

Leeds Multi-Agency Practice Development Group - notes

Tuesday 9th April 2019 2.00pm-4.00pm

WY-FI Hub, Park Square, Leeds

Facilitated and Notes by Roger Abbott – WY-FI Workforce Development and Learning Coordinator

Attendees: Laura, Sarah F, Sarah C, Robin

Apologies: Paul, Anna (Engage)

Representing: CGL (Leeds IOM); Engage; WY-FI; Urgent Care

Aims

With a focus on people with multiple needs in Leeds, the aims of the group are to develop practice by:

- Improving confidence and skills in working with challenging individuals;
- To understand each other's work;
- To share good practice;
- To support each other to overcome specific difficulties;
- To identify any gaps or barriers in services, and;
- To improve the service user experience of services.

Notes

We began with introductions and an outline of the group's purpose for the new attendees. The topics for discussion were agreed as follows:

- 1) Balancing Support – too much, too little. (How are some people accessing services much more quickly than others?)
- 2) Matching needs with criminal justice requirements
- 3) Discharges in to the community following mental health episodes

Discussion Topic 1

The discussion covered: communication; some boards (e.g. MARB) encourage many services to get involved; sometimes services can't decide who should be involved, resulting in no-one being there; handovers; trust; transparency of agencies with one another; pressure on services and capacity; service users can attend appointments because of loneliness and isolation; referrals are accepted depending on who refers them. Do Multi-Disciplinary Teams make a difference for service users?; does a multi-agency referral have more clout?; Linking teams together is not always easy; consent and information sharing between services – not always two-way.

Discussion Topic 2

The discussion covered: Clients complying with conditions to get a conditional caution resolved, therefore they only share a minimum of information; clients experiencing multiple needs struggle to get to an appointment and then may be breached for non-attendance; it is often not recognised by the police that not attending an appointment is not the same as committing an offence.

Discussion Topic 3

Description of a particular case – client with a history of psychosis and paranoia in A&E during an episode. A MH assessment was carried out and then the client discharged. The episode continued at home with hallucinations and continuing psychosis. Has since returned to hospital. The discussion covered: risk to self and others; GP referral; referral to CGL: street outreach who can help and have a MH specialist worker.

The next PDG meet on Friday 24th May 2019, 10.00-12.00 at BARCA, Unit 2 Northside Exchange, Wyther Ln, Leeds LS5 3BP

Discussion Topic Menu

(This list is not exhaustive it can be added to. Thanks to members of Kirklees and Bradford PDGs for their contributions)

- Not matching chaos with chaos
- Role boundaries
- Professional relationships
- How to focus on *all* of your clients
- Ending relationships
- Recognition of good practice
- Building trust
- Being responsive
- Working as a team
- Accountability and responsibility
- Planning for the future
- Structuring the day
- Time and priorities
- Shifting priorities
- Dealing with crisis
- Working with couples
- Managing carers (expectations)
- Money lending/financial abuse
- Non-engagement
- Delivering person centred approaches vs. demands and expectations of services
- Managing competing needs – what you see as a priority vs. what the client sees as a priority
- Avoidance/deflection
- Managing boundaries
- Creative approaches – adapting to austerity
- Building/ending relationships
- Working with resistance
- Working with unwise decisions