Hampshire Carers Partnership (also reporting to the Learning Disability Partnership (LDP))

Carers LD Working Group

Action Notes

Date: Tuesday 19th July 2022

Time: 2.00 - 3.30pm

Method: Zoom

Present 12

Apologies 11

The following also expressed an interest in joining the group 5

*Administration Note: to access any new Zoom meeting you need to find the meeting invitation for that day and click on the link. Old links do not work.*

*Where an abbreviation is used for the first time in the text, it is in bold.*

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|  | **Welcome, Apologies, Introductions**DH welcomed everyone to the meetingACTION 1.1: JH to email those who “expressed an interest in joining the group” to ask they still wanted to be on the membership.  | JH |
|  | **Previous Actions –** *unless otherwise stated below, action has been achieved** DH will send out details of future CASCAIDr workshops on **Direct Payments** (DPs). Currently they have published dates of workshops, starting in September, on the Care Act, which DH would highly recommend. There is a cost to these workshops, please see the link for details.

<https://www.cascaidr.org.uk/2022/06/22/cascaidr-public-care-act-course-2022-2023/>* Still looking for a volunteer carer to sit on the LD Communications Working Group.

ACTION 2.1: JH to email out to members to ask for a volunteerThe LD Complex Needs Group have enough carer members. The group has not met yet, should meet in September; waiting for the 4 provider members to be confirmed. The next step is to identify the carer member who will Chair this group.ACTION 2.2: Amanda to suggest a process to select the Chair, and discuss at the first meeting. This person will also be one of the 3 carer reps on the **Learning Disability Partnership** (LDP). * JC suggested that perhaps the 3rd carer rep could be identified, from this meeting; each time there is a new meeting, depending on who would be the best representative, based on the agenda. This way it keeps the 3rd member fluid. DH agreed this was a good idea.

ACTION 2.3: *SO suggested this proposal (re the 3rd carer rep) is taken to the LDP for approval* – remain on actions until LDP meeting in September has taken place. * ACTION 2.4: This action to remain on Action Log: *Members to send any comments on the proposals re LDP structure to JH*
* *SO and MW to discuss further, outside this meeting, how members access information, in their role as appointee*. SO and MW have met. SO also provided these links, which gives information on being an appointee [Become an appointee for someone claiming benefits - GOV.UK (www.gov.uk)](https://www.gov.uk/become-appointee-for-someone-claiming-benefits) and [Managing affairs for someone else - Citizens Advice](https://www.citizensadvice.org.uk/family/looking-after-people/managing-affairs-for-someone-else)
* JC asked if we could have the agenda for the next LDP, so that carers can discuss, prior to the meeting, and contribute at the LDP.

ACTION 2.5: AL to share agenda at next meeting, for discussion and in preparation for next LDP on 30th September. | JHALDH/SOAllAL |
|  | **Update and Q&A from JN:** See Appendix 1 ACTION 3.1: JN to share the link:[Let's go co-pro | Health and social care | Hampshire County Council (hants.gov.uk)](https://www.hants.gov.uk/coproduction)The question was asked - are Hampshire going to review Client Contributions, as the cost of living rises and people on benefits are strugglingACTION 3.2: JN will take this question back to AHCJN briefly mentioned a call for evidence from Government on people who have Down Syndrome.ACTION 3.3: JN to send links to JH[Government seeks views to improve lives of people with Down's syndrome - GOV.UK (www.gov.uk)](https://www.gov.uk/government/news/government-seeks-views-to-improve-lives-of-people-with-downs-syndrome?wp-linkindex=10) | AchievedJNJN |
|  | **Review of Carers Strategy and Charter - AM****Hampshire Carers Partnership** (HCP) has a responsibility to review the Carers Strategy and Charter, which was implemented in 2018. It should be reviewed in 2023, but due to huge changes, including those linked to C-19, and some organisations, who signed up not being in existence anymore, e.g., **Clinical Commissioning Groups** (CCGs), it has been decided to bring forward the review. An initial meeting has been held to start discussions on how to undertake the review. Included in the attendees were Director of **Adults’ Health and Care** (AHC), and TC, who is Head of Strategy, for the new ICS – **Integrated Care System**. It was observed that 15 organisations signed up to the Carers Charter, which is contained within the Strategy, but only one has implemented any actions. Here is the link to the Carers Strategy:[carersjointstrategy.pdf (hants.gov.uk)](https://documents.hants.gov.uk/adultservices/strategy-plans/carersjointstrategy.pdf)Attendees at the meeting agreed that the review needs to happen. To create a baseline/audit of the current situation, each organisation, who originally signed up, has been asked to submit information on what they have already implemented and what still needs to change. The next meeting, in September, will look at the outcomes of the audit and agree an action plan to take the work forward. The review group will include carers. No one had any questions.  |  |
|  | **New Information:**1. **Social Media** – DH would like to move the group towards having some sort of social media engagement; evidence shows that the place to start for the demographic, of this group is Facebook. DH acknowledged that there are some people who will not use any sort of social media, so we would have to also think about producing a newsletter. This proposal created a discussion.

Some members only use Zoom and emails. JS gave an example where it had proved useful when advertising for an event she is attending tomorrow, and she was able to share with her networks. BC observed that in her experience of Go LD, it is very variable how many people will engage with Facebook; she gave some examples and figures about how many people engage with Facebook, versus emails. A Facebook feed from a website could be useful. Members were concerned about potential safeguarding issues, as members are all linked to vulnerable people, and so need to consider how to make this safe. DH said this would be a closed group, which would minimize access to the group. JS suggested it would be a good way of finding out about what people think of the DP service provided by Enham. SE felt that any communication is better than none. Her experience of the “closed” Orchard Close Facebook group, was good, but also agreed that some members don’t have email addresses or smartphones. DH agreed that the Orchard Close Facebook group had been very positive, although only about half the members of the OC group were in the Facebook group, so had to be phoned, individually, with updates. Need to recognise that some people work and so cannot attend meetings, but could access social media. Members agreed that there does need to be a variety of ways to access information. AM reported that she has had discussions with AHC about setting up a HCP webpage. This could include information about signposting people to social media links. The idea of the webpage is so that people have one place to go to, where they can find resources and information in one place. DH agreed with all the discussions and added that peer support is really key to signposting, to information and guidance. ACTION 5.1.1: DH to look into starting a Facebook page, whilst acknowledging that if people don’t want to join, the group will ensure people receive information in different ways. *Post meeting – here is the link for the Facebook page:* <https://www.facebook.com/groups/768513741089733> | *Achieved* |
|  | **AOB*** ACTION 6.1: Please continue to vote for the New Blendworth Project – you can vote every week. The Project is currently leading the votes. <https://www.asda.com/green-tokens/store?store=4188>
* JS raised a concern about carers not being able to administer over the counter medications to service users, as they have not been prescribed by their GP. This was discussed and explained that this is for safeguarding reasons. It is a difficult issue to address, but people should talk to their GP to see if the medication can be prescribed.
* New incontinence pads – this issue has been raised before; some members feel the new pads are not as good as the previous ones, which are supplied under a NHS contract. AM suggested we could ask for feedback from carers and service users about their experiences. DH has researched this issue and it is the single most raised complaint with the Ombudsman.
 | All |
|  | **Date of next meeting:** 13th September, 2.00 – 3.30pmMeeting finished at 3.40pm.  |  |

Action Summary below and page 6

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|  |  | **Updates/Actions from previous meeting 17th May 2022** |  |
| **No.** | **Ref** | **Action** |  |
| 1. | 2.1 | Still looking for a volunteer carer to sit on the LD Communications Working Group. JH to email out to members to ask for a volunteer | JH |
| 2. | 2.2 | AL to suggest a process to select the Chair, of the Complex Needs Group, and discuss at the first meeting. This person will also be one of the 3 carer reps on the **Learning Disability Partnership** (LDP).  | AL |
| 3. | 2.3 | JC suggested that perhaps the 3rd carer rep could be identified, from this meeting; each time there is a new meeting, depending on who would be the best representative, based on the agenda. This way it keeps the 3rd member fluid. DH agreed this was a good idea.*SO suggested this proposal (re the 3rd carer rep) is taken to the LDP for approval* – remain on actions until LDP meeting in September has taken place | DH/SO |
| 4. | 2.4 | This action to remain on Action Log: Members to send any comments on the proposals re LDP structure to JH | All |
| 5. | 2.5 | JC asked if we could have the agenda for the next LDP, so that carers can discuss, prior to the meeting, and contribute at the LDP. AL to share agenda at next meeting, for discussion and in preparation for next LDP on 30th September.  | AL |
|  |  | **Actions from 19th July 2022** |  |
| 6. | 1.1 | JH to email those who “expressed an interest in joining the group” to ask they still wanted to be on the membership.  | JH |
| 7. | 3.1 | JN to share the coproduction website link:[Let's go co-pro | Health and social care | Hampshire County Council (hants.gov.uk)](https://www.hants.gov.uk/coproduction) | *Achieved* |
| 8. | 3.2 | JN will take question re review of client contributions back to AHC | JN |
| 9. | 3.3 | JN briefly mentioned a call for evidence from Government on people who have Down Syndrome.JN to send links to JH[Government seeks views to improve lives of people with Down's syndrome - GOV.UK (www.gov.uk)](https://www.gov.uk/government/news/government-seeks-views-to-improve-lives-of-people-with-downs-syndrome?wp-linkindex=10) | JN |
| 10. | 5.1.1 | DH to look into starting a Facebook page. *Post meeting – here is the link for the Facebook page:* <https://www.facebook.com/groups/768513741089733> | *Achieved* |
| 11. | 6.1 | Please continue to vote for the New Blendworth Project – you can vote every week. <https://www.asda.com/green-tokens/store?store=4188> | All |