

Clackmannanshire Carers Forum – A voice for local carers

Notes from the Clackmannanshire Carers Forum Thursday 18 November 2021

1. **Present:** Carolynne Hunter, Maureen Day, Alice Matthews, Margaret Daniels, Elizabeth Murdoch, Paul Morris (Carers) Elizabeth Ramsay (retiring IJB rep), Liz Rowlett (CTSi), Jessie-Anne Malcolm (NHS FV), Lesley Fulford (C&S H&SCP), Tracy Gibson, Diane Brines, Laura McKenzie, Alison Tanner, Caroline Quinn, Louise McKnight, Nicola Weedon (F&C Carers Centre)

Apologies: Carolanne Kane, Stella McDonald, Jackie Millar, Brenda Simm (carers), Cllr Les Sharp (Clacks Council), Caroline Robertson (C&S H&SCP)

- 2. Nicola Weedon **welcomed** everyone to the meeting and introduced two new members of F&CCC staff: Caroline and Louise who will be offering telephone support to carers in Falkirk only, but are attending the forum to get an overview of the whole organisation. Nicola outlined the agenda but noted that agenda items could be taken out of turn to allow attendees to leave early.
- 3. Nicola explained that one of the reasons for this Forum was to elect a new IJB Carers Rep as Elizabeth Ramsay has completed 2 terms, having done a fantastic job, keeping us all informed and up to date. Nicola thanked Elizabeth and other attendees added their thanks in the meeting chat. At the previous Forum in September and in an email to all carers on the "carer involvement" mailing list, carers were invited to find out more about becoming a Carer Representative. From this process, Paul Morris is keen to take on the IJB rep role (see bio in Appendix). He has met with Elizabeth, Laura McKenzie and Nicola to discuss what this entails, and they have no hesitation in supporting his nomination. Elizabeth proposed his election and Carolynne seconded it, there were no dissenting voices so Paul was welcomed as the new Clackmannanshire Carers Representative to the Integration Joint Board and will meet with Elizabeth for handover. Nicola also shared that Carolynne Hunter will be stepping down as Carer Rep on the Strategic **Planning Group** and thanked Carolynne for all her input over the past three years. She congratulated Carolynne on her new job as Postural Care Lead for Scotland with PAMIS, and wished her well in her new role. Many other attendees added their congratulations and thanks to the meeting chat. Nicola hopes to identify a new SPG rep in the coming months – please get in touch with Nicola if you are interested.
- 4. Elizabeth Ramsay delivered her report from the IJB meeting on 22 September 2021:
 - **Chief Officer Report:** The Chief Officer gave her usual review which included an update on Covid 19 Statistics; information about how to respond to the COVID 19 public enquiry and operational pressures resulting from COVID. There was also an update on the flu vaccination programme.

 It was confirmed that the joint inspection of Adult Support and Protection would go ahead. The HSCP is

trying to raise awareness with staff groups meeting the Chair and Chief Officer and videos uploaded to the HSCP YouTube channel.

Financial Report

The exceptional levels of demand have put pressure on costs. At the time of the meeting, the UK budget had not been delivered so there was uncertainty about the impact this would have on the Scottish budget. The H&SCP budget is expected to have an overspend of £2.181m excluding the exceptional costs of adult social care. If these are not fully met by Scottish Government, the projected overspend will be higher. Family health services prescribing remains the biggest area of financial pressure. Steps are being taken to address this and FV is now the 6th lowest cost NHS Board area. To try and keep control of the budget, there are monthly meetings to strengthen financial and operational arrangements. The aim is to break even on the core revenue budget while investing in doing things differently to have better outcomes. At the moment there needs to be a cash saving of just over £3m a year. The Carers Act investment figure given in the accounts was £0.385m which was the extra money given and did not include the base line.

Strategic Improvement Plan

There are now 6 key areas: Care closer to home, Primary Care Transformation, Caring and Connected Communities, Mental health, Supporting people living with dementia and Alcohol and drugs. Some of the actions include reprovisioning the social care recording system, using more TEC and reprovisioning Joint Loan Equipment Service. The refreshed Locality plan is being developed. The Hospital at Home team is being established and Community link workers in GP practices are being piloted in Clacks by CTSI. The model of care within Bellfield is being reviewed. They are also looking at plans to co-locate staff. The carers strategy group has been re-established and a short break co-ordinator appointed. Self-directed support is being reviewed and refreshed. Community mental health now delegated to the HSCP and a joint strategy with Falkirk is being prepared. The Alcohol and Drugs Partnership plan sets out work being done.

Carers Investment plan

- Joint recommissioning for Carers Centres Possibly one centre will be funded and could choose to subcontract to the other.
- A short break co-ordinator has been appointed
- A carers lead to be appointed they will deliver the carers improvement plan, review eligibility criteria, review short breaks statement/Young Carers statement, review carers strategy and develop the infrastructure to adopt social prescribing
- Work will also be done by a backroom processes person to get the processes set up for recording and reporting, Carers census, flexibility of SDS and review charging arrangements.
- Communication will be improved by having a "you said, we did" annual event

Commissioning Consortium

The way in which services will be commissioned is changing. It should be a more collaborative and ethical approach focussing on the public good rather than competition. The HSCP will work together with its strategic partners (including third and independent sector), partner authorities and our citizens, particularly those with lived experience of care either directly or indirectly:-

Transforming Care Board

Many of the items under this were mentioned in other papers. The locality planning paper is on the HSCP website. Changes are planned for Bellfield and CCHC. I have been assured that no decisions have been made and any proposals will have to be considered by stakeholders. It has been suggested that Ward 1 could be moved to the Bellfield centre. Hospital at Home are already working with social care and there is potential for further integration going forward to ensure the service is as effective as possible.

Quarter 1 Performance Report (April to June)

Delayed discharges were higher this year than last, possibly as people were less reluctant to go to hospital. At the end of June there were no delayed discharges from acute wards but the numbers in community hospital wards had risen. There were problems due to shortage of care workers and care homes affected by Covid. As part of review of care and support they have looked at the option of having one care worker plus equipment where manual handling is the driver for two care workers. The Reablement team for Clacks employed an additional OT to support discharge from hospital. District Nursing and Adult Social Care work together to support people in their own homes to prevent unnecessary hospital admissions. The model of care in community hospitals is being reviewed with the possibility of using intermediate care beds to assess the level of care and support required. There is a strategic review of palliative and end of life care underway. An outcomes-focussed approach to learning disabilities is being used with health and social care staff integrated. 81% supported to live in their own or family home and 15% in long term care.

Unpaid carers- stats were given and it was mentioned that an operational focus across HSCP teams to support all staff to identify and offer assessment to carers is underway.

Primary care mental health – each practice has a mental health nursing service so 80% consult the mental health nurse first and less than 3% need to go on to see a doctor. Most consultations now done by phone. Main reasons were anxiety, low mood and stress and the outcome for most was selfmanagement. There are videos available on the H&SCP YouTube channel:

https://youtube.com/channel/UCBwtUoNZILE9NZ-kQafbLQA

There is a growing rise in demand in Clacks for community mental health support (those who need the medical opinion of a specialist clinician as outpatients). There was also an increase in admissions to Mental health wards. People with dementia are entitled to a minimum of one year post diagnostic support. There is a growing waiting list for this.

All of the papers are available on the Clackmannanshire and Stirling HSCP website:

https://clacksandstirlinghscp.org/about-us/meeting-schedule/

5. Lesley Fulford discussed the draft **Carers Strategy** which attendees had received by email. Nicola invited attendees to add comments to jamboards as well as raising any points in the general discussion. Firstly, Lesley asked for feedback on the vision:

Together as partners we will deliver improved and more consistent support for adult carers so that they can continue to care, if they so wish, in better health and to have a life alongside carina.

She then asked for feedback on the priorities:

Recognising Carers; Including Carers; Supporting Carers; Health and Wellbeing of Carers; and Creating Carer Aware Communities.

Elizabeth suggested that Young Carers should be included in all aspects of the strategy. Margaret proposed that there should be mention of recently bereaved Carers and their need for ongoing support. F&CCC policy is that former carers are supported for up to two years, once their caring role has ended. Jessie-Anne reminded us that many carers do not recognise themselves such, they just

think of themselves as a partner, parent or friend, and also about the "stigma" of being seen as a carer, so many do not come forward for support. There was some discussion around making communities Carer Aware and community resilience.

Comments from the jamboards:

- Do we need to try and focus on the value of being a carer when describing a carer?
- Could we get information put in CCHC waiting area at the RVS cafe about the Carers centre?
- I read someplace recently that someone said "Carers will know when they need help" carers are the last to know they are not coping.
- Lack of resources for any support is a huge issue for Carers.
- Self-directed support not readily available for carers to have support in a more creative way.
- My GP practice website Carers section is about the English system. Could they be asked to use the NHS Inform site instead of the other one?
- It is clear at Carers Collaborative meetings that our HSCP does value carers more than some other boards.

There was further discussion about post diagnostic support for individuals following a diagnosis of a dementia. Nicola reminded the group that CC support is available for carers of people with dementia whilst waiting for formal post-diagnostic support service to start.

Lesley invited any further comments or suggestions to be emailed directly to her: lesley.fulford@nhs.scot

6. Nicola shared the results from the survey on the future of the Clackmannanshire Carers Forum:

25 Carers completed the questionnaire.

Forum Occurrence

Do you think that 4 times per year for carers to come together as a forum to raise issues, discuss solutions and hear about local decision making/plans (relating to carer services/supports) is enough?

YES - 23 carers felt 4 x/year was enough

If no, how often would you like carers to come together to discuss individual and local carer issues?

NO - 2 carers felt the forum should meet every 2 months (6x/year)

Would you want this to be as a formal forum, or more relaxed group discussions?

21 carers thought the forum should be RELAXED, 2 thought it should be FORMAL, and 2 thought it should vary depending on the content.

Do you have any suggestions where in your community forums and informal discussions could take place? E.g. Community halls, cafes

- Anything from above
- Any of the above
- Community Halls and Ludgate. Hotel function rooms, Town Hall, Spiers Centre
- Community halls / cafes Hawkhill Community Centre Town Hall Alloa Maker Village Café
- Community Halls
 - The Ladybird Café underneath Café
- Halls and cafes
- Ludgate as it is central
- Ludgate House, CTSi, Alz Scotland, Give a Dog a Bone

Forum Attendees

Currently health and social care and 3rd sector professionals are invited to the carers forum alongside carers. Are you happy for professionals to be part of the forum?

YES - 18 carers said they were happy for professionals to attend forums.

SOMETIMES – 6 carers said professionals should attend sometimes

If sometimes, how often would you prefer professionals to be present (e.g. every second forum, once per year)?

4 said every 2nd forum and 2 said when required / when have some)

In what capacity would you want professionals to attend?, e.g. to listen and respond to carer concerns, to present to carers about new developments, to seek feedback on health and social care policy

11 carers said all / a mixture of above

Other responses:

- To listen respond to concerns or feedback to any of the health and social care policy.
- To listen and respond
- To listen, take notice and keep us informed.
- Listen to carers needs and to give honest responses.
- To be there if we need extra help and information
- To share information about their specialist area and keep us up to date with new developments. I would also like carers to be given a chance to share with professionals how the service impacts the care-for person and the carer.
- For there knowing and advice
- Listen to carer and inform carer of what is in community for help.
- For qualified help and advice and also to give presentations periodically. Especially when there are changes in operation or legislation etc.
- Listen and respond; about new developments not necessarily in Detail; also Health and Social Care Policy. Also new schemes that may be of value to Carers ie. 'Lonely' people helping with Carers when appropriate?

Carer Representation in Local Decision Making

There are local decision making meetings through the Health and Social Care Partnership held regularly throughout the year and carer representation at these meetings is crucial to ensure that carers' opinions are taken into account.

Would you be interested in learning more about becoming a Carer Representative?

5 Carers have expressed interest in learning more about becoming a Carer Rep.

Would you prefer to have a carer as Chair of the forum rather than staff?

9 carers said YES, 2 said SOMETIMES, and 13 said NO.

If yes, would you be interested in learning more about becoming Chairperson?

One carer was interested in this.

Forum Name

Would you prefer the forum to have a name which reflects its role in making sure carers' concerns are heard? E.g. Carers' Voice, Carers Together

14 Carers said YES, 11 carers said NO

What's your suggestion / comments?

- Carers' Voice / Carers Learn and Listen Together
- Listen to Carers
- I think Carers' Forum is suitable. But open to suggestions.
- Caring Together As it would be professionals and carers
- Carers Matter? Like the ones suggested above too.
- Carers Voice
- Carers voice
- Carers Voice would be my choice.

- Carers & Staff Caring Together
- At moment unsure
- I don't feel strongly about this so happy to go with majority.
- I like the formality of the title. I think it lends more weight to our voice.
- Carers & Staff Working Together

Any other comments?

- This is my 1st meeting and I found it very informative yet relaxed. In regards to the position of the rep, I would be interested but I am currently unsure as to how much time I would be able to commit.
- I am no longer a carer as my husband died. However I only managed to attend the forum twice and that was after he was admitted to a care home. When I was caring for him full time on my own at home it was impossible to attend as there was no one else available to sit with him and he could not be left home alone. My suggestion that (some) meetings should be held in the evenings (when my daughters would have been available to look after their Dad) was rejected on the basis that the 'professionals' did not work in the evenings. It seems to me that the voices of the actual 24/7 carers are underrepresented in the forum. Also this group are unable to participate in the free 'treats' eg massage sessions, Christmas lunches, etc. that part time carers are able to enjoy.

Nicola then presented a poll so that attendees could vote on a new name for the forum, with the majority opting for **Carers' Voice.**

7. Social Work/Health/Third Sector updates

Liz Rowlett, CTSI, shared the news that they are now in their new office in Alloa High Street, manned each day, but working on a rotational basis, as can't all work in the office, at same time. Liz shared that CTSI are in the middle of funding opportunities — Community Mental Health and Wellbeing Fund for social isolation and loneliness with a closing date on Monday, but funds need to be identified by end of March 2022. There may be another round of funding after March, but not sure. Nicola confirmed that the Carers Centre are putting in an application.

Jessie-Anne Malcom , NHS FV Patient Public Forum Coordinator, has been attending the Falkirk Master Plan meetings and also the primary Carer involvement meetings which are part of Forth Valley – relevant to us in Clacks. Will update us when relevant information to pass on. Discussion around the previously held Public Partnership Forum which used to meet in Sauchie – many agreed these were very useful and hoped that they would be restarted.

Also discussed the issue that they need another Service User Rep for the Health & Social Care IJB. This will be advertised and Liz, Lesley and Jessie-Anne will interview for this position.

8. Carer Issues/Concerns

Elizabeth Murdoch raised issue that she encountered recently with poor communication between GP/receptionist and herself about her mother's care and asked for advice. It was suggested that she should contact the GP Practice Manager, and another carer suggested it would be best to put her "complaint" in writing rather that speaking with practice manager.

9. AOB

Nicola thanked everyone for coming along and for their input. She reminded carers that the Clackmannanshire Carers Christmas Lunch is on 14 December at the Dunmar Hotel, and she looked forward to seeing them in person then.

The next meeting of Clackmannanshire Carers' Voice will be in February 2022, date to be confirmed.

Appendix

Bio for Paul Morris, nominated as Carers' Representative to the IJB

My name is Paul Morris. I am father to two boys, married and work full time as Project Manager for the Stirling and Clackmannanshire City Region Deal.

I, alongside my wife Susan, am a full-time carer to my eldest son, around all aspects of his life and across every aspect of my own. My family lives in Alloa and has done so for 20 years. I have lived in Clackmannanshire since I was a toddler.

My eldest son, Lachlan, is a bright, outgoing 14 year-old boy, who attends Alloa Academy. He has quadriplegic choreo-athetoid cerebral palsy and requires support in every aspect of life. Lachlan communicates using an eye gaze device, the Tobii i-12+, which also acts as his window to the world via the worldwide web.

Educated to postgraduate level, I have two decades of work experience in policy, politics and economic development. I have worked with elected representatives at all levels and developed policy and strategy documents in many fields, including two manifestos at Glasgow level, a report on the Scottish Labour Market in 2006, a Social Enterprise Strategy for Glasgow and others. This work experience has provided me with valuable insights into the processes in place to effect change.

Alongside my extensive experience through work, I have been a trustee of Cerebral Palsy Scotland (previously Bobath Scotland) since 2015. This national, multi-million-pound charity, provides support to children and adults with motor difficulties associated with cerebral palsy.

My biography is available on LinkedIn.