

MEETING NOTES:	Learning Disability Partnership Board
DATE:	10 th September 2019
LOCATION:	Chacewater Village Hall

ATTENDANCE

Name	Position	Organisation
Nuala Kiely (NK)	Partnership Boards Officer	Healthwatch Cornwall
Mike Hooper (MH)	Partnership Boards Officer & Minute Taker	Healthwatch Cornwall
Allison Kirk (AK)	Community Nurse LD Service East	Cornwall Partnership NHS Foundation Trust
Andrew Gray (AG)	Self Advocate & Trustee	Cornwall People First
Ben Seamarks (BS)	Commissioning Officer	Cornwall Council
Christine Bateman (CB)	Chief Executive	Cornwall Advocacy
Chris Jordan (CJ)	Trustee & Treasurer Parish Councillor	Cornwall People First Carn Brea Parish Council
Deborah Rees (DR)	Transforming Care Team, Clinical Review Officer	Kernow Clinical Commissioning Group
Derek Hoddinott (DH)	Direct Payment Reviewer	Cornwall Council
Dina Holder (DiH)	Community Engagement Manager	Women's Centre Cornwall
Ebony Rose Thomas (ET)	CHAMPS	Cornwall Council
Elizabeth Campling (EC)	CHAMPS supporter	Cornwall Council
Fliss Hedge (FH)	Outreach Worker for East and North Cornwall.	Cornwall People First
Jane Rees (JR)	Manager LD and Autism RCHT Safeguarding Team	Royal Cornwall Hospital Trust
Jenna Pulley (JP)	Representative	Cornwall Partners in Policy
Laura Keeper (LK)	Self Advocate	Cornwall People First
Lesley Saunders (LS)	Coordinator	Shared Lives South West
Amanda Wilton (AW)	Patients Panel Representative	United Hospitals Plymouth
Maurice Shermer (MS)	Self Advocate	Cornwall People First
Neil Carpenter (NC)	Advocate	Cornwall Advocacy
Nory Menneer (NM)	Clinical Lead and Programme Manager, Learning Disabilities	Kernow Clinical Commissioning Group

Name	Position	Organisation
Paula Volkner (PV)	Transforming Care Programme Project Manager	Kernow Clinical Commissioning Group
Richard Gittens (RG)	CHAMPS	Cornwall Council
Roxanne Sutherland (RS)	Outreach Worker for Middle and West of Cornwall	Cornwall People First
Samuel Edwards (SE)	Nurse consultant, Adult LD Service	Cornwall Partnership NHS Foundation Trust
Sandra Ward (SW)	Carer Representative of PCC	Parent Carer Council (PCC)
Sharon Hambley (SH)	Speech and Language Technician East LD Service	Cornwall Partnership NHS Foundation Trust
Suzanne Leggett (SL)	Manager	Cornwall People First

APOLOGIES

Name	Position	Organisation
Aisling Khan	Senior Manager - Services to our community	Council of the Isles of Scilly
Amy Claridge	Commissioner for Day Services, Respite and Shared Lives	Cornwall Council
Ania Nicholls	Commissioning Officer	Cornwall Council
Jayne Kirkham	Councillor	Cornwall Council
Jody Wilson	Engagement and Volunteering Manager	Healthwatch Cornwall
John Groom	NHS director for Integrated Care	Kernow Clinical Commissioning Group
Leona Thorpe	Principle Social Worker Disabled Children and Therapy Service	Cornwall Council
Martha Reed	Commissioning Officer	Cornwall Council
Phil Confue	Chief Executive	Cornwall Partnership NHS Foundation Trust
Rob Rotchell	Councillor and Portfolio Holder for Adults	Cornwall Council
Richard Sharpe	Advanced Public Health Practitioner	Cornwall Council
Shelagh Mitchell	Manager CHAMPS	Cornwall Council
Suzanne Wixey	Service Director Adult Transformation and Commissioning.	Cornwall Council
Tim Francis	Head of Joint Strategic Commissioning for Adult Mental Health & Learning Disability	Kernow Clinical Commissioning Group

ACTION LOG

<u>Meeting</u>	<u>Action</u>	<u>ACTIONS CARRIED FORWARD</u>	<u>RESPONSIBLE</u>	<u>STATUS</u>
12/03/2019	1	NK to get in touch with Neil Carpenter to get his insight into UC issues nationally and consider event around UC	NK	Verbal update (11/06/19) NK There will be a cross-PB event on UC credit in September
12/03/2019	2	DR to get list of Jobcentre Plus local numbers from Vulnerable Customer Network Meeting and send to NK	DR	
12/03/2019	3	SM to send NK Steve Matthew's email address to possibly give talk at next LDPB	SM	Completed. There will be a cross-PB event on UC credit in September. Date and venue TBC
12/03/2019	4	JJM to investigate LP's contact's situation and update board at next meeting with legitimacy of process	JJM	Completed Verbal Update (11/06/19) As people are not coerced in to giving money no crime is committed.
12/03/2019	5	HE to liaise with Martha Warrener and provide list of advocacy services (statutory requirement) commissioned by CC	HE/MW/NK	Outstanding Advocacy services to be re-commissioned. Update 11/06/19 NK will email MW.
12/03/2019	6	HE to take comment re. opt out for assessment advocate rather than opt in back to Cornwall Council	HE	Completed
12/03/2019	7	TS to report back to social worker teams the value of "opt-out" re. advocacy.	TS	Completed
12/03/2019	8	NO to find out how to access advice on advocacy from the Council without going online	NO/NK	Update (11/06/19) NK will contact MW.
12/03/2019	9	TS to feed back to teams that forms and leaflets should be sent out with appointments and handed to clients after meetings	TS	Update 11/06/19) TS not present at today's meeting. NK to email TS and verify action completed
12/03/2019	10	DR to find out the context of MH cases for people with LDs and feed back to NK. NK to liaise with Dr Rohit Shankar	DR/NK	Completed. Statement from Dr Rohit Shankar passed on to SL

12/03/2019	11	NK to liaise with LK re. transport issues at day services and to send these to AC	NK	Completed. See AC's response below.
12/03/2019	12	AC to take day service issues to in-house services manager at the Council	AC	Completed.
12/03/2019	14	NO to send transport success story to NK to send on to AC	NO	Completed.
11/06/2019	1	NK to contact Kim Mabon at the DWP and see if they can offer someone to answer questions about PIP at a cross-PB event	NK	UC event will take place in November. Venue and time TBC.
11/06/2019	2	SS to add Inclusion Cornwall's contact details to the minutes	SS	Completed. Details in the minutes. Page 6.
11/06/2019	3	AC to send out dates, times and venues for events re. recommissioning advocacy to the Board via NK	AC	Completed. Details in the minutes. Page 6
11/06/2019	4	AC to take back concerns about fuel allowance and lack of minibuses in Launceston day service centre and Tregarne respite centre, to Cornwall Council transport department.	AC	Green transport to be discussed at the December 2019 meeting.
11/06/2019	5	DeH to provide the Board with updates and an ER copy of the information about DP s when available.	DeH	Completed 10/09/19
11/06/2019	6	AC to invite DiH to give their training to commissioners at the Council and link them to colleagues delivering training and development for the social care sector	AC	
11/06/2019	7	NK to circulate DiH's email address from Cornwall Women's Centre DIVAS project to the Board	NK	Completed Circulated 1/07/19
11/06/2019	8	NK to attach link to web-page with details on numbers of places for supported living in Cornwall.	NK	Completed Circulated 1/07/19 Link in minutes and correction. Page 12
11/06/2019	9	NK to put Extra Crisis Support on the next PB agenda and invite relevant speakers.	NK	

<u>ACTION FROM THIS MEETING</u>	<u>RESPONSIBLE</u>	<u>COMPLETED</u>
1. NM to present to the next meeting on work undertaken by the KCCG in relation to LD.	NM	
2. SE to provide an update on STOMP at the next meeting.	SE	
3. EC to provide feedback on planning county wide events.	EC	
4. NK to share info on joint partnership board meetings.	NK/CB	
5. BS and SL to liaise regarding charging for time off at day services.	BS/SL	
6. NK - Transport to be included as an agenda item for the next meeting.	NK	
7. NK and NM to write to all providers, on behalf of the Board, to remind them of their responsibilities.	NK/NM	
8. PV to identify suitable first aid courses and relay to CPF.		

Item	What was discussed?	Action
1	<p><u>Updates</u></p> <p>NK invited those present to provide updates and feedback on their work since the last meeting of the Board. Responses to questions posed by Board members were also provided.</p> <p>Royal Cornwall Hospitals NHS Trust (RCHT)</p> <p>JR stated the following:</p> <ul style="list-style-type: none"> • The LD Liaison Team would be increased to 5 members of staff. • Work was being undertaken with regard to improving admission processes for people with learning disabilities (LD). Easy read posters had been produced and an LD bundle was in development, including information on Sepsis. • There was a current nationwide drive to implement flagging systems for admissions of patients with LDs. However, such a system was already in operation at RCHT, identifying around 250 people per year, ensuring that nurses were alerted and care was given that was appropriate to patients' additional needs. • Unpaid carers for people with LDs were provided with beds for overnight stays. Beds were not provided for paid carers as they would be expected to be awake throughout the night. • Following discharge, community care could be provided for individuals at various locations across the county. <p>Kernow Clinical Commissioning Group (KCCG)</p> <p>NM stated the following:</p> <ul style="list-style-type: none"> • He would like to give a presentation to the next meeting on all work undertaken by the KCCG in relation to LD. • The LeDer Programme had provided good learning. There would now be an annual report and a long term, 10 year NHS plan that would focus in part on LD and autism. • Transforming Care Programme (TCP) - There were currently 18 people located out of the county: 10 of which were commissioned by NHS England (NHSE) and 8 by KCCG. There was a target to reduce the overall number in long stay hospitals to 6 or fewer by the end of the year. • The Whorlton Hall and Winterbourne View cases had highlighted the need to provide support close to patients' homes. Where that wasn't possible, DR would visit on a monthly basis and Care and Treatment Reviews would continue to be undertaken 6 monthly. • The market was currently dominated by large, national providers, which had led to limited options available for long term care provision. Work was underway with a view to securing smaller, local providers. • NK said that the health check target of 75%, as set by the Annual Health Check Programme, was not being achieved, possibly in part due to its importance not being recognised. Issues around IT systems could also be a factor. 	<p>NM to present to the next meeting on work undertaken by the KCCG in relation to LD.</p>

<p>Cornwall Partnership NHS Foundation Trust (CFT)</p> <p>SE stated the following:</p> <ul style="list-style-type: none"> • Whilst RCHT had been the first Trust to achieve Autism Accreditation, the reaccreditation process would begin the following week, with the National Autism Society attending to check on current services. • There would be an update to the next meeting on STOMP (stopping the overmedication of people with a learning disability or autism). It would coincide with a national programme to ensure that medication was taken only for the correct reasons. <p>SH stated the following:</p> <ul style="list-style-type: none"> • The Learning Disability Advisory Group was working towards ensuring that documents were produced in appropriate formats and were due to meet with the producers of the nationwide newsletter, The Spectrum (www.spectrumnews.org/newsletter), on 2 October 2019. <p>Cornwall Health and Making Partnerships (CHAMPs)</p> <p>RG and EC stated the following:</p> <ul style="list-style-type: none"> • The Big Beach Day, one of three annual events, had been held on 5 September 2019. Unfortunately, attendance had been disappointing, with only 10 people with learning disabilities in attendance, down from around 100 at previous events. It had been suggested that transport issues contributed to the low attendance but there were also internal issues that needed to be addressed. • The possibility of holding more localised events in order to limit travel complications was being looked into but there was concern that they could lead to fewer opportunities for people to meet and socialise. • The Blue Light event had been well attended and the Christmas event was always popular. • RS raised concern regarding the 6 mile travel radius restricting peoples ability to travel to events. <p>Healthwatch Cornwall</p> <p>NK stated the following:</p> <ul style="list-style-type: none"> • Smile Together, based in Bodmin, was now open. NHSE commissioned it to fill the gap created by the lack of special care dentistry in Cornwall. Any health professional could refer patients there if they could not receive care at a high street dentist. • People were encouraged to have their say in the current Healthwatch short survey on special care dentistry in Cornwall. • A focus group would be held to consider issues around special care dentistry. It would be held from 2pm-4pm on 24 September 2019 at Truro Community Library. Board members could contact NK for further information and to express an interest in attending. • RG said that the CHAMPs attended day centres to attempt to desensitise and reduce anxiety for people with issues about 	<p>SE to provide an update on STOMP at the next meeting.</p> <p>EC to provide feedback on planning countywide events.</p>
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	<p>visiting the dentist. SH added that the CFT had met with Smile Together.</p> <ul style="list-style-type: none"> • EC offered to include details of the survey and focus groups in the Learning Disabilities newsletter but added that low numbers of recipients opened the attachment to the email. • Hard copies of the survey were available and NK could be contacted if there were any queries. • A new group was being formed to enable people with learning disabilities to talk about the health and social care services that they would like in Cornwall. It was an additional group that would feed into the Partnership Board and it was also being promoted to organisations that had not previously been involved with the Board. • It had been intended for the Partnership Boards to feed into the statutory Health and Wellbeing Board but that role was not being fulfilled. It was hoped that an overarching group, made up of decision makers, could be formed to address that gap. NK asked that CB liaise with her on the matter outside of the meeting. • Lay members of Partnership Boards could claim “reasonable expenses” for travel as per the Healthwatch Cornwall policy. NK could be contacted for further information. <p>Cornwall Council</p> <p>NK stated the following:</p> <ul style="list-style-type: none"> • The Carer Support and Assessment Service was to be recommissioned and a survey was open until 27 October 2019. Ania Nicholls was leading but questions from the Board could also be directed through NK. 	<p>NK to share info on joint partnership board meetings.</p>
2	<p><u>Day Opportunities Engagement Update</u></p> <p>BS provided the following update:</p> <ul style="list-style-type: none"> • So far, around 425 surveys had been received back from approximately 800 users, with an estimated full cohort of 1400. The response rate was considered to be very positive. • Around 220 people that had completed the survey had said that having a learning disability was their principal reason for choosing to attend day opportunities. • Of those 220, 75% had stated one or more of the following as the key element(s) that they valued: <ul style="list-style-type: none"> - Socialisation; - Access to staff that they liked and who had their best interests at heart; - Interesting activities. <p>Such feedback would make commissioners think carefully about what they offered.</p> <ul style="list-style-type: none"> • Some providers had suggested that a survey was not the best approach. Workshops and drop-in sessions for providers were to be held across the duchy. • The most important areas for day opportunities were to provide a safe environment which provided: <ul style="list-style-type: none"> - challenges and the opportunity for service users to stretch themselves; - diversity; and 	

- positive peer pressure.
- Day services were not about the buildings but more about the space that they provided and the environment they created, where “safe failure” was possible and trying new things was encouraged.
- An independent facilitator tender had been launched the previous day. A body of evidence would be handed to the successful tenderer who would then work to determine the future shape of services, possibly through the facilitation of a series of workshops across the county. That work would run from mid-October 2019 to the end of the year with a view to having possible future service models by the end of January 2020 and open consultation by February 2020.
- NM urged BS to read the John Daniel Centre Serious Case Review from 2015.
- NK stated that some service users had asked her to feed back that they had felt included in the process so far. BS said that the Council recognised the anxieties around changes to day centres and that it needed to ensure that it didn’t miss people that could have contributed. It felt as though it had been representative.
- What was included in the review had been clearly stated. It was explicitly about commissioned services, which was where quicker changes could be made. The driver was the end of the current contract in 2021.

Three questions were put forward by Cornwall People First:

Booking Time Off - Day Placements:

‘We have been supporting a person who can’t book time off their day placements for events such as this or other meetings, without having to make the time up. We feel people should be able to book time off in the same way as a normal job. Is this a funding issue?’

BS replied that commissioned services funded for absences of less or more than two weeks notice. With two weeks notice, providers funded 50% of the day rate for an individual. For under two weeks it was 100%. NK stated that it appeared that there was confusion at a provider level around notice periods, planned absences, holidays and travel and suggested that CPF and BS liaise outside of the meeting and bring any wider issues back to the Board.

BS replied that there were no policy limitations but that it was possible that centres were imposing limitations themselves.

Day Service Transport Allowance:

‘Transport Allowance is now for only a 6 mile radius per day which doesn’t allow for person centred activities. People are experiencing a real sense of loss for things they used to be able to do weekly.’

BS replied that there were no policy limitations but that it was possible that centres were imposing limitations themselves.

A number of attendees raised concern regarding funding for transport. The key concern was that service users would become

BS and SL to liaise regarding charging for time off at day services.

	<p>isolated as they couldn't access events. NK advised that in order to draw the Council's attention to the issues affecting people, members needed to collate evidence, including specific details.</p> <p>ERT suggested that an alternative funding option would be for monies to be made available for people with learning disabilities to receive training on how to use public transport.</p> <p>To provide clarity, NK would seek a formal statement from Cornwall Council regarding their in-house services policy and request that a senior officer attend a future meeting.</p> <p>Social Media and Day Services:</p> <p>'Since the new tender there is a strict rule that day services are not allowed Facebook or Instagram pages. One day service is trying to start a social enterprise which could be really successful but they are unable to market it. Is this fair?'</p> <p>BS replied that there were no restrictions whatsoever on the use of social media. The only clause that could have been misconstrued was one that stated that the contract was a confidential document that should not be publicised.</p> <p>RS undertook to find out where the misinformation had come from.</p>	<p>NK - Transport to be included as an agenda item for the next meeting.</p>
	<p><u>Direct Payments (DP) Review</u></p> <p>DH provided background to the work being carried out by Cornwall Council in relation to its approach to Direct Payments.</p> <p>As it had become apparent that the policy was not clear, a new policy had been drafted which was to be launched across all media for consultation that day. The new version was to be viewed not only as a policy document but also a guide to Direct Payments and it contained links to supporting information.</p> <p>The survey was targeted towards current and future DP recipients, carers, advocates and healthcare workers. Board members were urged to get the message out to ensure that the survey reached as many people as possible.</p> <p>A series of workshops had been set as follows:</p> <ul style="list-style-type: none"> • 1pm, Monday, 7 October 2019 at Echo Centre, Barras Place, Liskeard PL14 6AY • 1pm, Wednesday, 9 October 2019 at Trethorne Leisure Park, Kennards House, Launceston PL15 8QE • 1pm, Thursday, 10 October 2019 at Redruth Community Centre, 9a Chapel Street, Redruth TR15 1AW • 1pm, Tuesday, 15 October 2019 at Lescudjack Centre, Penmere Close, Penzance TR18 3PE • 1pm, Wednesday, 16 October 2019 at Merlin MS Centre, Bradbury House, Hewas Water, St Austell PL26 7JF • 1pm, Thursday, 17 October 2019 at The Dracaena Centre, Dracaena Avenue, Falmouth TR11 2ER 	

In addition, three drop-in sessions had been set as follows:

- 9.30-13.00, Wednesday, 2 October 2019 at Pool Innovation Centre, Trevenson Road, Pool, Redruth TR15 3PL
- 9.30-13.00, Wednesday, 9 October 2019 at Liskeard Town Council, Public Hall complex, 3-5 West Street, Liskeard PL14 6BW
- 9.30-13.00, Friday, 11 October 2019 at St Austell Conference Centre, St Austell Business Park PL25 4FD

DH had already met with the Citizens Advice Bureau and would continue to meet with other voluntary groups over the following eight weeks. DH asked that any voluntary groups that he had omitted to contact to please get in touch with him.

Having a choice

There was a common misconception that DP could only be used for specific set activities. DH clarified that was not the case, stating that DP could be used for anything that helped a service user to meet their service care needs, including transport. The Council wanted recipients to think creatively about how they used it and the survey provided the opportunity for people to help shape the policy.

A number of members asked whether or not DP could be used to fund a holiday for a carer. DH stated that it could be used for respite care for the recipient, therefore providing a break for the carer. Alternatively, it could be used to fund the support costs of carer ie. Their hourly wage whilst on holiday with the recipient. It could not be used for travel or accommodation costs for the carer.

AK gave an example of an individual that had received Independent Living Fund (ILF) and now couldn't use DP. DH said ILF was still available and could be used alongside DPs.

Initial care and support plans should be detailed. However, those details could be changed at a later date if the case coordinator agreed that those changes met the needs of the individual. LiS added that it highlighted the importance of advocates.

Members of the Board proposed a number of potential uses of DP, including therapy dogs, and suggested that a list of potential uses should be drawn up. DH felt that a guide to how to use the money was preferable to a definitive list of options that may not be the best fit for an individual. Council officers would make overall decisions.

SW gave examples of families that had been left seriously out of pocket following financial assessments and transitioning to alternative funding, especially Universal Credit. Young people aged 18-25 were most affected. LS added that many had become reliant upon food banks. DH replied that whilst the rules around financial contributions were set by central government, Cornwall Council could do more to make people aware of the extent of the financial management issues that they faced. The draft Direct Payments Policy included two self-help tools: one to determine if an individual

	<p>had eligible social care needs and another to determine what they would need to pay towards their eligible care needs. The intention was for the latter tool to be trialed to ensure that it was fit for purpose. It was also hoped that outside organisations could be trained in its use and become accredited to assist individuals and provide an independent voice. Both tools were available as a choice, it was not compulsory to use them.</p> <p>NC highlighted that Cornwall Council no longer employed a benefits advisor and NK referred to the benefits of face to face advocacy or speaking to a person on the telephone.</p> <p>The cost of computers or access to them was raised. DH said that the Council recognised that some people had limited access to computers or lacked in IT skills and that was a reason why it was hoped that organisations could become accredited to assist or to do so on their behalf.</p> <p>In response to a question from RS, DH said that it would be reasonable for DP to be used to pay for a computer, for internet access or for support if they helped to meet their eligible care needs. SL expressed the view that people should not have to use their own money purely to allow them to adhere to rules set by the Council. DH stated that if funds were to be used in such a way then those funds would be from DP and not from an individuals own pocket.</p>	
	<p><u>Feedback from Cornwall People First Forums</u></p> <p>Cornwall People First gave a presentation through which five questions/statements were put forward (three further questions included in the presentation had already been asked under the Day Opportunities item).</p> <p>Safe Places</p> <p>‘We are aware of places with safe places stickers that aren’t accessible to the public. The scheme needs updating to be effective.’</p> <p>NK stated that there was an item on the agenda for the CHAMPS to provide an update on Safe Places but due to the meeting overrunning it would be deferred.</p> <p>An example was given of Penzance Police Station exhibiting a sticker but being closed. EC said that the CHAMPS continued to visit places with stickers and that she would investigate what was happening at Penzance Police Station.</p> <p>Cornwall Safe Places was now part of the national network and was sponsored by Rowes Bakery.</p> <p>Apps to assist people in need were available, including the ‘Find my safe place’ app, and large print formats were an option. EC added that not all safe places were currently included on the ‘Find my</p>	

<p>space' app and encouraged people to email her with details of missing and/or new ones.</p> <p>Support Service Flexibility</p> <p>'The support people receive through providers needs to be flexible. We feel flexibility should be written into the contract to create person centred support.'</p> <p>NK said that this was part of the assessment for eligible needs and that BS had stated that it should be written in. LS replied that evidence was needed and highlighted that money was not accumulated if an individual didn't receive it for 6 months.</p> <p>NM said that organisations had now signed up to the Charter and that people needed to "waves it in peoples faces".</p> <p>Support Staff and Mobile Phone Use</p> <p>'Many PA's and support staff we see out in the community are on their phones a lot while with the people they support. One individual was quoted as saying, "<i>I want quality time with my support worker and it feels bad when they're on their phone all the time.</i>"'</p> <p>Attendees felt that the first step should be to feed such concerns back to the companies in question and, should appropriate action not be apparent, report the matter to the commissioners.</p> <p>Some attendees suggested that specific reference to mobile phone use needed to written into contracts. However, the consensus was that the issue was already covered under the general responsibilities in the contracts of support workers. NM suggested that all providers be contacted to remind them of their responsibilities.</p> <p>Out of Hours Crisis Lines</p> <p>'What's the responsibility of support providers to respond to emergencies? We've come across situations where people have needed support out of hours but have no one to call. Who can they call?'</p> <p>Through discussion it became apparent that not all providers provided emergency numbers and that of those that did, not all picked up messages in a timely manner.</p> <p>The Board agreed that all individuals should be provided with the Health and Social Care 24 hour hotline. That number was 0300 1234 131. LeS suggested that a list of numbers covering all circumstances should be provided to all.</p> <p>First Aid Courses</p> <p>'Does anyone know where facilitates free or reasonably priced basic first aid courses for adults with a LD?'</p>	<p>NK and NM to write to all providers, on behalf of the Board, to remind them of their responsibilities.</p>
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	<p>PV undertook to liaise with her contacts to find out what was currently available.</p> <p>PIP Applications</p> <p>‘We see a lot of people who have no support with their benefits letters, application process, interview or appeal. There is no clear place to go for help.’</p> <p>Due to the meeting running over, there was not enough time to discuss the matter in depth. However, NK said that the scope of the LDPB needed to be revisited, specifically in terms of where it could and could not make a difference.</p>	<p>PV to identify suitable first aid courses and relay to CPF.</p>
	<p><u>Round Up and Any Other Business</u></p> <p>NK said that transport would be the main item on the next agenda.</p> <p>Other matters for future consideration were:</p> <ul style="list-style-type: none"> • TCP (Transforming Care Programme); • STOMP (stopping the overmedication of people with a learning disability, autism or both); • Feedback from BS meeting with Cornwall People First; <p>NC suggested that the action log was not entirely accurate, with some matters marked as complete when they weren’t. He added that it was important that the Board exerted as much pressure as it could on the responsible organisations. RS said that, historically, the Board had a Co-Chair who would write to organisations on behalf of the Board and that currently it seemed that the same things were being discussed repeatedly with no outcomes. NK said that members were welcome to draft emails and to circulate them to the Board for agreement. DH suggested that there was a need for better understanding of the remit of the Board and it was agreed that the Board’s Terms of Reference would be considered at a future meeting.</p> <p>AW reported that the 8 month Autism Liaison Service Pilot had been launched at Derriford Hospital.</p>	

NEXT MEETING	10.30am - 12.30pm
DATE	10 th December 2019
LOCATION	Chacewater Village Hall, Church Hill, Chacewater, Truro TR4 8LT