

MEETING NOTES:	Carers Partnership Board
DATE:	12 May 2022
LOCATION:	Via Microsoft Teams

ATTENDANCE

Name	Position	Organisation
Sandra Ward (SW) (Chair)	Director	Parent Carers Cornwall
John Bastin (JB) (Co-Chair)	Cornwall Councillor and Chairman of Health and Adult Social Care Overview and Scrutiny Committee	Cornwall Council
Mike Hooper (MH)	Partnership Boards Officer	Healthwatch Cornwall
Tanya Falaschi (TF)	Partnership Boards Project Officer	Healthwatch Cornwall
Amanda Wilton (AW)	The Patient Council & Carer for an adult with profound and multiple Learning Disabilities	University Hospitals Plymouth NHS Trust
Ania Nicholls (AN)	Commissioning Officer, Adult Carers	Cornwall Council
Caroline Ellis (CE)	Admiral Nurse Clinical Lead	RCHT
Charlotte Harris (CH)	Regional Carers Leadership Support Manager	NHSE&I
Gwynned Williams (GW)	Research Fellow	Falmouth University
Holly Kiernan (HK)	Patient Experience Manager	RCHT
Jayne Price (JP)	Contract Lead for The Carers Service	CRCC
Joanna Dobson (JD)	Patient Engagement Manager	RCHT
Kirsty Dexter (KD)	Network Co-ordinator	Cornwall Memory Café Network
Lynda Berry (LB)	Carer of adult with LD	Helston Carers Forum
Melanie Howes (MeH)	Dementia Friends Champion and Ex-Carer	Dementia Friends
Natalie Swann (NS)	Research and Evidence Manager	Healthwatch Cornwall
Pauline Hardinges	Ex-Carer	Liskeard Memory Café
Sally Mollard (SM)	Ex Carer	Liskeard Memory Café
Sarah Jones (SJ)	Engagement Project Officer and Carer	Healthwatch Cornwall
Serena Collins (SC)	Commissioning Manager, Caring for Families	Young Adult Carers
Wendy Gauntlett (WG)	Carer	Penzance Carers Group, Penzance Carers Forum and Adult Safeguarding Board

APOLOGIES

Name	Position	Organisation
Bernie DeLord	Director	Promas Caring for People CIC
Claire Jukes	Patient Services Manager and Carers Lead	Plymouth NHS Trust
Claire Martin	Deputy Director of Nursing	KCCG
Sgt Flo Linscott	Diverse Communities Team Lead	Devon and Cornwall Police
Gordon Lancaster	Carer & Treasurer	Liskeard Memory Cafe
Jenny Tarvit	Director	Promas Caring for People CIC
Joanne Lovell	Carer	
Kelvin Yates		Age UK
Kim O'Keefe	Director of nursing and allied health professionals	Cornwall Partnership NHS Foundation Trust
Liz Pagett	Ex-Carer	
Neil Lindsay	Ex-Carer	Wadebridge Carers Forum and Trust Carers Committee
Sgt Flo Linscott	Diverse Communities Team Lead (Cornwall)	Devon & Cornwall Police

ACTION LOG

Meeting	ACTIONS CARRIED FORWARD	RESPONSIBLE	STATUS
12/05/22 10/02/22 11/11/21 19/08/21	JP to request Age UK representation at the next meeting.	JP	Ongoing. Age UK have not been represented at the Board since the formation of the Informal Carers Service.
12/05/22	Share details of Carer Support Workers for circulation to the Board.	JP	Incomplete.
12/05/22 10/02/22	Provide information on Morley Tamblyn staff numbers and vacancies to AW.	AS	Incomplete.
12/05/22	Circulate link to Day Centres Cabinet report once published.	MH	Incomplete. Report due to be published 7 June.
12/05/22	Forward details of further work of CRCC to the Partnership Boards team for circulation. Include work currently being undertaken with Cornwall link.	JP	Incomplete.
12/05/22	Identify and book hybrid venue for next meeting.	TF	Incomplete.
11/11/21	Meet with Carers Forum reps.	MH	Incomplete. A meeting with Forum reps, to discuss reporting lines to and from the CPB, will be held once clarification of their future structure is confirmed.
11/11/21	Circulate new carers and assessment figures, Trust Carers Group update, at earliest opportunity.	MH	Ongoing. Reports circulated as received until a CPFT Carers Lead is appointed and attends CPB meetings.

<p>11/11/21 19/08/21</p>	<p>Ensure that the Board receives updates on the Identifying Carers Needs Project.</p>	<p>AN</p>	<p>Ongoing. Project currently on hold.</p>
<p>07/11/19 01/08/19</p>	<p>Request proposals for suitable alternative venues for CPB meetings. Board members to email suggestions for alternative meeting places to: partnershipboards@healthwatchcornwall.co.uk</p>	<p>MH</p>	<p>Deferred due to Covid-19 restrictions.</p>

	Item	Action
1	Teams Guidance and Meeting Etiquette	
	SW reminded attendees of meeting etiquette and use of the chat function.	
2	Actions from Previous Meetings	
	<ul style="list-style-type: none"> • The Chair expressed concern that the Board had not had an Age UK representative attend a meeting since the formation of the Informal Carers Service a year ago, despite specific requests from the Board. She proposed that the Board could either request that JP, as lead for the contract, progress the matter or concerns could be raised direct with the Age UK Chief Executive. JP said that she had raised the matter with Age UK a number of times but wider representation from the Carers Service had attended every meeting. However, she would request that Kelvin Yates or another Age UK representative join the next meeting. The Chair emphasised how important it was that the Board received input from Age UK in order to gain a wider perspective of the work it undertakes. • JP was going to share details of Carer Support Workers with WG. WG had not received the email but JP would resend and Cc in MH to share with the Board <p>JP advised that the best way for carers to find out such information was to call the advice line.</p> <ul style="list-style-type: none"> • CH had spoken at the last meeting about how carers were identified through coding allocated to them through their GPs and ongoing work in relation to coding. It was agreed that with it being a very complicated issue, it would be useful for members to receive a template letter for carers who wanted to become involved. She had liaised with the Co-Chairs since then and would discuss with the Board under agenda item 8. • Cornwall Council Commissioner Ann Smith Morley had not provided AW with information on Morley Tamblyn staff numbers, vacancies and the return of pre-Covid hours. Ann Smith was leaving the authority soon but Ania advised that she 	<p>JP to request Age UK representation at the next meeting.</p> <p>JP to share with MH for circulation.</p> <p>Chase Ann Smith for information.</p>

was still best placed to provide the information.

- Jo Dobson, RCHT Patient Engagement Manager, provided the following update on progress with the RCHT/CFT Carer Passport:

The passport was written and the acute site was ready to go. They were waiting for community colleagues to ratify the policy but were hopeful that both Trusts would be in a position to launch the passport soon. They were keen to use Carers Week to lay the foundation for the imminent launch of the passport and would use the Carer Week strapline 'Making Caring Visible, Valued and Supported' by concentrating on the three main strands of Visible, Valued and Supported.

To make Carers visible they would be using carers' stories from feedback systems to inform staff. Those communications would be accompanied by asking staff to actively identify carers.

To make caring valued they would be setting up stalls throughout the hospital sites to identify carers, to engage with them face to face to tell them that they are valued expert partners in care and to introduce the concept of the Carer Passport.

To show that they support Carers they would outline the planned help for carers within the forthcoming passport such as help with parking and vouchers, and explaining how staff would be trained in carer signposting to other agencies and the Carer Emergency Card.

When the Policy had been ratified they would put the plans to launch the passport into action. That would encompass a comprehensive internal communication plan to ensure all staff were aware of the passport and how to support carers. They would also be using external communications and engagement events to reach as many carers as possible.

They wanted to create opportunities where stakeholders and carers would be able to ask questions about the passport and how it would work in practice. They would be identifying areas where they could engage with carers and would be asking for the Partnership Board's help and co-operation with that.

Creative methods would be used to bring to life the experience of carers, for example with an exhibition within the hospital creatively showing Carers lived experiences through photography, poetry etc.

Updates would be emailed to the Partnership Boards team for circulation. If anyone had any questions they could email Jo direct at joanna.dobson@nhs.net.

- Carers Forums – LB had recently spoken with TF about the issues facing the Forums. The Helston area was so large that it was impossible to get it restarted in the same format. For that reason they had recently started up the Constantine Carers Group, run by the surgery. Small meetings but with new members, hopefully, would be held at LB's home. Jo Lovell had already held two Carers Forums in Falmouth but in March there had only been two attendees and at this month's there was just one new carer. She was going to hold one further meeting in the hope of progressing but the lack of support and therefore capacity to promote made it very difficult. It appeared that carers groups would be the most sensible way forward.

WG agreed, adding that she had asked JP if the Forum could be incorporated into their Penzance carers group. LB said that Alison Strickland, Carer Support Worker, CRCC, was joining their next meeting.

Via the chat function, PH said that her Liskeard group advertised on Pirate FM and Radio Cornwall and in Parish magazines. They'd had 6 new clients the previous week, provided lots of information and answered questions from carers so it was like a Forum.

The Chair encouraged ideas for ways to promote Forums that wouldn't require funding, both online and offline as many carers did not have internet access.

JP agreed with LB and WG. Debbie Vivien, Carer Wellbeing Practitioner, CRCC, had been supporting Jo Lovell but the overwhelming feedback that had been received from carers was that Carers Forums were a bit outdated and weren't working well. The overwhelming preference for carers was to incorporate contract with Carer Support Workers or Carer Wellbeing Practitioners through their carers group. CRCC had

	<p>liaised with a number of carers groups around funding support and available grants. That should alleviate some of the advertising issues. The Carers service would support and promote via its website and social media.</p> <p>JP wanted to open conversations about the continuation of Forums and the resource to do so, should there be an appetite to do so.</p> <ul style="list-style-type: none"> • Nigel Cox had provided Parent Carers Cornwall with a statement to be shared regarding the new contract and eligibility. PCC would publish that in order for all young, sibling or adult carers to know. • Trust Carers Group – MH continued to circulate new carers and assessments figures but there was still no news on a replacement for Andy Fox as the Carers Lead. • Falmouth University unpaid carers research – Data was currently being analysed and the findings written up. Gwynedd Williams had handed over the project and a final update would be received at the next meeting. • Identifying Carers Needs Project – Ania would update later in the meeting. 	
3	Minutes of the Meeting on 10 February 2022	
	<p>The minutes of the previous meeting were confirmed as a true record.</p> <p>One matter arising was shared by the Chair:</p> <p>Memory Matters – From Stuart Cohen, CCG – ‘We have been able to get some funding to continue in some format. I have a meeting next week with a number of our VCSE services working with people living with dementia and I will be sending out a more formal update shortly. In short, we will be able to continue some sessions of cognitive stimulation therapy and doing so with the intention of working with a wider array of services/venues.’</p>	

4	Change to Order of Agenda	
	The Board agreed to a request from AN to consider agenda item 9, Update from Adult Social Care Commissioning, next.	
5	Update from Adult Social Care Commissioning	Cornwall Council
	<p>AN provided the following updates:</p> <p>Day Services</p> <p>The results of the Council consultation to get the views of people who used the 4-day services at Bude, Newquay, Launceston and Bodmin, and those who could use them in the future would be reported to the Cabinet in June.</p> <p>Cornwall Council Directors</p> <p>Alison Bulman would soon be taking up the role of Strategic Director for Care and Wellbeing.</p> <p>Jonathan Price had recently left his role as Service Director Adult Commissioning and Partnerships. Rachel Rothero would be an interim replacement, also covering Children and Young People commissioning.</p> <p>Adult Social Care Strategies</p> <p>The programme of work to reshape and remodel ASC services was underway. The Partnership Boards were represented on current task and finish groups with a view to participating in engagement events in the summer. Further details would be circulated in due course.</p> <p>The Informal Carers Service fell outside the scope of this work and would not be affected by any changes.</p> <p>AN added that both regulated and unregulated services would be considered, which would include day services.</p> <p>Changes to the Access Team</p> <p>The Chair asked for more information about changes to the</p>	MH to circulate a link to the Cabinet report.

	<p>Access team, which was being replaced with Independence and Wellbeing Service Teams. AN said that there would be three teams -Mid, West and East – which would act as “front doors” to services. There were new technological solutions for referrals to make them quicker, as well as a new online service.</p> <p>There was a project group looking at solutions for ensuring that information and guidance was readily available for those that needed it.</p> <p>The Chair praised ASC for its recent work to ensure the uplift in minimum wage.</p> <p>and also received a summary of proposed Adult Social Care funding reforms.</p> <p>Identifying Carers Needs Project</p> <p>This work had been deferred until technological advancements had been identified and implemented.</p>	
<p>6</p>	<p>Update from Healthwatch Cornwall</p>	<p>Natalie Swann</p>
	<p>NS presented an overview of the feedback received by HC between 1 January and 31 March 2022, as detailed in the report circulated with the agenda (click here). NS provided accompanying detail as follows.</p> <p>Feedback was gathered from a number of sources and face to face engagement was ever increasing as services and events returned post-pandemic.</p> <p>Every piece of feedback received was shared with the appropriate body and on a quarterly or four monthly basis, depending on the organisation, was fed back to more formal Patient Experience Groups. That ensured that responses were provided to each individual issue raised and that the information was fed to the relevant department.</p> <p>HC had been working closely with RCHT in relation to communication with carers and that should feed into the Carers Strategy and the forthcoming Patient Engagement Strategies.</p> <p>Feedback has been received by phone or online with the majority</p>	

<p>relating to adult social care, hospitals, a small amount about GP practices and some about ambulance services.</p> <p>All of the feedback received had been negative, though it should be recognised that more balanced feedback is usually gained through the forms of proactive engagement that had been limited at the in recent times.</p> <p>The purpose for bringing the report to the Board was to find out whether the information correlated with that received through other forums. Much of the feedback that HC received about Adult Social Care was in relation to difficulties accessing packages of care and delays to discharge. The massive staffing pressures facing domiciliary care and care homes were recognised but equally the work undertaken with NHSIE in which carers were interviewed about hospital discharge had identified that people were finding it difficult to keep in contact with loved ones in hospital and particularly challenges for people unable or less able to communicate for themselves. That feedback had resonated with other feedback that Trusts had gained and should lead to positive change moving forward. NHSIE would be producing a report in the coming months.</p> <p>The financial aspects of accessing care was an issue for some and it appeared that a lack of information and explanation to support carers around the process of accessing care and the financial elements was a key factor.</p> <p>NS emphasised that all feedback was being shared with the right people and in the right forums, which should provide reassurance on HC's statutory role in that regard.</p> <p>A survey for carers of people living with Dementia had been launched the previous week, working closely with Dr Alison Hibbert, GP and lead for Dementia in Cornwall, Stuart Cohen and in collaboration with The Memory Café, who had worked with members to co-produce the content of the survey. With Dementia being one of the five priority areas for the ICS, funding was in place and it was the right time for it to be receiving such feedback. In addition, much work had been undertaken pre-pandemic, which would also be fed in.</p> <p>Further details and links to the survey could be found on the Healthwatch Cornwall website by clicking here.</p>	
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	<p>The survey could be accessed by clicking here.</p> <p>Paper copies and freepost envelopes, plus survey completion by phone is available if required.</p> <p>Members were encouraged to share details with their contacts.</p> <p>AW asked why it had been decided that no incentives would be offered for carers to take part in interviews. She felt that it could have acted as a small thank you for getting involved. NS said that had been HC’s historical approach and there were financial considerations but it could be revisited for future engagements. It was noted, though, that the aim was to hold 10 interviews and 15 were completed.</p>	
<p>7</p>	<p>Update on the Informal Carers Support Service</p>	<p>Jayne Price, CRCC</p>
	<p>JP presented the information contained within the report circulated with the agenda (click here).</p> <p>WG asked what happened if someone called disAbility Cornwall on a Sunday. JP sad that the outgoing message included an out of hours number, there was a messaging facility and signposting to the website – where there was another messaging service. A response would be received on the Monday.</p> <p>WG asked how active support groups were currently. JP said that some had reimagined how they were working, some had linked up with other groups – particularly in mid-Cornwall, and some were struggling to restart. Some new groups had arisen, with assistance being requested for ie young carers peer networks and support. There had been a couple of new applications for supporting parent carers of adults. JP offered to link WG up with a couple of support workers to help to rejuvenate the Penzance group. Also, some of the planned Carers Week activities were in the West so that could provide another opportunity to link up.</p> <p>AW asked how many carers the Informal Carers Service knew of and supported. JP said that the current total number of carers known to the service was 3,345. AW followed up by asking for clarification as to whether or not the 6,788 people accessing social media posts were users of the service. Said that those people may not have gone through the front door or accessed support but there were around 65,000 carers in Cornwall</p>	

<p>identified through the Census and it was important to reach out to as many people as possible.</p> <p>AW asked how many people were currently awaiting Carers Needs Assessments. JP replied that she wasn't sure of the local authority figure but in terms of their own workflow the figure had gone down to under 2000. AW asked how long it would take to work through all of them. JP said that the conversation was around the goal and aim and purpose of the service, with a clear drive to reduce the need for statutory assessments. The model of the provision was to work with people to understand their needs, provide access to guidance to support and resources that would reduce the need for statutory assessment. They were working closely with Cornwall Council to look at how to bring in additional resource to address the existing backlog and how we support those individual carers to gain meaningful outcome.</p> <p>AW asked if the Carer Support Worker from Cornwall was in Derriford yet. JP said that they had undertaken a recruitment round and had appointed to the Mid & West role but not the North & East role. They had a practitioner that was able to cover the Derriford role until a permanent appointment could be made. She would commence work in June and following induction would have a physical presence at Derriford for one day a week and would pick up referrals on an interim basis.</p> <p>AW highlighted that the majority of their activities were in West Cornwall. JP said that the activities were National Lottery funded and therefore had its own contractual requirements. The annual meal had been held outside of West Cornwall in the past but one of its aims was to raise funding and therefore it was important to share with them any knowledge of appetite for it to be held in other areas.</p> <p>Due to the meeting overrunning, the Chair asked that JP forward details of any further work to the Partnership Boards team for circulation. That would include work currently being undertaken with Cornwall link.</p> <p>MH reminded and encouraged members to submit questions in advance of meetings in order for timely answers to be provided and to aid the running of the meeting.</p> <p>The Chair suggested that contractual obligation 9, as detailed in the report – 'Provide clear information on the differences in</p>	<p>JP to send info for circulation to the Board.</p>
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provision between children's and adults services' – was a matter that Parent Carers Cornwall could be engaged on.

Promas Caring for People CIC had been unable to attend but had submitted the following written update:

'We are delivering several face to face courses across the county. Numbers at times are low as some carers are worried about the number of covid cases.

We have started our activities project . We have a free tai Chi class running in Penzance for carers each Tuesday from 11-12 and there are a few spaces still available. If people want to come just apply to us at info@promas.co.uk and we can arrange.

We have monthly social events for carers to attend and meet other carers . In April, 10 carers went to Trebah and on May 26th we have a free trip and entry to St Michaels Mount. Again, contact us for details and we can let people know about all of the social activities which are spread all over Cornwall.

We have a free photography course for carers in Penzance this year, start date to be confirmed, and next year in Bodmin.

We were planning to run a free swimming activity for carers each fortnight in Bodmin but so far take up is very low so we are looking at alternative activities with the partners of the carers service.

We have funding for male carers activities/sessions so we are looking for any ideas from male carers (female carers are also invited if they want to attend).

We are continuing to run telephone sessions as required and have two online courses available as well as telephone coaching and mentoring.

Coming up this month on 17th we have a Coping Strategies course at Lanivet community centre, Creative Writing on 19th in Penzance at the Lescudjack centre and on 24th we have a Caring for Carers course in Liskeard at the public rooms.

For Carers Week we have a singing course at Truro Library and Nordic Walking at Trelissick Gardens.

We have also had some leaflets printed so if anyone wants any,

	<p>please contact us and we can arrange to send some to you.'</p>	
<p>8</p>	<p>NHSE&I Commitment to Carers Programme</p>	<p>Charlotte Harris – NHSE&I South West</p>
	<p>CH gave a presentation on the NHSE/I Commitment to Carers Programme (attached as an Appendix). CH provided the following accompanying detail.</p> <p>Ipsos, a market research company, had created a slide pack for each Integrated Care System providing ICS level comparison of carer and non-carer experience.</p> <p>By following this link to the Commitment to Carers - FutureNHS Collaboration Platform, members could request to join the platform and gain access to lots of resources relating to the Programme and the five key workstreams. There was also a South West space on there which would be updated over the coming weeks.</p> <p>The SNOMED codes used in General Practice had been discussed with the Board previously. The national team was about to publish guidance with the aim of improving consistency in coding carers within Primary Care. This emphasised the importance of people informing their GP that they are a carer, who could then code them as such. That such open up opportunities such as more flexible appointments, being screened for mental health issues and anxiety, being invited for regular health checks and more.</p> <p>The Digital Resource for Carers brought together specially designed products and online resources to help organisations bring together comprehensive and up to date resources for carers. CH was keen to increase uptake and would be grateful for the opportunity to work with Cornwall to promote this free resource.</p> <p>Members were encouraged to join South West Carers Collaboration Network events and the Commitment to Carers Bi-Monthly Lunch & Learn webinar.</p> <p>There were two pages in the new guidance and documentation</p>	

	<p>for virtual wards that stated an intention for carers to be involved in their design from an early stage. CH was in the process of working out who she needed to link with at a regional level. She invited suggestions of ways in which Cornwall could be supported.</p> <p>SC asked if she could liaise with CH about young carers work as there was no joint working currently but it was part of the Young Carers and Young Carers Strategy. CH undertook to get in touch.</p> <p>PH asked if the work linked into the NHS Patient Leader Programme (PLP). CH asked that PH email her with more information. JD added that CFT and UHP had quite an active PLP. RCHT would be launching its at the end of October and would be linking in. Cohorts of patient experts were recruited who could help on focus groups and strategies to ensure that the patient voice is heard prior to decision making. It was expected that a carer expert would be recruited. CH asked that introductions be made as appropriate.</p>	
<p>9</p>	<p>Parent Carers Cornwall Update</p>	<p>Sandra Ward</p>
	<p>SW presented an update on the work of Parent Carers Cornwall for the period January to March 2022.</p> <p>101 meetings took place with Education, Health and Social Care. The meetings were held both locally and nationally to gain parental feedback.</p> <p>They were co-leader on work for the Keyworker pilot, a three-year programme to help young people avoid admission avoidance into hospital where a mental health, eating disorder, self-harm or similar were of concern. Parent Carers Cornwall chaired the keyworker board, attending and presenting at national meetings regarding that programme of work and would evaluate the service offered to families.</p> <p>They were involved in the work for the Neurodevelopment Pathway, meeting regularly with leads to ensure the pathway was fit for purpose for families.</p> <p>Parent Carers Cornwall had also been appointed as a co-leader for the Autism in school programme. They were moving forward with an initial nine schools chosen to pilot that area of work. The programme would roll out to more schools through evidence of</p>	

	<p>need.</p> <p>They had delivered wellness sessions for parent/carers of children with SEND to ensure parents looked after their own wellbeing and emotional health. They would continue through 2022 and they were working with a local school to roll out wellness sessions for their parent/carers.</p> <p>They held a workshop on Sensory integration with Joanna Grace and heard about the Neurodiverse brain from Tigger Pritchard. Evaluation of parents feedback was good. They would be holding further sessions with both facilitators in the coming months.</p> <p>Families had received information and activity days had been delivered. They were aimed at hidden families or those new into county. Feedback from evaluations were that they were valued and were informative to families.</p> <p>The Parent Carers newsletter continued to be welcomed by both families and those professionals working on the frontline with families. E-bulletins were also sent out monthly.</p> <p>They would be continuing to work in partnership with the Time to Move programme, who delivered activities to children in receipt of free school meals. Parent Carers Cornwall ensured that all relevant information was collected for children through contact with families and then passed to service providers. That allowed services to make sure everything was put in place for the child to attend fully inclusive activities.</p> <p>Up and coming work:</p> <p>They would be holding a Preparing for Adulthood event in May.</p> <p>A myth busting and Q&A for parent/carers of Autistic children/young people in June.</p> <p>Sensory Story Sessions workshop in July with Joanna Grace.</p> <p>They would continue to deliver training workshops to parent/carers on a range of areas as requested by families.</p>	
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10	Any other business	All
	<p>Changing Places – MH had circulated details of the where the six new Changing Places toilets would be installed following a successful bid for Government funding (Falmouth, Redruth, Seaton, St Ives, Truro and Wadebridge).</p> <p>The Advocacy People – Penny Newman had offered to join the next meeting of the Board to discuss possible training opportunities and how they could assist with widening membership to different types of carers. The offer was vague at the moment but the Co-Chairs and the Partnership Board team would look into it.</p> <p>Partnership Boards Team – TF had joined the team earlier in the year and one of her key roles was the promotion of the Boards and identifying new members. They would be attending a number of events in the coming months, including the Dementia Action Week Conference, Royal Cornwall Show and Blue Light Day.</p> <p>A ‘Community Promoter’ role was being developed with a view to having Board members with lived experience help to highlight the excellent work of its individuals.</p> <p>Cornwall Partners in Care – MH encouraged members to sign up for email updates . Click here to do so.</p> <p>Cornwall Memory Café Network – KD informed of a new updated newsletter. Information for inclusion was welcomed and could be emailed to Kirsty at kirsty@disabilitycornwall.org.uk.</p> <p>Carers Week Events – Members were asked if they were undertaking any activities and how they would be promoted.</p> <p>JP said that the Carers Service had ben successful in securing some funding so would be running three events across the county – Mid, West and East/North. Details would be on their website and would be shared on social media. The advisor team would have all the necessary information on how to sign up for events. SW asked for further details as she had called the previous week but no information had been available at that point and also why there was a joint East/North event as that would cover a vast area. JP replied that funding had only been secured the previous week. They now needed to quickly engage to find out what carers</p>	

	<p>wanted. There was the potential for more than one event in each of the three locations.</p> <p>AW said that Caring for Carers were putting on 12 events so there could be value in liaising with them with regard to their funding streams.</p> <p>They would share details of any events led by other organisations on social media.</p> <p>MH encouraged everyone to add details of Carers Week events to the official Carers Week website at Home Carers Week, where they were displayed on a map enabling people to clearly see everything that was on in their area.</p> <p>Day Services – LB reported that providers for day services at Boscowen and Kehellend were still doing a wonderful job but it seemed that Holifield at Gweek had not reopened. However, the Chair said that she had seen details of activities online. (Following the meeting, LB emailed to say that Holifield was now operating four days a week – Monday, Tuesday, Thursday and Friday. It had a new manager and staff and currently had staff vacancies).</p> <p>Penzance Carers Group – WG reported that it was hoped that funds raised through coffee mornings pre-Covid could be used to take carers to the Queen’s Hotel for afternoon tea in celebration of Carers Week. Potential speakers were being looked into.</p>	
<p>11</p>	<p>2022 Meetings</p>	
	<p>Future meetings were currently scheduled for 2pm on 11 August, and 27 October.</p> <p>Some members asked that the next meeting be held in person but some said that joining online was preferable. TF undertook to identify venues in which hybrid meetings could be held. The Chair suggested the Venton Conference Centre in Summercourt.</p>	<p>Identify and book hybrid meeting venue.</p>

APPENDIX

NHS
England



NHSE/I Commitment to Carers Programme

Cornwall Carers Partnership Board Meeting – 12 May 2022

Charlotte Harris, Carers Leadership Support Manager - South West Region



@CHarris_QI
@NHSThinkCarer

NHS England and NHS Improvement



Caring as a social determinant of health

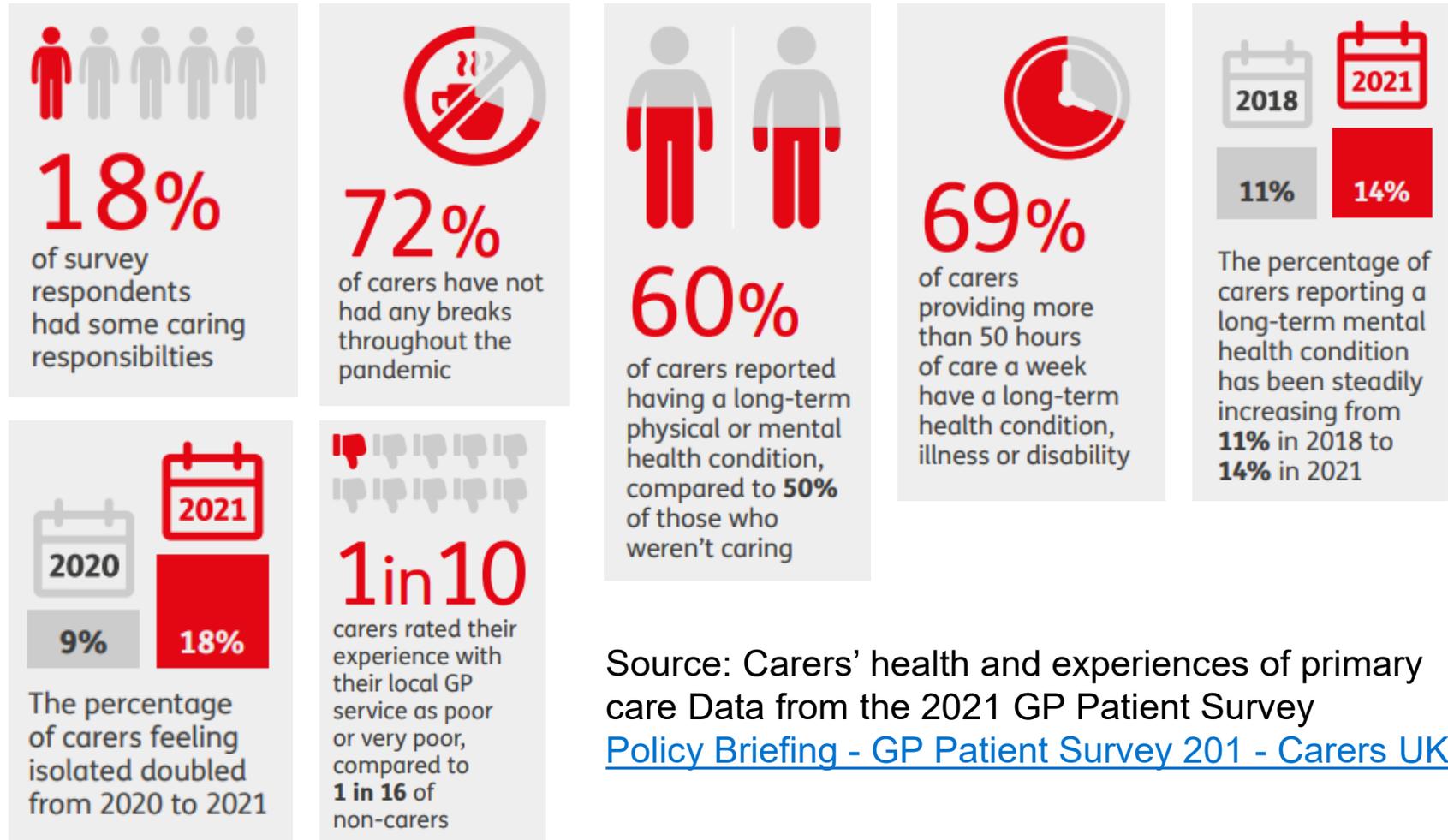
Conclusions

...unpaid caring should be considered a social determinant of health. Carers experience poor physical and mental health, struggle to access services and are at risk of financial hardship.

<https://www.gov.uk/government/publications/caring-as-a-social-determinant-of-health-review-of-evidence>



What can the GP Patient Survey tell us about the health of carers?



Source: Carers' health and experiences of primary care Data from the 2021 GP Patient Survey
[Policy Briefing - GP Patient Survey 201 - Carers UK](#)

Strategic aims for carers

- To secure better outcomes of care for patients, and for the millions of people who care, unpaid.
- To build a carer-friendly NHS to a greater extent than ever before.
- To start to build an NHS where no carer feels left alone and that the NHS is there to support them in their caring journey.
- To change things so that carers are able to look after their own health and wellbeing and manage the care of the person being cared for.

[NHS England » Commitment to carers](#)

5.0 What NHS England will do: Priorities

Based on the emerging themes NHS England has developed 37 commitments around the following eight priorities, which are within NHS England's gift to deliver and move forward:

1. Raising the profile of carers;
2. Education, training and information;
3. Service development;
4. Person-centred, well-coordinated care;
5. Primary care;
6. Commissioning support;
7. Partnership links; and
8. NHS England as an employer.

Carers



The NHS Long Term Plan



[The NHS Long Term Plan](#) makes clear:

1.19 Carers will benefit from greater recognition and support. We will improve how we identify unpaid carers, and strengthen support for them to address their individual health needs. We will do this through **introducing best-practice Quality Markers for primary care** that highlight best practice in carer identification and support.

2.23 We will continue to identify and support carers, **particularly those from vulnerable communities**. Quality marks for carer-friendly GP practices, developed with the Care Quality Commission (CQC), will help carers identify GP services that can accommodate their needs. We will **encourage the national adoption of carer's passports**, which identify someone as a carer and enable staff to involve them in a patient's care, **and set out guidelines for their use based on trials in Manchester and Bristol**. These will be complemented by developments to electronic health records that allow people to share their caring status with healthcare professionals wherever they present.

2.34 We will ensure that more carers understand the out-of-hours options that are available to them and have appropriate back-up support in place for when they need it. **Up to 100,000 carers will benefit from 'contingency planning' conversations and have their plans included in Summary Care Records**, so that professionals know when and how to call those plans into action when they are needed.

2.35 The NHS will roll out **'top tips' for general practice which have been developed by Young Carers**, which include access to preventive health and social prescribing, and timely referral to local support services. **Up to 20,000 Young Carers will benefit from this more proactive approach by 23/24.**

Long Term Plan Commitment to Carers deliverables 2020 - 2025

Quality Markers in primary care

Improved identification and support for carers from frequently excluded groups

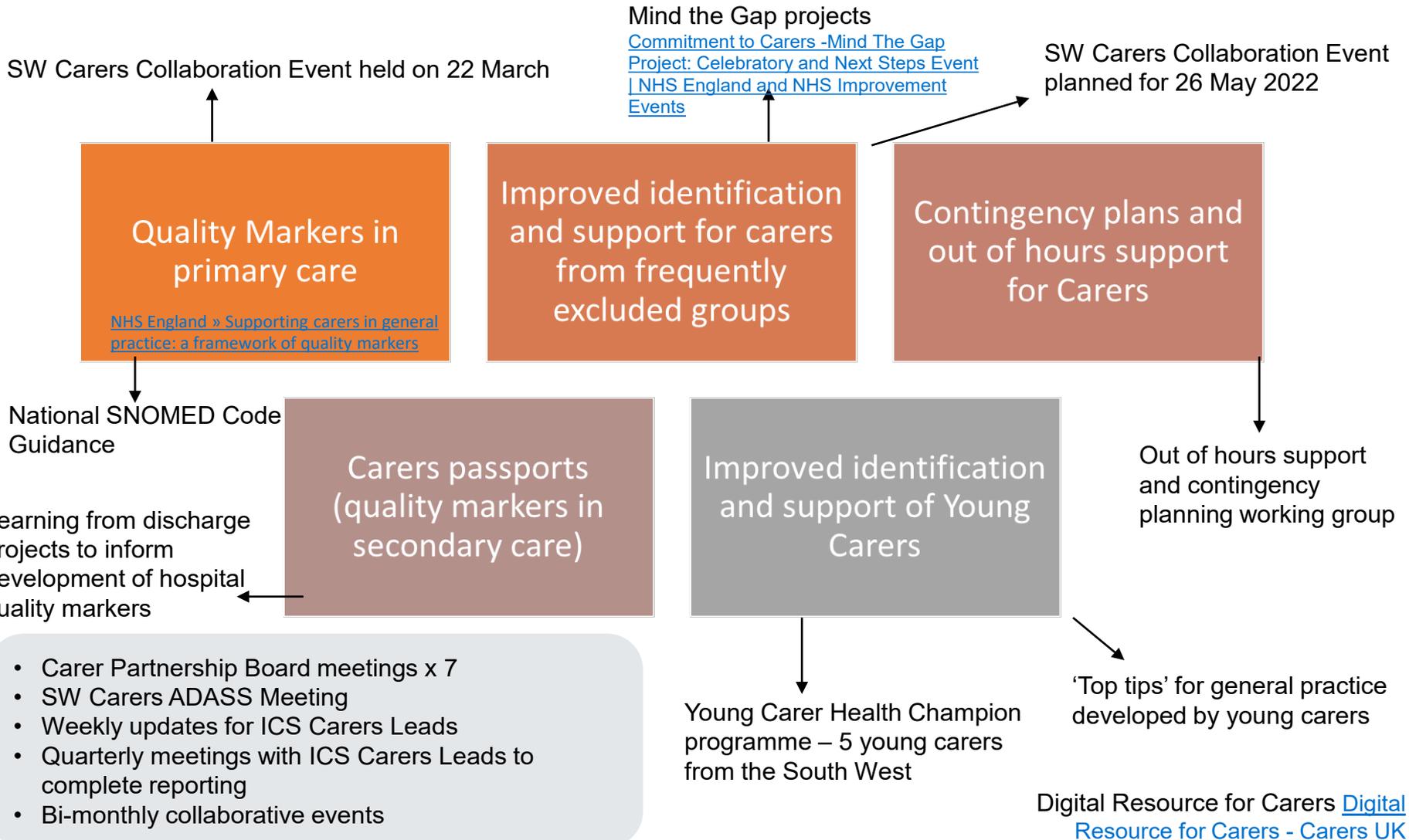
Contingency plans and out of hours support for Carers

Carers passports (quality markers in secondary care)

Improved identification and support of Young Carers

[Commitment to Carers - FutureNHS Collaboration Platform](#)

Long Term Plan Commitment to Carers deliverables 2020 - 2025



South West Carers Collaboration Network

- Bi-monthly events run in partnership with the Integrated Personalised Team
- Open to anyone with an interest, role or remit in supporting carers – currently has good representation from NHS, social care, Healthwatch and voluntary sector
- Dates planned for the rest of the year
- Each event has a theme
- Next event planned for 26 May, 10.00-12.00 focusing on identifying and supporting carers from frequently excluded groups
- **To join the network, please email myself c.harris12@nhs.net or england.swqualityhub@nhs.net**

Agenda

Item	Presenter
1. Welcome and introduction	Charlotte Harris Carers Leadership Support Manager, NHS England and NHS Improvement – South West
2. National Commitment to Carers Programme Update	Jen Kenward Experience of Care Lead - Community, Primary & Integrated Care, NHS England and NHS Improvement
3. Supporting Carers in General Practice	Lisa Walker Carer Services Manager, Gloucestershire Carers Hub
GP Accreditation Scheme	Dr Hein le Roux Deputy Clinical Chair Gloucestershire CCG / GP, Churchdown Surgery
	Judy Walker Chief Executive, Carer Support Wiltshire
Break (5 minutes)	
4. Breakout sessions	All
5. Feedback from breakout sessions	Paul Spencer Senior Programme Manager Personalised Care, NHS England and NHS Improvement – South West
6. HOPE for Carers Programme	Mily Yogananth Senior Manager Personalised Care, NHS England and NHS Improvement – South West
7. Summary and close	Michelle Hopkins Deputy Clinical Quality Director, NHS England and NHS Improvement – South West

Nationally funded projects

Mind the Gap

- Dorset – PramaLife working with the Veterans Hub

Hospital Discharge Projects

- Dorset County Hospital – Carers Voice
- Dorset Healthcare - Working with Carers during hospital discharge
- Great Western Hospital - Extending night care for end of life patients at home - supporting carers
- Royal United Hospitals Bath - Support for Carers

Healthwatch Experience of Discharge

- Healthwatch Cornwall

Covid Legacy

- BNSSG - Chinese Community Wellbeing Society (formerly known as Bristol & Avon Chinese Women's Group) - Enhanced Support for East and Southeast Asian (ESEA) Carers
- Cornwall and IoS - Cornwall Rural Community Charity - Cornwall Carers Service Pandemic Learning Project
- BSW - Carers Support Wiltshire - Evaluation of the impact of virtual ways of working in primary care during the pandemic on adult and younger people carers
- BSW - The Care Forum - Carers and Unpaid Carers experience of Mental Health during the pandemic

National Commitment to Carers

Reporting

- Quarterly highlight report
- Twice-yearly carers programme maturity matrix

Governance

- Quarterly Commitment to Carers Oversight Group

Other

- ICS Carers Leads Catch Up Call
- Bi-monthly webinars [Commitment to Carers Bi-Monthly Lunch & Learn webinar | NHS England and NHS Improvement Events](#)



COURSE DATES 2022

HOPE PROGRAMME	DATE
Hope Programme for Carers	17.05.2022
Hope Programme for Parents of autistic children	07.06.2022
Hope Programme for Carers	26.07.2022
Hope Programme for Parents of autistic children	13.09.2022
Hope Programme for Carers	01.11.2022

GRIEF, LOSS AND CHANGE	DATE
Grief, loss and change	07.06.2022
Grief, loss and change	06.09.2022

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[WWW.H4C.ORG.UK/COURSES/
#SOUTHWEST](http://WWW.H4C.ORG.UK/COURSES/#SOUTHWEST)



Guidance and Documentation

Ensuring people's care needs are met at home, including in a circumstance when an unpaid carer is not able to, is key in improving patient outcomes, preventing avoidable hospital admissions and delivering NHS and government strategic priorities, as a number of legal and policy documents outlined:

- The Care Act 2014 makes clear the duty on Local Authorities to:
 - provide light touch early intervention services including advice and information;
 - assess risk;
 - provide a care and support plan to mitigate those risks;
 - provide a support plan for both a person with care and support needs and their carer.
- Young Carers should be identified and included in either the parent carers support plan or the person with care needs support plan.
- NICE Guidance makes clear the need to ensure that [replacement care](#) is discussed as part of [carers' assessments](#), including planning for any emergency replacement care that might be needed.
[Recommendations](#) | [Supporting adult carers](#) | [Guidance](#) | [NICE](#)
- [The NHS Long Term Plan](#) (LTP) makes a clear commitment to carer contingency planning as follows:
 - *Carers should not have to deal with emergencies on their own. We will ensure that more carers understand the out-of-hours options that are available to them and have appropriate back-up support in place for when they need it.*

Up to 100,000 carers will benefit from 'contingency planning' conversations and have their plans included in Summary Care Records, so that professionals know when and how to call those plans into action when they are needed.
- The Urgent Community Response National Response Standard for Integrated Care Systems specifies that nine conditions need to be covered to meet Long term Plan objectives around Urgent Community Response and recovery Support. One of the nine is: "*unpaid carer breakdown*". [B1406-community-health-services-two-hour-urgent-community-response-standard.pdf \(england.nhs.uk\)](#)
- The Department of Health and Social Care White Paper [People at the Heart of Care](#) states:
We will [therefore] look to increase the voluntary use of unpaid carer markers in NHS electronic health records by simplifying current approaches to data collection and registration. We will also introduce a new marker indicating the presence of a contingency plan, where one is available, that describes the actions to take if the carer is no longer able to provide care.

Guidance and Documentation (continued)

Supporting information for ICS leads: Enablers for success: virtual wards including hospital at home

Virtual wards and carers

Third sector groups, carers and carer groups should be involved from an early stage in design of virtual wards, the technology and what support and care will be offered. Carers are a real asset and often know the patient the best, so their involvement is vital. ICSs need to engage with carers and carers groups to help shape virtual wards to ensure they fully consider the needs of carers, as well as the person with care and support needs.

To support carers and mitigate any potential risk associated with virtual wards that unpaid carers will be asked to pick up more caring responsibilities, virtual wards must be designed in such a way that enables professionals to:

- identify unpaid carers
- signpost carers to carers' assessments and further support, such as advocacy and respite care
- involve carers as equal and expert partners in care
- be aware of carer rights under the Care Act, and young carers' rights under the Children and Families Act. These pieces of legislation work together so that carers of all ages, and the people they support, can get the assessment and support they need
- have informed discussions with carers about the choices available for care including having the right to choose the level of care they can provide, including the right not to provide care if they are unable or unwilling to do so.

Thank you – any questions? 😊

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