

Carers Partnership Board

Blended Meeting held via Zoom and at Maple Centre Huntingdon Minutes 18.5.21

1 Present

SH	Sue Honour	Independent Member- Chaired meeting
KC	Kadie Chapman	Independent Member
SdP	Stuart de Prochnow	Independent Member
EM	Ella McKensie	Independent Member
GL	Graham Lewis	Healthwatch Cambridgeshire and Peterborough
DD	Debbie Drew	Healthwatch Cambridgeshire and Peterborough
LG	Laura Green	CCC- Carers support team
GH	Graeme Hodgson	CCC (direct payment lead)
SM	Siobhan McBean	CCC Disability Social care 0-25
DS	Dawn Stillwell	Little Miracles
LiG	Linda Green	Pinpoint
JM	Jason Merrill	Family Voice
KL	Kelly Law	CCC Information team
KR	Kate Rees	Centre 33
CD	Christine Dewilde	PCVS
SJ	Shabana Joiner	PCVS
TE	Tony Elliot	Caring together
TJ	Teresa Jude	Carer adviser- Peterborough Hospital
TM	Tara Mackey	Commissioner CCC/PCC
KP	Kari Payne	Comms Healthwatch.

Apologies

Annie Bamforth, Dennis Pinshon, Joseph Simon, Gillian Loveday, Andy McGowan, Wendy Dunn, Beth Green, Michelle King.

1. Welcome, introduction, and apologies

Today's meeting was a blended meeting. DD, SdP, SH and KP were at the Maple Centre with the meeting projected onto a wall.

Introductions were made and it was explained that the meeting would be recorded and used to support minute taking.

2. Minutes of last meeting and Action Log

The Minutes from March were approved.

Action 131 and 134 are on this meeting's agenda.

Action 135 was completed.

Action 136 The MIU has now reopened.

3. Feedback from Independent Members

The pre meeting for independent members was held the day before.

Dennis reported that a previous problem of linking his name as carer to his son had been resolved. Although someone's notes at GP may say they are a carer the cared for needs your name adding to their notes to make the complete connection.

Dennis also reported that his son has not had an LD check for 3 or 4 years. He wondered when these were going to restart.

DD had managed to get 2x face to face meetings for those she supports.

KC Had a phone call appointment for her son. He received a four point health action plan in Easy Read.

ACTION Dennis will try and arrange a LD health check for son and will report back to GL. GL will raise concerns at CCG meeting about inconsistency of checks.

JM said he had had a feedback form from his care agency. It was multiple pages, and many questions were irrelevant.

GL Asked if on the form anywhere it mentioned Healthwatch.

LiG Said often if people need help to complete form it would be the carer who would need to fill form. This could alter the feedback.

4. Feedback from Adult social care forum and other meetings

GL The ASCF talked about digital inclusion/exclusion and how people could get information without using the internet. It was suggested that radio and advertising on busses.

GL also attended ADDAS workshops over a couple of days. The key points raised were:

- The need to have better data usage.
- Coproduction is essential.
- Initiative and Collaborative commissioning
- Post pandemic look at workforce terms and conditions.

5. Recruitment Strategy for Carers to join Carers Board.

The aim of all the partnership boards is to have 50% of the board to be independent members. We would like to increase our scope of carers from around the county (particularly East Cambs) as well as people caring for others with different conditions and ages.

A discussion took place as to how to attract new people.

- CD could put something in their next newsletter.
- LG periodically send items to carers- this could be included.
- TE can ensure there is something in Carer's voice.
- GH mentioned Wendy Lansdown who is doing work in East Cambs. GL could link with her to identify possible carers.
- JM mentioned putting items in with parish councils particularly for targeted areas.
- SM would get other CCC staff to share information.

- SH mentioned that this may be a good time to recruit as some people may have not recognised that they are carers until lockdown actually reenforced this.
- SB Maybe the new style of blended meetings would suit some people more.

ACTION GL to send details to those who can share or add to publications.

GL also said that if any groups were doing coffee mornings etc that he could come along to chat about the boards.

6. Potential New Member

Teresa Jude introduced herself- she is the care advisor at NW Anglia FT for Peterborough and Stamford hospital. She identifies carers and raises awareness as well as teaching new staff about the role of carer. Two thirds of the carers are from Cambridgeshire or Peterborough but often Teresa has to liaise with other services outside of the area.

The board were asked to vote on Teresa joining- All agreed.

7. Update All Age Carers

Tony Elliot-Caring together- Business is as usual and we are still receiving referrals. We are looking forward to Carer's week and planning some activities.

We have had 3 new organisations get a Carer's Friendly Tick- 2 community and 1 health. We are talking with parent carers about transition with the aim to improve this process.

Kate Rees- Young Carers- We have seen an increase in referrals in particular from sibling carers. The long lockdown has been difficult for young people who live with a sibling with care needs.

We will be piloting a new sibling group in East Cambs in May for primary school age children and Secondary hopefully in the summer holidays. We have also held some workshops around eating disorders for sibling carers.

We are planning activities for carer's week.

We have had an increase in referrals from primary schools and we have been working with the safeguarding teams in some cases to offer extra support.

We have had huge engagement with secondary schools, and they have improved their support and awareness of young carers.

8. Update from commissioner- Tara Mackey

Later this week we will be launching a service user survey looking at the way we commission services. We are looking at support offered to those with disabilities, information and advice, community support.

We are wanting to know how people access information and advice.

We are also looking at the data we hold in house and how the current model works and what can be improved.

9. Graeme Hodgson

The councils have in a first wave of action boosting the interest in working in the care sector. The second wave is around "hidden carers". We want to connect with people who

may not have connected before and looking at resources that can help a person care. We have a lot of resources on our website.

Graeme explained that part of his commissioning role is to engage with people around coproduction. Individual Service Funds are mentioned in the Care Act and CCC have not done a lot of work around these so Graeme is looking at how they can be introduced.

What are they?

When people are eligible for social care packaged their needs are assessed by a social worker and a personal budget is decided.

70% of people opt for an arranged package (these people are then passive recipients of the care they receive)

Other people take the package as a direct payment which gives people more control of their support. Some people find these are too much of a burden -being an employer etc.

The alternative could be an Individual Service Fund (ISF)- these are in the early stages of how they could look, and we are piloting it in East Cambs and Peterborough.

JM would it be suitable for those receiving domiciliary care?

GH It is possible that someone who has had commissioned care may want to work in a different way so could get an ISF if it improves their outcomes.

LG How will it be monitored?

GH The same as direct payments are monitored.

GH The ISF could be managed by a home care agency the person is already using, Brokers of Care (community interest group) who can then pull in support from various areas. This should get the service user a more holistic package of care- each one being unique.

Healthwatch had received an enquiry about contributions to care. The information on CCC website was minimal in the first instance and then a link with a 16 page document to read. This was not easy to decipher and had no examples. It stated that you had to ask for an accessible format. There was nothing on the direct payment support services websites. GL had approached Carol Williams who explained that they decide not to use examples in case someone thought that it would be the same for them. She also shared some simpler leaflets. Accessible documents are not available yet.

CD (DPSS-Peterborough) explained that if a person has their financial document and are willing to share the workings then the team can help them understand it, but they are not allowed to give advice and guidance on assessment process.

KC Attended the original consultation and they promised that the financial assessments would be personalised. A lot of people had seen increases with not enough information or recourse. KC has challenged her son's financial assessment (the paperwork is extremely difficult to make sense of and KC is an accountant) but she has had no response from team.

ACTION GH to look at the appeal process for people to question their increase in contributions to care.

10. PCVS- Peterborough Direct payment Support Service- Chris Dewilde

PCVS has been in existence for over 30 years now. We support voluntary and community sector organisations across Peterborough.

Our direct payment support service:

Offers support with information and guidance- this can be one off or ongoing for more complex circumstances. Shabana has been with the team 18 months now and she handles all new referrals. Karen our senior support worker deals with more complex cases.

We run a payroll service which runs the PAYE for people who are using a direct payment to support staff. There is a charge for this.

We also manage some people's budgets for them (530) where we make all the payments etc on that person's behalf.

We have a PA register so people can advertise a vacancy or look for a PA. We have 70 PAs registered with us at the moment. We can take up references on behalf of the employer and we offer training. Faith is our PA lead, and she manages the document checks and job alerts.

11. AOB

Healthwatch are holding their AGM online on 21st July- There will be a variety of online workshops followed by AGM. The plans for workshops are Co-Production, Technology Enabled Care/selfcare, Digital exclusion.

In July we have a Future Parks meeting

Information was also shared about a consultation around out of hours services and how they work for carers. DD will be attending.

TJ Reminded carers to have "What If" plans often when carers arrive at hospital for themselves the care for ends up in hospital too as nothing has been put in place to care for them.

Next Meeting 20 July