

Physical and Sensory Disability Partnership Board

AGENDA

Date: Thursday 30 May 2013

Time: 10.30 am

Venue: Seminar Room 1, Main Hall, Green Park, Aston Clinton

No	Item	Timing	Page
1	Apologies for Absence / Changes in Membership	10.30	
2	Minutes of the Previous Meeting and Matters Arising	10.35	1 - 16
3	Update on Day Opportunities Update from Linda Warmbier, Day Opportunities Transformation Project, Adult and Family Wellbeing.	10.45	
4	Update on IAPT Update from Jackie Prosser, Primary Care Mental Health Transformation Lead - Buckinghamshire	11.10	
11.35 Break			
5	Carers Strategy Update from Nadiya Ashraf Lead Commissioner Carers and User Engagement.	11.45	17 - 30

6	National Benefits update (standing item)	12.10	
7	Membership of the PSDPB	12.20	
8	Dignity in Care (standing item)	12.30	
9	PSDPB Action Plan	12.40	31 - 34
10	Any Other Business	12.50	
11	<p>Date of the Next Meeting The next meeting of the Board will take place on Thursday 25 July 2013, 10.30am, Seminar Room 1, Green Park, Aston Clinton.</p> <p>Date of future meetings for 2013;</p> <p>26 September 28 November</p>		

If you would like to attend a meeting, but need extra help to do so, for example because of a disability, please contact us as early as possible, so that we can try to put the right support in place.

*For further information please contact: Sharon Griffin on 01296 383691
Fax No 01296 382421, email: sgriffin@buckscc.gov.uk*

Members

Stephen Archibald, Carers Bucks

Maureen Armitage, Buckinghamshire Alliance of Neurological Organisations

Patricia Birchley, County Councillor - Cabinet Member for Health & Wellbeing

Paul Bootle, Service User Representative

Trevor Boyd, Head of Commissioning and Business Improvement, Adult Social Care

Sue Brooks, Connexions

Andrew Clark, Bucks Disability Service (BuDS)

Jackie Wheeler, Action on Hearing Loss

Deborah Dow, CEO, Bucks Vision

Steve Goldensmith, Lead Commissioner Housing, Housing Related Support and Prevention

Brian Jones, Bucks Vision

David Keston, Carer Representative

Mathew Koshy, Consultant in Rehabilitation Medicine

Gillian Manning-Smith, Transformation Programme Manager

Dr Maggie Murphy, CNRS

Elaine Norris, Department for Work and Pensions

Barbara Poole, People's Voices

Michael Quinlan, Action on Hearing Loss

Christopher Reid, Joint Planning and Commissioning Manager (C)

Julie Richardson, The National Society for Epilepsy

Rachael Rothero, Service Manager, Strategic Commissioning

Gillian Sherwin, Service User

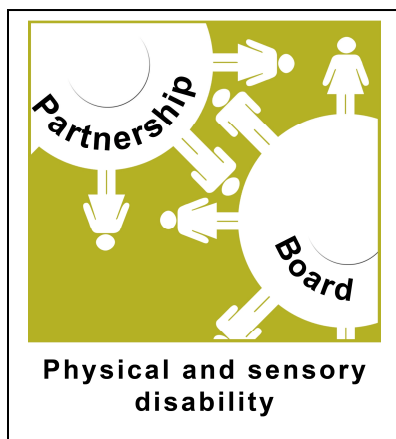
Jane Taptiklis, NHS Buckinghamshire

Andy Tyerman, Bucks & Milton Keynes Brain Injury Service Network

Tony Upward, OWLS / Carer Representative

Louise Wakelam, Chilterns MS Centre

Adam Willison, Assistive Technology Commissioning Manager



Physical and Sensory Disability Partnership Board

Minutes

Thursday 28 March 2013

Those in attendance:	
Tehmeena Ajmal	Bucks Healthcare
Paul Bootle	Service User Representative
Sue Brooks	Connexions
Debi Game	Bucks SUCO
Sharon Griffin	
David Keston	Carer Representative
Elaine Norris	Department for Work and Pensions
Ted Piker	Wycombe District Council
Brian Pollock	Wycombe District Council
Christopher Reid	Joint Planning and Commissioning Manager
Zoe Sutherland	Breathe Easy



No	Item
1	Apologies for Absence / Changes in Membership Apologies for absence were received from Stephen Archibald, Dr Maggie Murphy, Tony Upward, Michael Quinlan and Paul Rogerson.
2	Minutes of the Previous Meeting and Matters Arising The minutes of the meeting held on the 31 January 2013 were agreed as a correct record subject to the following amendments;

Paul Bootle to be added to the attendance list

Page 6 - Deprivation of Liberty Safeguards

The MCA is now part of legislation/law which came into effect in **2005**.

Matters arising

Page 2 - Dignity in Care

The Delivering Dignity Action Plan was discussed at the Adults and Family Wellbeing Board in February. Board members advised that the Action Plan needs to be more streamlined. At the moment the Action Plan sits with the Safeguarding Board. Ways of strengthening the profile and promoting Dignity in Care are being looked into such as the creation of a strategy group to be responsible for the Dignity in Care agenda.

Page 18 – Action Plan

The Action Plan has been updated and will be circulated with the minutes of the meeting.

Workability

The future of the Workability website is being pursued. The background, set-up and reason for the demise of the website are being looked into.

Members were advised that the website was initially started at the Head Injury Unit in Camborne by Martin Hillier. It appears that the funding may have run out.

Action: Chris Reid

3 Wycombe District Council's review of service towards disabled people

Councillor Brian Pollock and Ted Piker, Scrutiny Support Officer, Wycombe District Council, were welcomed to the meeting.

Councillor Pollock began by explaining that the update will be split into three parts; how the Task and Finish Group came about; to discuss the recommendations which came out of the review and to respond to any questions or comments that Board members would like to make.

Background

In 2011 after the District Council elections, the Improvement and Review Commission agreed to set up a Task and Finish Group to look at the issue of disability, how disability is dealt with and what improvements would be made within Wycombe district. The Task &

Finish Group was formed (with myself as Chairman) and started meeting officially in February 2012. The Task & Finish Group consisted of a group of councillors, 2 external experts (Ian Cormack to represent carers and Alison Lewis). The Task & Finish Group met on a number of occasions and visits took place to the Northampton Centre for Independent Learning and Broxtowe Council in Nottinghamshire. Public meetings were also held in Marlow. A set of recommendations was formed and was presented to the Task and Finish Group in early September 2012 which were all agreed. The recommendations were then sent to the Wycombe District Council Improvement and Review Commission and then to Cabinet at Wycombe where they were also agreed. The next step is for the recommendations to be acted upon and reported back to the Improvement and Review Commission followed by Cabinet in September

A copy of the Action Plan has been included in the agenda pack.

The following recommendations were discussed;

**Accessible Housing
Recommendation 1**

This was particularly about the ability of people who had disabilities to access appropriate forms of housing or to access funding to make their housing more accessible.

The first recommendation is linked to the National Planning Policy Framework (NPPF) which is the Government's guide to Local Councils about how they should resolve planning applications and planning issues. There were only two areas in the policy framework where the word 'disabled' or 'disability' was specifically mentioned (section 35-Transport and section 50-Housing). What the government are saying in that is that local councillors should have a view to take the needs of people with disabilities into account when they are looking at planning processes, setting up local plans and planning applications. One of the recommendations to Wycombe District Council is that their local plan review should include reference to disability in relation to housing. The aim is when a planning application comes in, it is an appropriate size and appropriate place and it meets the criteria for disabled access and for provision of a number of homes that might be disabled friendly. If the planning application does not meet the criteria, the application could possibly be turned down.

Recommendation 2 - Bringing homes up to appropriate standard for disabled access for disabled living

The Disabled Facilities Grant is a sum of money which the Council has in conjunction with the Government to help people make changes in their homes for appropriate access. Very few of the members of the Commissioning Group and Cabinet were aware of the Grant or flexible

home improvement loans. There needs to be increased publicity of grants and loans etc.

Recommendation 5 - Disabled access to public facilities

This recommendation around ensuring there is disabled access to public facilities, particularly for wheelchair users and where wheelchair accessible toilets are external to other buildings these should all be RADAR key accessible.

Recommendation 7 - New sports and leisure centre

To make sure that the new leisure centre at Handy Cross is accessible and disabled friendly. Nobody should be denied the ability to go to sports and leisure centres because of a disability. There is particular emphasis on the inclusion of a high dependency toilet in the leisure centre as there are a number of schools in the area which have pupils with very severe physical and learning difficulties. The recommendation includes having appropriate signage which is sufficiently large at an appropriate level, blue badge parking spaces and buttons at wheelchair height.

Access to Information

Recommendation 8

Part of this recommendation includes updating information on Wycombe District Council's own website but there are also recommendations that were made to look at the way in which customers view the service that Wycombe provides for them. A shoppers' analysis has been carried out to see how people feel about the information on their web sites.

Recommendations 11 and 12 - Disability Awareness

Councillors at Wycombe were not necessarily as fully informed as it was felt they ought to be about what can be done for disabled people, within the remit of Wycombe District Council. The first of two training sessions took place on the 1 February and 16 councillors attended. Copies of the documentations and report from the Lead Officer were discussed and advice was given on the process of how to obtain money, how the money is spent and whether more money can be requested from the Government. The second part was to run a disability awareness event which is in the process of being planned. The idea is for an individual to be put in to a position of somebody who's disabled i.e. in a wheelchair and see how they get on. It is hoped that the press will come along and then highlight some of the key issues that people who have disabilities face and increase public awareness. The event is being planned by Claire Hook, Community Services Officer, Wycombe District Council.

Members of the PSPD Board were invited to attend the event to take

part or make recommendations. Chris Reid should be contacted to advise attendance.

Action: All

Recommendation 13

The Skills Centre is closing due to cutbacks. The provision of this service will be revisited.

Recommendation 14

A number of examples have been given about problems experienced in the use of private hire and hackney carriages. Part of the remit of the Regulatory and Audit is to look at the licensing of taxis and private hire vehicles. Approximately three years ago there were only two taxis/private hire vehicles in the Wycombe District that had disabled access. From that point onwards any applications made for hackney carriages (taxis) would have to include wheelchair access. As a result the number of taxis in Wycombe that can now take wheelchair access is considerably greater than it was. Unfortunately Wycombe District Council does not have control over the pricing of private hire vehicles, although taxi tariffs are set by the Council and a tariff card should be displayed in each vehicle. There have been some worrying accounts given of a number of users being charged extraordinary sums of money for journeys, if they needed to have a wheelchair access. These concerns were raised and this issue is again being raised with the private hire trade. Members of the public are always advised to obtain a quote prior to confirming any booking.

Recommendation 16

The report will be published on the Centre for Public Scrutiny website.

Recommendations to Bus Companies

A number of recommendations have been made, particularly about accessibility on to buses at certain bus stops and to try to get better facilities there. The bus companies have engaged very well with the Report. A follow-up meeting took place in Marlow in October during which the Team Leader, Passenger Transport, Transport for Buckinghamshire addressed some of these issues.

One of the aims is to disseminate the outcome of the review to other County and District Council. A meeting has taken place between Cllr Pollock and the appropriate council officer in the Borough of Brighton and Hove who has seen what Wycombe District Council have done and carried out their own review about disabilities services.

Further scrutiny topics have now been looked at. Steve GoldenSmith, Senior Joint Commissioner, Accommodation Commissioning suggested

Specialist Accommodation Provision which is currently scheduled to run from October 2013 to March 2014. Members of the Board were asked for suggestions for key contacts for the review.

The suggestion was made of contacting Steve GoldenSmith, Chairman of the Health & Wellbeing Board. It would be useful to engage with members of this Board as housing is quite high on their agenda and membership includes a large number of providers.

Action: Ted Piker

The terms of reference that the councillors agreed to included looking at areas such as complex health and social care issues regarding specialist housing for vulnerable people, land and buildings, the planning processes, rent levels, funding streams etc.

During discussion the following questions were asked and points made;

One of the biggest problems for people with a sight impairment is being able to flag down the correct bus for their specific journey and having to pre-book transport – have Wycombe District Council been advised of this problem? This area of concern has been included in recommendation 14.

Has the practice of using taxi tokens been stopped? Taxi tokens were originally available via Bucks County Council. This service was then devolved back to the District Councils and for whatever reason Wycombe District decided they would not continue with the token facility.

Could the use of taxi tokens be re-introduced? This can be raised with the District Council but the best way forward is to try to get it incorporated into the departmental budgets and planning for Council Tax.

There is a very clear notice on the Wycombe District Council web site advising that charge for the hire of a private hire vehicle should be agreed before a booking is made.

The Council have a list of recommended reliable and trustworthy tradespeople on their website. Would it be possible to get a similar list of preferred taxi services? There is a list of companies with wheelchair accessible vehicles on the Council's website although the Council do not make recommendations.

Hackney carriages have to have a tariff of charges displayed. It's not the same applicable to private hire? At present this is not required by law. Last year the government had a consultation about

private hire vehicles and taxis, although the current recommendation is to retain a two-tier system with no power to set fares for private hire vehicles.

The Chairman said that it is a very good start for the District Council to take the initiative with this review and that he was keen to see how it can be ensured that the other local councils are doing the same or are taking a similar approach. Have discussions already taken place with the other local councils? As advised in the recommendations, local councils have been approached but they have not been able to make a commitment. Scrutiny is not carried out in the same way in each district.

It has been established that Wycombe District Council has an accessible housing register. It has been noticed that there is no where on the form that identifies if the individual has a disability. This is one of reasons for the inclusion of the recommendations on accessible housing. The first recommendation is to make sure that an individual who has some form of disability has the ability of to make housing aware, when they're making an application through Bucks Home Choice. The second recommendation is for a centrally held register which advises appropriate housing for those with a disability. This recommendation has been passed to the Choice Letting Scheme in the home the forms will be amended.

One of the revisions to building regulations a few years ago dictates that any building work done shall not make disabled access worse. Is it likely that perhaps that is not really enforced? Could this be linked in with your initiative to make sure it is properly considered? Awareness raising is a big part of the process. There is a very clear steer in the new National Policy Framework about providing for disabilities in housing. If Local Councils take this into account at planning level, it should also automatically roll over to building regulations because essentially the plans would have to be adhered to.

With regard to the Disabled Facilities Grant, when there is a disabled person in the household and they would like to make changes to the house such as a wet room, their personal care budget is assessed on their income and savings whereas almost every other grant is based on the overall household. Unfortunately Government regulations apply to the Disabled Facilities Grant.

In terms of getting encouragement from the County Council to have other District Councils look at the issue of services to adults with disabilities, would there not be a route in through the Health

and Wellbeing Board? There seems to be areas/ideas of best practice that could be put forward. The outcomes of the Scrutiny Review have been shared with the Health & Wellbeing Board.

The Chairman advised that he would raise the outcome of the review at the Executive Partnership Board (EPB) and would ask the EPB if they would like Mr Piker and Councillor Pollock to present their report to the Board.

Action: Chris Reid

At the last meeting of the PSDPB meeting, Ian Barham, Manager of the 2012 Olympic/Paralympic Legacy programme for Buckinghamshire gave an update on the programme. The legacy included looking at enabling greater participation of disabled people in sports and leisure. The Scrutiny Report is mainly related to physical access to buildings etc. Participation of disabled people is something that is very welcome and important to the Buckinghamshire Olympic legacy but in terms of the process how are the recommendations being implemented and how is feedback being received? As you see in the action points, some of the recommendations have already been implemented. For example recommendation 8, disability guidance notes, the action plan itself has been done. By September 2013 there has to be a completion of updates as the action plan report is going back to the Scrutiny commissioning Committee on the 4 September 2013.

The Chairman invited Mr Piker and Councillor Pollock to attend the September meeting of the PSDPB to provide a further update.

Action: Sharon Griffin/Ted Piker/Councillor Pollock

4 Presentation on Better Healthcare in Bucks

The Chairmen welcomed Tehmeena Ajmal, Reconfiguration Programme Manager, Buckinghamshire Healthcare NHS Trust to the meeting.

Ms Ajmal began by explaining that she became involved in the Better Healthcare in Bucks programme in April 2012. In November 2011 a large public consultation was initiated across Buckinghamshire to discuss with patients, carers, relatives etc what the proposals were, to get feedback on the proposals and feedback any issues they wanted to flag up. The discussions were initiated by Commissioners working with the hospital. Clinicians wanted make sure that the best A&E services possible were in place for the county as well as the best support for patients who had medical needs and required an in- patient stay. The proposal was to build on the existing model for stroke services of a

single hub in one place which over a period of time was demonstrated to deliver better outcomes to patients.

Meetings were arranged to discuss how the proposed changes would affect how the ambulance service is working and Heatherwood & Wexham Park Hospitals.

The intention was to try to make sure that services could be consolidated in a single place where possible because evidence suggests that this delivers much better care for patients. The two main issues that emerged from the consultation were concern from patients living in the Wycombe area about how their care needs were to be managed and how people would get from one place to another.

The three main principles were as follows;

- **Comprehensive and expanded community services** are available to support more patients closer to, or within, their homes where possible
- That a **full range of general acute services** (such as outpatient clinics, diagnostic testing and day case procedures) continue to be provided from Wycombe and Stoke Mandeville Hospitals
- That all **specialist acute services are provided from dedicated centres** within one of the two acute hospital sites to enable patients to access expert staff and facilities when they really need it.

At Wycombe there are three services to support patients in the Wycombe area - a minor injuries and illness unit (MIIU), a dedicated cardiac unit and a multi-disciplinary day assessment unit for older people. The MIIU is a 24/7 primary care-led service provided by Buckinghamshire Urgent Care (a combination of GPs, emergency care practitioners and some advanced care practitioner nurses). The MIIU went live on the 1 October 2012. There are very clear clinical pathways about patients who present who need ongoing care or treatment which cannot be provided from the unit. Treatment is carried out for minor injuries, minor illnesses and injuries which might require some sort of same day intervention. There is also access to radiology services. If the issue cannot be resolved within the unit or more specialist care or provision to manage injury or illness is required, the appropriate referral will be made. Information and advice is also given about where patients can access healthcare advice and services in the future. The number of patients going to the MIU is about what was predicted. There is not much overnight service activity which might be expected for urgent care patients but the service is still being maintained. Approximately 20% of patients are being redirected to other less urgent services.

For patients who might need a same or next day assessment, there is a new multi-disciplinary day assessment service which is delivered by a consultant geriatrician who can see between six-eight patients a day. Negotiation has taken place with patient transport services for a dedicated vehicle to enable patients to get to and from this service. The idea is that a patient comes into the unit, has an assessment, diagnosis and some intervention and then they are discharged on the same day. There is also a step down ward at Wycombe for patients who are not quite ready to go home but don't need that level of care but can be discharged from an acute ward.

Any other emergency services that are required are now being delivered from the A&E department in Stoke Mandeville. The A&E department has been redeveloping into a much larger 20 bedded area - the Clinical Decisions Unit.

A newly build surgical floor has in-patient beds and a dedicated surgical assessment unit. If patients are referred by their GP or come to A&E and need a surgical assessment they are managed in that unit and can be admitted, discharged with no further care back to the GP or admitted to a ward.

A working group was co-ordinated by the Director for property services to discuss how transport provision across the county can be improved to reflect the changing pattern of where emergency services will be delivered. Discussions have also taken place with Arriva about improving some of the bus provision across the county (new routes and frequency). A leaflet with further information can be circulated to Board members.

Action: Tehmeena Ajmal / Sharon Griffin

Protracted discussions have taken place around planning permission for parking a multi storey car park on the Stoke Hospital site.

In October the Community Transport Hub was launched. The hub was developed by Bucks Healthcare Trust, Community Impact Bucks and the County Council. The Hub is a one stop shop able to give transport advice to and from the hospital i.e. Dial a Ride, Community car schemes etc to community car schemes if you need access to a vehicle quickly. Since January almost 1000 calls have been received.

Transport has also been raised as an area of concern. A hospital has relatively little influence over the provision of transport. Discussions have taken place with the Patient Transport Service, to understand the capacity and changes of the patterns of attendance for patients. In terms of patient transport service, theoretically they should be relatively little change because all of the out-patient work is remaining where it

was.

During the update the following questions were asked and points made;

Concern was expressed about the waiting times for in the gastro and rheumatology department for infusions. Would a day case be classed as an in-patient? An in-patient would normally be someone who has a stay of 24 hours or more. If an individual comes in as a day case, they should be managed in the day unit. The intention is the patient comes in, is treated and goes home.

The pressure round the rheumatology day cases would not have been generated by Better Healthcare in Bucks as all of the out-patient services on both sites have remained unchanged. In Wycombe there is now a dedicated suite for infusions. Concern about the waiting times for treatment following a referral will be flagged up with the unit.

Action: Tehmeena Ajmal

What procedures are in place for ambulance crews to decide which hospital a patient should be taken to for example Milton Keynes seems to be the hospital where residents of the North of the county are taken to? If there is a 999 call and the person the ambulance crew are presented with is in a life threatening condition, the patient will be taken to the nearest hospital i.e. in the north, if it is quicker to get to Milton Keynes they will take the patient there. If the situation is not life threatening, theoretically the patient should be able to request their hospital of choice. The ambulance crew also factor in how long the queue is at the hospitals.

How many GP surgeries are aware of the Community Transport Hub as this was not suggested during a recent call to a local surgery. The Red Cross were also not aware of the Community Transport Hub. There are still issues around the dissemination of information. The understanding is that

The PCT sent information to all the surgeries, libraries, schools etc. The lack of awareness will be feedback.

Action: Tehmeena Ajmal

Improvements are being made via Better Healthcare in Bucks but a large amount of nurse and staff time is being taken up trying to contact and arrange patient transport service. It appears that a patient needs to have strong reason to be able to get transport. Theoretically there is a set of criteria that are applied to establish whether a patient is eligible for transport. There are two types of transport; planned transport where the patient knows well in advance they have an appointment – this type of transport is relatively easy to manage. Often the challenge is arranging transport for the same or

	<p>next day. New patients then have to be ‘dropped’ into the existing list of journeys. The South Central Ambulance Service are working with the PCT to look at the transport they currently deliver in Buckinghamshire and how best they can deliver that and organise their services going forward.</p> <p>What mechanisms and processes are in place to oversee the new healthcare arrangements? Within the hospital there are five meetings a day to discuss issues such as admissions, discharges and bed management in the hospital, patients needing community support, engagement with Social Services. A&E admissions are reviewed on a daily basis i.e. care pathways, what needs to happen, and when more staff are likely to be needed to cover increased activity. Waiting times for patients in A&E is extremely closely monitored.</p> <p>The new clinical decision unit will enable patients in the department to be managed more appropriately. The decision can be made whether a patient needs to be treated and discharged, kept in for a few hours or transferred to a short stay ward or acute ward.</p> <p>The new 111 number is coming on line on 1st April; will that help with the decision making? If someone phones 111 they should be advised whether they can get the care they need from Wycombe or if they need to go to Stoke Mandeville. The concern is that people will call the 111 for information. The 111 service uses a particular process of questions. If the caller mentions anything that suggests there might be in a life threatening condition and ambulance will be dispatched. There is a bit of refinement to be done.</p> <p>One of the comments received from members of the Older People's Partnership Board was that the additional number alongside 999 is going to create more confusion especially for older people as their natural reaction is to ring 999. The key is making the right use of the right number and education of this through awareness. The launch of the 111 service has been nationally managed which includes local as well as national publicity.</p> <p>The Chairman thanked Ms Ajmal for her very informative update.</p>
<p>5</p>	<p>Carers Strategy</p> <p>This item was deferred to the next meeting.</p>
<p>6</p>	<p>National Benefits update (standing item)</p>

Elaine Norris gave the following update on National Benefits;

- At the January meeting the DWP was about to launch personal independence payment (PIP) on the DWP web site.
- The pilot scheme in the north-west of England is on schedule to start on 8 April. From June 2013 any new claims will be for PIP as oppose to Disability Living Allowance (DLA). From October it will only be rising 16s who will be reassessed on PIP and then anybody who reports a change in condition and after that will be a rolling basis. If an individual is claiming DLA before they are 65 prior to the 8 April 2013, DLA will be retained.
- All current DLA claimants will have received some information about PIP in their up-rating notices. Feedback received was that the letter was too lengthy. The basic information is that claimants who are currently receiving DLA will be contacted well in advance when they'll be reviewed for PIP.
The assessment criteria and the guidance being used is available on the DWP web site. A link to be can be circulated with the minutes.

Action: Sharon Griffin

[Personal Independence Payment assessment guide for assessment providers - Publications - Inside Government - GOV.UK](#)

- Universal Credit is the next big change that will take place. The tool kit has just been launched and is also on the DWP website. The toolkit is not as in depth as the PIP one but there is a lot of information on who it is going to affect, how it affects people with children, people with disabilities and how housing will be paid etc.

<https://www.gov.uk/universal-credit-toolkit-for-partner-organisations>

- The DWP publish a monthly magazine (Touch Base) which can be subscribed to
- The DWP have taken the feedback from the consultation into account; hence the regulations are still in draft form, pending the controlled start.

During the update the following questions were raised;

Will there be a gradual changeover to Universal Credit?

Universal Credit will be introduced on a roll out basis, but by area rather than criteria. There will be a controlled start in a small area, where the most basic customer journey will be looked at. There is also a communications tool kit which covers all of the welfare reforms until 2017 in presentation form (i.e. benefit cap, housing benefits, child

	<p>maintenance etc).</p> <p>Is there a minimum income that the Government says benefits are made up to? There is a pension credit which gives you a minimum. There will also be a benefit cap. Short-term it is affecting people who live in London. In the longer term it will be national benefit cap of around £500 per couple (this includes all benefits and entitlements).</p> <p>The County Council has set up a Working Group to look at responding to the impact of the welfare benefits reform. What is their involvement in the process? Debi Game advised that Steve GoldenSmith took the lead on Working Group. A leaflet was produced which clarified 'jargon' etc. A copy of the leaflet is to be circulated with the minutes.</p> <p style="text-align: right;">Action: Sharon Griffin</p> <p>http://www.buckscc.gov.uk/bcc/community/benefits-changes.page</p>
<p>7</p>	<p>Dignity in Care (standing item)</p> <p>Christopher Reid gave the following update on Dignity In Care;</p> <p>It was National Dignity Day on the 1 February 2013. To coincide with this the County Council organised a local Dignity in Care event which was held at the Clare Foundation. There was a good turn out of care providers and a number of excellent presentations were given about the importance of dignity in practice. Care organisations were asked to nominate members of staff or their organisation against several categories for example the best Dignity in Care Champion and to produce video clips of their examples of Dignity in Care. The event ended with the presentation of awards from Patricia Birchley, Cabinet Member for Health and Wellbeing</p> <p>The action plan is going back to the Adult and Family Wellbeing Board for approval.</p>
<p>8</p>	<p>PSDPB Action Plan</p> <p>The Action Plan will be circulated with the minutes.</p> <p style="text-align: right;">Action: Chris Reid/Sharon Griffin</p>
<p>9</p>	<p>Any Other Business</p> <p>Sue Brooks explained that there are currently a lot of reforms taking</p>

	<p>place in the field of special educational needs, children and young people.</p> <p>As part of the reforms the Local Authority has to publish a local offer – a directory of all the services available for young people with disabilities (education, health, social care). Some of the items discussed today such as sports provision and the community transport hub should potentially go into a local offer as they would be relevant for 18-25 year olds.</p> <p>Amy Moore is to be contacted to clarify whether the person who is responsible for the development and publication of the local offer links in with the PSDPB in terms of any information required from the Board to make sure relevant services are included in the local offer.</p> <p style="text-align: right;">Action: Sue Brooks</p>
<p>10</p>	<p>Date of the Next Meeting</p> <p>The next meeting of the Board will take place on Thursday 30 May 2013, 10.30am, Seminar Room 1, Green Park, Aston Clinton.</p>

Chairman

Carers Support service

Results of Consultation to Develop Services to Support Carers

May 2013

Carers Support Service

Outcomes of Consultation to Develop Services to Support Carers in Buckinghamshire

Introduction

Buckinghamshire County Council consulted with local carers on new proposals for services to support carers in Buckinghamshire. The consultation was concluded on 15 March 2013, the consultation was carried out through an online questionnaire, paper questionnaire and consultation event with carers.

The outcomes of the consultation are set out below

Consultation outcomes

The consultation event gave us the opportunity to hear the views of local carers, listen to their experiences, hear their priorities and take back their view on the proposals.

The questionnaire used a variety of question styles, these included giving carers options, asking for the views and experiences, free text questions and questions asking carers to rank priorities and services.

Questionnaire Response

In total we had 113 responses to the consultation questionnaire. A break down of those who responded is as follows

Completing the questionnaire	Number of Responses
I am a carer	99

I have received a carers service in the past	6
I am an employee of Adult and Family Wellbeing at Buckinghamshire County Council	1
I am an employee of a partner organisation	7

Question 1

Question 1 asked respondents of the question to tick from a list of services that they had accessed from Carers Bucks. The table below sets out the 5 most accessed services in rank order.

Rank Position	Service
1.	Information and Advice
2.	Support Groups
3.	Training
4.	In Case of Emergency
5.	Emotional support

The question also gave the option for carers to state other services or support not listed that they had received from Carers Bucks, a sample of these responses are contained in the table below.

Additional services accessed from Carers Bucks

<i>One to one support in navigating complex decisions regarding my husbands care – putting me in touch with carers who had similar experiences</i>
<i>The benefits of Learning Carers Forum hosted by Carers Bucks</i>
<i>Support from Carers Bucks in accessing Health Funded breaks from my GP</i>

Question 2

Question 2 asked carers to rank the top 3 services that had been most beneficial to them as carers. The table below sets out the 5 services carers felt benefitted them the most.

Rank Position	Service
1.	Carers training
2.	Bursary funding
3.	Benefits advice
4.	Emotional support
5.	Supporting carers to access health funded breaks

The question also gave the option for carers to state other services or support not listed above but received from Carers Bucks that carers felt beneficial. A sample of responses is contained in the table below.

Additional services carers found most beneficial from Carers
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Bucks

I have returned to work with the support of Carers Bucks

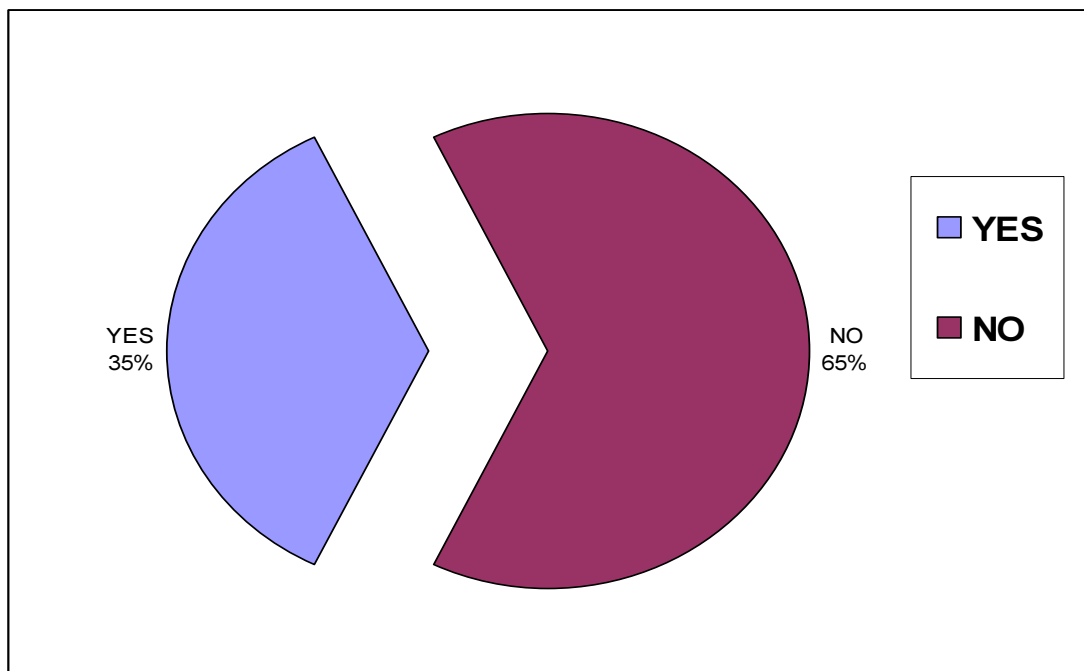
I have valued the Face book page

Question 3

Question 3 asked carers to indicate whether there was a service that would have supported them as carers but was not provided. The chart below sets out the responses.

65% of respondents felt that **No** services other than those available where required.

This is illustrated in chart below.



The question also gave the option for carers to state the services they felt would have been beneficial but not provided. A sample of responses is contained in the table below.

Services not currently offered
<i>Access to support out side of office hours</i>
<i>Help completing benefit forms</i>
<i>More support for carers across all of Buckinghamshire not just Aylesbury and High Wycombe.</i>

Question 4

The Proposal

Question 4 asks about support for the proposals set out in the consultation document.

The results are set out in the table below.

Level of support	Percentage results
Strongly Support	46.3%
Support	18.52%
Neither support or oppose	33.33 %
Oppose	0%
Strongly oppose	1.85%

A total of **65%** respondents support the proposal and only 1.85% of respondents showing any opposition to the proposals.

Question 5

Question 5 asked carers to prioritise funding to the list of 6 services. The table below sets out how carers ranked services for funding.

Rank Position	Service
1.	Advice and Information
2.	Support with emotional and physical health
3.	Supporting carers in crisis
4.	Developing the range of carers services
5.	Identification and early intervention
6.	Support planning and personalisation

Question 6

Improving identification of carers

Question 6 asked carers for their suggestions to improve the identification of carers in Buckinghamshire. Carers felt that the following two would be most beneficial.

Rank Position	Improve early identification
1.	GP recognises you as a carers

2.	More information on the services available for carers
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The question also allowed carers to offer suggestions. A sample is contained in the table below.

Other suggestions included
<i>Local news papers to have dedicated carers section</i>
<i>Need to work with Special Education departments</i>
<i>Reach out to Churches and places of worship</i>

Question 7

Transition

Question 7 asked carers to rank the services they felt young carers transitioning into adult caring roles would find most beneficial. The top three are listed in the table below.

Rank Position	Service
1.	Understanding the support available
2.	Help in understanding adult services
3.	Meeting other carers in the same position

Question 8

Technology

Question 8 asks carers about the advancements in technology and how they can be used to improve carer services.

The top three are listed in the table below.

Rank Position	Service
1.	A website with frequently asked questions and answers
2.	Fact sheets that you can download
3.	Electronic newsletters- with information on events help available

Question 9

Service operating hours

Question 9 asked carers if there was a need for the service to be open out of hours or weekends. **78%** of respondents felt **YES** there was a need for the service to be open out side of normal operating hours.

Some of the reasons stated
<i>Caring is 24/7</i>
<i>I am a working carer and cannot access current services</i>
<i>Some evening and weekend provision is needed</i>

Question 10

Improving accessibility

Question 10 was a free text question asking carers for suggestions on improving accessibility. Some of the key themes are listed in the table below.

Suggestions made
<i>Comprehensive website – BCC website too complicated and doesn't explain things to expect or where to go – not very user friendly</i>
<i>Free phone number</i>
<i>Need for services to be across all of Buckinghamshire especially at the very north and south of the county – we currently miss out</i>
<i>Need to understand the relationship between Carers Bucks and BCC</i>
<i>More local information</i>
<i>More support from GP's</i>
<i>Tailor the response to the carers – some carers can use technology others like me need face to face or telephone</i>

Question 11

Drop in service

Question 11 asked carers for their views on Drop in facilities. This was a free text question; some of the key themes are listed in the table below.

Responses
<i>Aylesbury and High Wycombe are not feasible for all Buckinghamshire residents – more local services, in local settings (GP surgeries, community centre &, churches)</i>
<i>More support in GP surgeries</i>
<i>Phone contact and one to one support currently available really excellent!</i>
<i>Drop in is too costly given the size of Buckinghamshire</i>
<i>Local support required</i>
<i>Drop in – not practical due to lengthy travel</i>
<i>Attendance would vary due to demands of caring</i>

Question 12



Question 12 asked carers if there was anything missing from the proposal. A sample of responses is contained in the table below.

Suggestions made
<i>Respite! Respite! Respite!</i>
<i>More acknowledgement for parent carers</i>
<i>Ensuring the excellent service received is continued</i>

Please ensure training continues

Look at ways of listening to carers

Key messages from the consultation

<u>Positive</u> 	<u>Negative</u> 
<p>Strong support for proposals – 65% in support</p> <p>Current service valued by carers.</p> <p>Support for funding priorities</p> <p>Carers health funded breaks – valued by local carers</p> <p>Support for extending scope of existing service</p> <p>Need to develop local carers services recognised and supported by carers</p>	<p>Carers need more help with understanding what services are available</p> <p>Need a more flexible service – more than 9-5</p> <p>Need to do more to support increasing number of very elderly carers</p> <p>Need for service to accessible across Buckinghamshire especially very north and south</p> <p>Not all services should be delivered in Aylesbury or</p>

<p>Carers training is valued</p> <p>Support to extend the use of technology to reach more carers is supported</p> <p>Carers support a county wide model.</p>	<p>High Wycombe</p> <p>GP's need to do more to support carers</p> <p>BCC website is not very good on informing carers</p>
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Next steps

The next steps in the process is to take the feedback gained through out this consultation and develop the model further, this will include writing detailed service specifications for the services we wish to commission in the future.

We have a group of carers that have committed to working with us on developing the service specifications and ensuring they are reflective of carers experiences and what they have told us.

PSDB Priorities 2012 – 2013 Action Plan (Updated 20/05/13)

PRIORITY	ACTION	LEAD AGENCY/SUB GROUP	PROGRESS UPDATE
Outcome 1: Helping people to speak up and to be active citizens			
1.1 That statutory organisations and 3 rd sector organisations are effectively assisting disabled people to make their views known effectively within engagement forums in Bucks	<ul style="list-style-type: none"> • Offer training to board members • ULO to offer and organise support for participation at meetings 	AFW training dept Bucks SUCO (Service User & Carer Organisation)	<ul style="list-style-type: none"> • OPPB training requirements provided to Exec Board in May • 20/05/13 - SUCO recruited further new members
1.2 That statutory organisations are fulfilling their Equality Duty requirements and are taking active action to address discrimination and inequality against disabled people	<ul style="list-style-type: none"> • To update the board on the Council's action against hate crime in Bucks • To update the board on how the Council is addressing its equalities duty • To update the board on how BHT is addressing its equalities duty 	A Sarchet, manager for cohesion & equalities A Sarchet, manager for cohesion & equalities Rep from BHT	<ul style="list-style-type: none"> • Report received November 12
1.3 That the priorities for disabled people are being addressed within the development and implementation of the Prevention Matters – building community capacity development programme	<ul style="list-style-type: none"> • Consult with members on proposed Prevention Matters model 	Diana Fentiman, project manager, S Goldensmith, senior joint commissioner	<ul style="list-style-type: none"> • Report received in May 12
Outcome 2: Supporting Carers			
2.1 That the joint carers commissioning strategy have a focus on carers of disabled people and disabled carers, including the identification of such carers and the accessibility of information for such carers	<ul style="list-style-type: none"> • Update and consult members on progress in implementing the carers strategy • Carer Bucks to update members on provision of information for carers 	Nadyia Ashraf, senior commissioner for carers & user engagement Stephen Archibald, CEO Carer Bucks	<ul style="list-style-type: none"> • On agenda for May 13
2.2 That the priorities for carers are being addressed within the development of integrated health and social care teams, including joint services for carers	<ul style="list-style-type: none"> • Consult with members on the development of the strategic business case for social care re-ablement services 	Helen McCloughry	<ul style="list-style-type: none"> • On agenda for July 13
Outcome 3: Day and employment opportunities			
3.1 That the priorities for disabled people and where 3 rd sector organisations have a role are addressed within the implementation of the modernisation of day services programme	<ul style="list-style-type: none"> • Consult with members on the implementation of the day services modernisation programme 	Bharti Quinn/ Linda Warimer, project leads	<ul style="list-style-type: none"> • Report received in May • Public bulletin issued in August • On agenda for May 13

3.2 That initiatives are undertaken to ensure disabled people are actively being assisted in work preparation and accessing employment	<ul style="list-style-type: none"> Consult with members on how current & future day services are doing this work 	Bharti Quinn/ Linda Warimer, project leads	<ul style="list-style-type: none"> On agenda for May 13
Outcome 4: Housing and support			
4.1 That there is a range of housing and supported living options available, including the offer of assistive technology, to meet the requirements of disabled people and those with long term neurological conditions in the county.	<ul style="list-style-type: none"> Consult with members on the work of Equipment and AT services 	A Willison, joint telecare commissioning manager, A Evans, contract & fund manager	<ul style="list-style-type: none"> On agenda for July 13
4.2 That nursing and residential care homes address fully the needs of disabled people through the provision of training and developing good practice around end of life care, palliative care & support for long term neurological conditions	<ul style="list-style-type: none"> Consult with members on the work of the joint care home team 	R Daly, team manager	
Outcome 5: Improving Health and Well-Being			
5.1 That the priorities for disabled people are addressed within the future commissioning of neurology and neuro-rehab services, including the development of long term stroke support services in the community	<ul style="list-style-type: none"> Consult with members on the review of neuro-rehab/neurology services 	C Reid, senior joint commissioner	<ul style="list-style-type: none"> Update for March 13
5.2 That the priorities for disabled people are addressed within the development of a single point of access to an integrated discharge process and the development of integrated re-enablement services to support discharge from hospital.	<ul style="list-style-type: none"> Consult with members on the development of the strategic business case for social care re-ablement services 	Helen McCloughry	<ul style="list-style-type: none"> On agenda for July 13
5.3 To advise and engage on the development of personal health budgets following the DH pilots ending in 2012			
5.4 That disabled people are given priority within the 'Five Ways to Well-Being' county-wide campaign 5.5	<ul style="list-style-type: none"> Consult with members on the Five Ways to Well-being campaign 	A Brett, public health principal	<ul style="list-style-type: none"> Report received in May 12

Outcome 6: Personalisation			
6.1 That initiatives on promoting and protecting safeguarding, including Dignity in Care, has a focus on achieving outcomes for disabled people	<ul style="list-style-type: none"> Consult with members on the national 'delivering dignity' report and the local dignity in care action plan Consult with members on progress in delivering safeguarding 	Maxine Foster, joint commissioning manager Gill Manning-Smith, service manager	<ul style="list-style-type: none"> Report received in September 12 OP Champions Forum to lead on DIC Champions work BSVAB annual report received in May 12
6.2 That disabled people have access to effective brokerage services and a social care market to buy services from using direct payments or individual budgets	<ul style="list-style-type: none"> Provide updates and get feedback from the board on implementation progress re brokerage services 	Natalie Fleming, brokerage service manager	<ul style="list-style-type: none"> On agenda for May 13
6.3 That statutory organisations have a strategy in place to support disabled people who may be disadvantaged by the impact of the planned welfare benefit reforms.	<ul style="list-style-type: none"> Consult with members on the work of the welfare benefits working group 	D Henry, policy officer	<ul style="list-style-type: none"> Standing agenda item

