

MEETING NOTES:	Carers Partnership Board
DATE:	30th July 2020
LOCATION:	Via Zoom

ATTENDANCE

Name	Position	Organisation
Sandra Ward (SW) (Chair)		Parent Carers Cornwall
Mike Hooper (MH)	Partnership Boards Officer	Healthwatch Cornwall
Nuala Kiely (MH)	Partnership Boards Officer	Healthwatch Cornwall
Amanda Wilton (AW)	The Patient Council & Carer	University Hospitals Plymouth NHS Trust
Ania Nicholls (AN)	Commissioning Officer, Adult Carers	Cornwall Council
Barbara Ellenbroek (BE)	Councillor, member of Health and Adult Social Care Scrutiny Committee and Carer	Cornwall Council
Bernie DeLord (BD)	Director	Promas Caring for People CIC
Claire Jukes (CJ)	Patient Services Manager	Plymouth NHS Trust
Derek Hoddinott (DH)	Consultant	Cornwall Council
Donna Darby (DD)	Head of Client & Partnership Networks	Cornwall Care
Jenny Tarvit (JT)	Director	Promas Caring for People CIC
Jo Lovell (JL)	Carer	Parent Carers Cornwall
Kevin Downing (KD)	Lead Practitioner for Young Carers & Lead on Carers Contract	Action for Children
Kirsty Luxton (KL)		Kernow Carers Service
Liz Trewell (LT)	Head of Risk, Safety and Patient Experience	Royal Cornwall Hospitals NHS Trust
Lynda Berry (LB)	Carer	Helston Carers Forum
Melanie Howes (MeH)		Helston Carers Forum and Dementia Friends
Pauline Hardinges (PH)	Ex-Carer	Memory Café Liskeard
Serena Collins (SC)	Commissioning Manager for Young Carers and Young Adult Carers	Cornwall Council
Stuart Cohen (StC)	Commissioning Manager	NHS Kernow
Wendy Gauntlett (WG)	Carer	Penzance Carers Forum

APOLOGIES

Name	Organisation
Bernadette George	Director of Integrative Governance, Royal Cornwall Hospitals NHS Trust
Caroline Ellis	Admiral Nurse, Royal Cornwall Hospitals NHS Trust
Chris Wolstencroft	Fire & Rescue
Gill Lovell	Carer
Gordon Lancaster	Carer
Jayne Price	CRCC
Jenna Grassick	Action For Children

John Groom	Director for Integrated Care Cornwall Council/NHS Kernow
Liz Pagett	Carer
Neil Lindsay	Carer
Rob Rotchell	Portfolio Holder, Cornwall Council
Sharon Tisdale	Royal Cornwall Hospitals NHS Trust
Simon Mould	Interim Service Director Communities Cornwall Council
Teresa Parsons	Alzheimers Society
Wendy Kearsley	CRCC

ACTION LOG

<u>Meeting</u>	<u>ACTIONS CARRIED FORWARD</u>	<u>RESPONSIBLE</u>	<u>STATUS</u>
30/02/20	AN to liaise with StC to determine if the Transforming Care Family Charter should be incorporated into the Strategy.	AN/StC	Ongoing.
30/02/20	MH to seek response from DH re question on adults with learning disabilities who had personal budgets for day services that shut in March.	MH/DH	Ongoing.
06/02/20	Update on Triangle of Care for circulation to the Board.	AC/MH	Complete. Included in minutes.
06/02/20	Find out why minutes of Dementia Partnership meetings aren't published online.	MH	Ongoing. Response from RJ included in minutes.
06/02/20	Liaise with Sarah Stevens, Pluss, regarding Action for Children services.	KD	Complete. KD confirmed he would liaise via email on 12/02/20.
06/02/20	Update for circulation to the Board re a new group at RCHT to address concerns for carers of those with autism/LDs.	AC/MH	Complete. Included in minutes.
06/02/20	EHCPs on next meeting agenda. Invite SENDIASS.	MH	Ongoing. May meeting cancelled.
06/02/20	Embrace Care - Agenda item for May meeting.	DH/MH	Ongoing. May meeting cancelled.
06/02/20	Embrace newsletter for circulation to Board.	DH/MH	Complete. Circulated with minutes.
06/02/20	Recirculate Carers Engagement Report to Board.	MH	Complete. Circulated with minutes.
06/02/20	Contact DWP re attendance and agenda item - Accessing Benefits (PIP).	MH	Ongoing. May meeting cancelled.
07/11/19	Circulate Kernow Young Carers film to Board.	MH	Complete.
07/11/19	HE to provide NK with a breakdown of the number of carers in Cornwall by location. NK to circulate to Board.	HE/MH	Complete. Link to map circulated with minutes.
07/11/19	Find out if the Cornwall Dementia Partnership minutes were available online.	MH	Complete. Minutes are not published online. However, minutes are now forwarded to CPB distribution list.
07/11/19	Circulate details of the Skills for Care survey to all on the distribution lists for the CPB, the Learning Disability Partnership Board and the Autism Partnership Board.	NK	Complete. Circulated by NK.
07/11/19	Request proposals for suitable alternative venues for CPB meetings.	MH	Ongoing. Email sent to all on distribution list requesting meeting venues. Only 2 responses were received.

01/08/19	Board members to send NK suggestions for alternative meeting places		Ongoing. Last discussed at 6 February 2020 meeting.
01/08/19	Circulate carers service map showing their reach to all Board members	JP/KL	Complete. KL to chase (07/11/19). See above.
01/08/19	GiL to give an update at the next Board meeting about a new group at RCHT to address concerns for carers of those with autism/LDs	GiL	Complete. See 6 February 2020 minutes.
02/05/19	Jayne Price to share information about veterans' services in Cornwall with NK to circulate.	JP	Complete. See 6 February 2020 minutes.
05/02/19	Liaise with Healthwatch Cornwall to see if forum questions can be presented before the next meeting and answers brought.	KY	Ongoing. Dependant on raising of questions. Improved communication with Forums included in 2020 review of Partnership Boards. Healthwatch Cornwall & CRCC met on 15/07/20 to discuss how to improve the process of Forums sharing information with the Partnership Board and vice versa. An update from CRCC was awaited.

Item	What was discussed?	Action
1	<p>Meeting Etiquette</p> <p>Concerns had been raised following previous meetings with regard to the conduct of some Board members, including verbally aggressive behaviour directed towards both professionals and other carers, as well as a negative approach to the discussion of agenda items which had led to matters not being considered fully.</p> <p>MH referred to meeting etiquette guidelines that had been circulated with the agenda and displayed a presentation detailing meeting rules.</p> <p>MH confirmed that, as discussed previously, all four Partnership Boards were changing, with revised membership and Terms of Reference. The aim of implementation by May 2020 had been on target but had been delayed due to the COVID-19 pandemic. New timescales would be confirmed at the earliest opportunity.</p> <p>The Chair opened round table introductions.</p>	
2	<p>Minutes of the Meeting Held on 2nd February 2020</p> <p>The minutes of the meeting held on 2nd February 2020 were confirmed as a true record.</p>	
3	<p>Actions from Previous Meetings</p> <p>The status of actions from previous meetings, as detailed in the updated table within the minutes, were noted.</p>	
4	<p>Matters Arising</p> <p>No matters were raised.</p>	
5	<p>Kernow Young Carers Update</p> <p>Kevin Downing, Action for Children, provided an update on Kernow Young Carers (circulated in advance of the meeting and filed with these minutes).</p> <p>In addition to the information detailed in the report, KD stated the following:</p> <ul style="list-style-type: none"> • KYC had responded to Covid-19 by undertaking initial “visits” via telephone, rather than going into family homes, from a couple of weeks before lockdown. • Teams was utilised after lockdown began for schools groups and young adult carers groups. 	

	<ul style="list-style-type: none"> • Easter activities - families were offered “short breaks” - board games, arts and crafts, as well as tools such as laptops to enable education to continue. 190 short breaks were provided. • Every young carer on the database had been contacted to check in with them and to offer support, if required. • Access to Action for Children’s emergency fund - families could apply for things needed to help them through the period such as food vouchers, food parcels if they were isolating. Additional funding to replace broken cookers was provided for a couple of families. Basically, responding to the needs that arose in the lockdown period. <p>The Chair commended the work undertaken.</p> <p>CJ had been liaising with the Plymouth team regarding young carers support. KD agreed to connect with CJ outside of the meeting.</p>	
6	<p>Kernow Carers Service Update</p> <p>Kirsty Luxton gave a short presentation (circulated in advance of the meeting and filed with these minutes) on the work of Kernow Carers Service throughout the Covid-19 pandemic.</p> <p>MH added that Healthwatch Cornwall’s Partnership Boards Officers had recently met with Kernow Carers to discuss how to improve the process of Forums sharing information with the Partnership Board and vice versa.</p> <p>NK drew attention to the online learning services offered by Promas.</p> <p>JT said that Promas had a contract with Cornwall Council to deliver training to unpaid carers in the county. Due to the current pandemic, free online training was now being offered, which included a bundle of seven courses, and dementia courses would soon be launched, hopefully in the next four to six weeks.</p> <p>There had been a massive response to the Carers Helpline, which would run until December. This was largely due to the continued service being offered, whereby some carers had received up to six follow up calls to see how they were progressing.</p> <p>Four different Zoom courses would be running in September and support was being offered to help people to get online and join in.</p>	

BD added that part of the National Lottery contract included the requirement for three different projects, which was a longitudinal study where there would be six to nine month follow ups for people that had completed courses. As the pandemic hit, most people on the database were contacted for wellbeing checks, which proved to be very successful.

There was also a project around carer pathways whereby people on the database were contacted to see where they were in their caring role, what they were struggling with and to help to develop contingencies and create an action plan.

Research into male carers had begun. Progress had slowed down but there had been a good response rate which could potentially help to identify what male carers wanted that was different to what was currently being offered.

The Chair asked what Kernow Carers or Promas thought were the main issues that carers had struggled with throughout lockdown. BD and JT listed the following issues from feedback from carers:

- Isolation and loneliness.
- Closure of day centres and community activities, meaning that people were caring for longer, doing much more and being unable to take a break.
- Some stated that they did not know how much longer they could continue. One carer stated that he had contemplated taking the lives of his wife and himself.
- Lockdown meant that they could no longer rely on extended family.
- Care agencies had become understaffed when some staff had become ill.
- Lack of knowledge of systems - where to go for help.

PH relayed information about a carer that she had been supporting being suicidal and detailed the key issues facing people that care for people with Alzheimer's. NK encouraged PH to detail it all in an email with a view to gaining responses and to identifying themes for discussion at future meetings.

SC asked how the two types of telephone support offered by CRCC and Promas worked together in terms of sharing information and making the most of opportunities. BD said that the two organisations liaised with one another at the very start to ensure that there was no crossover on what was being offered. Practices for sharing information and signposting, including to each other, were already in place.

	<p>BE said that it would be very helpful for the Council, and in particular the Health and Adult Social Care Overview and Scrutiny Committee, to receive a report from CRCC and Promas detailing lessons learnt throughout the process. In addition, it would be beneficial to know how effective the shielding lists were perceived to have been. Both KL and BD confirmed that they had not received any information on people that had been advised to shield. BE expressed her concern at that, adding that Cornwall Councillors had not been permitted access to lists of people that had received such advice, and she suggested that the lists that some Community Link Officers had were incomplete (based on the low number of residents of Redruth and Camborne included). Vulnerable people needed to be supported and to do that it was vital to share information.</p> <p>NK drew attention to the recent Healthwatch Cornwall survey on peoples experiences during lockdown. Once the data received had been analysed the results would be fed back to the Partnership Boards. BE said that it was vital to learn from such information in anticipation of potential spikes in the coming months.</p>	
7	<p>Trust Carers Group Update</p> <p>Andy Fox had submitted apologies for the meeting. The summary charts for March-May, which had been circulated in advance of the meeting, were noted. NK invited any questions or comments on them to be forwarded to partnershipboards@healthwatchcornwall.co.uk.</p>	
8	<p>Shaping the Future Carers Service in Cornwall</p> <p>Ania Nicholls, Commissioning Officer, Cornwall Council, gave a presentation on Cornwall Cares for Carers - Draft Adult Carers Strategy 2020/2029 the Carers Engagement Report (both the presentation and the draft Strategy were circulated in advance of the meeting and are filed with these minutes).</p> <p>Particular attention was drawn to the key themes identified from the feedback received, how they advised the proposed new model and how that new model would operate.</p> <p>The Chair invited questions and comments to be put to AN via the chat function.</p> <p>The following issues were discussed:</p> <ul style="list-style-type: none"> • AN undertook to take back a good point made by the Chair that the draft Strategy did not include mention of 	

	<p>people whose role as a carer of a child would continue as that child transitioned into adulthood.</p> <ul style="list-style-type: none"> • CFT assessments would be embedded into the mental health service. It was anticipated that there would be more targeted support for carers that support people with mental health needs, which would be considered within the Mental Health Services Review, which was following the same timescale as the Carers review. • JT asked how levels of need were assessed on initial meeting. Promas had found that it took time for carers to share and acknowledge that help was needed as they often normalised their situation and would say that everything is ok. Over time it became obvious when it was not but unearthing that took time and skill. AN said that the service specification would ensure that the provider had team members with the appropriate skills, including emotional intelligence, to speak to carers and identify needs. That was easier under one contract. AN clarified the differences between mental health and wellbeing services. • Support for form filling was already in place for the social inclusion and empowering independence contracts. It was difficult to define the support available as it was adapted to the needs of the individual. • Advocacy was not mentioned in the draft Strategy as it fell under a different contract but it could be referenced. • Extra support for carers with disabilities could be essential. • There would be a level of rapid response for carers who were identified as in crisis or risk of breakdown. • It was important to remember that mental health was everyone's business. Most people and services supported others mental health to a degree. People often talked about mental health services when meaning specialist services. However, the right skills in the right place could be invaluable to helping people get the right support quickly. • AN undertook to liaise with StC to determine if the Transforming Care Family Charter, which NHS Kernow and Cornwall Council jointly worked on, should be incorporated into the Strategy in order for the Charter to reach as many as possible. • There was an option for all carers to have a support plan with a Carers Assessment but not all would want that. • KD said that all young carers known by KYC (2500+) had been contacted with a link or a paper survey to complete. SC, Commissioner, had joined online groups with young carers to get their input. SC added that all 	<p>AN &StC to consider incorporating the TCFC into the Strategy.</p>
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young carers and young adult carers had received a bespoke survey which closed on 7 August.

- BE asked, with a view to identifying carers, what links there were with GPs, consultants, specialist nurses etc. AN said that it was a really important matter. In an ideal world there would be a joint database shared by the NHS and the Council. The Council would want the future provider to undertake work around improving engagement in this area. KL commented that engagement with GP surgeries regarding identifying carers varied greatly from surgery to surgery at present. There was currently a pilot at Tresliske whereby two KCS Coordinators were linked in with the hospital and working closely with the Discharge team to identify carers.
- BD asked if there would be a provision for carers in crisis. AN replied that the Mental Health Helpline was available. CC also had an out of hours Crisis Helpline that, although not specific to carers, carers could call if they required someone to look after their cared for. The in hours Carers Helpline was also available. BD said that Promas had received calls from several carers that had experienced crises around the person that they were caring for since the start of the COVID-19 pandemic who had reported that they had not received responses for 4-5 days following calls to the ASC Out of Hours Crisis Line. Immediate responses were required as the wait only increased their stress levels. Would the Carers Helpline be 24 hours per day? AN said that it was unlikely that would be affordable but it was a priority that there was a service for people in a crisis. Carers in complex situations were currently supported by Adult Social Care. KL added that carers in crisis would be advised by KCS to contact the Access Team or, if appropriate, KCS would contact on their behalf. AN confirmed that would continue to be the case.
- JL commented that a problem was that a lot of children saw specialists out of county, leading to a lack of support as they were not on the radar.
- StC asked if there was anything to be learnt from the Young Carers Support to transfer to Adult Carers - specifically in how to manage to reach more the 50% of the expected Young Carers? AN replied herself and SC were working together to ensure that service specifications aligned. They wanted the new service to reach new and hidden carers so it was important, with a finite budget, to make money go further.

The Chair suggested that any further comments or questions be forwarded to AN at ania.nicholls@cornwall.gov.uk.

	<p>AN thanked the Board for its input, encouraged everyone to take the survey at www.cornwall.gov.uk/adultcarers and to share details of it with their networks.</p>	
9	<p>Adult Social Care: Charging Policy</p> <p>Derek Hoddinott, Consultant, Cornwall Council, gave a presentation on the current consultation on the Draft Adult Social Care Charging Policy (circulated in advance of the meeting and filed with these minutes).</p> <p>DH said that the presentation was the one that was used for online consultation events and that comments received from the Board would be fed into process.</p> <p>In addition to information detailed within the presentation, particular attention was drawn to the following:</p> <ul style="list-style-type: none"> • The use of more accessible language, specifically to get across a point that was often misunderstood by both people that receive Adult Social Care and those working within the system. All Adult Social Care was charged for - every adult in Cornwall in receipt of Adult Social Care would pay 100% of their costs. However, they could apply for help with the cost of the care. • The document contained web links to ensure that up to date supporting information was easily available. For example, to the Minimum Income Guarantee figure, which changed annually, and to Housing Benefit applications. <p>The following issues were discussed:</p> <ul style="list-style-type: none"> • NK asked what support in terms of signposting to supporting information would be available for people that didn't have internet access. DH said that people had the right to have assessments undertaken by a Charging Officer and that it was recognised that there would always be some people that would be unable, even with help, to apply online. He added that he was aware that some would require support with applications for financial assistance. Whilst it was new to Cornwall, the Council would be gleaning advice and learning from the experiences of other local authorities in terms of types of support and how they could be arranged to make them as accessible to as many people as possible. • NK asked if the staff that undertake Financial Assessments would receive training to help them to understand the needs of a person with learning disabilities or other complex needs, as well as those of 	

	<p>older people. The skill sets to do so were very different. DH replied that Charging Officers already received training to ensure that they were able to undertake Financial Assessments with anyone. Going forward, when the online application is open the support already referenced would be available. NK said that wasn't apparent from the case studies in the presentation as they all referenced older people. DH said that would be addressed in the next few days as new case studies were due to go online.</p> <ul style="list-style-type: none"> • BD asked if not all carers would have access to a Carers Assessment. DH confirmed that Carers Assessments would continue as they were currently. AN commented that Carer's Assessments would be on offer but the approach was changing as per the new Unpaid Carers Support Model. • SC asked if health colleagues were aware of the changes, including GPs? StC replied that details had been included in the GP Bulletin. DH said that a session had been run for health partners and sessions were being arranged for colleagues such as the Continuing Healthcare team. All feedback received would be analysed as part of the consultation process. Information was also being included in widely distributed emails from Jonathan Price, Joint Director Adult Care and Health, Cornwall Council and NHS Kernow. • NK relayed a comment received via private chat: 'Charging officers need more training on the needs of people with learning disabilities. A lot of people that I have spoken to have said that the Charging Officers do not understand the needs of young people with learning disabilities and also challenge Health Needs Plans that are in place, for example, supporting sensory diets.' • BE relayed concerns that she had stated in Council meetings, including at the Health and Adult Social Care Scrutiny Committee, that colleagues and MPs had received contact from carers worrying that because they were so busy caring for the people that they were responsible for, with virtually no help because of COVID-19 and therefore virtually no respite, that they were unable to partake in the consultation. An additional concern was that there were a great many people that did not use the internet or social media as they were in digital poverty. It was worrying to consider that the consultation may be missing the most vulnerable. It was difficult to understand why the process couldn't be extended to allow face to face consultation, which was a concern also expressed by other Scrutiny members. • SW reported that Parent Carers Cornwall had also considered the Policy and had found that some parent 	
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	<p>carers had not received any information and had been unaware of the consultation. She also echoed the concerns raised by BE, saying that many carers had been overwhelmed by the pandemic and that it was very difficult for an individual to read and understand the document, much less interpret how it would affect their own family, when coping with such high levels of stress and tiredness.</p> <ul style="list-style-type: none"> • AW supported the views expressed by BE and SW, adding that she would have hoped that the Council would have shown more compassion for carers and waited until the pandemic was over before undertaking the consultation, which would also have allowed for face to face consultation and input from those most vulnerable of people in internet poverty. • DH acknowledged the issue of internet poverty and stated that a lot of consultation had been conducted over the telephone. He added that the number of responses so far had already far exceeded the number received for the Direct Payments consultation. Ultimately, the Council would need to conclude whether or not the level of engagement undertaken was sufficient for it to make an informed decision. • BD stated that although the response rate may be higher than that of other consultations, it was still only a few hundred people out of over 60,000. Feedback needed to be representative and to achieve that carers needed to have choices about how they engaged. • CJ echoed BD, highlighting the large number of registered carers in Cornwall compared to the level of engagement received back so far. She added that it was essential that the process had to be right in order for it to be considered good engagement and that the numbers so far were not sufficient. She asked if DH had considered promoting the consultation via the local news. DH replied that the consultation was not considered to be particularly newsworthy but the Council’s media team had taken different channels to raise awareness, including the Residents Newsletter. He reiterated the need for the Council to decide if the level of consultation was sufficient or if there was a need to extend the consultation period. • NK asked when a decision on whether or not to extend consultation would be decided. DH said that discussions were underway but no decision had been taken yet. • AN said that, for local authority engagement, the numbers engaged so far were pretty good. She emphasised the need for everyone to help to spread word within their networks. In addition, one of the Council’s priorities was to help people to get online and engage digitally, which was crucial in the 21st Century. 	
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	<ul style="list-style-type: none"> • BE gave assurance that the Health and Adult Social Care Scrutiny Committee would seriously consider the consultation process. If any Board members had particular concerns that they wished to raise with her she would be happy to receive them and would share them with the Strategic Director. <p>The Chair suggested that any further comments or questions be forwarded to DH at derek.hoddinott@cornwall.gov.uk.</p>	
10	<p>Any Other Business</p> <p>Parent Carers Cornwall</p> <p>The report circulated in advance of the meeting was noted.</p> <p>Dementia Friends</p> <p>Melanie Howes encouraged anyone interested in joining a Dementia Friends webinar, as detailed in the report circulated in advance of the meeting, to email partnershipboards@healthwatchcornwall.co.uk.</p> <p>StC said that he had shared the information with the Dementia Partnership.</p> <p>Question from Lynda Berry</p> <p>MH would seek a response from DH, who had left the meeting, regarding the question circulated in advance of the meeting regarding adults with learning disabilities who had personal budgets for day services that shut in March.</p> <p>NK said that she was collating similar stories from other carers with a view to identifying themes. She would contact LB.</p> <p>Question from Wendy Gauntlett</p> <p>WB sought guidance on bereavement counselling for a friend that lived on The Lizard. NK undertook to liaise with WB outside of the meeting.</p>	MH to seek DH response.
11	<p>Next Meeting</p> <p>2pm, 13 November 2020 via Zoom.</p>	
<p><i>The meeting started at 14:00 and closed at 16:13.</i></p>		