Norfolk Older People's Strategic Partnership Board

21 September 2011 Cranworth Room, County Hall, Norwich

Present:

Joyce Hopwood - Norwich Older People's Forum (in the Chair)

Gina Vorin - Voluntary Norfolk

Mary Granville-White - Chair, North Norfolk Older People's Forum

Anna Morgan - Norfolk Community Health & Care

Carol Congreve - Norfolk Constabulary

Jan Holden - Norfolk County Council - Community Services

Niki Park - Norfolk County Council - Environment Transport & Development

Lesley Bonshor - Carers Council for Norfolk
Chris Mowle - Norfolk Council on Ageing
Carole Williams - Norfolk Council on Ageing

Ann Baker - Chair, South Norfolk Older People's Forum (Board Vice Chair)

Emily Millington-Smith - Chair, Norfolk Older People's Forum - Broadland Older People's Partnership

Peter McGuinness - Chair, Great Yarmouth Older People's Network

Tony Cooke - South Norfolk District Council - Housing

Catherine Underwood - NHS Norfolk/Norfolk County Council – Community Health & Care Sally Cornwell - Department for Work and Pensions – Partnership Development

Jon Clemo - Norfolk Rural Community Council - Chief Executive

Hilary MacDonald - Age UK Norfolk/Norfolk County Council - Community Services

Alan MacKim - Norfolk Council on Ageing

Phil Wells - Age UK Norwich - Chief Executive

David Harwood - Norfolk County Council - Cabinet Member for Adult and

Community Services

James Bullion - Norfolk County Council - Assistant Director, Community Services

(for Harold Bodmer)

Annie Moseley - Age UK Norfolk - Supporting the Norfolk Older People's Strategic

Board.

Paul Anthony - Norfolk County Council - Corporate Support Manager,

Attendees presenting agenda items

Debbie Olley - Norfolk County Council - Assistant Director, Community Services

Dr. Jenny Harries - NHS Norfolk/Norfolk County Council - Public Health

Mark Harrison - Norfolk Coalition of Disabled People (NCODP) - Chief Executive

Apologies:

Apologies for absence were received from Harold Bodmer, Sarah Plume, Andrew Stevenson, Nigel Andrews and Hazel Fredericks

1 Chairman's Remarks

The Chairman welcomed everyone to the meeting.

2 Minutes

The minutes of the meeting held on 8 June 2011 were agreed.

3 Matters Arising

3.1 Voluntary Work and Benefits –

It was noted that more information on the implications of receiving expenses and an involvement fee on the benefits of older people who volunteered should be available from the Department for Work and Pensions (DWP) for the next meeting.

3.2 GP Clinical Commissioning Groups/Integrated Commissioning –

Following a question from Alan, Jenny was confident that, although the new Clinical Commissioning Groups were based on populations of around 300,000 (i.e. six CCG groups in Norfolk) - the local focus to commissioning services would be maintained.

3.3 Awayday –

Annie reminded the Board of the arrangements for the Awayday Conference for Board members and Commissioners at Breckland District Council offices on Friday 18 November.

3.4 Park and Ride System -

Niki explained how the changes to the Park and Ride services had helped save some £100,000, but she assured the Board that NCC was keeping the situation under review.

Pat suggested that, because the Postwick bus no longer stopped at Castle Meadow, the service was being underused particularly by older people/people with disabilities as they couldn't get up the hill to the bus station with all their shopping. **Action – Niki** to follow up

3.5 Contact Number for Social Services –

It was noted that NCC Customer Services was exploring the possibility of a single telephone contact number for Social Services.

3.6 Meetings Timetable for 2012 –

Annie reported that the majority of responses to her email were in favour of continuing to have Board meetings on a Wednesday morning in 2012.

4 Feedback from the three Working Groups

4.1 Working Group on Prevention led by Jon Clemo

Jon presented a paper from his working group on principles for the delivery of any prevention support funding, highlighting in particular:

- That NCC had created a £1,564,000 one-off fund to support prevention activities.
- That there was a range of views on how the fund should be used but he had been able to include a definition of innovation and an agreement to adapt existing models to meet changing needs.
- That there would be two programmes, one for grants up to £5,000 and

another for grants over £5,000 with a maximum of £50,000.

- That the fund was being administered internally by NCC, although this arrangement would be reviewed in the longer term.
- That Partnership Board outcomes were being included as a priority for the fund; and that the fund was not exclusively for projects relating to older people.

Decision: The Board endorsed the principles for the delivery of funding into prevention services as set out in Jon's report.

James reported that the final set of criteria for the fund and details of the marketing process would be circulated. He undertook to ensure that the fund was accessible to local groups. **Action - James**

4.2 Working group on Information, Advice and Advocacy led by Ann Baker –

Ann reported on progress with the Information, Advice and Advocacy Working Group and explained that, because some of the funding for NCC/health commissioning of new information, advice and advocacy services depended on the on-going NHS changes, commissioners had two options: either to go ahead now with tendering for a new service/s, or to delay until April 1st 2013 and to renew the existing contracts now with minor alterations.

Ann said that the working group had decided to recommend to the NCC Senior Management Team in Community Services the second option - that production of the new model for commissioning advice should be delayed to allow some time for it to be further refined and for the health changes to be completed.

Ann also reported that the working group was preparing a leaflet setting out quality standards for written information for older people. The aim was to ensure that all published information for older people/carers was easy to read and understand. The leaflet would be widely circulated. The NCC Team dealing with information, advice and advocacy had asked for a copy so they could ensure their publications were accessible to older people.

4.3 Working group on UK Older People's Day October 1st 2011: Norfolk Celebrates Age led by Jan Holden –

Jan Holden reported that the first 'Norfolk Celebrates Age' festival would run from Monday 26 September until Saturday 8th October.

It would involve many events both large and small, including a celebration in St Andrews Hall on 28 September, and a range of activities at Eaton Park, Norwich including pitch and putt, nordic walking, bowls and a tea dance on 30 September. Other plans included events at Great Yarmouth Library to launch the Norfolk Library Service reminiscence packs which can be borrowed and other celebrations at many libraries and other venues across the county.

Full information was available on the website www.norfolkolderpeoplesday.wordpress.com

Jan asked Board Members to help promote the various events associated Older People's Day and the Celebrating Age festival to ensure they are all well supported by the public.

The Chair asked that the Board's appreciation to Jan for all her hard work be recorded in the minutes.

5 Feedback on 'the Ageing Well Place Based Offer'

- 5.1 James Bullion gave the following feedback on the ageing well place based offer:
 - That the research into what it would mean to age well in a particular place (what supportive services worked well and helped older people remain living independently, what gaps in services were identified, and what additional services would be valuable) was now being undertaken by a county-wide group and three local groups in Breckland, Great Yarmouth and Norwich. Their conclusions would be reported to the Older People's Strategic Partnership Board and the Health and Wellbeing Board.
 - That the researchers were receiving good feedback from older people (using tools provided by the Office of Public Management); and that their work would continue until November.
- 5.2 During discussion, the following observations were made:
 - Mary emphasised the need for the place based research to be joined up
 with other work in the county such as that with older carers. Also, she said
 that older people living in rural areas tended to have more issues around
 social isolation than those in an urban environment. She, therefore,
 questioned why the North Norfolk Older People's Forum had not been
 asked to take part in the research given the very high percentage of older
 people living in their area.
 - James reminded the Board that there was an 'Ageing Well' project in North Norfolk. Also, that the Board had endorsed the three areas to be used for the research at the last meeting. However, the learning would be applied across the county as a whole, and he assured Members that the aim of the research was to build on and not to substitute work already done.
 - Mary said that partnership working was essential to securing better outcomes for older people.

6 Personalisation/Self-Directed Support

- 6.1 Debbie Olley gave a presentation on self-directed support, including personal budgets, emphasising in particular:
 - That the Government expected everyone in receipt of a paid-for social care service to go through a self-directed support process by 2013. The aim was to give people control over the support they need to live the life they choose with care needs being identified between the individual, their family (if appropriate) and the social worker.
 - She explained how, once assessed by NCC staff as eligible for social care, the older person (1) identified their social and care needs and what they wanted to happen (the outcomes), using the 'personal budget questionnaire'. (2) These social and care needs were costed by NCC staff using the NCC 'resource allocation' system (RAS) to produce a total

'personal budget' allowance. (3) Once the older person knew how much their total budget was, they would work with NCC staff to develop their Support Plan which showed the help they would receive. They could use their budget allowance to buy existing services, or they could find other ways of meeting their needs, e.g. by employing someone they know to help them with their meals and personal care. Or they could use a mix of existing services and services they arranged.

- Personal budgets were given to people in residential care and housing with care accommodation as well as those living in the community.
- Activities funded through personal budgets had to meet the assessed and eligible social care needs, deliver the care outcomes required, manage risks to an acceptable level and be good value for money.
- 6.2 During discussion, the following observations were made:
 - Debbie assured the Board that the County Council still retained a duty of care, and would intervene should any safeguarding issues arise.
 - Independent Living Norfolk would give advice to personal budget holders and help with setting up their care arrangements.
 - Debbie reported that she was discussing with the Adult Social Services
 Finance Team how to improve office systems in order to reduce delays in
 processing people's financial assessments which showed whether and how
 much they should pay for the services they would receive.
 - Debbie said that, whilst there were still problems finding service providers in rural areas e.g for home care, the new block contracts had helped improve the situation. Transport could be a particular issue for older people with disabilities in rural areas, and assistance to access transport, e.g. by using a volunteer driver or an adapted taxi, could be allocated as part of their personal budget to help them access services.
 - Debbie confirmed that NCC would commission care on behalf of frail older people with complex needs if this is what they asked for.
 - Debbie assured the Board that, in the event of a care package breaking down, NCC would negotiate with the provider and, if necessary, change the provider because, under self directed support, the local authority had a duty to make sure that the care that is provided is of a good standard.
 - Debbie confirmed that the County Council was monitoring the roll-out of self-directed care/personal budgets.
 - David reminded the Board that, throughout the Big Conversation consultations, the 'purchase of care' budget had been protected.
 - Mark Harrison said it was for the Board to ensure that, under the self-directed support/personal budget arrangements, the quality of care provided for older people was being maintained at a high level.
 - Catherine reported that, in November, NCC would be hosting a conference for providers at which a key theme would be ensuring that people receive the care they need under self-directed support/personal budgets. It was suggested that the outcomes from the conference be reported back to the

Board.

7 The Future of Public Health in Norfolk

- 7.1 Dr. Jenny Harries, Joint Director of Public Health, gave a presentation on the future of Public Health in Norfolk, highlighting the five key points:
 - Local authorities to take on responsibilities for Public Health (including staff movement) from Primary Care Trusts (PCTs).
 - Local authorities are supported by a new integrated Public Health service -Public Health England.
 - There is a stronger focus on the outcomes to be achieved.
 - Public Health has a clear priority core business across Government.
 - There is a commitment to reduce health inequalities.
- 7.2 Local authorities were expected to provide a range of public health services including accidental injury prevention; behavioural and lifestyle campaigns to prevent cancer and long term conditions; and local initiatives to reduce excess deaths as a result of seasonal mortality. They were also, responsibility for "local activity" in areas such as tobacco control; alcohol and drug misuse services; obesity and community nutrition initiatives; and increasing local population levels of physical activity.
- 7.3 Jenny said that there was still a number of unanswered questions:
 - The Public Health "core offer "- support to NHS and other commissioners; information analysis".
 - Detailed understanding on service provision eg emergency planning and infection control.
 - Issues about workforce transfer.
 - Public Health training, research and development.
 - Governance for clinical services.
 - Information data flows/access/ownership.
 - Leverage eg emergency response.
- 7.4 Jenny emphasised that it was a very fast moving timetable leading up to local authorities taking on their new roles and responsibilities with effect from 1 April 2013.
- 7.5 During discussion, the following points were raised:
 - Jenny outlined the process for dealing with a major outbreak of infectious disease, although she pointed out that there were still uncertainties over where the various groups of staff would be in the future.
 - Joyce said that David Harwood/Harold Bodmer would represent the views of the Partnership/older people on the Health and Wellbeing Board, even

though they are not older people.

- Jenny explained that the final membership of the Health and Wellbeing Board was being set at a level to ensure that it retained a strategic focus and did not become unwieldy. However, she was confident that, with good information flows to and from the Board, the views/needs of older people in the county would be taken fully into account.
- Jenny confirmed that there was no requirement in the Health Bill to have a
 patient representative on the Health and Wellbeing Board.
- Phil suggested that the Health and Wellbeing Board could report back to the Partnership on matters relating to older people, but Jenny said this was not a decision for her to make.

8 Learning Spot – Equal Partnership/Co-Production: What Does this Mean for Older People?

- 8.1 Catherine Underwood and Mark Harrison (Chief Executive of the Norfolk Coalition of Disabled People NCODP) went through the presentation on "Beyond Consultation: a Co-Production Partnership" which had been circulated with the agenda:
 - Mark explained that co-production should exist between user-led groups and local authorities, including the personalisation of care and tailoring services to individuals, to achieve better outcomes.
 - Catherine referred to the long history of partnership working in Norfolk. She said that the agenda was about transforming social care services through personalisation and working with user organisations. Co-production provided an ideal opportunity to bring together a wide range of expertise and to build on good foundations and make a reality of the philosophy "together we are better".
 - Mark confirmed that the NCODP and NCC had talked with the Carers Council on equal partnership/co-production.
 - Catherine said that members of NCODP were working alongside NCC project managers on co-production to provide the necessary challenge.
 - Mark explained that the NCODP were helping to connect NCC officers to the vision of independent living, and to put commissioners/project managers in touch with the "lived in experience".
 - Mark said that the ability to separate activities campaigning for the rights of of disabled people from co-production activities had presented a particular challenge to NCODP.
- 8.2 During discussion on what co-production could mean for older people, the following points were raised:
 - In reply to questions about co-production and the new Norfolk GP
 Commissioning Consortia, Catherine said that it would be about getting
 patient voices heard but, as yet, the GPs had not yet finalised their
 processes although she was confident they would want to build on well
 established engagement arrangements.

- Catherine emphasised that co-production was about changing outcomes and making a real difference to individuals.
- Following a question about whether the title "disabled people" was appropriate, Mark explained that whilst the initiative had started in Adult Social Care there was now a wider corporate interest in co-production within NCC. He believed the real challenge was how to achieve better outcomes for all groups of service users.
- Carole pointed out that the Information, Advice and Advocacy Working Group had expressed concern about characterising older people as "disabled" – that older people wouldn't necessarily see themselves as disabled, and that the needs of vulnerable older people trying to maintain their independence at home might be very different from those of younger people with a physical disability.

9 Any Other Business

9.1 New 101 Non-Emergency Police Contact Number -

Carol said that she would prepare a briefing note about the new 101 nonemergency Police contact number which was being introduced across the county between now and January 2012, for circulation to Members of the Board. **Action - Carol**

9.2 Halloween (31st October) and Bonfire Night -

Carol said the Police were putting a lot of work into managing the issues associated with Halloween and bonfire night which were recognised as being a cause for concern for many people of all ages. They were therefore proposing to visit people in the community who are known to be vulnerable, and she asked Members of the Board to let her know if there were any processes which would help the Safer Neighbourhood Teams identify such individuals. **Action – Board members.**



If you need these minutes in large print, audio, Braille, alternative format or in a different language please contact Paul Anthony on 0344 800 8020 or 0344 8008011 (textphone) and we will do our best to help.

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