

ERYLINK Sub-Group/Focus Group Proforma

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| Title of sub-group/Focus Group | Mental Health and Learning Disability Sub Group | |
| Status of Group Sub-group/Focus Group | Sub Group | (Please refer to Governance document sections 6.2 and 6.3) |
| Name of Chair including contact details | Sylvia Whitton tel: 01482 443246 (preferred) sylvia.whitton@googlemail.com | Budget requirements not set yet |
| Members of Group including contact details | Jean Turner (skipsea151@aol.com) Alison Rowlands (alison@northyorkslink.org.uk) Ruth Marsden (ruth@myford.karoo.co.uk) Sally Browne (tel: 01482 473891) Liz Watson (lwatson@mindhey.co.uk) Andrea Nettleton (andrea.nettleton@rethink.org) | |
| Group Description | <p>The Group is made up of members of the LINK working to improve mental health and learning disabilities services in the East Riding.</p> <p>They listen to local people, identify local issues, make recommendations to the Lead Group and work towards solutions. They work closely with the wider membership, service providers, users + carers and commissioners (e.g. Humber Mental Health Teaching NHS Trust, Hull and East Yorkshire Hospitals NHS Trust, voluntary organisations).</p> <p>Additionally, the Group will on behalf of the ERYLINK strengthen the influence of the local voluntary sector by inputting to the Trusts' Quality Accounts as well as strategies and plans as a key stakeholder.</p> <p>Further, the Group will influence the ongoing commissioning process.</p> | |
| Priority 1 | Improving provision and accessibility of Mental Health Inpatient Units (e.g. threatened closure of Buckrose Ward in Bridlington and implications; general uncertainty about future of inpatient units and related community facilities. Monitoring.) | |
| Priority 2 | Improving awareness of and services for people with learning disabilities and/or | |

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| | dementia (e.g. follow-up of changes after “Death by Indifference” and “6 Lives”; establishment of clear care pathway/single point of access in acute hospitals) |
| Priority 3 | Improving the East Riding of Yorkshire Crisis Resolution Home Treatment service (need for facilities to be in place both when people are in crisis and for continuing care, e.g. transport issues) |
| Date of Approval at Lead Group Meeting | |

Sub-group/Focus Group Workplan

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|-------------------------------|--|-----------------|-----------------|
| Priority 1 | Improving provision and accessibility of Mental Health Inpatient Units | | |
| Outcome to be achieved | Ongoing services responsive to recommendations made | | |
| | How this will be achieved | By whom? | By when? |
| Step 1 | Liaison with commissioners and providers | The Group | |
| Step 2 | Monitoring visits | The Group | |
| Step 3 | Correlation of extant information | The Group | |
| Step 4 | Public forums and/or wider membership consultations | The Group | |
| Step 5 | | | |
| Step 6 | Present outcome to ERYLINK Lead Group for recommendation to commissioners | Sylvia Whitton | |
| Priority 2 | Improving awareness of and services for people with learning disabilities and/or dementia | | |
| Outcome to be achieved | Ongoing services responsive to recommendations made | | |
| | How this will be achieved | By whom? | By when? |
| Step 1 | Ongoing work with the Our Say Group | The Group | |
| Step 2 | LINK representation on Humber Mental Health Teaching Trust strategy groups, e.g. “Death by Indifference” | Alison Rowlands | |
| Step 3 | Monitoring implementation of privacy and dignity | The Group | |
| Step 4 | | | |
| Step 5 | | | |
| Step 6 | Present outcome to ERYLINK Lead Group for recommendation to commissioners | Sylvia Whitton | |
| Priority 3 | Improving the East Riding of Yorkshire Crisis Resolution Home Treatment service | | |
| Outcome to be achieved | Ongoing services responsive to recommendations made | | |

| achieved | | | |
|----------------------------------|--|-----------------|-----------------|
| How this will be achieved | | By whom? | By when? |
| Step 1 | Working with the Crisis Resolution Home Treatment Team to review the implementation of the service | The Group | |
| Step 2 | | | |
| Step 3 | | | |
| Step 4 | | | |
| Step 5 | | | |
| Step 6 | Present outcome to ERYLINK Lead Group for recommendation to commissioners | Sylvia Whitton | |

Sub-Group/Focus Group Proforma checklist

| Activity | Date completed |
|--|-----------------------|
| Terms of reference completed | |
| Workplan completed | |
| Terms of Reference & Workplan agreed by Lead group | |
| Terms of Reference & Workplan uploaded to Website | |
| Message sent to all Members re: posting on website | |
| Insert summary into Newsletter | |
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Governance Guidance re: Sub-groups/Focus Groups

- 6.1 The ERYLINK Lead Group may establish time limited Focus Groups and more permanent Specialist Sub-Groups to examine and report on ERYLINK issues and priorities.
- 6.2 Focus Groups will focus on specific pieces of work as set out in the ERYLINK work plan (e.g. a specific health or social care service). They will co-ordinate research and produce recommendations to the ERYLINK Lead Group and Forum for approval and submission to external stakeholders. They will allow a wider range of members to participate in the ERYLINK's work based on their specific interests and expertise.
- 6.3 Sub-Groups will focus on ongoing specialist areas of work such as the monitoring of specific NHS Trusts, commissioning issues, or ERYLINK operations issues.
- 6.4 The ERYLINK Lead Group will decide the terms of reference and criteria for membership of Focus Groups and Specialist Sub-Groups taking account of: local specialism and expertise; the issues to be examined; and the local situation regarding health and social care.
- 6.5 The ERYLINK Lead Group will invite expressions of interest from people interested in joining Focus Groups and Sub-Groups. Once established, Focus Groups and Sub-Groups may invite further members to join if they feel their skills and experience would benefit the group.
- 6.6 Focus Groups should ideally be chaired by a member of the Lead Group. If this is not possible the Chair will be co-opted to the Lead Group for the life of the Group.
- 6.7 Sub-Groups must be chaired by a member of the Lead Group.
- 6.8 There is no set number of members for Focus Groups and Sub-Groups. Groups will be encouraged to operate flexibly in order to achieve the best outcome. Groups will be able to decide how they manage themselves in terms of roles within the Group and how the Group operates. If such issues cannot be resolved by the group members they will be referred to the ERYLINK Lead Group for a decision.
- 6.9 Focus Groups and Sub-Groups will agree their work plan and budget with the ERYLINK Lead Group. Support will be available from the ERYLINK staff team. Decisions to exercise any of the ERYLINK statutory powers will require the prior approval of the ERYLINK Lead Group.
- 6.10 Focus Group and Specialist Sub-Group members will be expected to act in a reasonable manner and abide by relevant governance policies such as the ERYLINK Code of Conduct and the ERYLINK Conflicts of Interest Policy. (see Appendices)
- 6.11 The Chairs of Focus Groups and Sub-Groups will report regularly to the ERYLINK Lead Group.
- 6.12 Focus Groups and Sub-Groups will communicate with and report to the wider ERYLINK membership and relevant statutory service commissioners and providers.

6.13 The decision to wind-up any Focus Group or Sub-Group which has completed its work will be taken by the ERYLINK Lead Group, after consulting with the Group concerned.

6.14 The ERYLINK Lead Group will consult with the Focus Group or Sub-Group which it feels is not operating effectively, or in accordance with its aims, or in the best interests of the ERYLINK, with view to achieving a suitable resolution. Ultimately the ERYLINK Lead Group may decide to wind up a Group, or to exclude a member of a Group, if it feels this is in the best interests of the ERYLINK.