

	Hybrid Meeting – In person and via Microsoft Teams	
DISCUSSION	Restarting the Older Persons Partnership Board	
NOTES:	& &	
	Cornwall Council Engagement on the development of care and support	
	services that meet the needs of older people	
DATE:	11 August 2022	
LOCATION:	ON: Venton Conference centre, Summercourt, Newquay.	

ATTENDANCE

Name	Position	Organisation
Tanya Falaschi (TF)	Partnership Boards Project Officer	Healthwatch Cornwall
Mike Hooper (MH)	Partnership Boards Officer	Healthwatch Cornwall
Alan Callcut (AC)	Representing older persons	
Allison Hibbert (AH)	GP Lead Launceston Community Hospital	Cornwall Foundation Trust
Anthony Ball (AB)	Advanced Public Health Practitioner	Cornwall Council
Clare Greenwood (CG)		Hearing loss Cornwall
Gordon Lancaster (GL)	Representing older persons & carer	Liskeard Memory Café
Kirsty Dexter (KD)	Network Coordinator	Cornwall Memory Café Network
Martha Reed (MR)	Strategic Commissioning Manager	Cornwall Council
Pamela Belverstone (PB)	Locations Manager	
Pauline Hardinges (PG)	Representing older persons	Liskeard Memory Café
Sally Mollard (SM)	Representing older persons	Liskeard Memory Café
Sandra Ward (SW)	Carer of Older Persons	
Sunnie Jarvis (SJ)	Community Partnership Manager	Anchor Hanover Group
Teresa Parsons (TP)	Service Manager	Alzheimer's Society
Wendy Gauntlett (WG)	Representing older persons	

APOLOGIES

Name	Position	Organisation
Alison Bulman	Strategic Director, Care and Wellbeing	Cornwall Council
Amanda Wilton	The Patient Council and carer	University Hospitals Plymouth NHS Trust
Cynthia Herbert	Representing older persons	
Deborah Came	Director	Healthwatch Cornwall
Sgt Flo Linscott	Diverse Communities Team Lead	Devon and Cornwall Police
John Evers	Director	Healthwatch Cornwall
Sarah Scoltock	Business Manager for Cornwall & the Isles of Scilly Safeguarding Adults Board	Cornwall Council
Shannon Smith		iSightCornwall
Stuart Cohen	Commissioning Manager	NHS Kernow Clinical Commissioning Group
Tracey Roose	Chief Executive	Age UK Cornwall & Isles of Scilly

	Agenda Item		
1.	I. Restarting the Older Persons Partnership Board		
	Healthwatch Cornwall shared the existing Terms of Reference with the group and explained that the OPPB had been put on hold because the Board could not form a consensus on the key issues that mattered to older people.		
	Both Healthwatch Cornwall and Cornwall Council were keen to see the Board restarted but to do that it was important to get the membership right from the beginning.		
	Everyone present and online were invited to come forward with any suggestions or issues they would like to raise.		
	GL – Would there be a Cornwall Council representative on the Board?		
	Following the recent staffing restructure, the Partnership Boards team had been working closely with Karen Hooper, Interim Head of Commissioning for Learning Disability, Autism, Mental Health and Participation and Martha Reed, Strategic		

Commissioning Manager and had been impressed with their commitment and engagement with the Boards. There would be a lead Cornwall Council representative on the Board.

Ali Bulman was the new Strategic Director for Care and Wellbeing. AB explained that she was the first permanent postholder in many years, which should enable greater stability.

SJ – In her role for Anchor Housing as a Community Partnership Coordinator she wanted to make sure that older people's voices were heard across Cornwall. She said she could gather feedback from the people that used their service and would like to then feed that back into the OPPB. The main issues her tenants had were around:

- Digital exclusion a big issue as everything was now online;
- Ambulance waiting times for falls Lots of people who had fallen were waiting for long periods for an ambulance to arrive;
- Energy price increases.

PB – Managed two schemes in the Bude area. Her main concerns were:

- Feeling isolated there was no contact from the wider areas for carers of older people;
- People need more support.

It was mentioned that it might be worth referring into the Dementia Partnership Board, as they may be able to advise/support.

GL shared the following concerns:

- Loneliness:
- The lack of and the cost of transport (it was hard to get around Cornwall if you didn't drive);
- Lack of knowledge on the benefits system;
- Reliance on charities to support;
- Peoples awareness of the services available to them;
- More involvement for the memory cafes would be beneficial;
- Help with IT training and how to access the internet. It would be great to work
 with local libraries and make use of their spaces for training. As they currently
 support younger people into work and creating their CV's;
- There was an assumption that people saw things publicised online but things did get missed;

- Carers Forums were no longer funded but would be beneficial if appropriate support for their running and publicity was available.
- Age UK should be involved. It was disappointing that they were not represented at today's meeting.

Other issues and ideas raised from the attendees were:

- People falling and having someone trained to help;
- Energy costs;
- The relationship with Derriford hospital. The Partnership Boards team explained that they had good connections with the hospital and representatives on the Carers Partnership Board;
- Patient access to and the sharing of information between Devon and Cornwall
 hospitals and GP's due to the use of different IT systems. That led to appropriate
 support and/or medication not being received and unnecessary appointments;
- Many people in Cornwall were isolated due to their location, which made shopping difficult;
- More tailored services were required;
- People deserved honesty about the health and social care services that they
 could expect to receive. A lack of openness could lead issues not being
 adequately managed and lead to greater problems for individuals.
- Could we have a GP representative on the OPPB?

MR said that many of the issues raised linked in with her work on the development of care and support services that meet the needs of older people, which she would engage on later in the meeting.

MR talked about the voluntary sector forum and how the Council would be funding the development of community hubs, which would act as access points to services. An attendee asked if libraries could be used? MR said they were always keen to look at venues that were already offering services. Another attendee asked if monies were ringfenced for the voluntary sector? MR confirmed that was the case.

Attendees said that they hoped that community hubs would help with better communication, as it was felt that currently, services were not actively sharing information enough. It would also be positive if the hubs could feed out to GP surgeries.

If people attended the hubs, would they require to pay for parking? People were advised to ask the organisers of the hubs in the first instance.

MR shared on screen the <u>Care and Support in Cornwall</u> online directory for people to access if they were comfortable with IT. It contained links to information about care and support I Cornwall for people of all ages and their carers.

An attendee suggested that public funds be spent on developing NHS services rather than building homes. AB said that local authorities had to adhere to national policy statements.

CG from Hearing loss Cornwall said that chat facilities on websites were not always accessible and that individuals sought help from HLC. Such assistance required funding. Accessing IT was an issue as well.

SM suggested that there needed to be greater Council overview of planning developments. All large projects contained Section 106 obligations stating the requirement for community infrastructure to offset the harm caused by the development but they were rarely provided as agreed. Green space was essential to wellbeing and overdevelopment was a big problem.

With regard to technology, SM pointed out that many older people didn't have smart phones and there was danger of important messages or even bills being missed, which could lead to fines. Shopping was also more difficult than it used to be as self-service checkouts were not user friendly for everyone.

WG was worried about people who couldn't access the internet, banks closing and long waits for hospital appointments. She said she had a real passion for carers and older people and would really like to see the Board connect with the 50+ Forum.

SW cared for both her parents and in-laws and could go online for them but recognised that most people weren't as fortunate. Information for older people needed to be targeted towards the places that they or their support network regularly frequented, such as pharmacies and churches.

The Partnership Boards team would liaise with Cornwall Council Commissioners with a view to drafting updated Terms of Reference, including the identification of appropriate representation.

A follow-up meeting would be arranged in due course.

2. Cornwall Council Engagement on the development of care and support services that meet the needs of older people

Cornwall Council had recently two Adult Social Care strategies as part of the Delivering Better Care programme – Maximising Independence, which was for older people, people with a physical disability and sensory loss, and Better Lives, for people with learning disabilities, autism and/or mental health needs.

MR, Strategic Commissioning Manager, Cornwall Council, gave a presentation on the creation of a new community based support model, attached as an Appendix.

Attendees were invited to ask questions and suggest key issues that needed to be addressed when shaping future services:

- Do the stated budgets cover personal care? MR said that some funds were spent on such needs, mainly for Support Workers;
- Befriending services;
- How to identify and reach isolated people living on their own that don't currently access any services;
- Post-diagnostic support and signposting;
- Wages weren't high enough to attract or retain staff. Could some of the budget be used to increase wages?;
- There was an ageing population in Cornwall and the lack of sufficient funding would necessarily lead to overspends in some areas;
- Could there be a few dedicated buildings/sites where Cornwall Council could house older people, with a few key workers to support them (like extra care units). Would that be financially viable?;
- Is the funding finite or could more government funding be received as the number of people in need of support increases?;
- Clarity of functions of the NHS and local authority and how they interlink to ensure continuity of service and support;
- Front line/first time contact with Cornwall Council needed to improve. Being directed to the relevant service was often more difficult than it should be;
- Services weren't engaging with Memory Cafes;
- Geographical and demographical gaps needed to be identified;
- Make information more accessible. Hard copy should not be refused and should be easily accessed;
- Newsletters from GP surgeries;
- Organisations such as The Women's Institute should be approached with a view to reaching specific audiences.

	MR thanked all in attendance for their valuable contributions and assured everyone		
	that further engagement would follow.		
3.	Any Other Business		
	WG made everyone aware of a 25-week online course on falls and prevention, if anyone was interested they should email		
	<u>partnershipboards@healthwatchcornwall.co.uk</u> , who would put them in contact with WG.		
	SJ welcomed future involvement in the OPPB. She added that Anchor Hanover hosted coffee mornings in communal lounges at their schemes.		
	GL suggested that hybrid meetings did not work and said that he would prefer to revert to face to face.		
	It was asked if future meetings could be held centrally, with members saying the location of today's meeting was good.		





Our project - community based support Creation of a new community based support model Daily Living and Independence Care and Support and Wellbeing at Home Help to do things Support in your Care and support in for yourself your home community £11,000,000 £7,000,000 £60,000,000 Direct Payment - £26,000,000

Our findings - what people have told us I would like easy to I would like control access information over my life about support I would like to be as I would like help to independent as possible community I would like to I would like my access support to focus on what I can do meaningful activities in the I want my support staff to feel valued for myself and have time to support me

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Our next steps — we need your help!

The contracts that we have for community based support services will end next year.

We need to put new agreements in place with organisations.

We need your help to decide what the services need to look like.

No support about me without me!

Help to do things for yourself

I live the life I want and do the things that are important to me as independently as possible

Is this true for you?

What would help you to be more independent?

Prompts:

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- Better information on care and support?
- Access to technology and equipment to help you with tasks?
- Short term support to learn how to do things for yourself?



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Support in your community

I have opportunities to learn, volunteer and work and can do things that match my interests, skills and abilities.

Is this true for you?

What would help you to achieve your potential?

Prompts:

- Find a job or voluntary work and go to work?
- Take part in learning and training opportunities?
- Find local social or interest groups and join in?
- Help to plan what you need to do in your day-today life – paying bills, doing the shopping, cooking meals, cleaning the house?





Care and support in your home

I am supported as a unique person with strengths, abilities and aspirations.

Is this true for you?

What would make support at home better for you?

Prompts:

- What could we do to support you differently?
- What could we do to support your family and friends differently?
- What could we ask care and support staff to do differently?





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