Minutes of Sutton Carers Forum  
Wednesday 25th September 2019  
12:00pm – 2:00pm at Sutton College, St Nicholas Way, Sutton, SM1 1EA  

Ken Fish (Co-Chair)  
Rachael Macleod - (CEO SCC)  
Bradley Coupar (Smart Place Project Manager)  
Jane Pettifer, (Assistant Director of Quality/Nursing – People)  
Lynne Brown, (Acting Head of Service: Carshalton Locality, Hospitals and Reablement)  
Robert Varney (Public Affairs Officer and TFL Charities Scheme Manager)  
Karen Page (Adult Carers Service Manager)  
Victoria Bastock (Temp. Carers Forum Admin)  
Jessica Appleby (Office Manager)  
Cllr. Marlene Heron  
Cllr. Chris Williams  
Marilynne Burbage  
Derek Yeo  
Derek Copeman  
Mary Meldrum  
Geoff Roberts  
Naren Joshi  
Carole Harris  
Brenda Possell  
Brian Dear  
Frank Glass  
Angela Hanken  
Diane Tookey  
Mrs Bhagirthiben Kshatri  

Apologies to anyone who was present but is not named above; attendees were taken from the sign-in sheet. We would be grateful if people could ensure that they sign-in. Thank you.

1. Welcome, Apologies and Chair’s Announcements

1.1. Ken Fish, Chair for Sutton Carers Forum, welcomed everyone.

1.2. Welcome to the panel members and speakers: Bradley Coupar (Smart Place Project Manager), Jane Pettifer, (Assistant Director of Quality/Nursing – People), Lynne Brown, (Acting Head of Service: Carshalton Locality, Hospitals and Reablement), Robert Varney (Public Affairs Officer and TFL Charities Scheme Manager).

1.5. Apologies from Nick Nalladori.

2. Minutes from previous Sutton Carers Forum meeting and Matters Arising

2.1. Minutes of the Carers Forum Friday 14th June 2019. Marilynne Burbage to be added as present. Mary Meldrum’s name to be amended, due to a typo. Minutes approved.

2.2. Matters Arising; Ken Fish informed the meeting that there will be a slight adjustment to the Forum timings and that Bradley Coupar will now be presenting later after lunch before ‘Go Sutton’.

Ken elaborated on Social Prescribing and read out the following extract from a presentation by AGE UK SUTTON:-
‘As you will know, Age UK Sutton has recently been commissioned to deliver Sutton’s first Social Prescribing Service.

This service is a whole population offer for patients over the age of 18 – Age UK Sutton is delivering it as we have the experience and capability to do so – we ran the ‘micropilot’ with Bob Calvery (Roundshaw Practice) last year, and deliver services that are heavily aligned to SP already.

The service won’t be Age UK Sutton branded – but we want you to know we are the people running it!

The workers will be Age UK Sutton’s employees, and managed by us, but fully integrated into the MDT structure (clinical supervision provided by Sutton Carers Centre – please see below).

This service provides two specialist Link workers who are a part of the new MDT for patients frequently presenting at primary care. A cohort of around 500 patients has been identified as potential candidates for this support. They have been stratified based on complexity of need and regular attendance at primary care, using data from Emis.

Any member of the MDT can propose a patient to be discussed.

SP candidates are essentially people presenting at primary care with a non-medical issue that could be supported elsewhere in the community.

Lynne Brown explained how social prescribing is for regular visitors to the doctor who have conditions that are not wholly medical.

Sutton Carers Centre will be providing the clinical supervision for the Link Workers, to ensure they have adequate support; this also will ensure professional input regarding Carers’ issues, as well.

3. **NHS Continuing Healthcare**

3.1 Jane introduced herself as the Assistant Director of Quality/Nursing – People. She explained that the ‘Quality’ in her title/role, refers to the care in nursing homes and is head of Continuing Care. Lynne Brown introduced herself as the Acting Head of Service for Carshalton Locality, Hospitals and Reablement, working within Sutton Health and Care at home. Lynne is the London Borough of Sutton representative and works closely with Jane, developing policies and protocols and managing operational issues. Lynne and Jane explained that they are happy to take questions away that they cannot answer today and come back with answers for people at a later date.
In October 2018 the National Framework for Continuing Healthcare was revised. Assessment is by the Multi-Disciplinary Team and they make a recommendation regarding the individual’s eligibility to receive Fully Funded NHS Continuing Health or Funded Nursing care or no eligibility for either. The CCG must then decide whether they agree with the MDT recommendation.

Fully-funded Nursing Care (FNC) is a funded payment of £168.06 paid to individuals in nursing homes, not residential homes. LB explained the difference between nursing and residential homes. Nursing homes manage nursing, all medication and Palliative (end of life) care. A nursing home is required to have registered nurses on duty at all times to oversee the nursing needs and provide skilled nursing care as and when required. JP and LB explain that they do not always place individuals in nursing homes and that it does depend on the individual needs of the person.

The Secretary of State for Health and Social Care set out in the National Framework for NHS Continuing Care, that within the MDT meeting, an individual that the MDT have allocated ‘one - priority’ or two - severe’ are deemed eligible to receive Fully Funded NHS Continuing Healthcare. For those individuals that MDT have allocated a mix of weightings, the MDT must apply the primary health test. The MDT look at the individuals needs in total and use the key descriptors:

- **nature** (overall effect of those needs on the individual and quality of care),
- **the intensity** (‘quantity’ and severity of the needs and care),
- **complexity** of needs present, interaction and skill required, and the
- **unpredictability** of the need (e.g. unpredictable healthcare need is likely to have either a fluctuating, unstable or rapidly deteriorating condition).

To be eligible, the MDT must identify that the needs match one of the descriptors, which will identify if the individual has a primary need for health. If this is not identified, then the MDT will identify if the individual is eligible to receive Funded Nursing care if placed in a nursing home.

LB and JP talk about what happens if you don’t have a primary need for healthcare.

Those individuals who need ongoing care/support who are not eligible for Fully Funded NHS Continuing Healthcare, are entitled to request an assessment for a package of support under the Care Act 2014. The Care Act states that at least one crucial health and social care Professional is involved in any processes. People dip in and out of funded care packages. An individual may be in privately funded care in the London Borough of Sutton and a healthcare need may be identified. A Social Worker may decide that they tip into a healthcare need that requires a care assessment.
Question: Is it London Borough of Sutton or CCG that are responsible for implementing the Continuing Healthcare Assessment process?

The CCG are responsible for implementing the National Framework in Sutton, with the London Borough of Sutton. A Continuing Healthcare assessment is usually triggered following the completion of the ‘Checklist Tool’ and this can be completed by the Social Worker or a health care professional. An individual can request an assessment via their GP, who would refer to the Community Nurses. A Checklist is normally completed when there has been a change in care needs and requires an increase in care package or move into a nursing home. Checklists were completed in hospital and this was identified as causing a delay in the discharge process and highlighted that a hospital is not the best place for this assessment to take place, as the individual is still recovering. Social workers, Continuing Care Coordinators, Discharge Coordinators, Physiotherapists and Occupational Therapists at St. Helier Hospital, work closely to identify the correct pathway for discharge, care packages and assessments, for eligibility to receive Fully Funded NHS Continuing Healthcare.

The assessment is holistic and the individual will be central to this process and it is open and transparent. LB and JP talk about how they will always attempt to involve the individual concerned wherever possible, as well as a family member or advocate. If necessary, an interpreter is organised. Prior to the assessment, consent is required and it is established whether Power of Attorney is in place for Health and Wellbeing. All the needs are discussed at the MDT Meeting, such as risk assessments, any care plans in place or specialist assessment reports. At the MDT meeting there will always be a Healthcare Professional. A Social Worker will be there on occasions when further discussion and challenges happen, once the recommendation regarding eligibility has been made. It is usually during the verification process, that the CCG is responsible for managing, to ensure that the assessment process was robust and undertaken in accordance with the National Framework. There are occasions when after further discussions, the original recommendation maybe overturned, but this always includes further discussion between the MDT members. Everyone in the MDT has individual responsibilities. It should not always be about money. It is about health care needs and in some cases a joint package of care is agreed. An example is in the nutritional domain. If an individual has weight loss and is taking over 30 minutes to eat a meal with assistance, then it is possible that a joint package would be agreed due to the length of time the task takes and all of the professional monitoring that is required.

The numbers of residents in the London Borough of Sutton that are eligible for Fully funded NHS Continuing Healthcare is high, when considered in relation to the population of adults aged over 18 years in Sutton. Last year a total of 625 were identified as eligible to receive Fully Funded NHS Continuing Healthcare. Sutton CCG spent a total of £19,945,979 on Continuing
Healthcare. This includes joint funding and Funded Nursing Care. A total of 643 people were entitled to receive Fully Funded NHS Continuing Healthcare this year. The highest cost packages are usually for ventilated individuals, complex care needs, high dependency and in some cases those who require 2 carers at all times and this can cost over £5,000 per week.

If an individual has a short life expectancy then they may be eligible for a ‘Fast Track Application’ and the decision regarding the use of this tool is made by a clinician, doctor or nurse. The tool is completed and submitted to the CCG for verification.

If the individual is eligible for Continuing Healthcare, the care (including end of life care) can be delivered;

- In the individuals home
- In a nursing home
- In a residential home
- Or, the individual can be supported using in-borough services

Nursing Home Fees – CCG
The CCG is part of a London CCG wide Any Qualified provider procurement for nursing home placements and domiciliary agency care with agreed rates, care specification and quality monitoring for commissioned services. The agreed weekly fee in Sutton that the CCG commissions with the nursing homes for a standard CHC placement is £868 per week. For AQP domiciliary agency commissioned care by the CCG there are three hourly rate tiers and the level is dependent on the care needs of the individual.

Funded Nursing Care - FNC
Most Nursing Homes in Sutton accept the set rate. There have been a few new homes that are a lot higher in price, so we would not place individuals in those homes. JP and LB explain that they negotiate with the homes, wherever possible. When someone is no longer entitled to fully-funded nursing care, the CCG will step in and pay it. Anyone identified is eligible.

Nursing Homes
If an individual has Dementia (for example), they would be placed in a nursing home, instead of residential. This is because they will need 24 hour nursing care. In a nursing home, they have a duty to provide enough care staff and nurses to meet individual care and nursing needs and are responsible for continually assessing those needs and providing them, 24 hours a day.

Residential Homes
Residential Homes provide 24 hour care. This is social care, not nursing care. There is a manager and Healthcare/ support staff, instead of nurses on every shift. If an individual requires injections or dressings then community nurses visit to provide this nursing care.

Previously, if an individual was in a Residential Home and the individual was eligible for Fully funded NHS Continuing Healthcare then it was normal for the individual to be moved to a nursing home. There is now a change and often the residential home will let the individual stay and be supported by community nursing and additional care commissioned by the CCG if eligible to receive Fully Funded NHS Continuing Healthcare, to support the individual to stay where they are. However, the ultimate decision as to whether the home will accept the care package, is still the manager of the home. The package will meet the individual needs of that person. Each case is different. CCG work with the homes and the individuals to try to keep consistency and quality of care.

3.2 Audience Participation and questions

3.2.1 Brian Dear explained that his son has profound learning disabilities, no speech and is incontinent, needing 24 hour care. He has supported development with others who have profound learning disabilities, are registered blind and have complex needs.

‘My son is 52. Assuming someone like my son grows older and develops frailties, can I assume his needs will be met in the premises where he is, without the need to move?’

Lynne Brown reassured Brian that it would certainly be the aim. Care Management would go through the CCG in the normal way. Sometimes it will involve community nurses going in as part of the increased care package.

Brian Dear explained that he had much greater assurance that his son’s care needs may be met where he is.

Jane Pettifer clarified that it did depend on the circumstances and the ultimate decision of the home, but the aim is to keep individuals where they are. LB explained that it is ultimately the organisations responsibility to assess the needs of the individual.

3.2.2 Derek Yeo described that Health Watch are currently being funded to inspect homes and have the right of entry for inspection.

A team is being formed and fully trained and will be going into homes at regular intervals in order to make sure that they are doing what they should be doing. Across the country, Sutton Healthwatch is very proactive.
JP and LB spoke of various meetings that they both attend. Health and Social Care meets on the last Tuesday of the month. The Care Home Support Team is made up of all types of homes. St. Helier and CQC attend. Discussions take place around various statistics, such as; falls, admissions to hospitals and CQC reports. Everything is constantly monitored. The group in the meeting draw up action plans, including unannounced visits.

JP and LB explain that they attend joint intelligence meetings. LAS provide information. We have the latest safeguarding information data for example.

Sutton CCG were at a Vanguard site for Care Homes with the aim of improving the quality of care. The Care Home Team were funded during this period and they remain a commissioned service to support nursing and residential homes. The team is multi-disciplinary and visit the homes regularly, supporting the staff:

- Nurses
- Therapists
- Occupational Health
- End of life care

For example, if a problem with wound or skin care was identified, then they would liaise with the Tissue Viability Nurses. The team also worked with care home staff to identify ‘End of Life’ and discuss this with the individual, relatives and care home staff. The discussion would be about how care would be managed in order to support the individual to remain in the home if possible. The aim of the team is to improve Care Homes in Sutton.

3.2.3 **Cllr. Marlene Heron asked JP and LB, ‘What is the ceiling on savings for Funded Nursing Care?’**

LB explained that for Adult Social Care a financial assessment is undertaken and if the individual has over £23,500 they are not eligible for social service assistance with funding the weekly fees. Funded Nursing care is not means tested.

3.2.4 **Cllr. Marlene Heron asked, ‘do Clinical Nurses have parking permits, where restrictions apply?’**

LB and JP explained that nurses do not have permits. For the Start Team parking permits are obtained, but it does not cover them everywhere they park. JP and LB explain that end of life care Macmillan Nurses who have had to pay for parking. Both state that parking is an ongoing problem that is being looked at.

3.2.5 **Forum Participant asked a question. She explained that at the moment there are 3 people in their house, all with various health problems. They all look after**
each other without any outside help. The forum participant stressed that as they get older, they worry about how their daughter will manage.

‘At the moment her health problems are not so severe, but we will not always be around to help her and it isn’t our house. What would happen to her? Would she end up on the street?’

JP explained that there would need to be advanced planning. There are so many variables. LB offers to contact her outside of the meeting. Cllr. Marlene Heron offers to take up the case with ‘Encompass’. LB explained that it did depend on the circumstances and that she would be happy to work with Cllr. Marlene Heron to help with this case.

LB and JP remind the Carers Forum that they are happy to answer any questions that are given to the chair.

4 An Introduction to the ‘Smart Place Project’ - Enabling individuals to live independently through technology.

4.1 Bradley Coupar (BC) is introduced as the ‘Smart Place Project Manager’.

BC explained that he is a Social Worker seconded to explore the benefits that technology can bring to support independent living. BC begins by asking, what more can Technology do to support Carers and those that we care for?

BC highlighted that there is an assumption that our adult population is not digitally ready; however to confirm or deny this we need to start to ask:

- Do you have an email address?
- Do you access your email regularly?
- Do you own a smartphone?
- What do you use your smartphone for?
- Do you have access to the internet at home?
- What do you use the internet for?

BC asked the forum to provide a show of hands if they either had a Smartphone, Tablet, access to the internet at home; or a Smart Speaker? all had access to one or more.

**BC asked who uses Apps?**

Some members of the forum raised their hands stating they use the Netflix, Prime and Games apps.
BC asked if anyone had heard of/or used one of the following:

- Google ‘Hey Google’,
- Apple ‘Hey Siri’,
- Amazon ‘Alexa’,
- Microsoft ‘Cortana’.

Many of the participants had heard of these names:

BC explained that these are the names of ‘smart assistants’ that have been integrated into our phones, tablets and into Smart Speakers.

Smart Assistants can set reminders, find out information, make calls, video call, play music, send text messages and emails and open and close apps, all with our voice.

BC asked who has a Smart Speaker?

Participants raised hands. Cllr. Marlene Heron stated that she has an Alexa device and she uses this to play music, set timers / reminders, finds out information and plays games.

BC explained that Smart speakers are becoming very popular and local authorities are asking what more can they do to support independence.

Cllr. Marlene Heron asked; ‘can you tell me what the running costs are?’

One participant explained that he pays £5 a month for ‘Alexa’ and he loves it.

BC explained that if you have a smartphone, tablet or a PC, then a Smart Assistant would be built into it and this would not present an additional purchase cost. However; they do use data as they access the internet so you would notice an increase the use of your mobile data spend.

BC explained that Smart Speakers can cost £50, are low energy; however, rely on the user having access to the internet.

Another Participant explained that he has an Alexa. ‘It plays the radio station I like and is able to provide lots of information’. He pays for Amazon Prime ‘I was able to watch sports events like the tennis and movies’.

Cllr. Marlene Heron explained her friend has a doorbell with a video camera that is able to tell her when someone is at her front door.
BC asked who owns a Smart Watch?

Some participants raised their hands. BC explained that Smart watches can monitor your heart rate, your steps and other types of activity. BC explained that having this insight can encourage us to do more.

A member of the audience asked ‘how much would something like that cost’? BC explained that you could obtain a fairly cheap smartwatch for about £15. However watches like fitbit can cost £60.

BC explained that the Apple watch has recently obtained FDA approval for its heart rate monitoring. It also has a built in falls sensor that will alert a specific number if you were to fall. The apple watch is also programmed to be a phone.

BC asked how many people at the forum had an email address?

Various members of the audience raised their hands and there were brief discussions about what may be required to setup an email address.

KF Chair asked if you need the internet for email. BC explained you would need access to the internet to set up an email and to send and receive email.

BC asked the forum if there was an interest to learn more about assistive technology? All hands were raised.

**ACTION:** Karen to setup a forum date for BC to meet with Carers.

5  ‘Go Sutton’

5.1 Ken Fish introduced Robert Varney, Public Affairs Officer and TFL Charities Scheme Manager.

RV spoke to the members of the Forum and explained that he was there to answer questions about the service and would not be using his slides.

RV described ‘Go Sutton’ as a demand responsive service in the Sutton area, where you share with other riders with ‘pick-up’ and ‘drop-off’ spots. RV explained that there is a set zone; north of Sutton, St. Helier, north Cheam, east north and south Beddington and right across to the Marsden Hospital, covering main hospital locations.

**Booking ‘Go Sutton’**
You can book through a phone app (from google play) or by telephone – 01903 924 259.

**Paying for the service**
You can use a freedom pass, local bus pass, debit or credit card, but not an Oyster Card.

**Registration**
You must pre-register for payment and this can be done on your smart phone or over the telephone. Most services do not deal with cash anymore for security purposes.

**Price**
It's £3.50 for one person or £2 per person when booking for 6 people.

RV explained that it was very simple. “Go Sutton’ will endeavour to pick you up and take you as close as possible to where you would like to go. There is ramp big enough for a full size wheelchair and 30 seats. We offer devices access to WIFI and facilitate charging points. Because this is a trial, we have not paid for the extra work involved with facilitating oyster cards.”

*A participant explained; ‘I’ve heard of issues with the service, where is the call centre based?’*

RV answered that the call centre isn’t in the local area and they haven’t invested in too many buses because this is just a pilot service at the moment.

*A participant complained ‘the drivers are using Satnav and looking at a screen all the time, instead of concentrating on the road’.*

RV answered that they have to use the ‘Satnav’ because it tells them where they need to go and provides all of their information.

*A participant explained that they were a ‘Go Sutton’ customer. ‘You have to walk ¼ of a mile to be picked up and you are dumped miles away from where you need to go. It can’t go on as it is’.*

RV explained that there are several hundred bus stops and routes change when the bus is picking up other travellers. RV informs the forum that this is a pilot service and they are still learning how to make it work.

*The Forum participant explained that there was not anyone else on the bus?*

RV explained that at the moment TFL have funded this trial and there is no government funding, so they only have a few buses. During peak hours things will be more difficult. They are trying to publicise the service.
Derek Yeo explained that out of hours, the service is very good. However, during peak hours the bus has not turned up. “They say I did not turn up! The bus passes my house and yet I walk ¼ of mile up the road to get to the pick-up point. If the service is busy, then there is no ride for over an hour. Nobody seems to know where some of the pick-up points are? During peak hours – do not bother to try. I think it’s a great concept. I have to use the phone, the app doesn’t work.”

RV explained that the service responds to those using it. Therefore, you will see a dip in service at peak times.

Another Participant from the forum spoke about the service. ‘I am a great fan. Initially there were teething problems and troubles, but it’s just trial and error. Once you understand how to set the destination point its fine. It’s difficult moving the map.’ The participant explained that you need to know which road name to put in and it solves the problem.

RV explained that you use the postcode or road name. “The problems are the same for all kinds of maps - they are not specific enough. We are talking at the moment about how we can offer a more reliable service.

The Chair, Ken Fish thanked Bradley Coupar and Robert Varney for coming and for their participation. Ken Fish introduced Brian Dear, to talk about Safeguarding.

4. Safeguarding Update

4.1. Brian Dear reads the latest Safeguarding Report. (Please see attached).

5. Hot and Simmering Topics

5.1. There were no hot and simmering topics.

6. Dates of future meetings

6.1. Please add the dates for the next Sutton Carers Forum meetings in your diary:

- **Monday 16th December 2019, 12:00pm – 2:00pm at Sutton Civic Offices**
  - Main Guest Speaker – Bradley Coupar – ‘Smart Place Project’ – Enabling individuals to live independently through technology.

- **Thursday, 26th March 2020, 11.45am – 1.45pm at Sutton College, Drama Room**

  Speakers to be confirmed – ideas welcome
If you have any queries or questions, or ideas for future speakers or topics, please get in touch with Vicky Bastock, **SCC Information and Communications Officer (temporary job-share), who also acts as Sutton Carers Forum Administrator via email or on the office number 020 8296 5611.**