

Carers Strategy Group

Minutes of Meeting Held on

Thursday 25 September 2008

Present :

- Glynnis Joffe (GJ) – Chair, Assistant Director for Adult Social Services
- Anthony Nicholson (AN) - Family Carer Rep
- Julia Merrigan (JM) – Barnet Primary Care Trust
- Anita Shah (AS) – Barnet Primary Care Trust
- Marie Bailey (MB) – Service Manager, Physical and Sensory Impairment Team
- Janice Hembrow (JH) - Carer Representative
- Christine Marchesi (CM) - (Young Autistic Spectrum Socialising)
- Stella Henriques (SH) - Carer Representative
- Carolyn Greenaway (CG) – Children and Families Service
- Mark Wehrly (MW) - Barnet Carers Centre
- Andrew Wilkes (AW) – Barnet Primary Care Trust / London Borough of Barnet
- Nigel Love (NL) – Older Adults Service Manager, London Borough of Barnet
- Catherina Tam (CT) - Barnet Care and Support Service
- Shirley Regan (SR) – Younger Adults Commissioning Team, London Borough of Barnet
- Rhoda Fynn (RF) - Carer Representative
- Ray Booth (RB) - Barnet Mencap
- Paramjit Singh (PS) - Barnet Primary Care Trust
- Dawn Rowe (DR) – Information Officer for Adult Social Services
- Pamela Wells (PW) - Carer Representative
- Chandana Sanyal (CS) – Learning and Development Manager, Adult Social Services

Apologies :

- Maggie Goff – Social Care Development Manager for Mental Health
- Sonia Douek – Jewish Care
- Diane Williams – Barnet Carers Centre

| | Item | Action |
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| 1 | Young Carers Strategy Carolyn gave feedback on the Young Carers Strategy and the members of the subgroup which will be looking at the needs of young carers. They will be meeting with Young Carers in October. The Young Carers strategy will be finalised once members have made recommendations. | |

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| 2 | <p>Carers Training</p> <p>Chandana Sanyal discussed carers draft training programme and spoke about the expert Patient training programme for carers with a long term condition.</p> <p>Mark Wehrly spoke on the need to have training for carers and professionals.</p> <p>Agreed the content of the carers training programme. Chandana will programme and work up the budget and publicity plan. Need to ensure that the programme reaches carers not yet known.</p> | CS |
| 3 | <p>Training for professionals.</p> <p>Low take up of training from staff. Discussion on whether the training is still appropriate and some staff have completed it. Does it reach all health and social care staff? Training group to look at a revitalised programme which gets to staff across the health and social care pathway. Need to think of new ways of getting to staff that give focused messages and are not time consuming. Need to cross community and acute sector staff. Primary Care Trust to consider their input resource wise. Consideration of how carers could be involved in the training.</p> | CS PS |
| 4 | <p>New National Carers Strategy</p> <p>Summary presented by Shirley Regan. Emphasis on young carers to raise awareness in schools about young carers and skilling up schools to identify young carers. Whole family support – Government commitment – Family pathfinders for young carers. Additional £4million available for projects. Health checks for carers another improvement area.</p> | |
| 5 | <p>Discussion on carers register at GP under Quality and Outcomes Framework</p> <p>Paramjit, Julia and Amita to discuss carers with Primary care leads in the Primary Care Trust. Are there quick wins such as carers being seen quicker, getting them information.</p> | PS JM AS |
| 6 | <p>Care Model Development</p> <p>Reconfiguring of the social services care management scheme. Presentation given by Ed Gowan, Project manager, Adult Social Services.</p> <p>There is currently a consultation of the new model being created. Three main themes :</p> <ul style="list-style-type: none"> • Strengthening the access point of social services and bringing the different duty points together. This service will also respond to simple requests for assistance • Enabling people to be independent as possible. Short and intensive package of support to be offered initially before an Individual Budget is decided on if long term assistance is still needed. This is a more proactive approach • If someone does need a longer term package of support then at start of the planning process we will give an indication of their | |

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| | <ul style="list-style-type: none"> budget. Risk management will move into supporting people to take risks and help them manage it if this is necessary. There could be other agencies who would be appropriate to help people plan what to purchase with their budgets. <p>Discussion</p> <p>When people move to continuing health care and have budgets there is no legislation at present to allow health to give people budgets. A quicker pathway gives family a quicker way of dealing with lower levels of need. Central access team must be knowledgeable about the range of services. Carers could worry that Individual Budgets will mean more work for them. The support such as Direct Payment advisers is very important so that carers are not burdened and are supported when they have to support the individual to manage. Safeguarding responsibilities does cover situations where the person is employing a private carer. These points need to be covered in publicity on choice and Independence.</p> | |
| 7 | <p>Carers Rights Day</p> <p>Carers Centre co-ordinated the day last day. At the carers voluntary organisations network decided that it needed the input of the strategy group to design the day. Carers Centre looking to co-ordinate a proposal which will be circulated to the carers strategy group. Need to state outcomes it wants to achieve and to reach new carers not known. It is about empowering carers by giving information.</p> | |
| 8 | <p>Communication Subgroup</p> <p>Directory – are the ones currently circulated used? Need to have basic information and develop internet information. Need a one stop shop approach and for people to be redirected. Role of library in giving information. Need to include information for professionals. Need to not rely on setting up new systems but to signpost to what exists. Ideas need to be prioritised and costed.</p> | Information subgroup |
| 9 | <p>Any other business</p> <ul style="list-style-type: none"> SS will plan to present Respite Audit and results will be discussed at next strategy group. There is no money for commissioning emergency respite service. This can only be considered if there is evidence of need. Emergency plans are being compiled and first preference of 15 carers is that home care is a first option. | |
| 10 | <p>Date of Next Meeting: Tuesday 2 December at 10am Conference Room 3, Building 2, North London Business Park.</p> | |