

## CHILDREN AND YOUNG PEOPLE'S STRATEGIC PARTNERSHIP

## **Think Family Sub Group**

## 22/07/2013

Present: Mary Donaghy (Chair) HSCB

Amber McLoughlin NHSCT

David Babington Action Mental Health

Kevin Morton SHSCT

Angela Rodgers NI Cancer Fund for Children

Marie Gratton Cause
Margaret Burke SBNI
Liz Bannon BHSCT
Carol Diffin BHSCT
Hazel Quinn SHSCT

Carina Boyle Action for Children

Pat Druse SHSCT

In attendance: Maurice Leeson Children Services Planning, HSCB

Andrew Hawthorne Children Services Planning, HSCB

CC: David Douglas SHSCT

Phil Hughes NHSCT
John Fenton NHSCT
Amanda McFadden WHSCT
Don Bradley SEHSCT
Leslie Walker BHSCT

### **Minutes of Previous Meeting**

Following minor amendments, the minutes of the previous meeting were approved.

#### Membership

The group discussed whether it was necessary to expand the current membership. It was agreed that links with relevant organisations had been made.

#### **Action Plan**

The group discussed each of the planned actions in turn as below:

## Communication and information sharing between families and professionals

Participation Network will act as a reference point for the Regional Sub Group

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This was welcomed by the group

Participation Network will develop leaflets within an NI context to inform C & YP regarding Mental Health This would be done using wealth of information currently available.

Action: Investigate copyright issue
Action: Group to examine and provide
comment if necessary

Action: Mary to circulate information in current form

Participation Network will develop a young person friendly version of the action plan

This was welcomed by the group

Complete awareness raising sessions for AMH staff and children's staff (inclusive of voluntary & community sector) re leaflets and talking to children about mental health

Paula Keenan to liaise with group members to organise workshops

Shape strategic direction to influence Think
Family Approach within established forums at
DHSSPS level

Mary to progress

## Early intervention; timely responses and accessible support tailored to meeting family needs

Ensure AMH & Addictions are represented on family support hubs

Trusts are to decide on best person to join Family Support Hubs

#### Action:

- Maurice to progress in Belfast on behalf of Carol
- Amber informed that progressing in Northern
- Kevin and Hazel to progress in Southern
- · Already existing in South Eastern
- Mary to speak to Amanda in West and
   Maurice to speak to Pat Armstrong
- Adult Mental Health Peer Group (community and voluntary organisations) to meet to discuss a potential representative
- Maurice to talk to Family Support Hubs re involvement of adult mental health

Increase awareness within adult mental health (voluntary, community and statutory) regarding referral process for family support hubs and uptake of usage

- Adult Mental Health Peer Group (community and voluntary organisations) meeting to discuss and quality assure the list of adult mental health organisations
- Mary holding ongoing discussions with Hidden Harm
- Noted as everyone's responsibility to raise awareness of Family Support Hubs

# Assessment, comprehensive planning and treatment which involves a 'whole family' approach by professionals

Develop a pilot project to work with an Acute
Psychiatric Ward and follow through to
community Mental Health Services that will
promote a whole family approach to assessment
planning and treatment

Discussed the practicality of a pilot within an Acute Ward as opposed to an earlier stage intervention and also the necessity of a pilot project when cultural change is the most important aspect.

Agreed to proceed given the appropriate funding and external support that will potentially be provided.

Enhance pilot project in BHSCT re self-harm presentation to ED to using a 'whole family' approach

Welcomed by the group

The group agreed to add an earlier action on Trust Interface groups into the action plan

### **Performance Indicators**

The group will explore the potential of the Darzi Model to develop performance indicators based on safety, experience and effectiveness. This model enables the identification of a maximum of 3 indicators under each of these headings

## **Date of Next Meetings**

The group agreed to hold meetings every 2 months initially.

Monday 23<sup>rd</sup> September 10am-12pm; Lisburn venue to be confirmed.

Monday 25<sup>th</sup> November 2013 10am-12pm; TBC

Monday 27<sup>th</sup> January 2014 10am-12pm; TBC

Monday 31<sup>st</sup> March 2014 10am-12pm