

# MINUTES OF HILLINGDON'S OLDER PEOPLE'S ASSEMBLY

28 March 2017

Council Chamber, Civic Centre, Uxbridge

1	<p><b>Welcome</b></p> <p>Lisa Taylor welcomed everyone to the meeting and explained the purpose of the Older People's Assembly to new members, which is for the Council, its partners and residents to work together to improve services for older residents in Hillingdon.</p> <p>Everyone was given a copy of the Council's new guide of activities and services for over 65s. The booklet is a comprehensive guide of the services and activities the council and its partners provide in Hillingdon. Lisa encouraged everyone to share the information with others who may benefit from it.</p>
2	<p><b>Update from the Older People's Champion - Cllr Ray Puddifoot</b></p> <p>Cllr Puddifoot gave an update on various issues, outlined below are the key points.</p> <ul style="list-style-type: none"><li>• Proposed expansion of Heathrow– final consultation concludes at the end of May. The government will issue a bill after the parliamentary process. The council together with other interested councils will issue a legal challenge.</li><li>• High Speed 2 – The proposal has now received Royal Assent and the project can move towards construction phases.</li><li>• Financial stand of the Council - Hillingdon is continuing to deal with the need to reduce its budgets. Central government has invited local authorities to add up to 2% to council tax bills to raise extra funding for social care. Hillingdon has decided not to do this as the funding should be coming from central government. The combined effect of reducing central government funding and demographic pressures means that the council has to save 107 million with further savings likely to be needed.</li><li>• The revenue budget proposals have been developed to deliver a zero increase in the Hillingdon element of Council Tax for all residents in 2017/18 for the ninth successive year, and for the over 65s for the eleventh successive year.</li><li>• Hillingdon has managed to maintain all of its services for residents and has rebuilt or refurbished all of its 17 libraries and continue to offer a range of popular schemes to support older residents, these include free burglar alarm scheme, heater loans scheme, telecare line and grants to organizations and community groups running events for older people.</li><li>• Hillingdon is dealing with the financial pressures very differently compared to</li></ul>

other councils. Hillingdon currently holds £54 million in reserves and is therefore in a stronger position than neighbouring boroughs.

- Fees and charges - Hillingdon has the lowest parking charges in London. Residents pay fees and charges on other services at 90% less than neighbouring boroughs.

It takes strong financial management to achieve such savings without cuts in services, thanks to the staff who work efficiently, enabling the council to continue to put its residents first.

**Comment:** There are a lot of flats being built in Hayes and I don't think the council has the medical facilities to deal with the increase.

**Response:** As part of the agreement to build, the developers have to provide funding for health and education. The health aspect is dealt with by NHS via the Clinical Commissioning Group.

### 3 "Working Together for Better Health and Care"

Gary Collier, who is London Borough of Hillingdon's Better Care Fund Programme Manager gave an update on Hillingdon's Better Care Fund Plan and some other initiatives that have taken place during 2016/17

Below are the main points of the presentation.

1. Update on bringing health and care together
2. Key themes
3. Some achievements in 2016/17
4. Next steps in partnership working - 2017/19

#### The Better Care Fund

- A national scheme intended to encourage health and social care to work together more closely, as required by the 2014 Care Act.
- Two, one year plans for 2015/16 and 2016/17.
- Hillingdon will focus on the needs of older people in the borough as a priority because of projected increase in the number of older people with long term health needs (for example, diabetes) in London.
- Next step is to look at a two year plan for 2017/19. Although 2016/17 includes some new money, it is mostly about spending existing funds more effectively by delivering services using a more joined up approach. The central government has made available some money for Adult Social Care, £4.1m for 2017/18; £2.9m or 2018/19 and £1.5m for 2019/20.

#### Key Themes 2016/17

- Supporting people in their communities.
- Helping to prevent admission to hospital.
- Supporting people home quicker when they've been admitted to hospital

## Better Care Fund 2016/17 and Hospital Discharge

### Achievements:

- A new patient information booklet has been produced and gives patients information about what to expect during their stay in hospital, including the hospital discharge process.
- Integrated Discharge Team made up of hospital, social care and therapy staff
- Hospital Multi-disciplinary meetings (MDMs), to help identify the appropriate ways of meeting patients needs.
- Homesafe, Rapid Response provided by Central North West London NHS Foundation Trust and Reablement provided by the council.
- New bed-based discharge process to assess arrangements in local care homes.
- 7-day assessment arrangements by care homes to support hospital discharge
- Increased care planning in GP surgeries.
- Community multi-disciplinary teams (MDTs).
- Newly formed H4All Wellbeing Service, made up of five prominent third sector charities, funded by Hillingdon Clinical Commissioning Group. The partnership provides a free Health and Wellbeing service for Hillingdon residents aged 65 and over that need support to better manage long term health conditions, frailty, social isolation and to bring people into greater contact with their local community.
- A new single point of access for Carers.
- Planning consent for Grassy Meadow Court for a dementia resource centre.
- Introduction to dementia training for staff working in GP surgeries as well as the council's contact centre and libraries.
- 2 Care Connection Teams (CCTs).
- Funding for an additional consultant geriatrician post that will help to support community health teams.
- 9 new Patient Flow Coordinators at Hillingdon Hospital.

## The Next Steps in Partnership Working 2017/19

### The new Better Care Fund Plan 2017/19

Proposed 9 schemes, 6 focused on older people.

*Scheme 1:* Early identification of people at risk of falls, stroke, dementia and/or social isolation.

*Scheme 2:* An integrated approach to supporting Carers.

*Scheme 3:* Better care at end of life.

*Scheme 4:* Improving hospital discharge process

*Scheme 5:* Improving care market management and development.

*Scheme 6:* Living well with dementia.

Other schemes focussed on:

- Adult mental health.
- Children and adolescent mental health.
- Children and young people.

### **Better Care Fund 2017/19 and Hospital Discharge .**

The plan is to be able to achieve the points listed below.

- Joining up health and care services - this means less referrals to different organisations.
- Earlier discharge planning on the wards.
- Linking up IT systems, so that patients would only have to tell their story once.
- Lining up Hospital pharmacy service.
- Earlier referrals to hospital transport.
- Common assessment forms in Hillingdon hospitals.
- Supply of local nursing home beds for people with challenging behaviours.
- Earlier referrals to mental health services for people who need them.
- Improve support services for carers.
- Developing voluntary sector support.

### **Preventing Hospital Admissions**

- The use of H4All Wellbeing Service
- Rolling out the Care Connection Teams:
  - Dr Julie Vowles - Consultant Geriatrician, Hillingdon Hospital
  - Lalita Scott - Service Improvement and Business Development Lead, Hillingdon Health and Care Partners

Dr Vowles and Lalita showed a short film about the Hillingdon Health Care Partnership's Care Connection Teams and the new initiative that would help prevent elderly patients from having to go into hospital except in extreme circumstances. The film highlighted how the teams work together to deliver the best joined up care to meet the needs of the patients. There are 15 care connection teams working in partnership with other agencies to ensure that patients receive the specialist support care they need in the community.

## **4 Questions and Answers and Discussion**

Discussions were focused on the questions listed below.

Jane Walsh from the Commissioning Group and Urmila Silas from the council's Adult Social Care Team joined the discussion panel to share information and help in answering questions.

1. What other things can we do to support you or your family in the community?
2. What other actions would help prevent you or a family member from visiting the Accident and Emergency Unit?

	<p>3. Have you or a family member recently been admitted to hospital? Is there anything else that would have made your experience of the hospital discharge process better?</p> <p>The key point highlighted in the discussion was the lack of communication amongst agencies, especially the hospital and the GPs.</p> <p>Q1. How would you support people who rely on the use of hospital transport? The service at the moment is very bad.</p> <p>A1. We are aware of the problem. We would pass on your concerns to the manager in charge of the hospital transport service.</p> <p>Q2. Where is the money coming from to funding the 15 Care Connection Teams?</p> <p>A2. The funding comes from the NHS.</p> <p>Q3. Would you be happy to give a talk at one of the University of The Third Age (U3A) settings</p> <p>A3. Yes, we are all happy to come along to any of the meetings.</p> <p>Q4. What happens when someone frail is to be discharged from hospital but has no one to look after them at home?</p> <p>A4. This is considered as part of discharge planning and depending on the circumstance; we take residents to our 22 bed nursing unit with 24hour care to provide the rehabilitation they need before they return home. A reablement service is also offered for up to 6 weeks. The purpose of reablement is to help people who have experienced deterioration in their health and/or have increased support needs to relearn the skills required to keep them safe and independent at home.</p> <p><b>Comment:</b> There are no GPs in the Heathrow Villages as a result; residents from the villages and West Drayton have the highest number of people visiting the Accident and Emergency Unit. This needs to be addressed.</p> <p><b>Response:</b> Comments will be passed on to the lead of primary care.</p> <p>The new patient information booklet would be made available at the next assembly.</p>
5	<p><b>Close</b></p> <p>Lisa thanked everyone for attending and the officers for their presentations.</p>
	<p><b>Date of the next Assembly:</b></p> <ul style="list-style-type: none"> <li>• 27 June 2017</li> </ul> <p>From 2pm to 3:30pm (<b>registration and refreshments from 1.30pm</b>) The Assembly will be held in the Council Chamber.</p>