## **Trust Wide Involvement Operational Group**

Thursday 10th February 2011

11-1 PM, Boardroom at the Maudsley Hospital

#### Attendees:

Adam Black (AB)

Alice Glover (AG)

Andy King (AK)

Anne Kirby (AK)

Christian Wilcox (CW)

D Rosier (DR)

Emma Playford (EP)

Gerry Kelly (GK)

Gillian Ashwood (GA)

Jane White (JW)

Jason James (JJ)

Julie Harper (JH)

Leslie Casimir (LC)

Marianne Caitane (MC)

Nick Hervey (NH)

Nin Pandit (NP)

Paul Paterson (PP)

Ray Johannsen-Chapman (RJC)

Sarah Naylor (SN)

Stefano Peria (SP)

Margaret Guerrero(MG)

### **Apologies:**

Kim Clarke Lorayne Duggan Sharon Wellington

#### **Matters Arising:**

DR gave an overview of TWIG Operational, reading extracts from the TWIG operational strategic policy.

# **Meetings Training:**

DR explained the idea around providing training. Once CAG advisory groups are set up they will recommend projects, forums and meets to attend.

AK explained the combination of training sessions for TWIG operational members that offers a two stage approach:

- Session includes an introduction to attending meetings and providing administration support and offers a chance to attend a meeting with a member of staff.
- 2. Session to explore the barriers and difficulties within meetings

PP agreed that it is good to get new people attending meetings, as previously the same people, who may not have been suitable, attending as this can be disempowering. PP felt this training will allow service users to gain confidence about why you're at the meeting.

MH added that it was the responsibility of the chair when service users are involved and this should include understanding of those attending the meetings.

DR there will be two sessions before the end of the financial year with up to ten people attending each session. Strategic PPI team will fund the next two sessions.

LC, SP, JH and JH asked if they could attend the second stage training at the Maudsley. DR added that next financial year there will be training in each borough and confirmed the current rate for training was £20.

## **Projects:**

1. Nightline audit – NP gave a background to the audit of the information line, commissioned by the Patient Experience Group. AB added that in relation to the information line SLaM are in a red and at the bottom of results in the National Patient Survey 2010.

Action: To be added as an agenda item for the next TWIG operational meeting.

2. Interview training - SN gave information on interview training through two day course and recent one day at SUITE. SN chase up with Sue Folan and to lead on this project with GA.

The group discussed involvement more generally. NH added that there are IoP routes into research for involvement and they are paid through the involvement register. NH added the monitoring outcome of personalisation budget group. AG felt that service users should be in staff recruitment and selection training. RJC added that the Trust needs a policy or framework to give to staff, in case they are not aware. PP mentioned there was already a policy within the PPI resource pack but this may be out of date.

Action: RJC to locate PPI resource pack and email it to the group.

- 3. Peer Support Project MG discussed the project in Lewisham and that was already one in Southwark. AK said peer support in Southwark treated separately. There is interesting stuff with Mark Bertram in Lambeth.
- 4. National Survey Priorities RJC put forward focusing projects on the ongoing red areas from National or PEDIC surveys that we have difficulty to resolve. He felt these relate with other areas of patient experience.
- 3. Croydon booklet JW said that Hear Us interviewed 100 service users in Tamworth with care plans and lack of information scoring low. Probably separate leaflets but want one pack for discharge from hospital and they are putting a booklet together for Croydon.
- 4. Food on the wards DR said Southwark team looked at food on the wards at the Maudsley. Group agreed with this project.

5. CMHT SU Groups - Establishing groups or recruiting from those groups, at CMHT's are a good idea. AB said this may be different under CAGs and DR said we need to go with what works in our local area. AG said CMHT link working scheme on wards but not in community. AG said she would invite them to TWIG.

## **Blog and Publicity:**

The group discussed what information they would like on the blog. DR asked that all members sign up.

### **AOB**

Discussion on involvement leaflets: look at trust wide leaflet rather than borough ones

The group discussed the frequency of the meetings and DR proposed bi-monthly, as the committee is project based and there is a need to fund projects. DR will meet the strategic chair and co-chair in between.

NP said National Patient Survey is now out. PP and JH agreed to be on poster campaign.

Next meeting: Thursday 7th April, 11-1 pm, Maudsley Hospital's Boardroom.