

Are you listening? Making a difference through people's experiences and involvement

6 February 2020





Harrow User Group

Engaging Mental Health Service Users in Safeguarding

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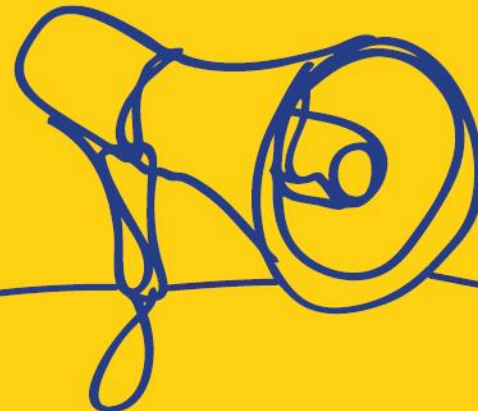
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This presentation

- About the Harrow User Group
- How did we collect feedback?
- What did we learn?
- Top 3 safeguarding tips

About the Harrow User Group

- The voice of mental health service users
- Over 450 members
- Over 20 Trained User Representatives
- On working groups, staff recruitment panels, carry out feedback surveys...
- Supported by Mind in Harrow User Involvement Coordinator



Harrow User Group in action

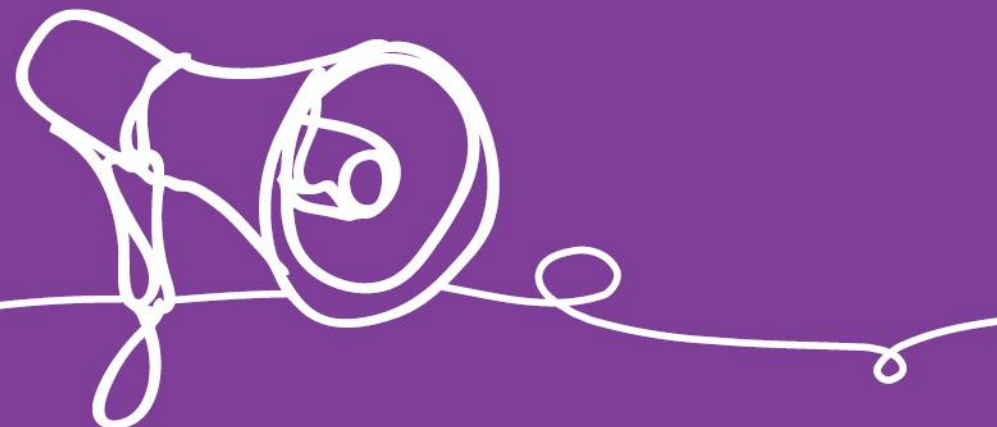
Local Election 2018



Niamh McEnery, Paolo Arrigo, Sachin Shah, Mark Baker, Norman Stevenson and Mind in Harrow CEO Mark Gillham



Mental health petition



How we collected the feedback

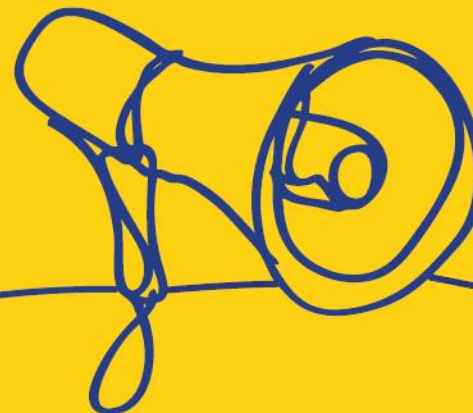
During two years:

- Peer-to-peer discussion groups
- People feeding back individual case studies
- Mystery shopping
- Anonymous questionnaires



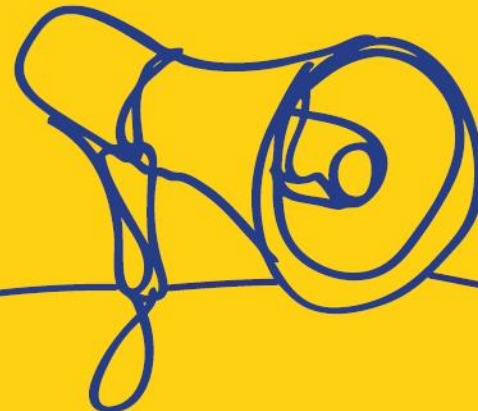
What did we learn: Case study A

Asian women, 40 years old, inpatient under
Section Mental Health Act –
Alleging multiple abuse from family.



What did we learn: Case study B

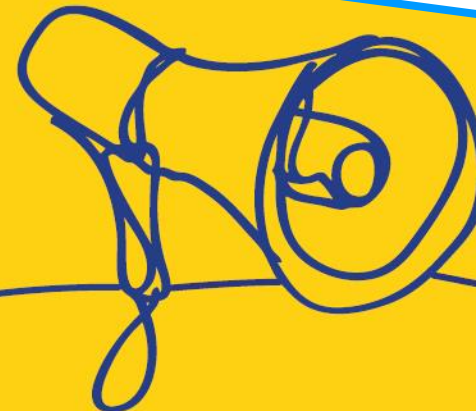
Mixed race man, 42 years old, inpatient under Section of the Mental Health Act –
Absconded from ward during leave and missing for 5 days without inpatient staff awareness.



What did we learn: Service user views

“Being taken seriously when someone raises a complaint about abuse - Believe us!”

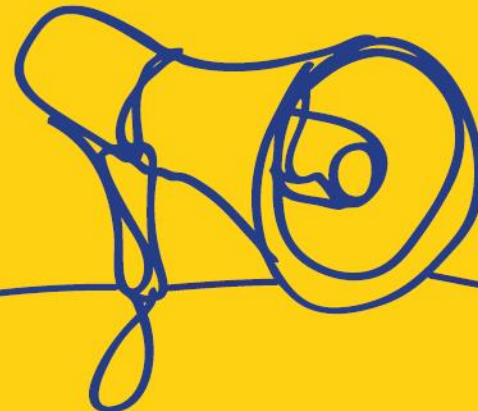
‘Staff being trained in safeguarding procedures- we found responses vary’.



What did we learn: Service user views

“Staff listening, giving options, responding quickly, regular updates, support...”

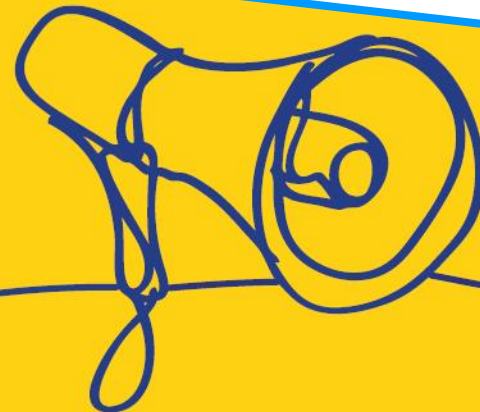
...i.e. making safeguarding personal”



What did we learn: Service user views

“People are not always realising the way they are being treated is abuse.”

“Vulnerable people need to understand the different types of abuse.”



TOP 3 Safeguarding Tips!

Don't make decisions for people.

One lead contact, keep it simple!

Be open & upfront about the
process.



What difference have we made?

- **NHS Harrow** monthly meetings in place to review mental health safeguarding cases
- **Local Authority** safeguarding lead deep dive reviews of mental health data
- **Greater scrutiny** of NHS mental health trust reporting of safeguarding e.g. KPIs (Key Performance Indicators)
- **Mental health trust** programme of safeguarding improvements, updates HUG



Specific questions asked about Safeguarding experiences

- How can people with mental health problems keep safe?
- What have your experiences of support been if you have been abused or are at risk of abuse?

For NHS, Local Authority & Police:

- How can your services best support services users who are at risk or have been abused?
- How can best coordinate support to keep mental health service users free from abuse?



Harrow User Group

Thank you

Raksha Pandya

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Community Reference Group

Grahame Snelling
Healthwatch Kingston
Board member with lead for safeguarding

Background to setting up the Community Reference Group

- Impetus of the Care Act 2014
- Making sure as Healthwatch Kingston (HWK) we took up our place on the Safeguarding Adults Board (SAB)
- Being an active member
- Invitation from the chair of the SAB to consider setting up a Community Reference Group (CRG)
- Local recognition of what HWK has achieved
- Board level commitment to the safeguarding agenda.

Planning the CRG

- Research elsewhere
- Identifying the resources and expertise
- Using group work theory and principles to shape the design
- An emphasis on safety, bounded confidentiality and clarity about who would be there
- Developing ground rules for negotiation
- Devising a time limited structure with quarterly meetings
- Consultation with Adult Safeguarding to ensure synergy
- Launch in November 2018.

CRG Aim and links to our vision

- To collect the experiences of Safeguarding service users and their carers in order to inform practical policy and practice improvements
- To draw immediate attention to pressing concerns or where a person was at risk
- To gather intelligence about the perceived performance of partner services to develop focussed reports for the SAB
- To provide a credible community voice as a key aspect of the SAB.

Who came to the CRG?

- Initial advertising through existing Healthwatch Kingston communications networks
- The first meeting – didn't know who to expect!
- Carer who whistle blew institutional abuse and then was alleged perpetrator; parent with concern about care of adult dependent; clergyman with concerns about financial abuse and neglect amongst a group of parishioners; victim of domestic and familial abuse; advocate concerned about unsafe discharge of homeless people from hospital.

Emerging themes

- Poor communication about what's happening during a 'case'
- Lack of joined up planning for vulnerable individuals with complex needs
- Judgement calls about escalation in relation to service quality
- Assessing capacity and consent
- How, when and why a case is opened or closed; spelling out the Section 42 conversion criteria
- Focus on experience of process as opposed to outcome.

Issues to grapple with

- What is the group for?
- Single attendance to tell a story and move on – ‘I’ve been heard’
- Second visit to find out what happened next
- No one has been to all 5 meetings – not designed as a support group
- Lack of consent to share a concerning narrative
- Self selection to attend – small sample size (11 individuals) with clear personal perspectives.

What's next?

- Report on CRG work with anonymised case summaries to each SAB meeting to illustrate emerging themes
- 1 escalation case concerned with care quality and staff conduct
- 1 thematic inquiry linked to hospital discharge
- Dialogue with Adult Safeguarding during 2019 to broaden scope of public voice dimension extending to Making Safeguarding Personal (MSP) outcomes
- Pilot scheme to collect MSP impact data from as many service users as possible from April 2020
- Healthwatch Kingston Board commitment to support this agenda at a time of competing priorities
- Continue with group until second annual review at the end of 2020.



Thank you

Contact:
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healthwatch
Kingston upon Thames

Group discussions

How can you use what you have heard here to make a difference to people with lived experience of safeguarding?

How will you know your efforts will make a difference to people with lived experience?

