

**Personal Care Task Group Meeting
15th January 2010
St Sidwell's Centre**



	Actions
<p>Welcome, Intros and Apologies</p> <p>Present: Robin Corser-Langford (RCL) - Chair, Sarah Rowe (SR) - Carer Support Group, Nick Cape (NC) South Hams CVS, Catriona Widdows (CW) - LINK Devon</p> <p>Apologies: Caroline Lee (CL), George Alfred Husband (GAH), Liz Hitchins (LH), Jane Hansford (JH), Hilary Ackland (HA), Matthew Byrne (MB)</p>	
<p>2. Last months minutes</p> <p>RCL only one present from previous meeting – discussion adjourned until next month – 19th March</p> <p>Difficult to understand minutes with initials and no names against them. Not easy to understand acronyms – e.g. CQC Would like the minutes to hang together better</p>	<p>Add names to initials in all minutes and update previous minutes.</p> <p>Create a glossary of terms for terms within minutes</p> <p>CW to forward previous minutes by post to RCL</p> <p>CW to talk to CL regarding expanding last month's minutes</p>
<p>3. Group Discussion</p> <p>NC Terms of reference pose an issue with low numbers – due to numbers this meeting and previous meeting not quorum</p> <p>RCL Do member want to continue? Value for money: travel, room hire etc.</p> <p>SR 2 meetings with a single chair? Different meetings with people from the geographical area so can topic to particular area and not lose touch with the other areas. Not sure what we're progressing towards at present.</p> <p>RCL what happens when LINK funding runs out? Need to be focused on what we're doing to ensure make a difference.</p> <p>RCL 6 month meetings? What happens after this? SR Need more clarity about the group.</p>	<p>Check members wish to continue with the group as numbers appear to be gradually dwindling</p> <p>Add email address option to attendance list.</p> <p>CW to refer questions to Caroline Lee</p>

SR - Key issues we put forward results in acknowledgement and agreement that they know the issues exist but no progress
a. Getting people to rural areas
b. When we do get there need to ensure they are reliable – reliability comes from checking on firms and making sure they are providing the care correctly. Whoever is commissioning needs to be involved. Providers need to be kept in check

RCL need to be able to approach people to report what's going wrong.

SR – also concerned about people living on their own. How do you know if someone has been in to see them?

NC – Sense of meetings going round in circles. People in meetings different each time. **CL** getting people to join in but this seems to change the dynamic of the group constantly – sense of the group starting again each time. Should it be the group or **CL** inviting people to the meeting?
Invite key people to meetings to ensure the group moves forward. To give evidence etc to support the issues being addressed. **SR** Need to get to know each other. **NC** Putting it to the group as a proposal. We are not quorum at present. This is a proposal for the rest of the group to discuss/agree.

Suggestion: a closed group with the people already involved.

RCL possibly need to find out if members of this group would like to attend the Strategic Planning Group (SPG) meeting as a Personal Care Task Group representative.

RCL Happy to become chair. **NC** also interested. Possibility of Chair and vice chair. **SR** Could be a good idea is group splits into North and South.

NC Terms of Reference (ToR) originally given as a complete document but group felt not yet ready. More of a discussion group at that stage.

CW - **CL** aware of this and looking to ensure this freer stage built into the process to ensure the group can focus before evolving into a Task Group.

NC Perhaps the group is still in a focus group stage? Could this be discussed in the next meeting

RCL Suggested getting hold of the Gloucester LINKs ToR's to assist the PC Group in moving forward.

NC Group began with one issue then, as others joined, the focus moved to other things and the initial seems to be getting lost.

CW Group to be contacted and suggestions put forward for discussion at next meeting.

Ask the group in advance of the next meeting on the 19th March. Include explanation of SPG Meetings and expectations.

CW to discuss with **CL** and relay suggestion to the Personal Care Group

SR Original issue: Problems with caring and providing care to rural areas. How can we improve this? Suggested a hub system in villages where all the care packages are run within a very small area. Could provide work locally, opening employment for local people, give more contact for those in need of care. Need an office with 24 hour contact ideally. One idea the group discussed. The core focus was never really defined, however, making it easy to lose where the group is going.

SR Still problem focused. Need to be solution focused. Perhaps someone not directly involved better as chair and vice chair to be objective and pull out key aspects.

SR Have also spoken about lack of training and career prospects for carers.

Need to look at is a whole. Need more cohesion amongst the agencies too

NC concern is the problems with people getting care I their homes. Not nurses or volunteer befrienders but agencies and private care agencies. Washing dressing, eating, home management etc. Have met commissioners who agreed the problems existed but said difficult to address them. **MB** explained also aware of the issues.

Where do we go from here?
So many issues overlapping

NC Choose an area where there is a problem and do a pilot project there. Last months minutes appear to be reverting back to looking a parish plans etc. Could be look, therefore, at doing one or two pilot projects? **SR** Brixton? **NC** Moving away from Parish plans and looking at the whole provision of personal care? Pick a pilot project and try it. Take lessons from it that can be rolled out across Devon.

NC Befriending still an issue raised regularly. Happy to talk to people about Befriending as they have 4 befriending schemes and looking to add 2 more in the next year. Potential for a Befriending sub group?

SR Definition of personal care is still a grey area. Where does nursing care end and personal care begin? The qualification process is very limited. **NC** Look at the criteria used to assess health and social care needs. Currently assessed using a form. Perhaps the group could look at this area with a view to making a recommendation?

CW to put proposals to the rest of the group (by email and written correspondence) in advance of the next meeting as this meeting is not quorate. Add to next months agenda?

Potential for a befriending sub group to be discussed at next meeting?

CW to ask **Lorna Davis** (LINK Devon) about access to Assessment criteria for nursing care and personal care.

<p>RCL Groups got together to discuss the criteria police used to assess people (under the influence e.g.) and made recommendation that eventually led to changes in the criteria used to assess members of the public.</p> <p>Summary of proposals:</p> <ol style="list-style-type: none"> 1. Drawing back to original group focus 2. Pilots in Devon 3. Definition of Personal Care 4. Assessment criteria 5. Creation of a befriending sub group 	
<p>6. A.O.B</p> <p>SR please forward details by mail or call with information to ensure included in correspondence.</p> <p>NC/SR/RCL look at planning guest speakers for the group to ensure the process is smooth and moves in a productive direction. Ensure lots of guest speakers not all attending one meeting.</p> <p>SR Wendy Lloyd from North Devon was a valuable participant in the first meeting.</p>	<p>Put idea to the rest of the group</p> <p>CW to contact Wendy Lloyd to request attends a future meeting.</p>
<p>7. Date and venue for next meeting</p> <p>19 March 12.00 - 1.30pm St Sidwell's 23 April 11.30 - 1.00pm</p> <p>RCL Can we book more meeting for May, June, July?</p> <p>Is it possible to adjust the meeting time to 12 – 1.30 to enable NC to be there for the full meeting?</p>	<p>CW to email the group next week with full details and questions form this meeting</p> <p>CW to discuss with CL. <i>Meet-O-Matic</i> facility an option to ensure all members can attend,</p>