







NHS Integration Operational Group Meeting AGENDA

Friday 18th June, 10:00-12:00

Zoom meeting link | Meeting ID 931 8212 9632 | Passcode: 308231

Time	Agenda Item		Lead	Time	Paper
10:00	1.	Welcome and Introductions	Steve Pilling	5 mins	
10:05	2.	Minutes from the last meeting and matters arising	Steve Pilling	5 mins	Minutes
10:10	3.	Additional student membership	Steve Pilling	20 mins	
		Suggestion to increase student representation on the group.			
10:30	4.	Research and evidence	Laura Gibbon	30 mins	
		Presentation on findings and recommendations from the IMPACTS peer-led research projects. A total of 18 students have conducted research across a diverse range of themes and issues.			
		Key findings and recommendations to be shared. Group to discuss implications for practice and ways in which findings might be disseminate.			
11:00	5.	Collaborative project: SU-iCope blended workshop and peer support intervention	Rosie Ellis	30 minutes	
		Update by the project team on the launch of the pilot intervention, learnings from training of peer link worker, further piloting and evaluation timelines.			
11:30	6.	Updates		25 mins	
		nt updates from the group and preparations eturn to campus/ the new academic year			
	(i) (ii) (iii)	Services and Disability, Mental Health and Wellbeing Workplace Wellbeing			
	(iv)				
11:55	7.	Sum Up and Any Other Business Meetings schedule for next 12 months	Steve Pilling	5 mins	

























NHS Integration Operational Group Meeting 4

Friday 19th February, 10:00-12:00

Meeting Minutes

1. Welcome and Introductions

2. Minutes from the last meeting and matters arising.

LG updated the group on submission of a grant proposal for the new OfS funding competition (as discussed at the last meeting). Following the December NHS-IOG, PsychUP for Wellbeing submitted a proposal for a Peer Support 'Accelerator' programme. Applicants are due to be notified of the outcome of their bids in April or May. If successful, the project would commence in June.

3. Current projects:

UCLPartners and UCL Student Support and Wellbeing partnership: UNI-LINK

SP informed the group of a potential pilot of an e-triage system for student mental health in North London linked to IAPT (UNI-LINK).

This is a project with UCLPartners in a potential partnership with UCL SSW, and other HEIs in the N. London footprint. As a starting point the system would focus on linking students with IAPT services but would not be solely focused on this. The ambition would be to extend to, if not include in the pilot, specialist services such as those for eating disorders and alcohol/ substance misuse, known to be increasing in prevalence amongst students.

Points of discussion:

- Location, management and access to data and data-sharing between agencies.
- Selection and use of appropriate screening tools, depending on range of issues the system supports.
- The point at which human input/monitoring should occur to ensure quality and safety of the tool.
- Referral pathways/mechanisms and access to services.
- Getting the technology and system itself operational and fit for purpose, separate to deciding on the range of issues any system might manage.
- Importance of involving Primary care in the development of the system; role in referrals and pivotal role in continuity of care and effective management of risk.

Further discussions to take place with various individuals outside of the meeting, including DL, BK and CE.

SU-iCope blended workshop and peer support intervention

ST and RE updated the group on progress with this collaborative pilot project.

Parameters of the intervention and the role of collaborating partners (University Clinic/iCope, UCL SU and PsychUp for Wellbeing) has been agreed.

























- Operational polices and procedures being developed (risk management, data management etc).
- Preparations are now underway for the recruitment of a small group of students to be trained as 'Peer Link Workers'. The role description and criteria for selection has been developed and is being signed off.
- Training programme is in development, drawing on the HEE Peer Support Competency Framework and associated training from Care City.
- Currently working towards recruiting students by Easter and conducting training over the Easter break.

4. Research and evidence

Presentation from Tom Osbourn, PsychUP for Wellbeing PhD Student, on research looking at health inequalities and students' pathways through care.

TO introduced himself to the group and provided an overview of his background, including career in nursing in intensive care, work at the Red Cross evaluating health interventions and research in public health.

TO summarised the background to, and plan for the PhD. Presentation slides are accompanied with the minutes.

Aims of the PhD are to look at whether services in London are meeting the needs of students and who may benefit from an improved service offer.

Part of this includes a meta-analysis and systematic review to distinguish differences between student characteristics and service barriers.

As the prevalence of mental health issues within the student population is not always well understood, the review will look at prevalence in the general pop and then at costs of use/ episodes. It was noted that looking at a range of data sources can get a reasonable sense of prevalence.

TO invited the group to share suggestions of others it might be important to engage in this research and any additional thoughts or considerations on the proposed work.

- BK and SG happy to engage and provide SPCS and SWW perspective on inequalities within UCL student population. Natalie Humphries also identified as someone to approach.
- LK noted that the IoE have carried out some research with Chinese students within the Engineering Department.
- Jordan Rowe, Centre Manager of UCL Urban Laboratory, is looking at points of access for Chinese students at different services.
- Mapping of demographics of UCL student population as a whole with demographics of those using services of SSW; will likely identify BAME and Chinese students as proportionally less engaged with support.
- If there are groups less engaged with services, are they going elsewhere? Are there variations in engagement between different services?
- There can be cultural reticence in seeking support until in crisis, particularly amongst Chinese and this experience was echoed by several people in the group.

























- The pandemic has invariably affected services, service use and the nature of people's difficulties. This adds another dimension to any research being carried out. Important to consider inequalities in the context of changing models of living and working.
- Isolation seems to be felt much more strongly by students. ST noted a research report the SU were involved in produced by WonkHE and Trendence: https://wonkhe.com/blogs/anti-social-learning-the-costs-of-covid-restrictions-onstudents
- Increase in consultations overall by 15% in primary care since lockdown.
- There is research that suggests that for BAME students, lessening inequalities in access to care is about organising care pathways better, rather than service adaptations.
- The value of peers and peer support in access and movement through care pathways.

SP invited suggestions from the group as to other areas of potential research:

- Impact of 'environments of kindness' (ref: PF's foreword to the staff MH strategy).
- Staff resilience.

5. Updates

Relevant updates on work and perspectives on the on-going provision of services and support online

Student Psychological & Counselling Services and Disability, Mental Health and (i) Wellbeing

BK provided an overview of services and support:

- 5700 assessments and appointments to date, 1920 since the start of the year. Currently operating to full capacity. Students are triaged within 24 hours and seen within 2-3 week of registration (av. 6-11 days).
- Flexible service offers in response to covid and diversified to include group support, including peer and bereavement support groups.
- More than 300 students booked on to wellbeing events in the autumn/winter term. Programme has been extended to the end of the year.
- On-going close working with Ridgmount and Care First. Aiming to put SLAs in place with other partners and recruiting to new posts internally.
- Increase in complexity of cases. Manifesting as loneliness and isolation, depression and anxiety. This seems to be leading to issues with eating, drugs and alcohol. Further compounds sense of disconnection.
- (ii) Workplace Wellbeing
 - LG shared that a third-year trainee clinical psychologist on a leadership placement has been splitting their time between PsychUP for Wellbeing and the Workplace Wellbeing team. The trainee supported preparation of UCL's London Healthy Workplace application.
 - A new staff strategy has been released.

























Ridgmount General Practice update (iii)

CE gave an update to the group and further comment on some items earlier in the agenda:

- They are seeing an increase in students presenting with eating disorders and an increase in ADHD diagnoses as adults.
- Students with more complex mental health presentations including ADHD, BPD, PTSD, complex PTSD.
- Marge number of international students registering, and many bring their own medications.
- Ridgmount has considerable experience of electronic screening services, having conducted over 8K consultations. Good sense of what works and what does not. Consideration of potential harms and limitations of the system are essential.
- (iv) Students' Union UCL
 - ST provided an overview of currently Union activities including the launch of a Wellbeing hub https://studentsunionucl.org/mental-health-wellbeing-support
 - The Union have published a Student Priorities for Wellbeing report. This is the culmination of work over summer 2019.
 - 6. Sum Up and Any Other Business













