

# **Older People's Providers Network**

**Time:** 2.30 pm to 4.30 pm, Tuesday 21 January 2020 **Venue:** The Reed centre, Octavia, 28 Convent Gardens W11 1NJ

## **Notes and feedback**

1	Welcome and introductions by chair Reena Mukherji (RM), Octavia	Actions
	Foundation	
	Round of introduction and review of the agenda for the day.	
2	Minutes of the last meeting and actions arising	
	The minutes of the last meeting were circulated and approved.	
	Actions pending were as follows	
	<ul> <li>KCSC agreed to collect all the case studies sent and collate them to</li> </ul>	
	send to Adult Social Care (ASC) on behalf of the OPPN. No case	
	studies were received but the offer to collect case studies is always open.	
	• A session on Primary Care Networks (PCN) could be useful for a	
	future session. Attendees agreed. A similar presentation was	
	scheduled for the Health and Wellbeing forum on the 28 of January so this item will be presented in April.	
	KCSC will take the feedback from 'Meals on Wheels' users to the	
	Council on behalf of the network. No feedback received but again	
	this is an open offer, if you hear anything of concern for your users,	
	just send it via email to sylvia@kcsc.org.uk and we will collate and	
	share appropriately.	
	• Aisling raised the need for some Equality Impact Assessment training	
	for local staff. Aisling will undertake to do one and will let the	
	network know about it when ready.	
3	Adult social care personalisation – digital work - Victoria Swann (VS),	
	Personalisation Programme Officer for the Bi-Borough and Phoebe Carpenter	
	(PC)	
	See <u>here the personalisation presentation</u>	
	VS presented on the new Care Information Exchange (CIE) pilot. The	
	CIE is meant to give patients better control over and better access to	
	their medical information. The Adult Social Care (ASC) team has been	
	gathering information for the past 6 months and is now ready to	
	integrate more providers as well as trying to make the platform more	
	accessible and more user friendly as for now all the information has	
	to be inputted manually. The process should be shortened and help	
	with hospital administration and follow up time. Any patients from	
	the hospital that have signed up have access to it. They can choose	
	who has access to their date. They can also opt-out of the service.	

	<ul> <li>VS then told the network about the recent progress around Direct payments. She explained the uptake of the service had been low in both RBKC and Westminster and they were reviewing the service and looking into why that might be. The ASC team now has a new strategy in place including a number of events, trainings and focus groups to figure out how to improve the offer and interest in the bi-borough.</li> <li>The strategy is being finalised and VS will share it with the network when it is published. One of the elements the strategy will have to deal with is capacity as a lot of social workers have asked for extra support to deal with the added workload of promoting Direct payment on top of their regular case duties.</li> <li>PC presented on the work the ASC team was undergoing around Market Shaping. They are currently gathering a list of non-commissioned services and will contact KCSC when they are ready to receive more information as KCSC Self care service directory contains lots of activities that are not commissioned or commissioned by other funders.</li> </ul>	VS PC
4	Interactive session on transport (affordability, accessibility, reliability)- Sylvia Nissim (SN), KCSC	
	recently in particular with the criteria for access. SN ran a short interactive session to gather and share the information available on the transport service available for Older people in the borough. We asked: 1) What transport services do you use? 2) Any barriers you have encountered with those services or lack thereof. 3) Any news about changing criteria you have heard.	
	<ul> <li>Here's a summary of the information collected:</li> <li>Westway CT <ul> <li>Older and disabled residents living in the Royal Borough of Kensington &amp; Chelsea (RBKC) can choose from a range of options to help you get out and about for free. The service is open to anybody who needs it and fully funded.</li> <li>Westway CT is volunteer led and there is not always enough capacity to cover the rides. They also cannot confirm if they can cover a ride more than 48 hours before the appointment. However, the volunteers are highly trained including in safe handling practices and safeguarding for vulnerable and older adults.</li> </ul> </li> </ul>	
	<ul> <li><u>Dial a ride</u> <ul> <li>This is a TFL service that is available to registered users and freely available but advance booking is advised.</li> <li>This service can be costly and is not always reliable in terms of timing.</li> </ul> </li> </ul>	

### • TFL public transport

a.	Regular paid for busses and underground services. The DLR in East
	London is fully accessible as opposed to a lot of the other underground
	stations. The maps available have been updated with access available
	made clear. TFL also implemented a 'Please offer me your seat' badge
	for disabled people and those with invisible impairments.

b. Not always easy to access for people who are frail or have mobility issues. Bus riders have been known not to lower the ramp for Older people with walker or Zimmerframe.

#### • <u>MyCareMyWay</u> (MCMW)

a.	The service is for any service users registered through their GPs offers
	free transport for appointments. MCMW also offers escorting services
	provided by <u>Age UK</u> and <u>MSH</u> .

b. The transport service is limited to 10 free rides delivered by Westway CT per patient.

#### • Hospital transport

- a. Often the costs are added to the price of care.
- Taxis card

#### Uber mobility

a. Uber mobility has an app as well but there are fewer vehicle available so the wait is often longer.

Other barriers reported included:

- Difficulty in finding the right information.
- The need for a mobile phone to use some of those services when not all older people have one or use it regularly.
- Waiting for the ride can be difficult for some users especially if the wait is long.
- Referral process can be limiting (registration form).
- Some drivers are not trained properly in safe handling practices.

5	Older People Hubs, Neil Colquhoun (NC), Strategic Commissioner, Bi-Borough	
	Integrated Commissioning	
	See <u>here the Older People Hubs presentation</u>	
	NC presented on the ASC/ Public Health commissioning objectives in	
	RBKC and WCC.	

	•	He did an overview of the services commissioned and underlined the	
		fact that they wanted to keep long term funding rather than short	
		project and current services at the same level even thought the	
		funding form the Central London CCG had gone down.	
	•	NC also explained they were undergoing a review of all the services	
		they funded and said he would share the result of the review with	
		this network when ready. He also shared some of the feedback	NC
		already collected and asked the room about their comments. LCAT	
		reported that it would be good to embed some prevention into the	
		community services and as well as help bridge the emotional and	
		mental health support need particularly around outreach.	
	•	NC finished by introducing what they call Hubs+. They are looking to	
		reach out to users and patient that fall between the offer at the	
		moment as most users at the hubs are 50-65 and most users at day	
		centres are over 75. There must be a way to reach out to the 65-75	
		before they need the day centres and help them stay healthy.	
		Members of the network suggested transport might be an issue as	
		well as mobility in general that can deteriorate.	
		<ul> <li>One attendee suggested using the community champions</li> </ul>	
		programme to reach out door to door and maybe add a	
		question around 'What could help you access services?' in their	
		usual questionnaire. NC said he would look into it.	
		<ul> <li>Another attendee suggested services available for carers as</li> </ul>	NC
		well as Older people could help particularly if they were	
		offered at the same time.	
		<ul> <li>Another participant asked about the North Kensington User</li> </ul>	
		and if data had been collected for that particular cohort as they	
		felt there was a lot of distrust in public institution. They did say	
		the hubs were easier as they are seen as delivered by local	
		charities and not necessarily as council funded activities.	
		<ul> <li>NC said he was happy to receive feedback and for participants</li> </ul>	
		to email him on <u>Neil.Colquhoun@rbkc.gov.uk</u> .	
		to chian him on <u>iten.coiquitoun@rbkc.gov.uk</u> .	
6	Key o	ganisational changes, events and important information sharing	
	-	sked the room for updates and events from the providers.	
	• (	Green doctors now offer free home visits to RBKC residents to help them	
	e	evaluate their home efficiency, help them with switching suppliers and	
	r	educing their bills. They also offer workshops for local orgs where they	
	C	come and present their offer to your users. If interested please contact	
	<u>f</u>	lorencia.nannetti@groundwork.org.uk.	
	• 4	ADKC has a Direct payment (DP) service that is open to all over 18 not	
	j	ust for members of ADKC. Jenny also mentioned RBKC's plans to	
	r	nembers of the Personal Budget (PB) user group and although it was	
	a	greed that it was good to have a number of options for people to get	

	info, we have agreed to try to advertise more widely to ensure that	
	there is still knowledge of an independent advice service!	
	Open Age has a new Winter programme of activities available here	
	https://www.openage.org.uk/activities. Please note we are in the process of	
	removing the autumn programmes, the current programmes are the winter	
	programmes. Hervé Bessières is happy to answer any question at	
	HBessieres@openage.org.uk.	
7	Date of the next meeting	
7	<ul> <li>Date of the next meeting</li> <li>5 May 2020, 2:30pm – 5pm, the Reed centre, Octavia, W11 1NJ</li> </ul>	
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