MINUTES OF THE MCN MEETING held on Wednesday 20th September 2023

Present: Lesley Pillans, Linda Keenan, Shirelle Young, Alice Duncan, Brian Dawson,

Shaun Ewen, Paula Collin, Laura Hulse, Judit Szekelyhidi, Ross Sibbald, Lisa Malcolmson, Mark Edmond, Claire Smith, Heather Ireland, Emma Plunkett,

Sharon Hamilton, Phil Crockett

1. Apologies

Heather Cassie, Sam Aitcheson

2. <u>Minutes of Previous Meeting</u>

The Minutes of the previous meeting were accepted as accurate.

3. <u>Matters Arising</u>

A meeting set up with Perinatal Services and took place last week and was a very good helpful meeting. Minutes will be distributed once typed up. Another follow-up meeting will be set for the end of the year.

A further meeting with REDU and Stephen Anderson re OOA referrals following on from last week's meeting will be sometime in November.

All other matters arising are covered under the main agenda.

4. Service Developments (by Region)

Tayside

PC gave the update from the Tayside Team.

A few staffing developments since last meeting. Andreas Paphiti, who has just qualified as a clinical psychologist and did his third year placement with the team, has successfully finished his training and is about to start on a full time basis on the 2nd of October. Teds also have Jodie Gilbert starting on the same date and she will be a full time Assistant Psychologist and she's coming from the CAMHS Tayside EDS team so again someone who knows the field already and has already been doing a lot of work within the team.

Have also managed to recruit a GP Career Start doctor who will come in January so have a bit of time before she starts. PC had a meeting with her last week and she's very enthusiastic about the whole field of mental health and has been working in Tayside and is very keen to link in with people. If everyone is happy PC will pass on details. Initially she will be one day a week but might increase as time goes on.

Busy with a lot of transition cases this year, both from within Tayside and quite a few coming from CAMHS. Have also had some out of area ones and have had a couple of issues in that they seem to be getting discharged from services before it's

confirmed that they've actually linked in with a Tayside GP. Have a few at the moment where as far as they know, they're living locally, but as far as Trak care is showing they're not actually registered with a local GP. This means they can't actually activate the referral so that's a bit concerning in that again, there is the danger of people falling through the gaps.

Have 3 patients in Eden at the moment and 1 in the Priory who is about to be discharged.

Research wise, Andreas has had one of his two papers published already and is waiting to hear about the second one. Still recruiting for Susan Simpson's study and have been approached by Fiona Duffy with a view to maybe being involved in a FREED study but that's still at very early stage.

Really busy with teaching recently. Doing nursing, third year medical teaching, about to do the first year psychology teaching and have been approached by lots of the CMHT's locally. Beyond that working around the different pathways that they're involved in at the moment so have the neurodevelopmental work which Ali and PC will present on at the MCN Annual Event next week and the EDPD pathway which Louise is leading on, a local one around transitions and another local one around diabetes.

Highland

HI gave the update from the Highland team.

With regards to staffing had some positive news following ongoing discussions about need for continuation of the additional Band 7 post that they were able to access through the emergency eating disorders funding from the Scottish Government, which was a fixed term post and despite attempts weren't able to continue that. It had been put out for recruitment as a fixed term post again, but it's now been converted to a permanent post. LH confirmed that it had gone out as a Band 6 annex 21, so it's a development post which means that if somebody's willing to do the CBT training they can apply for that without currently being trained, so it opens up the doors for people that aren't currently in a position to take on a Band 7. They are aware of a candidate that is likely to fit that criteria. Have also been allocated a Clinical Psychology post which they haven't had previously so that would be a valuable addition to their multidisciplinary team. There has been a discussion that's been ongoing for at least nine months around a change in the most senior clinician roles within the team in terms of looking to create a Nurse Consultant post which will have more of a team lead function. This will involve HI reducing her hours as Consultant Psychiatrist within the team and will map a model that will be more similar to how things are done in Tayside and Grampian where the Consultant Psychiatrist isn't the team lead in the way that Yvonne Edmondson who developed the Highland service set up. This would also free HI up to fill another service gap. The model of having a nurse consultant post would be really exciting and also for the wider team in Highland because it's not a role that they've traditionally had.

There has been a formal establishment of an Eating Disorder Hub within the Child and Adolescent Mental Health Service in Highland which is not a separate service but a sort of hub within the generic CAMHS service. This has been something that they've been trying to develop over many years but it's now been formally recognized. The team have met with them and trying to firm up a pathway. There has been various attempts over the years to get a pattern going of regular meetings with their CAMHS colleagues and although they've always had informal communication this should give a structure. They're going to put together a pathway which they can lay out as a formal way of working and are going to use that as an opportunity to firm up their transition approaches and also look for some service user feedback around that.

In terms of research they are also recruiting to Susan Simpson's study and teaching similarly there's an ongoing pattern of contribution to a range of teaching of medical students and they get lots of requests from nursing students and other students to come and join the team, and although it's difficult to have people sitting in with patient sessions, their MDT format gives a good opportunity for involving people. HI has been invited to give teaching to both the broad based trainees and the FY2 so delivery of treatment to junior doctors is ongoing.

LH added that the current waiting times are getting quite tricky and they have breached the urgent criteria on one occasion and ended up having to Datix that. They have group work restarting, which is exciting as that's been on hold since before COVID. They also have Amy who has just started doing her EEATS Accreditation.

Although positive news about staffing in the future the current staffing situation is difficult and the referral numbers still reflect the height of the peak at the end of the pandemic.

Eden Unit

LJ gave the update from the Eden Unit.

Staffing still an issue and all feeling the pressure, so morale to be fair has not been great. Currently have no OT input at the moment other than Christine who does a brilliant job. Since the last meeting Ross has settled in now and that's proving to be a real asset to the team and means they have more medical cover throughout the week. Have had a few medical students in other disciplines and that's been really positive. Have Dharmesh who is the CT but he is off on study leave at the moment and also had a core trainee for the last few rounds which has been really positive as well. Been trying to still keep going with training and LP and LJ have been doing quite a lot of teaching. A couple of counselling organisations approached LJ asking for teaching and have the mental health officers teaching coming up and have been asked to be involved in the trainee teaching as well into October and are still doing the Year 5 teaching as well for the medical students so there are a number of teaching opportunities coming up.

LJ and Shirelle Young ran a Music and Art Therapy Group which went well and had positive feedback from the patients so hoping to run that again and have managed to get a music therapist coming into the ward once a week which is a brilliant addition. As well as Ross's post they are quite keen to see if they can secure

funding to make that a longer pilot project. The pilot project is for 16 weeks for the music therapist so it would be good if they could keep that going for a bit longer to try and develop an expertise in creative therapies in the North. In regards to Ross's post it would be good if the funding for that could be extended so that could be kept going because they have realized what a valuable asset of having a PA in the team has been.

Already mentioned the PDED group that LJ is chairing at the moment that's hopefully going to be useful for everybody. LJ has a meeting with Tony Winston who's doing the English version of that tomorrow so hoping that will be a nationally relevant document.

LJ has an EEATS trainee on the Unit who is doing really well and just about ready to submit.

SE gave the update with regards to what's happening on the ward with nursing staff and a general update. Have three new NGN's starting, two starting next week and one starting later in the year and all three of them were previous students with Eden. Have two agency workers at the moment and the plan is that they're going to be there longer term. Nick, who works Monday to Friday is an absolute godsend and really helps keep everybody going. Also have another agency worker who works on nights so once you take away the three NGN's they have three whole time equivalent band 5 vacancies at the moment. SE and Rachel are looking at the advert to use different methods to get the news out that there are vacancies and trying to be a bit more creative with the posts. Currently have two deputy charge nurses in secondment posts which is going really well and the feedback has been really quite positive. Have been well supported with the hospital with the patients getting fundamental needs met, they have been getting their walks and been getting out and about but are lacking a little bit in the eating disorder care and treatment particularly in the dining room.

From a development point of view been really lucky in the last few weeks with Viv starting her IPT post. She's one day a week and is already talking about submitting a poster to a quality event, which is either later on towards the end of this year or beginning of next year.

Julie one of the registered nurses has been very proactive and looking at tissue viability and she's organised some training for staff next week. Working closely with lan who is the Associate Practice Educator for Healthcare Support Workers and he's doing some work around VBRP and asked if Eden staff could be part of that process in looking at reflecting on their daily work and to look at things that really went quite well and things that didn't go so well so they can improve on.

SE was fortunate last week to go to some LEO training which is leading and empowering organizations, and is an international course. It was a fantastic three day course and he came up some new ideas that he would want to implement on the ward. Rachel Peden and Jen Sorbie are also attending the same course in October.

Over the last few months have had a variety of awards. Viv the IPT Therapist got a Daisy award. Other staff members received Star Awards, Irene got one for her risk assessments, Rachel got one for her leadership and we got one and as a whole nursing team.

EP gave a short update regarding the day program. They got funding through OT money for a support worker so they recruited somebody 0.6 wte between outpatients and day program, but unfortunately she's got assistant psychology job so she's leaving, but Fiona from OT has actually found some more funding so hoping to be able to advertise the post as a 0.8 band 4 healthcare support worker between day program and outpatient EDS so that will be two days in day program and two days in EDS. It's been really valuable for the day program, but especially for outpatients just to be able to do some of the kind of eating skills and maybe social eating and things like that.

CS advised that there is an action plan in place around staffing and a lot of areas across the site are in a similar position, lots of vacancies waiting for new graduate nurses to come into position however, obviously there is a specialist aspect to Eden so having permanent staff rather than regular bank staff across the site doesn't fully meet the needs of the patients. There's been a lot of work done in the last month and having the new graduates in post and the new Band 6 is going to make a big difference. There is no plan to stop Agency at the moment so they can continue in the meantime.

Grampian

JS gave the update from Grampian.

In terms of outpatient service staffing wise as Emma mentioned Abby is leaving but heard from Fiona that we might be able to recruit 0.4 OT as well because their OT has been on secondment and it's been extended until next year, it's been quite poorly communicated but finally got the answer regarding what's happening with her. The biggest concern obviously is Phil retiring and he is cutting back his hours more and more.

Now have a full time Nurse Therapist starting at the end of October and a part time Dietitian that just started recently so hopefully with the increase staff level, we will be able to focus on other things as well, like teaching and think more about research types of things. Another staffing thing which is more about actually personal development than professional development is our Physiotherapist managed to apply for training in Spain and she's looking for funding for that. Previous Physiotherapist Sandra also did this training and she did good work with the patients using that model. It's going to be a one year training and she has applied to Millar Mackenzie Trust and Endowment Trust for funding.

Also part of Susan Simpson's study and are recruiting anorexic patients and their carers and have spent quite a lot of time looking through their open patients to see who is meeting the criteria for this research. JS is also focusing on the diabetic and eating disorder liaison work to see how we can develop an integrated care pathway.

Just finished the MBT group with Phil. Don't think anyone is going to continue with that group so recruiting new people. With Phil retiring Emma is going to take over which is a nice integration of the day program in the outpatient clinic and the work around that and how to recruit people who have PD and ED takes a lot of thinking and it's not as easy as we thought so something they need to really carefully think about.

Had their review day last week and the waiting times are pretty good and the longest waits are on the individual waiting list but the group waiting lists are really quite good and triage waits are good too.

Lisa Malcolmson gave an update on Phil's vacancy to say that the vacancy process is well underway and the job description is sitting with the external advisor so hopeful that that will be back in the next week or so and then it will be advertised and advertised externally as well as in Grampian.

NEEDS

Heather Cassie sent her apologies for the meeting but sent in the following report.

NEEDS (Scotland) continues with a small core of regular attendees, a few sporadic attendees and the occasional new person. There are two very regular carer members and some occasional attendees, but the numbers are much lower than before lockdown. This seems to be a new pattern as there have been more online support services developed. Beat's POD is popular with carers and SupportED's befriending service too. We feel that face to face meetings are more beneficial, but understand the constraints of timing, around the evening meal, travelling time, and family commitments. Now that leaflets and posters are permitted again, we hope to advertise more widely, and also investigate some sort of presence on social media. which would have to be strictly monitored. We would also request short meetings with the staff at the Eden Unit and also the Outpatients EDS to learn more about who we are and what we do. Unfortunately our Dundee group, Bridging the Gap remains on hold until at least the beginning of 2024, as there is a shortage of volunteers, and also a continuing accommodation problem related to staffing at the location. Until the group resumes, anyone from the Tayside and Angus regions are very welcome to attend our Aberdeen group. Dates and times are on our website at www.needs-scotland.org

Shetland

Alice Duncan joined her first MCN Meeting and gave an update on the Shetland service.

AD started her role in December of last year and the picture in Shetland is very similar to what's going on on the mainland in terms of recruitment which has been a huge issue. The service is also going through a period of service redevelopment where before they used to just be a blanket staff team of just Band 6 nurses they have now re-organised that a little bit and now have Band 6's, Band 5's and Band 3's so have been recruiting for those posts which has been reasonably successful and have two new nurses that have started and also a support worker who they are putting through the OU program. Over this last year from an eating disorders perspective, AD's main aim has been ensuring that the staff know where the resources are to support somebody with an eating disorder. They have also had two of their nurses complete the MANTRA training in March and one of those CPN's has also gone on to complete some CBT training specifically for eating disorders.

Everything's kind of been a bit up in the air over the last 12 months, but things are settling and hoping to be concentrating more on staff development going forward so more of their nurses have the knowledge to support people with eating disorders.

5. MCN Visits

LP & LK have already visited Tayside, Highland & Orkney so would be keen to complete the regions by visiting Shetland and Grampian.

6. Training

LP advised that she is doing the FY2 training which will be in January and is an additional thing from the Scottish Government stuff where she was in the education and training group, so that's an extra lecture in its own right.

Held an EEATS Trainees Day back in June and the next one will be in Edinburgh on the 1st of December. With regards to the EEATS Supervisors Day currently trying to confirm a date with the speaker but will either by the 19th or the 26th of October.

7. Audit & Quality Assurance

The next Quality Assurance meeting is scheduled for the 4th of October at 2pm. In terms of some of the items that were discussed at the last meeting LP has updated the Ward 104 protocol and sent it out for comments. LP and Waleed also updated the Grampian GP guidelines so both have been updated to link in with the new MEED guideline. The next step was to upload that and a few other things onto the Grampian Intranet.

8. AOCB

Electronic Questionnaires

SA had asked for this item to be added to the Agenda but he was unable to attend today's meeting. It was agreed to carry this item forward to the next meeting.

Music Therapy Funding

LJ spoke about the music therapist who's doing a 16 week project that came from the Scottish Government monies and being aware of how long it took to get that project off the ground it would be good to think about how to extend that. Would be good if they could have funding for six months or a year as that would give the option to run some groups and potentially do some really interesting evaluation and would be something that would really benefit the patients in the unit. Where would they go to look for funding for this? Again similarly looking at Ross's Physician Associate post obviously that's a split post between Eden Unit and CAMHS and again came from the Scottish Government money and that's an 11 month post. Again aware that these things take so long so don't want to get to the end of Ross' time and think what are we going to do.

HI advised that she has been invited to a North of Scotland Mental Health Strategy meeting tomorrow that Sophie Avery is speaking at. She was the Scottish Government representative who dealt with the emergency funding so is hoping that through hearing her speak there might be some information about ongoing Scottish Government provision. HI's understanding is that there has been another letter come out fairly recently confirming that eating disorders remains one of the Scottish Government's priorities although some money has been identified in amount, there's still a lack of clarity about exactly how much money is being allocated to each board and obviously that makes it difficult for boards to know how to spend the money. If there's anything useful from that meeting HI will feed it back to the MCN.

PC echoed HI's point that the eating disorder money has not stopped but the amounts don't seem to be too clear. He did see an amount that was being estimated sometime ago for Grampian but doesn't think there's been any guarantees. There would need to be a negotiation with clinical management first of all in Grampian as they host the unit and then approach the partner boards. The other thing is Ross's post a day a week of that was money that already existed in the Eden Unit budget so it's worth sitting down with the Eden Unit Finance Manager to look at the budgets. There is an Eden Unit Review Group Meeting on the 8th of November so this can be discussed then.

LP advised the group that Shirelle had approached herself and Louise after the ward round today to let them know that she is going to apply for an AHP career fellowship this year and the proposal she has is centred on providing Art Therapy as an online service to people on a waiting list that would offer some psychological safety and stabilisation which would in attempt align with the public health waiting well service. She has to have her proposal in by the 17th of October the pilot would run for 12 months and the aim would be to create blocks of sessions for patients or people online with the option of face to face sessions at intervals if required, but looking at it being a conjunction with other regional professionals and MDT so that it's a joined up approach. Shirelle is looking for any feedback on who might be interested in thinking about this or perhaps identifying patients on the waiting list that might benefit from this. It would be a service that would be provided free of charge because it would be part of the pilot project that Shirelle would be undertaking. Shirelle advised that she has done presentations for various regions and there has been an interest in art psychotherapy but there's not always a budget for that. Currently Shirelle works for a third sector charity and about 20% of the referrals are from children on the CAMHS waiting list. She is still working on the proposal and was sceptical at first about working with 10 to 18 year olds online but it does work, obviously not for everyone but therapy doesn't always work for everyone depending on what their needs are, so it is a viable option possibly to take some of the stress off the waiting lists and hopefully prevent an immediate hospital admission or perhaps an increase in medication.

HI asked whether this would be a resource that was suitable for an unfiltered audience essentially because not all of the people who are referred to the outpatient service will end up being appropriate for services or having an eating disorder as such.

Shirelle advised that the young people she works with just now are self-referrals but are also a mixture-ones that have been referred from CAMHS or other charities

such as Autism charities. That is something she would need to iron out and explore a little bit further as to what option would work best and serve the MCN regions. She would be limited as well because it would possibly be a day to a day and a half per week

PC asked whether it was purely for patients with eating disorders? Shirelle advised it could be but could be for other patients as well such as people dealing with anxiety where it would be a case of working creatively to give them some sort of coping mechanisms to stabilize them and hopefully prevent a hospital admission.

AD asked whether it was just online that SY was planning on doing it because that would be something quite a few of the Island communities would be very interested in as their access to different types of therapy is quite limited for instance in Shetland if somebody wanted to engage in art therapy, that would be quite a struggle.

Shirelle has to have the proposal submitted for the 17th of October and will feedback any update at the next meeting. If anyone wants to get in touch with Shirelle to ask any further questions they can contact her by email.

9. Date and Time of next meeting

The next meeting will take place on the 6th of December 2023 at 1pm.