

Carers' Voice Somerset Meeting

MINUTES

JULY 1, 2015 10.00AM – 3.00PM

WINCANTON MEMORIAL
HALL

CHAIR	Neil Richards
NOTE TAKER	Deborah de Mornay Penny
ATTENDEES	Caroline Toll, Caroline Mead, Bob Champion, Dick Acworth, Lynne Ballard, Ali Pomeroy, David Willis, Gareth O Rourke, Vicky Chipchase, Nicola Miles, Richard Hobbs, Ali Pomeroy, Caroline Parry, Caroline Harding, Kerry Leydon, Sian Howell, Rachel Mason, Susan Hartnell Beavis, Julie Woan, Nicola Miles, Jackie Murphy
APOLOGIES	Amanda Payne, Eddie Godfrey, Brenda Prentice, Malcolm Jeffries, Gaynor Price, Eileen Mc Carthy, Sarah Baker, Frank Burbach, Caroline Harrison, Debbie Smith, Sarah Baker, Steve Austin, Miranda Boncey, Jill Downey, Paul Shallcross, Richard Pitman, Steve O Neil

Agenda topics

	Carers' Pre Meeting 10.00am – 11.00am
DISCUSSION	<p>Welcome and introductions.</p> <p>Caroline Harding – Village Agent</p> <p>Kerry Leydon – Carer (Somerset Parent Carer Forum)</p> <p>Caroline Parry – Service Development & Clinical Engagement Manager – Clinical Commissioning Group</p> <p>Julie Woan – Treasurer & South Somerset Federation Manager/Carers Champion Lead</p> <p>Carers' Voice Somerset needs to be involved in the process of commissioning services from the start and when interim changes are proposed. We need to know the following: What will happen, how will we be involved and how can we contribute to the process.</p> <p>Carers' Voice Somerset requires contract dates of all commissioned services.</p> <p>We require more Carers Support Workers and continuity of support. We would like to see Carers Assessment Workers and Carers Support Workers working more closely together. (One person to tell all to) – key words being: Consistency and Continuity</p> <p>We are concerned about the rapid turnover of staff and the impact that</p>

	<p>this has on consistency and continuity and ultimately the support we provide to carers.</p> <p>We would like to see more staff retention and a more comprehensive and timely hand over process when staff do move on.</p> <p>We understand that carers support staff at Somerset Partnership NHS Trust are required to hold higher level qualifications, relevant to their role and are paid more than Carers Support Staff at Compass Carers. To achieve the quality of support required it is essential that we have appropriately qualified and experienced staff within our services. We would like to recommend more investment in training and to use the Somerset Partnership NHS Trust model as a bench mark for best practice.</p> <p>We would like to look more closely at best models of practice across the county and beyond, in order to look at ways that we can improve our services for carers.</p> <p>We would like to look more closely at how Healthwatch are involving carers i.e. The Dorset model – carers stories are being collected which could provide more useful information.</p>
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1	Matters arising from last meeting - Neil	
DISCUSSION	1.1 Minutes agreed	
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
1.1 Find out who is to replace Jo Sylvester from the Young Carers Service.	Dave Willis	
1.2 Carers' Voice Somerset – new name accepted. D.Ackworth – recommends that we always include the strapline <i>“Working together to improve the lives of carers”</i> , on all correspondence, publications and website.	IIC Group	
1.3 Invite Councillor William Wallace to next Carers' Voice Somerset meeting.	Debbie	28.9.15
1.4 Publishing of minutes agreed	Debbie	2.7.15

2	Social Care Update – Gareth O'Rourke
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DISCUSSION	<p>2.1 – Carers Support Officer post</p> <p>Debbie’s post has been extended until May 2018</p> <p>2.2 – Changes in Adult Health and Social Care</p> <p>There will be changes in Adult Social Care as follows:</p> <p>Care Act – New responsibilities local authorities – we are now responding by:</p> <p>Working with development teams to focus on “Personal Planning”</p> <p>Looking at carers’ assessment documentation to ensure that they fully cover the required outcomes under the Care Act.</p> <p>Reinforcing “Front Line” staff – responses must be comprehensive and assessments must be recorded properly (the recording of assessments has been identified as a required improvement area).</p> <p>There is a marked cultural change – carers will now be on an equal footing as the “cared for”. The carer qualifies for support in their own right.</p> <p>Some carers are not known to the local authority</p> <p>C.Mead – Somerset Partnership NHS Trust give information and advice to Carers who visit their “Cared for” in Somerset, even if the carer lives outside the county i.e. Dorset</p> <p>G.O’Rourke – There are 8 outcomes (if a carer has difficulty meeting 2 or more then they meet the criteria) This is quite open and each case is considered on an individual basis, most will be eligible for some form of support.</p> <p>S.Hartnell -Beavis – Carers should not have to travel to get support. Carers should get support where they need it.</p> <p>D.Acworth – It would be useful to have these 8 outcomes</p> <p>G.O’Rourke – If any carer is struggling to have a carers assessment then they or their advocate must inform Gareth.</p> <p>Recruitment of Social Workers – It is difficult to recruit qualified Social Workers and to retain them.</p> <p>We want to undertake more work at the “Front end” (What happens</p>
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when a carer initially contacts us, we wish to improve the first point of contact in order that there is less repetition and delays).

We are working closely with “Somerset Direct” to improve this service. Our aim to move and signpost appropriately and as soon as possible. We are redesigning that process. Call advisors now spend longer on each call in order that they gain a better understanding of the callers needs i.e. 20 – 25 minutes.

We are up – skilling our team by providing vocation qualifications. We will also be increasing our staff team by 8 – 10 people who will specifically deal with complex calls at the first point of contact. These staff will be qualified Social Workers.

We are now reversing our incentive from short calls to more outcome focused calls.

C.Harding – I have received positive feedback – responses to 2 calls made have been excellent and assessments were carried out in less than a week.

A.Pomeroy – I have also received positive feedback, a huge improvement in relation to how they have responded to my questions. Assessment also carried out within one week.

D.Acworth – Could we request a member of “Somerset Direct” to attend our meetings? Where are calls directed to?

G.O'Rourke – This data will be made available in the longer term – GO not allowed to have details of this information at present – this may change in the future.

D.Acworth – This information is essential in order to help us develop services in the longer term.

G.O'Rourke – Agreed.

G.O'Rourke – Looking to the future:

We will be focusing on: **how** we provide, How we commission services including: Somerset Partnership NHS Trust, Young Carers Services, Learning Difficulties Services, Compass Carers.

We would like to look at **what** we are commissioning in order to determine fitness for purpose under **EU rules**.

Our overall aim will be to respond to Somerset's Commitment to Carers and the commissioning process will follow this providing integrated services in the future. Carers' Voice Somerset will be involved in this.

Compass Carers – This service was initially commissioned for 3 years with the option to extend by 1 or 2 further years (totally 5 years) We have

decided to extend the Compass Carers Contract until September 2016 – we may re commission.

J.Murphy – Can we please add counselling to the themes of our Commitment?
 G.O'Rourke – Long term, low intensity support will need to be given consideration and the Commitment work will provide a good framework for commissioning.

C.Toll – Will the politicians support this?
 G.O'Rourke – Yes – they will and the Commitment will support this in line with Health.

D.Acworth – Continuity is essential. Continuity of care right through until death. This sort of care should be available to all carer. To know that you have a number and a named person to contact.
 SHB – I agree, it should be the same person.

G.O'Rourke – We need to design what comes next very carefully and involve Carers' Voice Somerset.

Gareth will have a new job. Moving from commissioning to operational. I will be overseeing the "Front End" with Somerset Direct making sure that carers feature within that. I will be developing a healthcare interface i.e. how we work with those who are dependent.

Congratulations to Gareth who is now a Dr.

Tim Baverstock is acting as interim Strategic Commissioning Manager. Meeting on the 8th July to who takes post.

Action items	Person responsible	Deadline
Circulate 8 outcomes	Debbie	3.7.15
Provide a testimonial about positive feedback and send to Gareth	Caroline Harding Ali Pomeroy	31.7.15
Request that a member of Somerset Direct attend our next meeting.	Debbie	28.9.15
Any further questions please forward via Debbie	All	

3	Launch update - Vicky
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DISCUSSION	<p>V.Chipchase - The Launch of the draft “Somerset’s Commitment to Carers” taking place on the 8th July 2015 is the start of the process.</p> <p>We will be involving as many people possible in its development. We have a working group from Carers’ Voice Somerset. This group will take the work forward.</p> <p>The afternoon workshop will focus on themes and priorities based on all of the existing information that we have gathered from carers. We will be looking at all priorities and then identifying the top two within each theme that must be addressed first.</p> <p>The overall aim of “Somerset’s Commitment to Carers” is to bring better outcomes for carers in the future. So far we have 70 confirmed attendees 50 of whom are service providers, statutory, Community and Voluntary sectors. We are expecting more on the day. Please invite more carers if you can.</p> <p>Following on from the event the working group will evaluate the day and a comprehensive report will be drafted and made available for everyone to see.</p> <p>This Commitment will be formally adopted via the Health & Well – Being Board, Clinical Commissioning Group, Somerset Partnership NHS Trust, Young Carers, Compass Carers and Learning Difficulties Services etc. All will commit to demonstrating their achievements by reporting quarterly, through a robust performance framework. Carers’ Voice Somerset will have overall responsibility for monitoring outcomes.</p> <p>We need wide media coverage, videos, photos etc and follow up press releases.</p> <p>C.Parry – We can link with Clinical Commissioning Group media</p> <p>RM – Must ask carers to get involved, “How can we harness their experiences and how do we collate that information.”</p> <p>D.Penny – Discuss further in Carers’ Voice Focus Groups and young carers need to be involved in this also.</p> <p>J.Murphy – Not many recognise themselves as carers or know what they want.</p>
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ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Action items	Person responsible	Deadline
➤ Design action plan & monitoring & review	Debbie	July 15

process with Vicky		
➤ Plan and coordinate Vision Group involvement	Debbie	July 15
➤ Draft Commitment document	Vicky	Oct 15
➤ Create an event plan	Debbie	Sept 15
➤ Promote final “Somerset’s Commitment to Carers” – Event hosted by Carers, Voice Somerset	Carers’ Voice Somerset	Feb 16

4	4. Community Services update – Caroline Parry
DISCUSSION	<p>4.1 We are currently reviewing the community services based in community hospitals, based on the last 2 years.</p> <p>The purpose of the review is to ensure that what we are providing is still fit for purpose. We have been looking at what we need to consider next in relation to the health of carers. BC is a member of our steering group and is helping us with this.</p> <p>To do this we have been extensively engaging with “The League of Friends”.</p> <p>Over the last 18 months we have looked at 13 hospitals providing 312 beds. We have asked – are people best elsewhere? Statistics show that some could be cared for at home or an alternative. People generally heal faster at home physically and psychologically.</p> <p>The feedback that we have received so far indicates that there is a need for more services to be delivered at home, more at hospitals and more at locations closer to home.</p> <p>4.2 A new 3 part model has been introduced called “Step Up”, this may change in time. Hospital beds = someone who needs medical support.</p> <p>We are developing a diagnostic tool to determine needs in relation to minor injuries.</p> <p>There is a national drive to change “Minor Injuries Unit’s” to “Urgent Care Centres”. We are looking at how we can improve i.e. equipment, specialist advice, how to access notes and how we can get someone home as soon as possible.</p>

“**Step Down**” is about how we provide support when someone returns home.

Some may need pure nursing care or a mix of “**Step Up**” and “**Step Down**”.

4.3 We are looking at “**Community Health and Well – Being Centres**” these will provide peer support, health education and advice on long-term conditions, helping people to remain healthy and reduce them from reaching crisis point. The aim is to have “Health and Well – Being Centres” in all hospitals, they could also be in other places i.e. community halls. These centres will provide a useful supporting link to other services, be able to share information, help with sign posting etc and could link up with i.e. voluntary organisations.

4.4 We will be looking at better trained staff to support with dementia care. Health care specialists will link more closely with dementia specialists.

4.5 We will be looking at ways to review and develop a **Centre for Excellence in strokes and neuro development**. We wish to speed up and differentiate care i.e. direct to the specialist trauma units rather than send to A&E first.

4.6 We will be delivering services close to home. Outpatients and ambulatory care will be reviewed. Transport, travel time and travel issues around this will be a key theme i.e. not everyone drives, how do we address this? There are some schemes in place and we will be carrying out a mapping exercise in order to identify gaps and make improvements, strengthen and promote.

4.7 We need more flexibility around hospital beds to include consideration for winter demands. We will also be looking at flu pandemics. We will be asking:

- What else needs to be considered
- Considering travel and distance
- What types of health and well – being services do we need

S.Hartnell-Beavis – a permanent doctor in community diagnostic/minor injury clinics more than fortnightly, monthly etc.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Action items	Person responsible	Deadline
Final report to SEAG & PPG meetings	CP & Jill Downey	2.7.15

Recommendations to the governing body	CP & Jill Downey	Mid July
5 Year plan to be completed		

	5. Service updates – Written service updates provided
DISCUSSION	<p>Compass Carers – Service update</p> <p>Somerset Partnership – Annual report</p> <p>Young Carers Services Report</p>

6	Focus Group Meeting 1.00pm – 3.00pm
	<p>6.1 Community Services – Caroline Parry (Open discussion)</p> <p>“Somerset You Can Do” have a transport scheme. RH – we need to promote these schemes more. i.e. a visual map of services could be useful.</p> <p>J.Woan – South Somerset have 20 surgeries, 19 have Carers Champions. 4 Practices have more than one Carers Champion. Some practices have “Dementia Friends”. Carers Champions in South Somerset meet 3 times a year and attend 2 events they then feedback the outcomes to their surgeries. Carers Champions are back filled in order that they may attend meetings and events. All agreed that South Somerset have a good working model of practice.</p> <p>S.Hartnell-Beavis – Carers Champions need to be more than someone that sign posts, they need to also look out for those who might be carers. There is a need to answer “Open Questions”.</p> <p>C.Toll – GP’s need to be told of the benefits of listening to carers – “If you listen to carers they can help you” i.e. “Whats in it for me?”</p> <p>D.Acworth – Williton surgery very supportive – engages well.</p> <p>C.Toll – We need to boost the role of Carers Champions so that they can inform the professionals.</p> <p>R.Hobbs – Possibly not a good time to introduce, GP’s are under immense pressure at the moment. There is a shortage of GP’s and appointments are very short.</p> <p>C.Parry – The “Triangle of Care” is very important for all carers. We have no GP leads in The Clinical Commissioning Groups. We need a GP. Karen Sylvester may be this person – need to check.</p> <p>L.Ballard – If a carer comes in and describes a critical situation it is so important that it is passed on to the GP.</p> <p>B.Champion – Carers are unable to have access about their cared for due to data protection. This must be sorted ASAP at the point the carer is registered.</p> <p>C.Toll – Doctors could help carers know the best way of managing the condition or situation even though confidentiality may apply re diagnosis.</p>

C.Parry – Raising issues of consent i.e. cared for may not wish carer to have access to all information about them.

J.Murphy – Carers have a legal right to talk to their GP to give the full picture.

B.Champion – It is a big problem when the cared for goes into hospital.

C.Parry – Need to clarify the situation.

Kerry Leydon – I promote a carers support group in my surgery through a newsletter and on our website.

R.Hobbs – Young carers may not have the confidence to ask for support. Support needs to be provided to put the needs of the cared for across when telling others.

S.Hartnell-Beavis – i.e. if a young carer collects a prescription from the surgery dispensary then we need to find ways to approach them – they may be embarrassed and do not wish to identify themselves to their peers.

JW – We need funding for valuable and good training and time to carry out role.

L.Ballard – Turnover of staff, time to recruit – how do we get past this? Need for clarity of job descriptions.

RH – Musgrove staff turnover is less frequent

J.Woan – Struggling to recruit GP's in Somerset and it is also a national problem.

C.Parry – Will attend each Carers' Voice Somerset meetings.

6.2 Carers Champions Questionnaires

All have looked at the questionnaires for: Carers Champions in GP Practices and those designed for schools and FE settings. Suggestion that these could be put on "Survey Monkey"

6.3 Carers' Voice Somerset Planning meeting

Initial ideas discussed i.e. Should it be one event or a series? Does it need to be an event or more about promoting the role of carers? Could we have stands at supermarkets? Could we have a display stand in each surgery? Who could we involve and how do we work together with others? Do we need to fund raise for specific things? What promotion do we need? etc.

C.Toll – offer to advise on promotional activities

Date planned

Tuesday 20th October

Venue

Red Brick Building (Boca Bar), Moorland Enterprise Centre, Moorland Road, Glastonbury, BA6 9FT, Tel: 01458 899564 – **Booked**

Time

9.30am – 1.30pm – Travel will be reimbursed to carers. Lunch arrangements to follow.

Purpose of workshop

To plan Carers' Voice Activities for Carers Week (June) and Carers Rights Day (November) next year and to plan the launch of Somerset's Commitment to Carers on 11th Feb 2016.

Further details will be circulated prior to our next meeting on the 28th September 2015

CONCLUSIONS	All agreed that it was very useful hearing from and talking with Caroline Parry from the Clinical Commissioning Group, The questionnaires will provide us with useful information and a clearer picture of the types of support provided to carers across the county, in schools, FE Settings and GP Surgeries. Future projects linked to this will focus on support for carers in employment. All agreed that the workshop will be useful and the venue agreed.
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ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
6.3 Plan and organise workshop	Neil & Debbie	
6.2 Send final revision suggestions for questionnaires to Debbie	All	10.7.15
6.2 Agree how we distribute questionnaires	All	31.8.15
6.2 Produce and circulate questionnaires	Debbie	18.9.15
6.3 Plan and organise workshop	Neil & Debbie	30.9.15

FUTURE MEETINGS	<p>September 28th (Monday) The Meeting Room, Compton Dundon Village Hall, Meadway Hall, Ham Lane, Compton Dundon TA11 6PQ</p> <p>The format for both meetings will be as follows: 10.00am - 11.00am Carers’ pre meeting 11.15am - Refreshments 11.15am - 12.30pm main Board meeting 12.30pm - 1.00pm – Lunch 1.30pm - 3.00pm – Focus Group/s</p> <p>Important: Can you please all let Debbie know which meetings you can attend and whether you are able to stay for the whole day or part. This will enable her to plan accordingly and minimize waste of resources. Thank you</p> <p>Please note: A schedule of dates for 2016 is currently being planned by Debbie</p>
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