

Adults and Communities Involvement Board

Tuesday 19 September 2017 2-4.30pm Committee Room 1, Hendon Town Hall, The Burroughs, Hendon

Minutes of the meeting Present: Hamid O'Toole Resident Representative (Learning Disabilities) Nicola Saunders Resident Representative (Learning Disabilities) Peter Sartori Resident Representative (Mental Health) Emma Chisholm Resident Representative (Mental Health) Ulla Chisholm Resident Representative (Carers) Resident Representative (Physical Disabilities) Maria Nash Janice Tausig Resident Representative (Older Adults) Resident Representative (Older Adults) Peter Cragg Resident Representative (Older Adults) Melvin Gamp Andrew Goodwin Resident Representative (Sensory Impairment) Sandra Turner Resident Representative (Sensory Impairment) Carole Dukes Engagement Co-ordinator, Mencap Lisa Robbins Healthwatch Barnet Director, Adults and Communities, Barnet Council Mathew Kendall James Mass Assistant Director, Adults and Communities, Barnet Council Ella Goschalk Engagement Lead, Adults and Communities, Barnet Council Prevention and Wellbeing Manager, Adults and Sarah Perrin Communities, Barnet Council Assistant Director, Joint Commissioning Unit **Catherine Searle** Meeting supported by: Amy Stainton Business Support Assistant, Customer Care, Adults and Communities, Barnet Council

	Welcome, introductions and apologies
	Mathew Kendall welcomed everyone to the Board.
	Mathew advised the Board that Emily Bowler, Head of Communications and
	Customer Care, Adults and Communities is on a secondment and will be coming
	back to Adults and Communities in September 2018.
2	Agreeing minutes and matters arising
	Everyone agreed the minutes from 15 June were accurate.
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	Mathew Kendal discussed outstanding actions from the last meeting:



	Peter Cragg mentioned that he was unhappy that the action around the dementia working group was closed. He felt that the group were waiting on a report of the implementation of their project on how it was working from a public point of view.
	Mathew informed that there has been a changeover of staff within the Clinical Commissioning Group and that it may have been lost in the handover.
	Action: Peter to talk to Catherine to find out more on how the changes are working from a public point of view.
	 Hospital discharge group have given in initial ideas about the scope of what the group will cover. It has not started yet; Ella is working closely with Catherine to make sure that the right professionals are involved within the group.
	Janice Tausig questioned that she felt that the Involvement Board should be involved in these conversations so the Board is aware of the delay and reasoning as Hospital discharge group is very important.
	Action: Ella to send around an update of the Hospital discharge working group.
3a	Working group updates
	Ella Goschalk began by giving an update of the working groups over the past year and the achievements from each group
	For more detail please see slides used in the meeting.
	Equipment and telecare was a positive working group. The group worked with Argenti, the new telecare provider for Adults and Communities, Barnet Council. Together they looked at promotional materials, what new telecare services give out and what worries people have. Argenti felt the group was so successful they want to set up an ongoing group.
	Members of the Involvement Board were worried about how residents of Barnet will hear about the change of provider and how the provider will be monitored.
	Mathew Kendall explained that the council works closely with the provider to make sure they deliver what is asked of them. This is done by regular meetings, feedback from service users and looking at the complaints. The council will take actions if the provider is not matching the requirements and as a last resort the council can end the contract before time is up.
	Maria Nash raised a thought that most people are reluctant to complain and won't say anything until it is too late. When asking for feedback the council should not put complaints and compliments together and make a complaint seem positive and helpful.
	Ella proceeded to discuss End of life care working group. The group has met twice; the first group was a broad conversation about different aspects of end of life care, where the second group narrowed down topics. The working group will be closely run with the help of the Clinical Commissioning Group to make sure the outcomes



are achievable. The next two sessions are planned to take place in October and November.

Janice Tausig said that the Sustainable and Transformation Partnership (STP) are currently looking at end of life care plan. It would be good if this working group can closely work with them.

Ella went on to explain that it was agreed that the End of life working group would have a 6 month review. There was a discussion about whether 6 months was too long for a review. Mathew reminded the Board that it is up to each working group to decide when they would like a review, or how often they meet.

There are no rules around how working groups operate, but if a group would like support for an outcome they would need a member from the council or Clinical Commissioning Group to join.

There was a discussion about how people feel in terms of being involved in the Board and the working groups.

Action: Ella to set up a review session with members of the Involvement Board to discuss how they have found being a representative at the Involvement Board meetings and how to improve the Board.

Mathew added that the Involvement Board will get an update every meeting of the working groups and an update of the process after every working group and that the Board can contribute as much as they would like throughout the process.

Ella moved the conversation on to talking about the 'Making services accessible to everyone' working group. This group went well with the outcome of a guide that will be sent to different providers.

Action: Ella to circulate 'Making Services Accessible' guide to the Board when complete.

Andrew Goodwin questioned if the Guide to good engagement was being used. He emphasised how important it was that the hard work of the groups is being used. Ella replied with that she is looking at spreading the guide more widely. The council do use the guide when organising working groups but she understands that the Guide to good engagement group aim was for the guide to be used throughout the borough.

The next group Ella spoke about was the Employment working group. Ulla Chisholm commented that it is important that this working group manages expectations.

The last working group Ella mentioned was on Autism. Ella said that she is aware that this group hasn't started yet However Ella said she is having successful conversations with people from the Clinical Commissiong Group on the new autism advisory service, and that the working group will involve looking at this service.

3b	Review of Involvement Board and Working Groups
	Ella Goschalk then showed the Board some more information about the working
	groups and the Involvement Board, including feedback from members.



For more detail, please see the slides used in the meeting.

Members of the Involvement Board emphasised the importance of knowing how work from the working groups were being implemented and making sure this is worth people's time.

Mathew Kendall also asked that members of the Board get involved in using products from the working group, and to feed this back to Ella.

Ella let the Board know that after each working group she creates a summary of what the group has discussed and sends around to the Board. Ella asked the Board how they would like to receive information on the different working groups.

Ulla Chisholm suggested that there could be a form for people to complete at the end of working groups. A few members of the Board suggested that different people from working groups should come and speak at the Involvement Board meetings as not all Board members are able to make the working groups. They also said it is important that the Board knows and look at what is recommended in working groups. James Mass confirmed that it was originally agreed that the Board would have oversight over all working groups but wouldn't have to sign off each recommendation.

Maria Nash said that she wanted the hard work from the working groups to be spread more widely within the community, to make others aware of what the groups, and the Involvement Board are doing.

Mathew concluded the conversation by saying that information goes up on the website, in the newsletter, Barnet First and the Health and Wellbeing report. He also said Adults and Communities often has conversations with a variety of residents, regardless of their age, to see how they can communicate better and give out information and advice. He then went on to confirm that the Board would discuss their purpose in a session they spoke about earlier. However he also felt there was an opportunity for the Board to have a session on how the council and Board communicate with each other.

Action: Ella to set up a session with members of the Involvement Board to discuss how the council and the Board should communicate and how the Board would like to receive information on working groups.

Action: All Involvement Board members to send Ella any questions or thoughts prior to the meeting.

4 Annual Summit

Mathew Kendal informed the Board that due to time they will skip the discussion on the Annual Summit.

Action: Involvement Board members to email Ella if they have any additional thoughts and feedback of the day, including suggestions for improvement.

Ulla Chisholm mentioned that it if people want a working group on a specific subject they should get them to be involved and come along to the Annual Summit so they



	can influence the decision.
	Peter Cragg added if people want to discuss something specific you should email Ella beforehand so she can put it on the agenda.
	Action: Involvement Board members to email Ella when they want something added to the agenda ahead of the meeting.
5	CCG update
	Mathew Kendal introduced Catherine Searle. Catherine recently joined the Joint Commissioning Unit as Interim Associate Director in the Summer.
	Catherine explained that she manages a joint commissioning unit of 13 staff that commission for both the Clinical Commissioning Group and adult social care. The joint commissioning team have been understaffed and Catherine is here to put a stronger plan in place. When the joint commissioning team plan ahead they are in a strong position to engage ahead of time, which will then make it easier to feedback to the Involvement Board.
	Catherine began by talking about the Dementia and information working group. Catherine advised that the commissioning group will continue to be involved with the sign off and will communicate with Alzheimer's Society to see how this can be taken forward. Peter Cragg referred to his previous comment he had made about the report from the Dementia and information working group.
	Action: Catherine to bring more information to the next meeting, about dementia and whether people can be involved on an ongoing basis.
	Next Catherine spoke about the End of life care working group. She advised there was a lot work of work being done all over North Central London. She is currently questioning some of the work that has come out from the level of the North Central London work and wants joint commissioning team to revisit as the team needs to make sure these changes are right for Barnet, for example employing end of life nurses.
	Action: Catherine to share further information with the Involvement Board.
	Mathew then said that the End of life care working group was very important to the Involvement Board and has been a struggle to get things moving. Catherine said she understood and is keen to get things progressing.
	Catherine moved the conversation on to discuss Hospital discharge working group. She began by saying she doesn't have as much information as she would like. The joint commissioning team are working with Age UK around hospital discharge, people having their assessment at home rather than the hospital. They have been some delays but recently there has been progress as they have talking to various providers. Catherine went on to say she would like the working group to have a Clinical Commissioning Group representative or lead, councillors, people from Age UK and members from the Involvement Board and People Bank The working group would look at discharge from an acute hospital and a mental health hospital
	Peter Cragg commented that it was also important to have all hospitals involved. All



three hospitals have something slightly different about them. He also said that there needs to be more communication on hospital discharge as people don't know anything about it.

Catherine mentioned the new 'red bag' project, being implemented in care homes. The bag will hold information about people for when they go suddenly into hospital, including various key documents, medical information and any previous discharge papers. Not all care homes will be part of the project but all care homes will get a list of what they can include, so they can choose to set it up themselves.

Andrew Goodwin raised that the bags should include standards of how to communicate with people who have any impairment. Peter Sartori mentioned that for mental health patients the red bag should include risk assessments.

Catherine then spoke about Finchley Memorial Hospital.

Sandra Turner raised the question of the empty space in the hospital that could be used for her support group meetings. Catherine answered with she was told that the Clinical Commissiong Group compared the cost of the rooms at Finchley Memorial Hospital with other rooms in the borough and found that it was affordable. Peter Cragg, Sandra Turner and Peter Sartori advised that they would be happy to share space as all groups are losing funding.

Peter Cragg went on to say that that he was invited to a group run by the Clinical Commissioning Group to review Finchley Memorial Hospital as it is not meeting its planning approval.

Action: Peter to speak to Catherine about the group and find out how to get involved.

Melvin questioned the use of the empty ward and GP surgery. Catherine responded with saying she doesn't have an update on the GP surgery but primary care are leading. The empty ward, Adams ward, is being redeveloped to become a discharge and assess ward. She wasn't sure who would run the ward, more than likely Central London Community Healthcare (CLCH).

Peter Cragg asked if Catherine knows of any information on which pharmacists are able to give out any medicine. He also asked when Catherine was leaving. Catherine responded by saying that they're prescribing pharmacist in Barnet and there are some in care homes but she wasn't sure about GP clinics.

Action: Catherine to provide update to next Board meeting.

Catherine then said that as interim post she thinks she will be here until beginning of next year.

Sandra Turner asked Catherine about what happens if people don't want to take conventional medicine, and what is free for people on benefits

Action: Catherine to look into what options are there for people on benefits who don't want to take conventional medicine and feedback to Board.



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	Lastly Catherine mentioned that STP have put a proposal in for extra funding for engagement. If funding is approved they will be looking to appoint an engagement manager who will work across North London level, not just Barnet. It would be really good if these groups can feed into the STP engagement groups.
6	Resident representative roles
	Mathew briefly spoke that due to illness and unavailability that Adults and Communities are currently recruiting three new members for the Involvement Board. To represent carers, physical disability and autism. We have had a few responses, the closing date is Monday 2 October.
7	People Bank update
	 Amy Stainton gave an update on People Bank. In March 2017 we had 122 members, and now we have 162 members. We are continuing to work on increasing the numbers because we want to make sure as many people's voices can be heard as possible. We are working on increasing numbers by: an article in Barnet Homes September magazine. This will go to roughly 15,000 people a letter to all our direct payment users, which is roughly 1000 people
	 reaching out to roughly 60 community and voluntary groups having a stall at the Provider Forum next week to reach people through residential and home care providers having a stall at Silver Sunday engaging with adult social care staff through our fortnightly briefings, internal emails and communications to reach more of our clients.
	She then went on to say that in their packs there are the new People Bank forms and gave thanks to all Board members who came back with changes. She asked if the Board could hand the forms to anyone they think might join. She also asked the Board if they know any ways to expand the People Bank.
	Action: Involvement Board members to email Ella Goschalk with any ideas of how we can expand People Bank.
	Peter Cragg mentioned that he keeps receiving emails from Engage Adults on a new forum Engage Barnet and is unsure what it is and would like to be removed. Andrew Goodwin also said that he was unsure what the forum was. Ella responded by briefly explaining that it was a new engagement forum that is a good way for the Involvement Board to be constantly engaging with Barnet Council.
	Action: Ella to send out more information on the new engagement forum and the Board to let Ella know if they are unsure on a communication from Engage Adults.
8	Items for future business
	Janice Tausig asked if the Board was interested in discussing affordable housing in Barnet, which is related to good health. Mathew Kendal summed up the conversation by saying Ella Goschalk will have a conversation with housing colleagues and will pull together information on the right sources on council planning.
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Action: Ella to investigate how people can get information and get involved
on housing