

Notes from meeting of Carers Partnership 5th July, 2018 held at Liskeard Wesley Methodist Church

In attendance:

Kevin Downing - Action for Children
Andy Fox - Cornwall Partnership Foundation Trust
Pauline Hardinges - Carer
Melanie Howes - Carer
Claire Jukes - Patient Services Manager, Derriford Hospital
Nuala Kiely - Healthwatch Cornwall
Gordon Lancaster - Carer
Michael May - Carer
Celia Newcombe - Healthwatch Cornwall - secretary
Liz Pagett - Carer
Jayne Price - CRCC
Sandra Ward - Carer - Chair (SW)
Esther Way - Alzheimer's Society
Kelvin Yates - CRCC
Sally Mollard - Carer
Gill Lovell - Carer
Lynda Berry - Carer

Apologies

Angela Andrews - CPYFS Cornwall Council
Karen Barnard - Carer
Stuart Cohen - Senior manager, Adult Transformation and Commissioning CC
Wendy Kersley
Vivien Maxey
Nicola McMinn Patient Experience Team Derriford
Liz Nicholls - Senior manager Strategic Commissioning CC
Kim O'Keefe - Deputy Director of Nursing RCH
Stacy Sleeman - Strategic Housing and Commissioning Manager CC
Janette Smith - Advanced Public Health Practitioner
Mark James - Community Network manager CC
Wendy Gauntlett - Carer
Wendy Care - CRCC

The meeting was convened to discuss the Department of Health and Social Care's 2018 - 2020 Carers Action Plan and in particular chapter 4 Recognising and supporting carers in the wider community and society.

1. Introductions
2. Apologies as noted above.

SW opened the meeting saying that she was disappointed having read the Carers Action Plan she was personally planning to write to both Sarah Newton, minister of State for Disabled People, Health and Work and Caroline Dinenege, Minister of State for Care with regard to its content. She noted that there was a lot of discussion about research but nothing tangible resulted.

KY said he was particularly disappointed, the issues discussed in the document had been raised by Carers UK and the Carer's Trust previously and there was still no mention of any money to underpin the Action Plan and support the work that was currently in place. £5000 had been allocated for Cornwall which was effectively tokenism and would most likely be used for a joint activity which CRCC could be involved in. He had been asked to comment on this by Baroness Judith Jolly.

The particular special needs of Carers in the many rural areas of Cornwall were discussed. It was normally impossible for employers to be sufficiently flexible to cater for the hours that a carer could be available, due to distances from work places, travel facilities and their many commitments. Given these problems the Action Plan was not fit for purpose in Cornwall.

MH said when she had first read the Plan she had been encouraged but on reflection she was aware of the lack of commitment which this plan and the money available would be unable to address. Carers currently felt disempowered and without a voice.

There was a particular concern over support for carers of patients with dementia in Cornwall. EW and CJ spoke about the developing/developed changes by Alzheimer's Society (improving pathways where there are no primary care dementia practitioners) and the training of dementia champions, patient passports, special support for carers at Derriford hospital respectively. This included free parking for carers and vouchers, given out by staff. AF spoke of the work CPFT were involved in, including increasing the number of committee meeting that carers were invited to, carers assessments and looking at the role of the carer in addition to that of the nearest relative in assessments. Parking is currently free for all who visit.

Regarding support for young carers KD said detail about them and support for them were both being developed. Carers amongst children in most schools in Cornwall had now been identified and support groups for young adult carers (18-25) were being developed.

KY raised the subject of the wide range of services that the voluntary sector was now expected to cover with little support. JP said this was extremely detrimental and services such as support for carers with filling in forms were not available. She pointed out that the report gives no detail regarding who was consulted or how the information for the Action Plan was gathered. GL said the words "responsibility", "accountability" and "coordination" were all missing in the Plan.

GL asked why he had not seen any minutes from the previous partnership meeting. He was also concerned that he hadn't received the minutes from March. NK stated that he should have received them from CRCC.

Section 4.5 of the Plan mentions a Carer Passport project which would enable access services and facilities in recognition of their roles and the needs of the person they cared for. Some time was spent discussing suitable uses of this scheme which the Department of Health and Social Care is evaluating.

ACTION NK will pass the board's suggestions to Stuart Cohen.

A Carers 'Passport'

NK talked about there being many different carer passports, including:

1. General Carers
2. Employers
3. Education
4. Hospital

The small groups were asked to consider a general Carers Passport and what it might contain.

General

- A term that is overused and old fashioned
- Who is the person that the passport relates to? The cared for, the main carer and others who do participate in care including voluntary organisations?
- How would you register? Who would fit the defined role as a carer?
- Could it be a "one card" for carers? Holders of 'passport' might be automatically fast forwarded to schemes such as blue badge after information has been collected on registering for the passport.
- Whose ID goes on the card?
- Could the card be registered to the main carer but have some nominees who could use it whilst caring for the "cared for".
- Helpful for emergency services - they would know there is someone you care for.
- Would the cared for need to be present when used? The need for GPs to have more information about what is available for carers.

What information should be included?

There would be a need for concessions to be identified and regularly updated. This would include a list of 'amenities/services' where the passport could be used. Who would be responsible for this?

- A specific national logo to identify services/facilities
- Travel discounts- particularly good for young people who are unable to drive themselves.
- Link for information about suitable accessible toilets (for carers to avoid timely queues and for the cared for person with special needs)

- Utility companies which can help carers find the correct tariff and any specific discounts - many will assist with necessary extra costs (SW mentioned that this is not true for people who are self-employed)

NK thanked those who had been present at the Next Steps meeting on 26th June which discussed the future for partnership boards and more effective ways of working with commissioners to achieve successful outcomes for members of the Cornwall Community, enabling the voice of the community to be heard and improved contracts.

She will be concentrating on building a working group which will look at all aspects of the current partnership boards and launching partnership boards and ways of working in a new format in spring 2019.

Various concerns from carers were raised, including:

1. Where would their questions go from now till then. NK asked KY and JP what they thought about this.
KY said that he could act as a conduit. JP said they would direct them where needed to relevant leads in Cornwall Council. KY suggested that they go through HC. NK said that HC was not in a position to answer these questions.
2. During the 6 months what will happen? NK said that there would be no formal PB meetings. This was responded to by various members who felt that the present group was an important voice for carers and shouldn't be lost. NK agreed and said that the board was not functioning as a PB but if the group wanted to continue meeting in this format, they could potentially do so as a reference group which all carers could attend. That would need carers to set their agenda, decide who to invite and decide what information goes up to the PB.
3. There was some discussion about what the different groups do and NK said that the Terms of Reference (TOR) for the Partnership Board or a new Reference Group TOR would set that out.

KY was concerned that they were commissioned to provide answers to questions raised at local forums and usually raised them at the Carers Partnership Board .JP said that she had unanswered questions carers raised via the carers service. NK said that they would not be answered now due to time.

KY suggested another meeting in 4 months. In this time NK and KY could meet and discuss the changes within the forums and how that will fit in to future meetings. GL felt that this was too long since the previous meeting and suggested a month. This was agreed by the Chair and a preliminary date of August 2nd was set.

Date of next meeting: TBC August 2nd.

(at a suitable venue and time to enable SW to chair).