



national association of psychiatric intensive care & low secure units

NAPICU Conference 2019

The 24th Annual NAPICU Conference

**Therapeutic Advancements in
Acute, Emergency and Secure
Mental Health Settings; Reducing
Restrictive Interventions**

Programme and Abstract Book

**Thursday 5th and Friday 6th September 2019
Glasgow Caledonian University**

www.napicu.org.uk
www.northernnetworking.co.uk

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CONFERENCE PLANNING COMMITTEE

NAPICU Conference Committee



Dr Dinal Vekaria

Consultant Psychiatrist (PICU), Hertfordshire Partnership NHS Foundation Trust and NAPICU Director of Scientific Programmes



Mrs Caroline Parker

Consultant Pharmacist for Adult Mental Health Services, Central and North West London NHS Foundation Trust and NAPICU Director of Operations



Dr Shanika Balachandra

Consultant Psychiatrist (PICU), Central and North West London NHS Foundation Trust and NAPICU Deputy Director of Scientific Programmes



Mrs Julie Haste

Principal Pharmacist for West Sussex, Sussex Partnership NHS Foundation Trust and NAPICU Executive Committee Member



Ms Laura Woods

Nurse Consultant, Forensic Health Care, Sussex Partnership NHS Foundation Trust and NAPICU Executive Committee Member

NAPICU Executive Committee

Chairman – Dr Stephen Pereira

Treasurer – Mr Alan Metherall

Editor-in-Chief – Mr Roland Dix

Director of Operations – Mrs Caroline Parker

Director of Policy – Mr Thomas Kearney

Director of Educational Programmes – Dr Aileen O'Brien

Director of Scientific Programmes – Dr Dinal Vekaria

Deputy Director of Scientific Programmes – Dr Shanika Balachandra

Director of Research – Dr Hamid Alhaj

Patient Representative – Mr Bernard Fox

Executive Member – Dr Faisil Sethi

Executive Member – Mr Paul Deacon

Executive Member – Mr Chris Dziki

Executive Member – Mrs Jules Haste

Executive Member – Mr Andy Johnston

Executive Member – Dr Rhodri David

Executive Member – Ms Laura Woods

Executive Member – Dr Faeza Khan

Executive Member – Dr Wendy Sherwood

Conference Organisers



Northern
Networking
Events Ltd

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ABOUT NAPICU

NAPICU is a rapidly expanding association committed to developing and promoting the psychiatric intensive care speciality. The association was officially formed in 1998 although the roots of its formation lie 3 years previous to that. NAPICU is also a registered charity - SC048876.

The aims of NAPICU are to improve service user experience and outcome and to promote staff support and development within Psychiatric Intensive Care Units/Low Secure Units by (in a multidisciplinary manner):

- Improving mechanisms for the delivery of psychiatric intensive care and low secure care
- Auditing effectiveness
- Promoting research, education and practice development

The association uses a number of tools and methods to meet these aims, including Local Quarterly Meetings and academic seminars; training initiatives; the website; and of course the Annual National Conference. Various committees have been established to take an overview and further develop PICUs or LSUs through research, audit, training and education.

NAPICU publish their own Journal; Journal of Psychiatric Intensive Care. They are always looking for papers. If you are interested in publishing a paper in the journal please contact us at the Administration office at info@napicu.org.uk

One of NAPICU's strengths lies in the fact that it is a truly multidisciplinary clinician led association, both within the Executive Committee and within the wider membership.

The Executive Committee works with key stakeholders at regional and national levels to shape policy and practice in the area of acute inpatient psychiatry, including psychiatric intensive care and low secure services.

Visit NAPICU on Facebook, Twitter and LinkedIn



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[napicu](https://www.linkedin.com/company/napicu)



[napicu.org.uk](https://www.napicu.org.uk)

ABOUT THE CONFERENCE

The National Association of Psychiatric Intensive Care and Low Secure Units (NAPICU) are delighted to welcome you to our 24th Annual Conference at Glasgow Caledonian University

The theme for this, our twenty fourth Annual Conference 2019 Conference is:

“Therapeutic Advancements in Acute, Emergency and Secure Mental Health Settings; Reducing Restrictive Interventions”

There will be discussions on maintaining the PICU specialism and what skills and expertise does the PICU workforce require. We will be retaining the patient at the centre of our focus, ultimately improving outcomes.

The conference will feature a wide-range of forums to enable clinicians to share knowledge and gain more insight into understanding patients and carers needs.

To maximise the benefits of the conference for every delegate, we are running some parallel sessions. The Poster Session will continue to allowing submissions to be presented more thoroughly in an interactive session and there will be the judging session for the Team of the Year Award and the successful poster of the year.

We aim to provide you with some useful ideas and thoughts which you can take away and use in your place of work. The sharing of perspectives and ideas allows for the opportunity to network globally. Thus, a learning event which we know will be fascinating and enjoyable.

The programme has been designed with our delegate's feedback from previous years in mind and we hope it is interesting and enjoyable. This will hopefully provide you with some useful ideas and thoughts which you can take away and use in your place of work. Finally, looking at the progress made and the changes the health services have undergone, it is a testament to the hard work, efforts and expertise of the clinical staff which has made all of the advances possible.

Dr Dinal Vekaria
NAPICU Conference Planning Committee

CONFERENCE ACTIVITIES

Welcome Drinks & Quiz Night

Following the arrival dinner on Wednesday evening NAPICU will be hosting an informal quiz and social networking session in the Student Association Bar at Glasgow Caledonian University campus. The quiz will be fun and there will be a variety of prizes to be won.

Poster Exhibition

Please visit the poster exhibition in the exhibition hall, Hamish Watt building to view research projects completed within PICUs and LSUs across Europe. The posters will be judged and this year's winners will be announced at the end of the conference on Friday 6th September 2019. NAPICU would like to invite you to join us in our live Interactive poster session on Thursday 5th September 2019 at 16.10 with a refreshments reception in the exhibition hall.

Team of the Year

You are invited to hear entrants' presentations as they compete for the NAPICU Quality Improvement Project of the Year Award on Thursday 5th September 2019 at 14.45 – 15.15 in the Conference Hall, Glasgow Caledonian University. This year's winners will be announced at the end of the conference on Friday 6th September 2019.

Gala Dinner

The Gala Dinner on Thursday evening will be a civic drinks reception followed by a three course meal accompanied by entertainment at the iconic and beautiful Glasgow City Chambers, where the Lord Provost's and her council sit.

Attendance at the Gala Dinner is included in your registration fee; however entrance is ticket-only, and places must be booked in advance. If you wish to attend and do not have a ticket, please contact the NAPICU registration desk. Should you have any specific dietary requirements please ensure the conference staff are aware of these prior to the conference commencing.

NAPICU APP

Download the official NAPICU App

via **Yapp**



Download the app on iOS or Android:

1. Visit <http://my.yapp.us/NAPICU> on your device and follow instructions on page
2. You'll be asked to install Yapp from the app store (if you don't have it already).
3. Open Yapp and tap "Download an existing Yapp" and your app will appear.

Don't have an iOS or Android device? You can view this app from your desktop browser by clicking the my.yapp.us URL above.



REGISTRATION & ENTITLEMENTS

REGISTRATION

The registration area will be in the entrance foyer on the ground level floor in the Hamish Wood building

Registration opening hours are as follows:

Wednesday 4th September (for pre-conference training event)
13.00 – 17.00

Thursday 5th September
08.00 – 17.00

Friday 6th September
08.30 – 13.30

ENTITLEMENTS

The delegate full registration fee includes:

- Conference registration
- Attendance at exhibition
- Hot Buffet dinner on Wednesday 4th September 2019 in the Student Association Bar, Glasgow Caledonian University Campus between 18.30 – 20.30
- Social Evening Quiz Night after dinner on Wednesday 4th September 2019 in the Student Association Bar, Glasgow Caledonian University Campus
- Gala Dinner & Civic Reception held at Glasgow City Chambers 18.15 on Thursday 5th September 2019
- Buffet lunch (cold) on Thursday 5th September 2019 in the Exhibition Hall within Glasgow Caledonian University.
- Buffet lunch (cold) on Friday 6th September 2019 in the Exhibition Hall within Glasgow Caledonian University.
- Tea/Coffee during official breaks
- Delegate materials
- VAT at the prevailing rate

Accreditation

You will be issued with a Certificate of Attendance via email on completion of a feedback form.

CONFERENCE PROGRAMME AT A GLANCE

Wednesday 4th September 2019

Optional Pre-Conference Training Event
Glasgow Caledonian University, Lantern Room
Quality Improvement, Research and Publishing

14.00 – 17.00	<p>Course Leaders:</p> <p>Dr Hamid Alhaj, Consultant Psychiatrist, Sheffield Health and Social Care NHS Foundation Trust, NAPICU Director of Research and Executive Committee Member.</p> <p>Mr Roland Dix, Approved Clinician, Consultant Nurse in Psychiatric Intensive Care & Secure Recovery, 2gether NHS Foundation Trust and Editor-in-Chief Journal of Psychiatric Intensive Care & Low Secure Units, NAPICU Executive Member</p>
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Thursday 5th September 2019

Glasgow Caledonian University
Therapeutic Advancements In Acute, Emergency And Secure Mental Health Settings; Reducing Restrictive Interventions

08.30 – 09.00	Registration
09.00 – 09.15 Conference Hall	Opening Address & Welcome Dr Stephen Pereira , Consultant Psychiatrist, London and NAPICU Chairman
09.15 – 09.25 Conference Hall	Chair: Mr Peter Pratt , Head of Mental Health and Learning Disabilities Medicines Strategy, NHS England
09.25 – 10.00 Conference Hall	Restrictive Interventions: Practice and Philosophy Keynote Speaker: Mr Roland Dix , Consultant Nurse in Psychiatric Intensive Care & Secure Recovery, Editor-in-Chief Journal of Psychiatric Intensive Care & Low secure Units
10.00 – 10.30 Conference Hall	Missed Opportunities for Least Restrictive Practice Keynote Speaker: Mr Johnathan MacLennan , Mental Health Quality Improvement Lead, NHS Tayside and Vice-Chair Mental Health Nurse Forum Scotland
10.30 – 11.00	Tea and Coffee Break
11.00 – 12.30 Conference Hall	Parallel 1: PICU as a Specialism Chair: Ms Laura Woods , Nurse Consultant, Forensic Health Care, Sussex Partnership NHS Foundation Trust and NAPICU Executive Committee Member Dr Stephen Dye , Consultant Psychiatrist, Norfolk and Suffolk NHS Foundation Trust Ms Lucy Tilden , EAP Team Leader Occupational Therapist, 2gether NHS Foundation Trust Ms Marianne Van-De-Lisle , Lead Clinical Pharmacist-Mental Health, NHS Lothian

CONFERENCE PROGRAMME AT A GLANCE

Thursday 5th September 2019

Glasgow Caledonian University

Therapeutic Advancements In Acute, Emergency And Secure Mental Health Settings; Reducing Restrictive Interventions

11.00 - 12.30 Upstairs Hall (W110)	<p>Parallel 2: Therapeutic Practice in Different Settings</p> <p>Chair: Dr Wendy Sherwood, Consultant Occupational Therapist, International Creative Ability Network and NAPICU Executive Committee Member</p> <p>Vona du Toit Model of Creative Ability Informs Multidisciplinary Approaches to Reduce Restrictive Practice</p> <p>Ms Suzanne Jordan, Senior Occupational Therapist, West London NHS Trust Broadmoor Hospital</p> <p>Ms Jade Reilly, Senior Occupational Therapist, West London NHS Trust Broadmoor Hospital</p> <p>Connecting for Wellbeing – Actions to Value, Support and Connect Service Users on PICUs</p> <p>Miss Jennifer Beal, Head of Occupational Therapy, Cygnet Health Care</p> <p>Intensive Care in the National High Secure Women's Service, Changing Systems and Culture to Reduce Restrictive Practice</p> <p>Mrs Mandy Mudholkar, Nurse consultant, Nottinghamshire Healthcare Foundation Trust/ The National High Secure Women's Health Service, Rampton Hospital</p>
12.30 – 13.15	Lunch with Exhibition
13.15 – 14.45 Upstairs Hall (W110)	<p>Parallel 3: Education and Workforce</p> <p>Chair: Dr Aileen O'Brien, Reader in Psychiatry & Education and Honorary Consultant Psychiatrist (PICU), St. George's University of London and NAPICU Director of Educational Programmes</p> <p>New Ways of Working and Extended Roles</p> <p>Mr Tom Tunnicliffe, Consultant Nurse and Approved Clinician, Midlands Partnership NHS Foundation Trust</p> <p>Being a Trainee Nursing Associate on a PICU Ward</p> <p>Ms Dilakshana Ettricksutharakan, Nursing Assistant, South West London and St George's Mental Health NHS Trust</p> <p>Physician Associates in Psychiatry</p> <p>Mr Reb Kean, Lecturer – Physician Associate Studies MSc Programme, University of Wolverhampton</p>
13.15 – 14.45 Conference Hall	<p>Parallel 4: Novel Treatments in Psychiatry</p> <p>Chair: Mrs Caroline Parker, Consultant Pharmacist Mental Health, Central and North West London NHS Foundation Trust and NAPICU Director of Operations</p> <p>MDMA, Trauma, Addictions and The Future of Psychiatry</p> <p>Dr Ben Sessa, Consultant Child and Adolescent Psychiatrist and Psychedelic Researcher</p> <p>Autoimmune Causes of Psychosis: Diagnosis and Management</p> <p>Dr Belinda Lennox, Clinical Senior Lecturer in Psychiatry, University of Oxford</p> <p>So What do I do Next..?, an Update on Management of Acute Disturbance</p> <p>Dr Sotiris Posporelis, Institute of Psychiatry, Psychology and Neuroscience, King's College London & South London and Maudsley NHS Foundation Trust</p>

CONFERENCE PROGRAMME AT A GLANCE

Thursday 5th September 2019 Glasgow Caledonian University Therapeutic Advancements In Acute, Emergency And Secure Mental Health Settings; Reducing Restrictive Interventions	
14.45- 15.15 Conference Hall	Team of the Year Presentations 2019 Dr Dinal Vekaria , Consultant Psychiatrist, Hertfordshire Partnership University NHS Foundation Trust and NAPICU Executive Committee Member
15.15 – 15.40	Tea and Coffee Break
15.40 – 16.10 Conference Hall	Chair: Mr Andy Johnston , Clinical Director. AndyJohnstonAssociates, Consultant - Centre for Mental Health and NAPICU Executive Committee Member Quality Improvements and Innovations in PICU Dr Faisal Sethi , Consultant Psychiatrist & Service Director, Maudsley Hospital & Bethlem Royal Hospital, South London and Maudsley NHS Foundation Trust and NAPICU Executive Committee Member
16.10 – 17.00 Exhibition Hall	Interactive Poster and Exhibition Session with Refreshments Walls and Bridges, What inspired me to write this book? Mr Paul Deacon , NAPICU Executive Member
18.30 – 23.00	Glasgow City Chambers – Civic Welcome Reception Hosted by the City of Glasgow followed by the Gala Dinner

CONFERENCE PROGRAMME AT A GLANCE

Friday 6th September 2019 Glasgow Caledonian University Therapeutic Advancements In Acute, Emergency And Secure Mental Health Settings; Reducing Restrictive Interventions	
09:00 – 9.10 Conference Hall	Chair: Mr Andy Johnston , <i>Clinical Director. AndyJohnstonAssociates, Consultant - Centre for Mental Health and NAPICU Executive Committee Member</i>
09.10 – 10.00 Conference Hall	NAPICU Annual General Meeting and Open Forum
10.00 – 10.20 Conference Hall	NAPICU National Survey Of Psychiatric Intensive Care, Low Secure and Locked Rehabilitation: Patient Characteristics Dr Stephen Pereira , <i>Research Lead for The National Survey, NAPICU</i> Ms Lucy Walker , <i>Research Fellow for The National Survey, NAPICU</i>
10.20 – 10.50 Conference Hall	Promoting Risk Intervention by Situational Management (PRISM) When the Ward is the Patient: Using Situational Risk Management to Reduce Violence Dr Lorraine Johnstone , <i>Consultant Clinical Forensic Psychologist & Visiting Professor, University of Strathclyde</i> Dr Jana de Villiers , <i>Consultant Psychiatrist - Intellectual Disability Forensic Network Clinical Lead for Intellectual Disabilities, The State Hospital, Carstairs, Lanark</i>
10.50 – 11.10	Tea and Coffee Break
11.10 – 12.45 Conference Hall	Patient and Carer Involvement in Reducing Restrictive Practice Chair: Mr Chris Dziki , <i>Senior Programme Manager (Mental Health Lead), North London Partners in Health and care (NCL STP) and NAPICU Executive Committee Member</i> Peer Support in Secure Services Ms Deborah Owen , <i>Service User Lead, Forensic Healthcare Services and Peer Support Lead of the People Participation Team. Sussex Partnership NHS Foundation Trust</i> The Co-Production Perspective Ms Sandra Jayacodi , <i>Service User Advisor for Quality Improvement Board, Interim Chair for Adult Mental Health Research Partnership Group and Research Assistant at Central and North West London NHS Foundation Trust</i> Do I Notice Your Empathy and Compassion - The Emotional Experience Ms Carolyn Cleveland , <i>Founder and Director C&C Empathy Training Ltd</i>
12.45 – 13.00 Conference Hall	NAPICU Conference 2019 Awards: Winning Poster and NAPICU Team of the Year Dr Dinal Vekaria , <i>Consultant Psychiatrist, Hertfordshire Partnership University NHS Foundation Trust and NAPICU Executive Committee Member</i>
13.00 – 13.15 Conference Hall	Summing Up and Thanks Mr Thomas Kearney , <i>Deputy Chief Allied Health Professions Officer for England, NHS England, NHS Improvement and NAPICU Director of Policy</i>
13.15	Lunch with Exhibition

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Wednesday 4th September 2019

Pre-Conference Training Event: Quality Improvement, Research and Publishing

14.00 – 17.00, Lantern Room

Dr Hamid Alhaj, *Consultant Psychiatrist, Sheffield Health and Social Care NHS Foundation Trust, NAPICU Director of Research and Executive Committee Member.*



Biography

Hamid is a Consultant in Psychiatric Intensive Care on the multi-award winning Endcliffe Ward in Sheffield. He is the Director of Research for NAPICU and Director of Medical Education for Sheffield Health and Social Care NHS Foundation Trust. His other roles include being an Honorary Senior Clinical Lecturer at the University of Sheffield. Hamid did his psychiatric training in the North East of England, where he obtained his PhD at Newcastle University. His research interests include understanding common and severe mental health problems. He has developed national collaborations to establish the evidence-base for restrictive environments.

Mr Roland Dix, *Approved Clinician, Consultant Nurse in Psychiatric Intensive Care & Secure Recovery, 2gether NHS Foundation Trust and Editor-in-Chief Journal of Psychiatric Intensive Care & Low Secure Units, NAPICU Executive Member*



Biography

Roland started his career in mental health as a Nursing Assistant in 1984. He became an Enrolled Nurse in 1988 and a Staff Nurse in 1992. Roland was appointed Unit Manager and Clinical Nurse Specialist for the Greyfriars Psychiatric Intensive Care Unit in 1993. During 1996, with others, Roland formed the National PICU group, the fore runner of NAPICU. Between 1993 and 2000 Roland spent time working as a Matron Manager and Research Consultant for Gloucestershire Health Authority. He was appointed a Visiting Research Fellow to the University of The West of England in 2001. Roland is the founding Editor-in-Chief for the Journal of Psychiatric Intensive Care. In 2000 Roland was appointed Consultant Nurse for Psychiatric Intensive Care and Secure Recovery and became an Approved Clinician in 2012, then was awarded the RCN Fellowship in 2014. Roland was a major contributor to the 2002 National Minimum Standards for PICU and both editions of the only international PICU text book. He has published extensively on issues of psychiatric intensive care, acute inpatient care and related subjects. Roland has been an invited advisor for several European countries' acute mental health services including Norway, Iceland and the Netherlands. Roland has remained a committed Executive Committee member for NAPICU and is an active commentator on issues of psychiatric intensive care both within the UK and abroad.

Abstract

Many of you are already involved or completing Quality Improvement projects, but have been scared off by the thought of producing a paper and publishing it.

This training session will address the common questions and concerns and lead to a great understanding of the process, taking away the fear and helping you share work more widely with colleges.

The two trainers have a wealth of experience in research and publishing.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Welcome and Opening Address

09.00 – 09.15, Conference Hall

Dr Stephen Pereira, *Consultant Psychiatrist, London and NAPICU Chairman*



Biography

Stephen has devoted his career to the relentless search for best practice in acute mental healthcare especially psychiatric intensive care. He is known for co-founding and guiding NAPICU over the last 23 years and for his commitment to improving the patient experience in adult 'locked' units. He conceptualised and developed The National Minimum Standard in PICUs and low secure care. He is a key international leader in his field of Intensive Care and in the NHS. He has a major influence in re-definition and development of Psychiatric Intensive Care in the UK via: policy, research, practice development and education. His key papers on Design Problems in PICUs resulted in the government (Department of Health) releasing 160 million pounds for design faults in PICUs. He developed a National Centre of Excellence in Psychiatric Intensive Care and is a winner of 8 National awards including UK Hospital Doctor of the Year in Psychiatry, Medical Management - Team of the Year, and a National Clinical Excellence Award (DoH). Stephen has over 30 years' experience in psychiatry. In addition to his Psychosis Spectrum work he is also a specialist in Cognitive Behaviour therapy (CBT). He has an MSc in CBT and Marital / Sexual problems at Guy's Hospital, London. He is currently Consultant Psychiatrist at Keats House, London Bridge and the Nightingale Hospital, London. He is also an Honorary Senior Lecturer, in Psychiatry at Guys, Kings, St. Thomas's School of Medicine. He is also Chairman of NAPICU, is on the editorial board of the International Journal of Psychiatric Intensive Care and is co-editor of the only worldwide textbook on psychiatric intensive care and is published widely. He has published the largest survey of PICUs/LSUs, reporting on patient and unit data in the NHS and private sector. He is currently Research Lead for the Second National Survey having successfully obtained a research grant.

Chair's Welcome

09.00 – 09.15, Conference Hall

Mr Peter Pratt, *Head of Mental Health and Learning Disabilities Medicines Strategy, NHS England*



Biography

Peter has worked as a specialist pharmacist in psychiatry for over 25 years. He is a former chairman of United Kingdom Psychiatric Pharmacy Group (UKPPG), Fellow of the College of Mental Health Pharmacy (CMHP) and executive board member of NAPICU. He has extensive experience of psychopharmacology and pharmacy practice in mental health throughout the UK. He has been a member of several NICE clinical guideline development groups including schizophrenia, psychosis with substance misuse, and violence and aggression. He strongly supports the use of evidence to guide the best use of pharmacological treatments in psychiatry.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Keynote Speaker 1: Restrictive Interventions: Practice and Philosophy

09.25 – 10.00, Conference Hall

Mr Roland Dix, *Consultant Nurse in Psychiatric Intensive Care & Secure Recovery, Editor-in-Chief Journal of Psychiatric Intensive Care & Low secure Units Restrictive Interventions: Practice and Philosophy*



Biography

Roland started his career in mental health as a Nursing Assistant in 1984. He became an Enrolled Nurse in 1988 and a Staff Nurse in 1992. Roland was appointed Unit Manager and Clinical Nurse Specialist for the Greyfriars Psychiatric Intensive Care Unit in 1993. During 1996, with others, Roland formed the National PICU group, the fore runner of NAPICU. Between 1993 and 2000 Roland spent time working as a Matron Manager and Research Consultant for Gloucestershire Health Authority. He was appointed a Visiting Research Fellow to the University of The West of England in 2001. Roland is the founding Editor-in-Chief for the Journal of Psychiatric Intensive Care. In 2000 Roland was appointed Consultant Nurse for Psychiatric Intensive Care and Secure Recovery and became an Approved Clinician in 2012, then was awarded the RCN Fellowship in 2014. Roland was a major contributor to the 2002 National Minimum Standards for PICU and both editions of the only international PICU text book. He has published extensively on issues of psychiatric intensive care, acute inpatient care and related subjects. Roland has been an invited advisor for several European countries' acute mental health services including Norway, Iceland and the Netherlands. Roland has remained a committed Executive Committee member for NAPICU and is an active commentator on issues of psychiatric intensive care both within the UK and abroad.

Abstract

Over recent years, undercover journalism have exposed a number of atrocious abuses of power in mental health related units. The abuse exposed in those units seemed to be more criminal assaults or abuse of power rather than the use of "restrictive interventions" commonly used in mental health settings. These events have however, understandably increased the focus of regulators, service providers and other stakeholders on the issues associated with reducing restrictive interventions. Since the publication of the 2015 MHA CoP there has been renewed commendable efforts to see the reduction in the use of seclusion, restraint and other restrictive intervention. This lecture will offer some analysis of the issues both historically and as they currently stand. Traditionally, there has been a "count and reduce" approach for restrictive interventions. This lecture will propose an alternative.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Keynote Speaker 2: Missed opportunities for least restrictive practice

10.00 – 10.30, Conference Hall

Mr Johnathan MacLennan, *Mental Health Quality Improvement Lead, NHS Tayside and Vice-Chair Mental Health Nurse Forum Scotland*



Biography

Johnathan was appointed as the Mental Health Improvement Lead for NHS Tayside in late April 2018. In this role he has responsibility to lead the design of quality improvement initiatives, projects and collaboratives across adult mental health services including least restrictive care and developing capability and capacity in QI in mental health. He is a registered mental health nurse and Vice-Chair of the Mental Health Nurse Forum Scotland. Along with Mental Health Quality Improvement peers he co-convenes the #MHImprove network which fosters the sharing of information through an annual event and use of social media to share, learn and connect internationally to improve outcomes for service users and care deliverers. He is a graduate of Wave 28 of the Institute for Healthcare Improvement's (IHI) Improvement Advisor programme and is also IHI faculty. Prior to this role he was the Improvement Advisor and National Programme Lead for the Scottish Patient Safety Programme for Mental. Before joining Healthcare Improvement Scotland he spent 14 years Nursing in NHS Lothian mainly in low secure care, CAMHS, inpatient and community rehabilitation services and Intensive Psychiatric Care. During this time he was actively involved in the Edinburgh Napier University Leadership in Compassionate Care Programme (from 2009-2012) and continues to explore work on least restrictive, trauma informed rights based care practices and including, understanding and involving the Patients, Carers and Staff experience to test, design and deliver improvement – something that is critical to and is a key driver in his current role.

Abstract

We recognise that we currently use restrictive interventions in certain aspects of our services in particular to preserve safety. Often the triggers for the restraint/restrictive measures are as a result of extreme challenging behaviour and this is where it is at times unavoidable for the protection of self and others. Ultimately however, it is difficult to suggest that restrictive practice/coercive measures such as restraint, containment and medication in reaction to challenging presentation has any level of long term compatibility with recovery, rights, trauma informed care and staff satisfaction.

Realising, and critically sustaining a reduction in the use of restrictive interventions, invariably requires deep change across the service that cannot be delivered by induction/training/modular learning alone and will require significant diagnostic work and multiple incremental tests to achieve a reduction of restrictive practices.

Developing a model of care that is based on prevention, activity, engagement and skilfully delivered least restrictive alternatives is the core discussion point for this talk and will discuss:

- Should we see missed opportunities for activity and therapeutic engagement in the same way as a missed dose of medication?
- The role of Improving Observation Practice in supporting change in care delivery
- How we use quality improvement, data, staff, patient and carer feedback to continually learn and develop least restrictive practice
- Opportunities for shared learning

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Parallel 1: PICU as a Specialism

11.00 – 12.30, Conference Hall

Chair: Ms Laura Woods, Nurse Consultant, Forensic Health Care, Sussex Partnership NHS Foundation Trust and NAPICU Executive Committee Member



Biography

Laura is a NAPICU Executive Member. She is a mental health nurse with over ten years' experience working in PICUs, prisons and secure and forensic health care. During her time working within PICU she was an active member of the Positive and Safe network for the Department of Health with her ward being an early implementer for reducing restrictive practice. Laura has spoken nationally about reducing the use of seclusion and has a particular interest in how PICU teams can provide meaningful alternatives to restrictive interventions. After nearly nine years working in PICU, Laura managed a healthcare service within the prison estate. During this time, she gained an MSc in Clinical Forensic Psychiatry with her research looking at prison transfers to general adult PICUs. She is now working as Nurse Consultant for Forensic Health Care in Sussex and her work focuses on reducing restrictive practice within forensic PICUs and Low Secure Units. She remains passionate about mental health nursing and enjoys teaching junior colleagues and nursing students.

PICU as a Specialism

Dr Stephen Dye, Consultant Psychiatrist, Norfolk and Suffolk NHS Foundation Trust



Biography

Stephen is a consultant in acute inpatient care for Norfolk and Suffolk NHS Foundation Trust. From 2001 until 2008 he was a PICU consultant for Oxfordshire and Buckinghamshire Mental Health Partnership NHS Foundation Trust, and prior to that a lecturer in psychiatry at Imperial College London. Stephen sat on the NAPICU Executive Committee from 2002 and held the position of Director of Research. From 2004 to 2006 he was seconded, via NAPICU, to jointly coordinate the PICU Governance Network and subsequently the Psychiatric Intensive Care Advisory Service until the end of 2007. Although no longer and NAPICU Executive Committee member, he still supports and promotes the work of NAPICU.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

PICU as a Specialism

Ms Lucy Tilden, *EAP Team Leader Occupational Therapist, 2gether NHS Foundation Trust*



Biography

Lucy's first experience within mental health was working as a health care assistant. She later became interested in occupational therapy and from qualifying in 2016 she has worked within 2Gether Trust. She has been able to use her profession within the PICU and now has a unique role of EAP Team Leader. The EAP Team is an abbreviation for Engagement, Activity and Physical Health Practitioner. It's made up of 6 members of staff based on the PICU providing a 12 hour engagement agenda. This is a semi structured and holds a variety of activities from relaxation sessions, financial support, cooking sessions and walking groups. Alongside engagement we formulate assessments on individual's mental state which alongside the nursing assessment can provide a holistic picture of the individual's recovery. We provide goal orientated intervention which varies from community/home assessments, promoting healthy lifestyle/smoking cessation to promoting an individual's enjoyment for activity and assessing independent living skills.

Team Approach to Improving Monitoring of 'Prn' Medication

Ms Marianne Van-De-Lisle, *Lead Clinical Pharmacist-Mental Health, NHS Lothian*



Biography

Marianne studied at the University of Strathclyde and qualified as a pharmacist in 1992. After a number of years working in hospital, community and voluntary sectors she came to work in Mental Health in NHS Lothian in 2001. Having provided clinical pharmacy services to both adult acute and rehabilitation services she implemented a new service to the PICU at the Royal Edinburgh Hospital in 2009 and continues to work in the unit. In addition to direct provision of pharmacy services she leads a team of mental health clinical pharmacists across the Health Board area. As a member of the Mental Health Pharmacy Strategy Group in Scotland she supports development of mental health pharmacy at a national level and is also a member of the UK wide College of Mental Health Pharmacists (CMHP).

Abstract

Psychiatric Intensive Care Units (PICUs) should be clearly defined to support the quality of care (NAPICU Minimum Standards 2014). Since the emergence of PICUs in the mid-1990s NAPICU has sought to advance practice, provide clear guidance, improve patient experience and provide educational opportunities for staff working as part of PICU teams. With clear admission criteria, guidance on length of stay, suggested staffing numbers and clear evidence for the skills required to work in PICU, it is argued that PICUs are specialist units requiring staff to possess specialist skills and expertise. What are these skills? Are they unique to PICUs? This session will consider the specialist skills and expertise required for working in PICUs. We will hear from a Consultant Psychiatrist, a Pharmacist and Occupational Therapist who all have extensive experience of working in PICUs. There will then be time to consider if the specialism of PICU can be or should be maintained in today's healthcare services. With a landscape of staffing shortages, shortage of beds and rapidly changing mental health care services what is the future for PICUs, and can we protect it as a specialist clinical area. It is hoped the session will encourage discussion with delegates and perhaps even a debate!

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Parallel 2: Therapeutic Practice in Different Settings

11.00 - 12.30, Upstairs Hall (W110)

Chair: Dr Wendy Sherwood, *Consultant Occupational Therapist, International Creative Ability Network and NAPICU Executive Committee Member*



Biography

Dr Wendy Sherwood PhD, MSc, Dip COT is an occupational therapist who has specialised in mental health for over 25 years. Wendy has held positions as a Senior Lecturer in Occupational Therapy and also as Course Director for the BSc (Hons) Occupational Therapy programme at London South Bank University. Wendy is a visiting Professor in Singapore and an Honorary Fellow at St George's University, London. Since 2005, Wendy has been dedicated to introducing a model for occupational therapy practice to UK services called the Vona du Toit Model of Creative Ability (VdTMoCA), which has enabled significant improvement in the delivery and outcomes of occupational therapy and whole service delivery in mental health and learning disabilities services. Wendy has co-authored and edited two texts on the model in the UK and is a contributing author and co-editor of the first full text on the model. Wendy is the Executive Director of the VdTMoCA Foundation (UK), which is a Community Interest Company serving the community of VdTMoCA-informed occupational therapists. Wendy is recognised nationally and internationally as an expert in the VdTMoCA, delivering an international conference on the model every two years. Wendy brings her expertise to the field of PICU in order to contribute to improving the quality of PICU services for clients and staff.

Vona du Toit Model of Creative Ability Informs Multidisciplinary Approaches to Reduce Restrictive Practice

Ms Suzanne Jordan, *Senior Occupational Therapist, West London NHS Trust Broadmoor Hospital*



Biography

Suzanne Jordan trained at the University of Essex, gaining a First Class Honours in Occupational Therapy in 2015 and the University award for the highest overall academic score for the 2011 cohort of Occupational Therapy and Physiotherapy. Since qualification, Suzanne has enjoyed working in a variety of community, acute and secure settings, mainly in mental health and brain injury. Suzanne is a Senior Occupational Therapist currently working on the Psychiatric Intensive Care ward in a high secure forensic hospital. She is passionate about collaborative working; using her professional philosophy, clinical models and sensory approaches to guide recovery focused interventions.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Ms Jade Reilly, *Senior Occupational Therapist, West London NHS Trust
Broadmoor Hospital*



Biography

Jade is a qualified Occupational Therapist at Broadmoor Hospital is currently working as part of a High Dependency team, which is part of the National Quality Improvement Project to Reduce Restrictive Practice. Jade is driven towards utilising Occupational Therapy principles to make positive changes to High Secure Practice, through the use of models of practice and sensory approaches. Previous to this challenge Jade has worked with Assertive Rehabilitation patients, which has allowed her to widen the scope of her knowledge. Jade studied at Oxford Brookes University, gaining a First Class Honours degree in Occupational Therapy.

Abstract

Broadmoor is the first high secure forensic psychiatric hospital to implement the Vona du Toit Model of Creative Ability (VdTMoCA) as its primary model of practice. The influence of this model has shaped clinical team approaches on high dependency and intensive care wards. Previously patients were managed using prolonged use of Long Term Segregation (LTS); increasing social and occupational isolation.

VdTMoCA is a collaborative process identifying strengths and barriers aligning with handling principles, supporting clinicians to make modifications and enhancements to task and physical environment. These principles optimise positive behavioural responses to facilitate safe participation, emotion regulation and skill development; congruent with national drivers to reduce restrictive practice (Royal College of Psychiatrists 2019). This patient group usually present within the lower levels of creative ability; VdTMoCA identifies key characteristics including: executive functioning, self-regulation, social norms, communication and internal motivation. The creative levels and principles run parallel, guiding treatment modifications which enable and empower patients to make informed choices. This approach promotes collaborative working, creating opportunities for patients to safely engage in meaningful activities and succeed in highly stimulating environments. Environmental modification is used to reduce external stimuli with explicit expectations of engagement increasing familiarity, reducing patient and staff anxiety. Task design is concrete in concept, providing immediate gratification or to support exploration of self as an individual, who is different from their environment and influences cause and effect. The VdTMoCA's strengths focussed approach visually demonstrates the minutiae of change which can often be overlooked when managing risk

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Connecting for Wellbeing – Actions to Value, Support and Connect Service Users on PICUs

Miss Jennifer Beal, *Head of Occupational Therapy, Cygnet Health Care*



Biography

Jennifer is committed to leadership and strategic management in developing occupational therapy services. Jennifer currently manages occupational therapy provision over three hospital sites in North and South London. Her responsibilities include managing recovery and rehabilitation of a wide range of mental health services from intensive care, locked learning disability, personality disorder, low secure care and step down services. Jennifer is driven and focused to improve clinical effectiveness and the experience of mental health care. She regularly presents at local and national professional forums to share developments in occupation focused mental health service provision.

Abstract

Recovery oriented care has meant a shift in care provision towards more inclusive patterns of care. This presentation shares a committed approach to improve the quality of care and services in a PICU setting by valuing the social connections with peers, family or their community. It is well documented that people who are socially connected are happier, physically healthier and live longer with fewer mental health problems than people who are less connected. Nurturing relationships can help us to feel happier, more secure and offer a sense of belonging and self-worth. The presentation provides an evidence base of good practice and how we transferred this into achievable actions. Our PICU ward supports social connections with:

- Peer support: service users co-design and deliver activities.
- Wide range of community activities ensuring that whilst on the PICU individuals can maintain valued roles and relationships.
- Family and friends support which includes bi-monthly newsletter and forums.
- Recovery College: PICU service users are invited to learn in our relaxed space that builds knowledge and caters for social needs.
- Recognising the changed nature of our society with new policy and practice supporting access to mobile phones and social media.

The presentation shares measureable outcomes of quantifiable data and qualitative comments to evidence the value of engagement and social connections on a PICU. The presentation suggests achievable actions to embrace the commitment to recovery oriented practice to improve individual outcomes and wider service provision for PICU populations. Coral Ward is a 6 bed intensive care unit for the National High Secure Women's Mental Health Service, based at Rampton Hospital.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Intensive Care in the National High Secure Women's Service, Changing Systems and Culture to Reduce Restrictive Practice

Mrs Mandy Mudholkar, Nurse consultant, Nottinghamshire Healthcare Foundation Trust/ The National High Secure Women's Health Service, Rampton Hospital



Biography

Mandy Mudholkar is Nurse Consultant to the National High Secure Women's mental health service at Rampton Hospital. During her nursing career Mandy has worked in community, in patient, medium and high secure services. Mandy Leads the Trauma and Self Injury (TASI) programme within the women's service and has overseen the implementation of the HOPE(S) Model for reducing long term segregation. She is presenting work that was carried out by the multidisciplinary team on Coral Ward, a 6 bed intensive care unit which is part of the women's service.

Abstract

It is a unique setting which provides treatment and therapies for women who present a grave and immediate danger to others, often in conjunction with severe suicidality, life threatening self-injury and complex trauma. The multidisciplinary team balances the need to ensure patient safety while delivering care in a least restrictive and trauma informed manner. The team has adopted the HOPES model as a means of identifying barriers to change, in relation to the reduction of segregation and ensuring that segregated patients have a clear exit strategy care plan. Patients continue to engage in therapies such as the Trauma and Self Injury Programme, Dialectical Behaviour Therapy (DBT), speech and language therapies, psychology interventions and occupational therapy, while Therapeutic Engagement Workers are proactive in ensuring that patients have a meaningful day. Patients engage in therapies on the ward and are encouraged wherever possible to engage in off ward activities. Staff supervision has been essential in ensuring that the team has been supported in positive risk taking and has provided a space for staff to reflect on patient formulations as a means of preventing burnout and vicarious trauma. As a result of changes to the ward culture and ethos, in the last year, 7 patients have progressed out of segregation, with 4 patients moving to less restrictive ward environments.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Parallel 3: Education and Workforce

13.15 – 14.45, Upstairs Hall (W110)

Chair: Dr Aileen O'Brien, *Reader in Psychiatry & Education and Honorary Consultant Psychiatrist (PICU), St. George's University of London and NAPICU Director of Educational Programmes*



Biography

Aileen O'Brien is a Senior Lecturer at St. George's University of London. Aileen is the teaching lead for undergraduate psychiatry, and also works as a PICU Consultant at South West London and St. George's Mental Health NHS Trust, where she is one of the responsible clinicians for a 13 bed male PICU and a busy section 136 suite. Aileen is the director of educational programmes for NAPICU and is currently working on a continuing professional development module for the Royal College of Psychiatrists, as well as revising multiple choice continuing professional development questions for the NAPICU website.

New Ways of Working and Extended Roles

Mr Tom Tunnicliffe, *Consultant Nurse and Approved Clinician, Midlands Partnership NHS Foundation Trust*



Biography

Tom Tunnicliffe is a NAPICU Executive Member. He is a Consultant Nurse and Approved Clinician in PICU. With over 10 years' experience he has previously held posts of Staff Nurse, Charge Nurse and Ward Manager, is a non-medical prescriber and has an MSc in Advanced Clinical Practice. Tom has specific interests in developing the specialism of PICU nursing, extended roles, multi-professional Approved Clinicians and MDT working. Tom is also a member of the MHA Approval Panel (Midlands and East of England).

Abstract

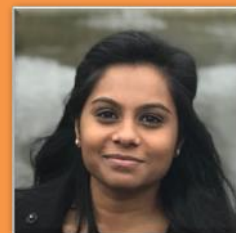
In his presentation Tom will discuss his experiences in becoming an Approved Clinician and how this role is deployed within a PICU. Alongside an explanation of the actual process and requirements for becoming Approved, Tom will discuss some the challenges faced, the benefits and how the role works in day to day practice. The presentation will include information gained through a recent evaluation and aims to provide an insight for staff or services who are considering the development of similar roles.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Being a Trainee Nursing Associate on a PICU Ward

Ms Dilakshana Ettricksuthakaran, *Nursing Assistant, South West London and St George's Mental Health NHS Trust*



Biography

Hello my name is Dilakshana Ettricksuthakaran; I am currently working as a trainee nurse associate on Ward 1 PICU at Springfield University Hospital. After I finished my BSc in Biological Sciences I worked as a medical secretary here I sat in a CBT session. This sparked my interest in Mental Health. I obtained my MSc in Mental Health and soon after I started working at Springfield Hospital. I am part of a very big family, my family members round up to about 25 people. I spend most of my time with my family; we have a party at least every week. I am a very enthusiastic person I do a lot extracurricular activities. I play the Indian sitar and performed on many stages. I have taken part and hosted many charity events. I always put myself forward when it comes to raising awareness for Mental Health, especially because I come from a country where mental health patients are hidden and abused rather than being understood and treated.

Abstract

My speech will talk about the struggles an individual with mental health problems faces in third world country (Sri Lanka). How this has always encouraged me to study in health care in order to help people. Working in PICU is an amazing experience; there is so much to learn. Moreover my speech will talk about facing challenging situations on a PICU ward and what specialist skills I have developed since working there. It will go on to talk about how the consultants and nurses always encourage the least restrictive methods to deal with aggressive and agitated patients. Furthermore I will talk about the various opportunities this nursing associate programme has given me. Finally end with further developments and recommendations for the course.

Physician Associates in Psychiatry

Mr Reb Kean, *Lecturer – Physician Associate Studies MSc Programme, University of Wolverhampton*



Biography

Reb qualified as a Registered Nurse 1997 working primarily in the care of older people until re-training as a Physician Associate and graduating in 2010. He worked for Birmingham and Solihull Mental Health NHS Foundation Trust from 2010 until 2018 attached to the Community Mental Health Team for Homeless People. As well as his professional qualifications he holds a Masters in Medical Law, PG Cert in Advanced Practice, and is completing an MSc in Psychiatry. He currently works at the University of Wolverhampton teaching on the MSc Physician Associate programme and part-time as an Advanced Nurse Practitioner in Urgent Care.

Abstract

Physician Associates are a relatively new professional medical role in the UK, however they have been utilised widely in Birmingham and Solihull Mental Health Trust for almost a decade. In July 2019 the Dept. of Health announced that the GMC will be their new statutory regulator and this presentation will look at how they are trained, how they are regulated and how they are utilised in psychiatry.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Parallel 4: Novel Treatments in Psychiatry

13.15 - 14.45, Conference Hall

Chair: Mrs Caroline Parker, *Consultant Pharmacist Mental Health, Central and North West London NHS Foundation Trust and NAPICU Director of Operations*



Biography

Caroline is a Consultant Mental Health Pharmacist in Central and North West London NHS Foundation Trust; one of the largest mental health services in the UK. Her clinical role includes working as a member of a Psychiatric Intensive Care Unit team, and in a Community Mental Health team, where as a qualified Independent Non-medical Prescriber she runs a Medicines Management Review Clinic. Caroline has worked as a specialist mental health pharmacist for over 15 years in several central London hospitals across a wide range of psychiatric services delivering direct patient care. She is the Director of Operations for the National Association of Psychiatric Intensive Care Units (NAPICU) and has served on the NAPICU executive committee in a variety of roles since 2008. She is an accredited member and Fellow of the College of Mental Health Pharmacy (CMHP), an accredited Faculty Fellow of the Royal Pharmaceutical Society, a Fellow of the Royal Pharmaceutical Society, and is on the editorial board of the International Journal of Psychiatric Intensive Care.

MDMA, Trauma, Addictions and The Future of Psychiatry

Dr Ben Sessa, *Consultant Child and Adolescent Psychiatrist and Psychedelic Researcher*



Biography

Ben qualified in medicine from UCL, London, in 1997 and specialised in Child and Adolescent Psychiatry in Oxford in 2004. His years working with abused and maltreated children and young people has led him to take a highly developmental approach to his clinical work, which is now predominantly with adults with PTSD and addictions. This approach has culminated in his 15 years' experience in the field of psychedelic research. Through Imperial College London, Ben has been associated with research studies on LSD, psilocybin, MDMA, DMT and ketamine – both as a study doctor administering the drugs, and also as a healthy subject receiving all these compounds in research settings. He is currently running the UK's first clinical study with MDMA-assisted psychotherapy; exploring this compound as a treatment for alcohol use disorder. Ben works clinically in Bristol and the South West of England in the field of addictions, with combat veterans with PTSD, with the Family Law service and in private practice. He is also actively involved in drug policy activism; working to review the current prohibition laws that he describes as restrictive of civil liberties, harmful to individuals, families and society and creating an unnecessary cost for the health and social services – without tackling the problem of drug misuse and addictions. Ben is planning to open a UK service of psychedelic-assisted psychotherapy clinics when the compounds MDMA and psilocybin become licensed medicines in the next few years.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Abstract

In this talk, 'MDMA, Trauma, Addictions and The Future of Psychiatry', Ben will describe the developmental issues that arise from child maltreatment and abuse. He will explore the shortcomings of current psychiatric treatment of trauma - using a primarily maintenance pharmacology approach - which leaves many adult patients unable to address their longstanding history of childhood trauma and recover from their addictions. Ben describes how the medicine MDMA, when combined with supportive psychotherapy, has many pharmacological properties that can help a traumatised person to safely address their traumatic history and rebrand their long-standing negative psychological narratives. Ben illustrates this with data and reflections from his ongoing MDMA-assisted psychotherapy study, which he is conducting in Bristol, UK, for people with alcohol use disorder. He describes the current situation of psychedelic research and clinical approaches and concludes that an innovative approach with psychedelic medicines is a necessary direction for psychiatry to manage its large population of treatment-resistant patients.

Autoimmune Causes of Psychosis: Diagnosis and Management

Dr Belinda Lennox, *Clinical Senior Lecturer in Psychiatry, University of Oxford*



Biography

Belinda Lennox is Associate Professor in the Department of Psychiatry, University of Oxford and Honorary Consultant Psychiatrist in the Early Intervention in Psychosis service for Oxford Health NHS FT. Her interests are in discovering the causes of and developing more effective treatments for those with psychosis and in implementing those discoveries into clinical practice. She is Clinical Director for NIHR Clinical Research Network: Thames Valley and South Midlands.

Abstract

There are many lines of evidence to suggest that a proportion of psychosis has an autoimmune basis however there have not been any biomarkers to identify individuals that might benefit from immune modifying treatments. This has potentially changed with the discovery of neuronal cell surface antibodies over the last decade. These antibodies have been described in patients with limbic encephalitis, often with prominent psychiatric symptoms and they are recognized as pathogenic – removal of the antibody results in clinical improvement and usually remission. However the relevance of the same antibodies in patients with purely psychiatric presentations has been seen as controversial and screening for antibodies, and treatment when they are detected, is not readily available. I will discuss the current controversies around the diagnosis and management of autoimmune psychosis and the challenges that these discoveries pose to psychiatric practice.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

So What do I do Next..?, an Update on Management of Acute Disturbance

Dr Sotiris Posporelis, *Institute of Psychiatry, Psychology and Neuroscience, King's College London & South London and Maudsley NHS Foundation Trust*



Biography

I am a Consultant Liaison Neuropsychiatrist in the NHS. Employed by South London and Maudsley NHS Foundation Trust, my main workplace is King's College Hospital. I specialize in treatment and management of the psychiatric complications of neurological, as well as functional neurological disorders. In addition to my clinical role, I hold a Honorary Senior Clinical Lectureship at the Institute of Psychiatry, Psychology and Neuroscience, King's College London, as a Lead for the MSc in Clinical Neuropsychiatry and Organiser of the Maudsley Grand Rounds. I have completed my Psychiatry training at the Maudsley Training Programme, as well as an 18-month clinical research fellowship at Johns Hopkins University (Baltimore, USA), for which I have been awarded RCPsych Researcher Trainee of the year in 2014. Relevant to this conference, I have co-authored the recently published joint BAP-NAPICU guidelines for the clinical management of acute disturbance.

Abstract

Dr Posporelis has co-authored the recently published joint BAP-NAPICU guidelines for the clinical management of acute disturbance. This session aspires to cover the basics of safely and effectively managing acute disturbance. It will also target special clinical settings like the Emergency Department of a General Hospital or the Intensive Care Unit that allow for a broader range of pharmacological interventions, especially when standard options fail to produce the desirable effect.

Team of the Year Presentations 2019

14.45- 15.15, Conference Hall

Dr Dinal Vekaria, Consultant Psychiatrist, Hertfordshire Partnership University NHS Foundation Trust and NAPICU Executive Committee Member



Biography

Dinal Vekaria works as a Clinical Lead Consultant Psychiatrist on a 15-bedded male PICU with a catchment area covering the whole of Hertfordshire. He has an additional role covering female acute inpatients and ECT. Dinal has a keen interest in education and is the Royal College of Psychiatry Tutor for West Hertfordshire. He completed his psychiatric training in South and East London, and has worked as a locum consultant in both regions. Dinal is currently the NAPICU Director of Scientific Programmes.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Chair's Welcome

15.40 – 16.10, Conference Hall

Chair: Mr Andy Johnston, Clinical Director. AndyJohnstonAssociates, Consultant - Centre for Mental Health and NAPICU Executive Committee Member



Biography

Andy trained as a nurse in 1987 and has held Director posts in the statutory, independent and professional sectors. He has held and continues to hold a number of senior advisory positions to statutory and non-statutory organisations and remains on a number of national advisory boards. His previous roles include Clinical Director for Forensic services and Clinical Director for adult mental health services. He left the NHS in 2014 and works with his Associates as independent consultants to mental health services across the UK and abroad, (AndyJohnstonAssociates). Andy has contributed to many national programmes/publications influencing the direction of travel for mental health services over the years and is an Editorial Board member of two international peer review scientific journals. He also has over 25 years' experience as a trainer and senior lecturer in conflict resolution and physical intervention. Andy has reviewed over 50 services spanning 8 European countries over the last decade. He held Executive Secretary and Director of Operations roles within the National Association of Psychiatric Intensive Care Units (NAPICU) Executive from 2002 until May 2013. Having stood down after 11 years he remains an Executive member with a number of portfolios

Quality Improvements and Innovations in PICU

Dr Faisil Sethi, Consultant Psychiatrist & Service Director, Maudsley Hospital & Bethlem Royal Hospital, South London and Maudsley NHS Foundation Trust and NAPICU Executive Committee Member



Biography

Dr Faisil Sethi MA (Cantab) MBBS FRCPsych MScDIC DipStat LLM. Dr Faisil Sethi is a Consultant Psychiatrist in Psychiatric Intensive Care at the Maudsley Hospital in London (South London and Maudsley NHS Foundation Trust). Faisil is on the Executive Committee of NAPICU and on the Editorial Board of the Journal of Psychiatric Intensive Care. His clinical, service development and research interests include: clinical leadership, PICU clinical standards, art and design, rapid tranquilisation and the management of acute disturbance, personality disorder, mental health law and the criminal justice interface.

Abstract

The hallmark of a healthy psychiatric intensive care unit is one where the multidisciplinary team embraces a culture of improvement and innovation in clinical practice. Given the complex nature of the clinical challenge in the psychiatric intensive care unit, multidisciplinary clinical leadership is key to developing new answers to often age-old dilemmas. The high value of such an approach for the quality and safety of patient care is palpable in the everyday experience of patients and clinicians in psychiatric intensive care units. This session will overview a range of improvement projects in the psychiatric intensive care unit, spanning environmental art & design, sensory rooms, psychopharmacological approaches and service models.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Thursday 5th September 2019

Interactive Poster and Exhibition Session with Refreshments: Walls and Bridges, What inspired me to write this book?

16.10 – 17.00, Exhibition Hall

Mr Paul Deacon, NAPICU Executive Member



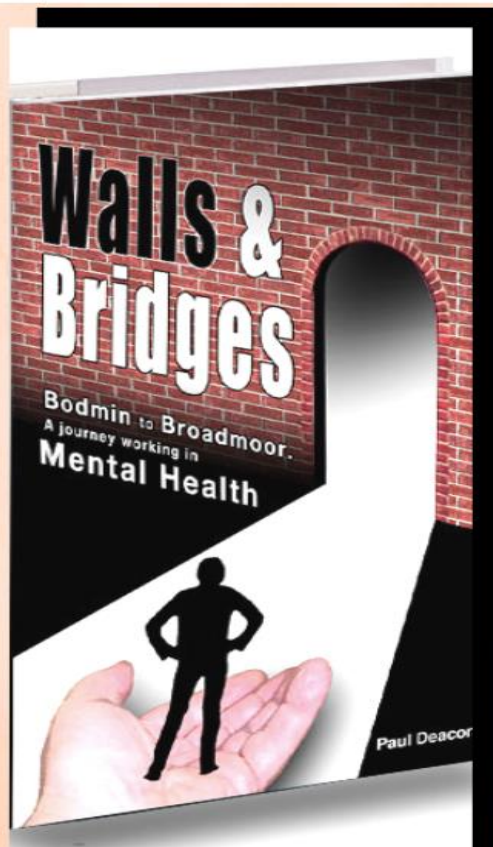
Biography

Paul worked as a nurse in a variety of mental health settings, including 10 years at Broadmoor Hospital, and was a PICU ward manager until he retired 6 years ago. His PICU team won several awards and was among the first to receive an excellent AIMS accreditation. Paul has sat on the NAPICU executive committee for 13 years. For five years he had a keen interest in the Accreditation for Inpatient Mental Health Services (PICU-AIMS), and was an active Lead AIMS reviewer for the Royal College of Psychiatrists and was the AIMS lead for NAPICU. He regularly delivers a well-received breakout session on the AIMS process at the annual conference. He is currently working on the UK Wide NAPICU National Survey for all PICU's, Low Secure Unit's and Locked Rehab Unit's. Paul is offering site visits to all of those units who have not yet completed their survey. The survey is now in phase two. Paul has written his first book, Walls and Bridges-A Journey Working in Mental Health.

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SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Chair's Welcome & AGM

9.00 – 9.10, Conference Hall

Chair: Mr Andy Johnston, Clinical Director. AndyJohnstonAssociates, Consultant - Centre for Mental Health and NAPICU Executive Committee Member



Biography

Andy trained as a nurse in 1987 and has held Director posts in the statutory, independent and professional sectors. He has held and continues to hold a number of senior advisory positions to statutory and non-statutory organisations and remains on a number of national advisory boards. His previous roles include Clinical Director for Forensic services and Clinical Director for adult mental health services. He left the NHS in 2014 and works with his Associates as independent consultants to mental health services across the UK and abroad, (AndyJohnstonAssociates). Andy has contributed to many national programmes/publications influencing the direction of travel for mental health services over the years and is an Editorial Board member of two international peer review scientific journals. He also has over 25 years' experience as a trainer and senior lecturer in conflict resolution and physical intervention. Andy has reviewed over 50 services spanning 8 European countries over the last decade. He held Executive Secretary and Director of Operations roles within the National Association of Psychiatric Intensive Care Units (NAPICU) Executive from 2002 until May 2013. Having stood down after 11 years he remains an Executive member with a number of portfolios

NAPICU National Survey Of Psychiatric Intensive Care, Low Secure and Locked Rehabilitation: Patient Characteristics

10.00 – 10.20, Conference Hall

Dr Stephen Pereira, Consultant Psychiatrist, London and NAPICU Chairman



Biography

Stephen has devoted his career to the relentless search for best practice in acute mental healthcare especially psychiatric intensive care. He is known for co-founding and guiding NAPICU over the last 23 years and for his commitment to improving the patient experience in adult 'locked' units. He conceptualised and developed The National Minimum Standard in PICUs and low secure care. He is a key international leader in his field of Intensive Care and in the NHS. He has a major influence in re-definition and development of Psychiatric Intensive Care in the UK via: policy, research, practice development and education. His key papers on Design Problems in PICUs resulted in the government (Department of Health) releasing 160 million pounds for design faults in PICUs. He developed a National Centre of Excellence in Psychiatric Intensive Care and is a winner of 8 National awards including UK Hospital Doctor of the Year in Psychiatry, Medical Management - Team of the Year, and a National Clinical Excellence Award (DoH). Stephen has over 30 years' experience in psychiatry. In addition to his Psychosis Spectrum work he is also a specialist in Cognitive Behaviour therapy (CBT). He has an MSc in CBT and Marital / Sexual problems at Guy's Hospital, London. He is currently Consultant Psychiatrist at Keats House, London Bridge and the Nightingale Hospital, London. He is also an Honorary Senior Lecturer, in Psychiatry at Guys, Kings, St. Thomas's School of Medicine. He is also Chairman of NAPICU, is on the editorial board of the International Journal of Psychiatric Intensive Care and is co-editor of the only worldwide textbook on psychiatric intensive care and is published widely. He has published the largest survey of PICUs/LSUs, reporting on patient and unit data in the NHS and private sector. He is currently Research Lead for the Second National Survey having successfully obtained a research grant.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Ms Lucy Walker, *Research Fellow for The National Survey, NAPICU*



Biography

Lucy has 19 years' experience of Mental Health / Drug & Alcohol Services; NHS / Non-Statutory / Independent Treatment Services. She has extensive audit experience as an NHS auditor for Mental Health and Drug & Alcohol Services. She is an original member of the research team which devised and completed the research into Psychiatric Care and Low Secure Services in 2001, published 2006. She is a contributor for Clinical Audit into the Department of Health (2002) Mental Health Policy Implementation Guide: National Minimum Standards for Psychiatric Intensive Care and Low Secure Environments. She co-authored papers on Supportive Observation and Engagement & Rapid Tranquillisation. She has 11 years Private Practice experience as a Psychological Therapies Consultant, specializing in Compliance & Practice Development, Cognitive Behaviour Therapy, Intensive Care and Substance Misuse Services. She is a highly professional and conscientious practitioner, known for dedication to 'clinical excellence' in mental health & substance misuse care

Abstract

The UK national survey of PICU, Low Secure and Locked Rehabilitation addresses changes in UK-wide services since the last survey was completed in 2002, (Pereira et al) in the context of increasing service privatisation and diversification / evolution of new services within the speciality. The survey has been developed in discussions with a multidisciplinary expert advisory group and uses a similar methodology to the original survey and is supported by the Department of Health, Care Quality Commission, Healthcare Inspectorate Wales & Royal College of Nursing. The practice standards for this survey are the National Minimum Standards for PICU and LS services, as defined by NAPICU (National Association Psychiatric Intensive Care Units), which were developed by UK wide multidisciplinary practitioners and revised in 2014. Comparative analysis will be completed to 2001 survey data to identify significant changes in service provision / patient characteristics.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Promoting Risk Intervention by Situational Management (PRISM) When the Ward is the Patient: Using Situational Risk Management to Reduce Violence

10.20 – 10.50 Conference Hall

Dr Lorraine Johnstone, *Consultant Clinical Forensic Psychologist & Visiting Professor, University of Strathclyde*



Biography

Lorraine Johnstone is a Consultant Clinical Forensic Psychologist, Visiting Professor, and Head of Child and Family Clinical Psychology in an NHS CAMHS department. Alongside her extensive clinical experience working with individuals with mental health and violent behaviour problems, Lorraine has worked with residents and staff teams based in a range of residential settings (secure and unlocked hospital settings, prisons, care homes, secure children's homes, etc). She is also experienced in working with complex systems where many and diverse factors impact and influence the organisational functioning. Lorraine has worked with many institutions using PRISM to inform risk management, service delivery, service development as well as benchmarking areas of good practice. Lorraine has led several PRISM evaluations across the UK and Europe and has been successful in achieving change in even the most entrenched and challenging settings. She has also consulted to and supported colleagues from other countries including New Zealand and the US who have implemented PRISM in their own settings and PRISM is currently being embedded in the Youth Custody Service in England.

Dr Jana de Villiers, *Consultant Psychiatrist - Intellectual Disability Forensic Network Clinical Lead for Intellectual Disabilities, The State Hospital, Carstairs, Lanark*



Biography

Dr de Villiers completed her medical training at the University of Pretoria in South Africa. She trained in psychiatry in Exeter, Bristol and the South East of Scotland. She was the Consultant Psychiatrist for the Fife Forensic Learning Disability Service from 2011 until 2018, with responsibility for a regional low secure ward, a forensic learning disability locked ward and the Fife-wide community forensic learning disability team. She jointly established a pilot Forensic Autism Assessment Service with a forensic psychology colleague. This service provided assessment and management advice to agencies managing individuals with Autism Spectrum Disorder (with or without comorbid intellectual disability) who engage in violent or sexual offending. She has published in peer-reviewed journals and contributes to national training programmes including the Approved Medical Practitioner Advanced Practice Course. She co-authored an online training module for the Royal College of Psychiatrists on people with intellectual disability in criminal justice settings, and has presented on a range of topics at both national and international conferences. As of May 2017 she is the Forensic Network Clinical Lead for Intellectual Disabilities. She was appointed in April 2018 as Consultant Psychiatrist for the High Secure Intellectual Disability Service for Scotland and Northern Ireland based at the State Hospital.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Abstract

Assessing and managing violence is a key task for health professionals. Over the last few decades, there have been dramatic improvements in the methodologies available to identify individual risk factors for violence but, the emphasis on the person alone is too narrow a perspective. People are violent not merely because of who they are but because of where they are. The literature is clear: situational risk factors are powerful determinants of violent behaviour. PRISM was developed to provide an evidence-based, structured professional judgement approach to identifying factors within the organisation that were linked to violence, those risk factors relevant to this process. Through a lengthy process of quantitative and qualitative research the protocol was devised to provide a method of assessment that is action-oriented, collaborative and facilitative. Since its inception, PRISM has been used across the international arena in a range of settings and for a range of purposes. This presentation will detail the protocol and how it was applied to a Learning Disabilities Ward in Scotland experiencing very significant incidents of violence and where it was the ward that was the patient.

Patient and Carer Involvement in Reducing Restrictive Practice

11.10 – 12.45, Conference Hall

Chair: Mr Chris Dzikiti, Senior Programme Manager (Mental Health Lead), North London Partners in Health and care (NCL STP) and NAPICU Executive Committee Member



Biography

Chris Dzikiti completed his mental health nurse training at City University London in 2002. Chris studied part-time for a nursing degree, and has completed a Masters in Transcultural Psychiatry, which gave him insight into how mental disorders and their treatment can be influenced by cultural and ethnic factors. He is currently studying an MSc in Strategic Health Management. Chris has been a member of the NAPICU executive committee since 2011, and is the NAPICU lead for the collaboration work with the Design in Mental Health Network. Chris is one of the co-authors of the Design Guidance for Psychiatric Intensive Care Units 2017. He is a trainer in Smoking Cessation, HoNOS Adult Mental Health Clustering Tool and HoNOS secure rating scales. Chris worked as a modern matron at East London NHS Foundation Trust, and was involved in developing women's mental health services.

Peer Support in Secure Services

Ms Deborah Owen, Service User Lead, Forensic Healthcare Services and Peer Support Lead of the People Participation Team. Sussex Partnership NHS Foundation Trust



Biography

Deb studied French at university and then decided to train as a social worker. She became unwell during the training and never really worked in the field, finding a career in publishing instead. After 15 years in book and market development, she was made redundant and was diagnosed with bipolar disorder around the same time. Now, as Service User Leader for the Forensic Healthcare Service, Deb combines her career background and her lived experience as a service user. Deb sits on the leadership team of the service, leading on peer support role development, service user involvement, and service user led projects across the service. She is the co-Chair of the Forensic Clinical Academic Group which promotes evidence led care and treatment as well as service user choice and experience.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Mr Luke Elsmore, Peer Support worker, Sussex Partnership NHS Foundation Trust



Biography

Luke became a service user in his late teens coming through the CAHMS team then on to adult services. Luke spent 10 years between the age of 16 -26 going through the prison system and secure hospitals. Luke suffers from schizophrenia, and the combination of this and a negative home and social life led Luke to become at times very violent and extremely unwell. In 2013 Luke's daughter was born while he was in an MSU. Luke worked extremely hard to stay on track and worked with services to an eventual discharge from secure services and is now a stable father and enjoys a happy home life with his (now) 2 daughters. Luke joined the peer support network and now works at an LSU and with a community based 'assertive transitions' team. His lived experience is providing men and women with real hope that they to, can live a meaningful life away from secure and inpatient settings.

Abstract

What is it like to be a patient in an LSU? What is it like to come back a few years later as a peer support worker? What difference does peer support make? What do we need to think about to make peer support safe and effective in inpatient settings? Luke Elsmore speaks from his own experience: "It's a scary thing to go back to a place you will have once been. But it's actually a great satisfaction to know you have been there and overcome it and now you are trying helping others along this path." Deb Owen has helped the service recruit, train and support 10 forensic peer support apprentices in the last year and has much to share on the process, the benefits and the challenges. Luke and Deb will share their experiences of making peer support work in an secure inpatient setting.

The Co-Production Perspective

Ms Sandra Jayacodi, Service User Advisor for Quality Improvement Board, Interim Chair for Adult Mental Health Research Partnership Group and Research Assistant at Central and North West London NHS Foundation Trust



Biography

Sandra is an Improvement Research Fellow of CLAHRC (North West London Collaborative Leadership in Applied Health Research Care) and a trustee for Mind in Harrow, a mental health charity. Sandra sits as a service user representative for Central North West NHS Trust's Quality Improvement Programme Board. She is the chair of Imperial Biomedical Research Centre Public Advisory Panel and a member of NIHR Imperial Patient Safety Translation Research Centre Research Partnership Group. Sandra is passionate about translating strong research evidence into clinical practise to improve patient safety and care within the health sector. Sandra has co-authored several peer-reviewed research papers on Patient and Public Involvement and contributed to the first text on peer support called 'Peer Support in Mental Health'.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

Abstract

"I believe we can change the world if we start working together"

The process of co-production enables the development of a common, shared vision. Adopting a meaningful collaborative and co-production approach with service users, carers, clinicians, health care providers and relevant voluntary sector organisations can be a powerful mechanism to improving patient experience. The session will explore how service user and carer involvement through coproduction can reduce restrictive practises.

Do I Notice Your Empathy and Compassion - The Emotional Experience

Ms Carolyn Cleveland, *Founder and Director C&C Empathy Training Ltd*



Biography

Carolyn has a background in psychology and counselling, and conceived C&C Empathy Training from her direct experience of patient safety, poor communications, the inquest system and the NHS complaints process. Carolyn experienced the loss of a child and found many of the systems did not grasp her emotional experience, motivations, and needs following this tragic loss, causing further unnecessary harm. Carolyn is passionate about taking empathy out of the text book and into real life application to promote long term change. Through training and development work, Carolyn humanises systems to support staff to support those that they are interacting with, as well as themselves and colleagues, in a friendly and supportive learning environment. Carolyn started to speak publicly about recognising the emotional experience in 2006. As she developed, she started to realise that her professional counselling training and study of emotional awareness and vulnerability, very challenging life events and her personality, created a trio of attributes that enabled her to reach people on a deep level. She found that she was able to not only educate professionals, from the health service to legal teams, but create a desire for them to engage with people better and understand their experiences as well as themselves better. Recognising that organisations struggle over and over at communicating empathy, compassion and integrity, for both the people in their processes and supporting their own staff, she committed to developing thought-provoking and honest training that reflects real human emotions to support professionals often dealing with difficult situations. She prides herself on taking people on an experiential learning journey of empathy, emotional awareness and candour, for use in leadership, complaints, inquests and general communication, to make all challenging situations a little better for everyone in the process. Carolyn works with many health and social care organisations, as well as corporate organisation. She is also part of the National Coroner Officer's Training Programme.

Abstract

Within this presentation, Carolyn will be identifying the presence and absence of empathy within a hospital setting, both from an individual perspective and the culture. Through journeying through the 'emotional experience', communication, biases and care are examined. Carolyn will further take delegates on a thought-provoking journey of the 'Funnel of Life' and levels of stress, taking a light-hearted look at how we naturally perceive things differently and how we all catch emotions. This will be linked into the 6C's and the role empathy and emotional awareness play in these. Finally, Carolyn will touch on challenging workdays and the importance of wellbeing.

SESSION ABSTRACTS AND SPEAKER BIOGRAPHIES

Friday 6th September 2019

NAPICU Conference 2019 Awards: Winning Poster and NAPICU Team of the Year

12.45 – 13.00, Conference Hall

Dr Dinal Vekaria, *Consultant Psychiatrist, Hertfordshire Partnership University NHS Foundation Trust and NAPICU Executive Committee Member*



Biography

Dinal Vekaria works as a Clinical Lead Consultant Psychiatrist on a 15-bedded male PICU with a catchment area covering the whole of Hertfordshire. He has an additional role covering female acute inpatients and ECT. Dinal has a keen interest in education and is the Royal College of Psychiatry Tutor for West Hertfordshire. He completed his psychiatric training in South and East London, and has worked as a locum consultant in both regions. Dinal is currently the NAPICU Director of Scientific Programmes.

Summing Up and Thanks

13.00 – 13.15 Conference Hall

Mr Thomas Kearney, *Deputy Chief Allied Health Professions Officer for England, NHS England, NHS Improvement and NAPICU Director of Policy*



Biography

Thomas has worked extensively as an Occupational Therapist in both acute and community care across both physical and mental health specialising in neurology trauma and acute mental health. He is also dually qualified in Cognitive Behavioural Therapy. Thomas holds a Masters with Oxford Brookes University in Leadership & Operational Management in Health and Social Care and jointly led the Operations module for their Masters programmes. In his career, Thomas has worked as Deputy Chief Operating Officer of a District General Hospital, an Associate Director of Commissioning as Strategic Lead for Urgent Care and Out of Hospital commissioning and is currently the Deputy Chief Allied Health Professions Officer for NHS England and NHS Improvement. Since 2007, Thomas has helped numerous mental healthcare NHS trusts and companies throughout the UK, in both substantive and consultancy roles engaging in rapid operational turnaround for high profile incidents but while maintaining full time employment in the NHS. Thomas has been involved with NAPICU since 2007 and became an Executive member in 2011. He is a reviewer for the Journal of Psychiatric Intensive Care and led the first AIMS-PICU review in the country. Thomas was the programme lead for the release of the revised National Minimum Standards for PICU launched in 2014. Thomas's areas of special interest are in service improvement and change management to enable increased efficiency, quality and performance within mental health and acute services. Thomas was the inaugural winner of the NHS South West Quality Champion / Innovator of the year 2014 and was a runner-up for the National NHS Quality Champion / Innovator of the year 2014. This was for extensive turnaround of clinical services and development of national standards. He has recently been involved in the development of the NHS Long Term Plan and national investment planning for rehabilitation services in 2019.

POSTER SESSION & TEAM OF THE YEAR

The following posters will be displayed around the exhibition Hall in the Hamish Wood Building, Glasgow Caledonian University. To view the poster abstracts please visit the NAPICU website – www.napicu.org.uk

Poster No	Title
PO1	Audit to evaluate whether the Rhythm pad has contributed towards improving data for ECG compliance in Rowan ward (PICU)
PO2	From Observation to Intervention
PO3	Are we under-diagnosing diabetes in mental health?
PO4	A Team Formulation Approach to Care Planning on a Psychiatric Intensive Care Unit: Staff Feedback and Reflections
PO5	Capacity to Consent to Admission of Patients Detained Under Section 5(2) of the Mental Health Act
PO6	Does sensory modulation reduce patient distress and restrictive intervention in Psychiatric intensive care settings?
PO7	Colne Ward's Reducing Restriction Intervention Journey
NAP001	NAPICU & BAP guidelines
NAP002	NAPICU National Survey

Team	
Amber	Sussex Partnership NHS Foundation Trust
Endcliffe	Sheffield Health and Social Care (SHSC) NHS Foundation Trust
Pavilion	Sussex Partnership NHS Foundation Trust

FUTURE EVENTS & SOCIAL NETWORKS

Local Quarterly Meetings

Details of the next NAPICU Local Quarterly Meeting will be available on the NAPICU website - www.napicu.org.uk

If you are interested in hosting a Local Quarterly Meeting please visit the website for more details www.napicu.org.uk or contact the administration office on **01355 244 585** or email info@napicu.org.uk

The 25th Annual NAPICU Conference 2020

Thursday 10th – Friday 11th September 2020
Park Inn Northampton

Social Networking

Keep up-to-date with all things NAPICU via our Facebook and Twitter remember the hashtag #napicu2019

Visit NAPICU on Facebook, Twitter and LinkedIn



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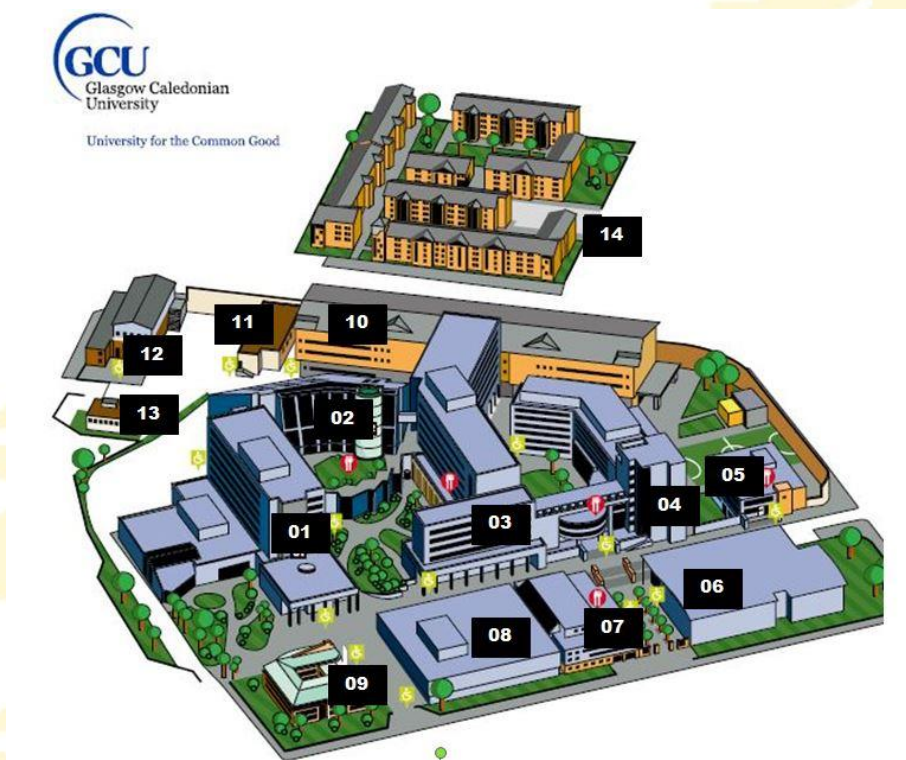
CAMPUS MAP

Caledonian University Campus

Glasgow Caledonian University
Caledonian Court
Dobbies Loan
Glasgow
G4 0JF

+44 (0)141 331 3011

+44 (0)141 331 3787 (24 Hrs) security



Campus Key – NAPICU venues

- 01** Hamish Wood Building- Conference and Training Venue
- 03** George Moore Building- Breakfast Venue
- 05** Students' Association- Buffet Dinner and Quiz (on Wednesday)
- 14** Caledonian Court – Student Accommodation