

## **Kent Acquired Brain Injury Forum (KABIF)**

### **MINUTES**

**of meeting held on 1 December 2005 at 7.00 p.m.**

**at Thomson Snell & Passmore, Tunbridge Wells**

#### **In attendance:**

Louise Brown, Legal Assistant, Thomson Snell & Passmore  
Sophia Chung, Executive Director, S C Support and Care Services Ltd  
Tim Gilbert, Brain Injury Case Manager  
Gerhardt Florschultz, Director, Raphael Medical Centre  
Deborah Harding, Unit Co-ordinator, West Kent Neurorehabilitation Centre  
Steve Leidecker, Area Director, Mid Kent Social Services  
Jenny Mazur, parent of child with ABI  
Yvonne McWean, Unsted Park Hospital  
Tony Merriman, Solicitor, asb-law  
Pam Munro, Founder and Volunteer of Tunbridge Wells and District Headway  
Frances Pierce, Solicitor, Thomson Snell & Passmore (Chair)  
Paul Roome, GP  
Mary Ryan, Occupational Psychologist, RBLI  
Dennis Smith, President of Tunbridge Wells and District Headway  
Jennifer Stockley, Independent Paediatric Neuropsychologist, Tadworth Court  
Linda Theoff, Brain Injury Case Manager  
Anuraj Varshney, OT  
Susan Ware, SALT  
Hilary Whibley, OT

#### **1. Apologies for absence:**

Sue Anscombe, Neuro-Rehab at Pembury  
Nicky Coffey, Head of Specialist Commissioning, Kent and Medway  
Di Drummond, Manager, Headway House Day Centre, Tunbridge Wells & District  
Ros Eastwood, East Kent Hospitals Schools Service  
Bhavna Jones, Service Development Manager, Unsted Park Hospital  
Mandy O'Brien, Brain Injury Case Manager  
Julie Reynolds, Chair of CBIT  
Pi Townsend, Training Officer, CAB  
Affy Wajid, ABI Co-ordinator, Bromley Social Services  
Janet Walker, Physiotherapist and parent of daughter with ABI  
Don Young, Case Manager, Harley Reed Consulting

## **2. Approval of minutes**

Linda Theoff said that there were a few points about her talk that had not been mentioned; she would re-jig her talk notes and send them to Frances.

## **3. Matters arising**

Dennis confirmed that in answer to paragraph 4 of the last minutes, Judy Barnes is responsible for NSF Long-Term Conditions in SW Kent PCT

Frances said she had emailed all those names given to her by Nicky Coffey as the named individuals responsible for the implantation of the NSF at PCT level and the response was disappointing. Nicky Coffey agreed to follow this up and to report where she could on progress.

## **4. Information Exchange**

Dennis reported that he had been invited to the Tunbridge Wells Borough Council Community Plan networking event last Friday. They had prepared a brochure as part of the plan.

Dennis also mentioned the West Kent Partnership Health Policy Board and enquired as to whether this was worth pursuing. Dennis did not know, however, how much involvement they had with brain injury. Frances asked if Dennis knew the date of the next meeting. Dennis said that he did not but he knew Estelle Grant headed it up so he could contact her. In time for the next meeting Dennis would follow up to see whether it is worth KABIF being involved. Frances said it might be worth advertising their existence on our website if nothing else.

## **5. PCT and Mid Kent Social Services reorganisation update:**

Nicky Coffey had sent her apologies for the meeting and will come to the February meeting in order to give her update.

Steve Leidecker, Area Director of Mid Kent Social Services, was welcomed to the meeting and gave a very useful talk to the Forum on his role and the future changes happening at Mid Kent Social Services and in the NHS.

He said that the NHS has been reorganised three times in the last six years. The present change is the most profound change and it is important for KABIF to understand the changes. The nine existing PCTs will become three. The Kent and Medway Strategic Health Authority will be combined with Surrey and Sussex SHA. These are welcome changes as it is difficult dealing with nine PCTs. There will also be changes with the Social Services and the Kent County Council, structures which have remained constant for the last eight years. These changes were brought about by the Government in November 2004 within the Children's Bill and compliance with them is therefore compulsory. The changes emanated from the Victoria Climbié case.

Steve said that Adult Services will be split from Children's Services. Adult Services will cover two areas, East Kent and West Kent. Steve himself will be Director of Operations for West Kent and there will be a similar Director for East Kent. They deal with over-18s. There is one Director of Children's Services. However, because of the nature of the issues, i.e. risk, there will be three heads of service. From 1 April 2006 it will be known as the Children and Education Service, bringing all the services together. There should be minimum disruption to the frontline services and making contact with them and receiving the services will not change. The offices will have the same management structure.

Frances asked Steve whether it was worth putting together a sub-committee from KABIF to meet with the decision-makers on the consultation. Steve said that we had to see what the process was for consulting before deciding on a strategy. It has to be decided what is important first. He suggested writing to Oliver Mills, Strategic Director of Kent Social Services, to ask him what can be expected of the reorganisation and what issues are concerning us.

Frances asked if, now we had made contact, Steve would keep in touch and always try to send someone to the meetings. She informed him that there was a joint meeting in August with SABIF with a talk from Chris Wall, an expert on social services provision, and this would be a good opportunity to meet his teams. Steve said that he would be happy to encourage his department to come to that and also to receive minutes of meetings.

Debbie referred to the reorganisation of the health trusts. East and West Kent Social Care Trusts are merging. This makes commissioning easier, which is a positive side to the process. It was noted that the mergers did not mirror each other so concern was voiced about areas such as Ashford which sat in a different social services structure than the health providers.

Steve said that we need to think about the issues that we would like addressed and then write to Peter Smallridge, Director of Kent Social Services Department, with our queries.

## **6. Neuro-Rehab Stakeholders Group and NSF update - Debbie Harding**

Debbie reported that the Group was having a re-think about reducing their meetings although they would be holding on to the symposium - these are people working with ABI on the ground, so it will continue. They are presently looking at mentoring and supervising,

With regard to the NSF, the SHA has a strategy going with health and social care representatives on it. It is important to bear in mind that the NSF has an enormous remit, not just in neuro-rehab but also in conditions such as diabetes. The SHA strategy group is looking at pulmonary obstructive airways disease, a reduction in acute admissions; neurological conditions (all of them, not just ABI). There will be a sub-group also. Debbie said that the PCT representatives have agreed that they will keep her up to date with matters so she can report back to KABIF.

**7. Mapping Exercise/Website Update - Mary Ryan**

Mary said that up to 100 people can go onto the website and the present idea is to put a map of Kent onto it so that people can click on to the area about which they require information. Chris Merriman will hopefully have the map on by the end of January.

**8. Headway (Kent) - Di Drummond**

Di was not able to be at the meeting and Dennis kindly gave the Headway (Tunbridge Wells and District) update in her absence.

He said that there were three main items to report. Firstly, there is the impending move. Three possibilities were still being investigated. However, one has fallen through and the situation is now getting desperate. Secondly, Headway is producing a calendar of events and some of these were mentioned by Dennis, such as Dr Trevor Powell coming in September to talk about sex and relationships after ABI. Thirdly, the 10<sup>th</sup> anniversary of Headway Court had been covered with a two-page spread in the Courier.

**9. Focus on Young Adults with ABI - Ros Eastwood**

Ros had sent her apologies for the meeting and confirmed her sub-committee would be meeting in January 2006.

**10. Speakers**

**Anuraj Varshney - Acting Co-Ordinator, DART (Disability Assessment and Rehabilitation Team)**

Anu is a senior OT and part of a 22-strong interdisciplinary team dealing with a range of different disabilities who make up the DART team.

The Driving Assessment and Advice Centre (DAAC) is part of DART and is fully accredited with the Forum of Mobility Centres. It is one of 17 centres in the UK and funded by the Department of Transport. It was started in 1988 by John Kitching and came under DART in 2002.

The diagnostic group dealt with by the DAAC team includes MS, strokes, dementia, Parkinson's, cerebral palsy, head injury, back problems and psychiatric problems.

The criteria for referrals include being 16+ with a confirmed medical diagnosis. A pre-driving skills assessment can be carried out and also an assessment for adaptation. Exclusion criteria include medico-legal work and HGV and commercial vehicles and motorbikes. It is possible to have a repeat driving assessment and ongoing regular review assessment. Home visits are also possible for adaptation only.

Assessment for fitness to drive is carried out in a number of different ways and it is possible to have a closed course (number plate test, speed and reaction, strength steering, pedal strength and physical and cognitive

assessment) and open course, which is conducted in traffic in town and on rural routes and assesses skills in speed, traffic signs, negotiating intersections, etc.

A typical case where a patient will be referred to the DART team will be as follows: admission to an acute hospital, then onward to a specialist neuro-rehab unit, then to DART for community rehabilitation which might include an access to work scheme which might include a driving assessment, and finally a community reintegration programme before discharge from DART.

Referral sources vary from the DVLA, self-referral, professional organisations and social services/carers. Contact can be made with DART DAAC at Cobtree Ward, Preston Hall Hospital, Aylesford, Kent ME20 7NJ (tel 01622 795719) and their website can be found at [www.mobility-centres.org.uk](http://www.mobility-centres.org.uk)

### **Dr Paul Roome - GP with Special Interest in Neurology**

Paul gave the Forum a talk about his work as a GP with special interest in neurology.

Paul said that he is based at the Kingswood Surgery in Tunbridge Wells. He has a neurology clinic at the surgery and sees 200 to 300 new patients per year, and 100-200 patients for follow-up. Each new patient receives a half-hour consultation. A typical new patient would be one presenting with uncontrolled fits. Paul does investigations which the ordinary GP cannot do. He also tends to see patients with diseases such as Parkinson's who need extra help and follow up. The benefits of patients being referred to his clinic are that the waiting time is far less than in hospital. He has his own resources at the surgery and so is more efficient.

Being employed by the PCT is also an advantage as he can get funding for conferences etc. Also the follow-up system is good as there is consistency and he can easily find out what is happening. He has access to scanning, e.g. MRI, and also nerve conduction studies and access to neuropsychology.

Paul said that he sees many people with strokes, ABI, and transient weaknesses such as problems with speech. He also deals with hypoxic brain injuries after major surgery, head injury problems, e.g. headaches, epilepsy, multiple sclerosis, investigations into causes of tremors.

Co-ordinating the treatment is also easier; for instance, it is easier for Paul to prescribe specific drugs. Headway have referred a number of people to him and he said that he would be interested to receive feedback from those who have been referred to him from Headway. It is not always clear who you can refer to - it tends to be a matter of funding.

Paul said that he works closely with the Neurology Departments of hospitals and meets with Dr Saldana every month - fortunately he is very accessible. Whenever Paul sees a patient he writes to their GP with a copy to the patient; Dr Saldana always gets a copy of that letter too.

There are other GPs in Kent doing the same work as Paul. He has two multiple sclerosis nurse specialists working with him

Frances apologised to both speakers as sadly, despite the valiant efforts of many, their Powerpoint presentations could not be displayed. Copies of their slides are available - please email Louise Brown at [lbrown@ts-p.co.uk](mailto:lbrown@ts-p.co.uk) if you would like a copy.

## 11. AOB

Headway had kindly made delicious mince pies for all to enjoy at the meeting.

### Next meeting:

**Date:** 08 February 2006  
**Time:** 7.00 p.m.  
**Venue:** Thomson Snell & Passmore, 3 Lonsdale Gardens,  
Tunbridge Wells, Kent

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### Meetings for 2006

08 February (7.00 p.m.)	Thomson Snell & Passmore 3 Lonsdale Gardens Tunbridge Wells Kent TN1 1NX
04 April (2.30 p.m.)	Royal British Legion Industries Royal British Legion Village Aylesford, Kent ME20 7NL
29 June (4.00 p.m.)	Spa Hotel, Mount Ephraim Tunbridge Wells Kent TN4 8BX (to coincide with the Brain Injury Lecture)
18 August (2.30 p.m.)	Joint meeting with SABIF - venue to be confirmed
11 October (7.00 p.m.)	East Kent Hospital Schools Service City View Canterbury, Kent
08 December (2.30 p.m.)	Thomson Snell & Passmore 3 Lonsdale Gardens Tunbridge Wells, Kent TN1 1NX