – discussed 23/06/2015.</p> <p>Section 3.3 Challenges No Pennine representation. RM, invited a psychologist based at Rochdale – no response. To find out name/contact details PM to contact. (Pennine Care not Pennine Acute)</p> <p>Other challenges identified are with representation of the pathway group, accurate data, inequity and delivering consistent useful supervision. Staff struggling with the</p>	<p>ACTION: HN/Manchester Cancer</p> <p>ACTION: Michelle Leach? User Involvement</p> <p>ACTION: PM</p>

<p>complex needs of patients without appropriate/sufficient psychological training.</p> <p>A further issue is that the psychology support group are not officially recognised as a Pathway Board. PM is not given appropriate time to spend on the needs of the group and working on the issues that arise. The role is currently unpaid with no time allocated to the role which in turn leads to the Pathway Manager having to do an enormous amount of work.</p> <p>The group felt that a response is needed from Manchester Cancer with regards to the group going forward.</p> <p>Section 4. Objectives for 2015/2016 Important issues. PM to feedback to HN</p>	<p>ACTION: PM to meet with Dave Shackley & Tom Pharaoh</p> <p>ACTION: PM</p>
<p>6. A.O.B Enhanced vs. advanced communication skills to be discussed in detail at the next meeting.</p> <p>SP raised the issue of BACP changes to Level 3. From March 2016 a more robust procedure is being introduced and staff will need to register as opposed to joining as a member.</p> <p>TH queried the possibility of approaching Macmillan with regards to funding for a 12 month post to properly audit what the current level of psychology service provision is and what needs to be done to improve it.</p> <p>PM to email DS and request meeting</p>	
<p>7. Date of next meetings</p> <ul style="list-style-type: none"> ▪ 8th September 2015 The Christie NHS FT , Department 2, level 3, room 6, 2-4pm ▪ 9th November 2015, The Christie NHS FT, Department 2, Level 3, room 4-5, 2-4pm 	