

The Coalition of Carers in Scotland
Annual General Meeting
Minutes 27th November 2013

Attendance

Jimmy Bell	Crossroads, Dunoon
C Farquhar	VOCAL, Edinburgh
Teresa Woodman	North West Carers
Andrew Muir	Psychiatric Rights Scotland
Alan Henderson	Falkirk Carers
Olivia Feres	Dundee Carers
Tim Mineard	Dundee Carers
Maureen Summers	Carer, Perth
Lorna MacDonald	Inverclyde Carers
Anne Meikle	Carers, Clydebank
Diana Buchanan	Quarriers, North West Glasgow
Chris Bruce	Scottish Government
Kitty Adair	West Dunbartonshire Carers Forum
Rose Barr	Carers Link, East Dunbartonshire
Jennifer Roe	East Dunbartonshire
Shona Daly	Quarriers
Maureen Kerley	Care 4 Carers
Andrew Tweedy	Carers of East Lothian
Jenny Swan	Carers of East Lothian
Scott Hunter	North Lanarkshire Carers Together
Lorraine Keith	Support in Mind Scotland
Alan Scougal	COCIS, Carer, Wester Ross

Linda MacLeod	Edinburgh Carers Council
Claire MacMillan	East Renfrewshire Carers
James Marshall	Stirling Carers Centre
Andrew Ridley	Edinburgh Carers Council
Keith Lugton	Carers of West Lothian
Agnes McMillan	Falkirk Carers Centre
Terry Walsh	Dundee Carers Centre
Eileen Rennie	Carer, Edinburgh
Barbara McAuley	SLCN
Rosemary Kennedy	South East Carers Centre
Ann Anderson	VOCAL
Iain Kirkman	Falkirk Carers Centre
Ian Petrie	West Dunbartonshire Carers
Sheena Munro	COCIS, Inverness
Mhairi Lochhead	Fife Carers Centre
Simon Hodgson	Carers Scotland
Mary Stewart	Carer, Fife
Tony Fitzpatrick	North Lanarkshire Carers Together
Wendy Laird	VOCAL
Christine McKenzie	East Renfrewshire Carers
Alison Smith	North Lanarkshire Carers Together
Sharon Campbell	Central Carers Centre
Bill Addies	South Lanarkshire Carers Together
Rosemary Nicholson	Glasgow Association for Mental Health
Seb Fischer	VOCAL
Alan Gow	CAST Carers
Graeme Sime	PASDA

Annual General Meeting

The minutes from the last A.G.M were agreed as an accurate record.

Proposed by: Maureen Kelly, Care 4 Carers

Seconded by - Alan Gow, Carers All Stand Together, COCIS

Sheena Munro, Joint Convenor, provided an overview of the years activities

Claire Cairns, Network Coordinator, gave a report on the work of the Coalition throughout 2012/2013, focusing on areas of progress and member feedback. A full Annual Report was provided in the Information Pack.

Seb Fischer, Treasurer, gave a financial report and also provided a summary of financial activities for the current financial year. A copy of the full accounts was also made available.

Election of Office bearers

A list of the office bearers standing for re-election was provided. These were:

- Bill Addies, carer and Vice Chairperson of South Lanarkshire Carers Network
- Ann Anderson, former carer from Edinburgh and member of the Board of VOCAL
- Sebastian Fischer, Chief Executive of VOCAL
- Tony Fitzpatrick, carer from Lanarkshire
- Lynn Gallacher, Operations Manager, Borders Carers Centre
- Alan Gow, carer from Glasgow and Chair of CAST Carers
- Suzanne Munday, Manager of MECOPP, Minority Ethnic Carers Project
- Sheena Munro, Former Director of Highland Community Care Forum
- Catherine Paterson, carer from Argyll and Bute and founder of the Dochas Foundation
- Jennifer Roe, Manager of Carers Link, East Dunbartonshire
- Alan Scougal, former carer from Wester Ross and Chair of Gairloch and District Community Care Forum

There were no new people standing for election. The committee was voted on

Proposed by Mary Stewart and seconded by Rosemary Nicholson

Main Meeting

Chris Bruce from the Joint Improvement Team, Scottish Government

Chris provided an overview of national outcomes and how these relate to carers.

A copy of all the presentations from the day are available by contacting
coalition@carersnet.org

Questions and Discussions

Q: The background to this is going to be integration. We need to make sure it doesn't become a bun fight over resources - jobs etc . It's a good move to start looking at the quality of outcomes - will there be some oversight to make sure figures can't be manipulated?

A: One of the models is the way the health service do this - NHS Chief Executives lose their jobs as a result of poor performance. Data that's used through NHS is subject to much scrutiny and verification. Detailed briefing and cross checking of data takes place. At the same time there is lots of value in qualitative information, such as people's stories which can't be checked in the same way but is still very valid.

Q - Carers giving their stories are often told that is an individual thing - data is not always reliable - services are not always there. When poor service is provided it is not always monitored,

A: This is not the whole answer. Over the 7 years we have started down the outcomes route - personal stories are often the missing piece of the jigsaw. If carers ask for something and don't get it, it is often not recorded and people not held accountable, but this puts the emphasis back to individual experience. This fundamental shift won't happen overnight. In some areas this is collected already and it changes the nature of the discussion when it comes to strategic planning – the stats on people not getting a service

If you ask about this every time you work with an individual – the same questions all the time. For example, in East Renfrewshire -30% of service users were not satisfied – they went back and looked at records to see why this was the case

Q: I'm pleased with your response. There is a gulf between the historical way people in health count things and personal outcomes. For example, doing really well if we do more carers assessments - but if there are no resources and no services from assessments - no outcomes are achieved. Indicators just show you are busy - but you may be busy doing the wrong thing

Bruce Irvine and Fiona Wray, Stirling Carers Centre

Fiona and Bruce talked about the positive outcomes for carers from their hospital discharge service and how they have been able to evidence these.

Julie Gardner, Midlothian Carers Centre

Julie explained how changing to an outcomes approach across all their services has changed the way they work and had positive benefits for carers

Questions and Discussions

Q: I am interested in the hospital discharge information. In our area carers are discharged without any assessment on how to cope. The discharge procedure is not implemented

A It's not in all hospitals. Forth Valley has a discharge worker in every hospital. It's a confusing time, not knowing where you stand - letting the carer know their rights is essential. Hopefully it will eventually be available in every area

Midlothian also have a worker. It's a growing area, typically targets are not reflecting people's experience, such as people getting out of hospital quickly, does not reflect people's experience

Q It is much better if it is treated as a carer outcome, rather than because they have to due to targets. They should be doing it for the right reasons, carers as equal partners, not to follow targets with carers being used by services to help them achieve their targets

Comment: It goes right back to the beginning - look at chief officers with their jobs on the line - what other sanctions are there other than his

A: In my view accountability and sanctions are important but more important are positive incentives. The main sanction is the inspection agency

Comment - How can we ensure in future positive outcomes for carers in areas where this is not happening

A: Culture change - supporting people in day to day practice, underperforming areas will be held to account. We need to both incentivise the right behavior. Areas not performing will be highlighted in review

Q: How long has the programme been going

A: Just under a year, it's funded until March and we are looking for further funding,

but there is the possibility it might not be re-funded. We are building up a positive profile -and building up a positive ethos with staff and they want to support carers because they have seen the benefit

Q: Within Lanarkshire there is a carers support team from CIS funding with carer workers in each of the 3 acute sites and 2 in community settings. It is a well embedded programme of support, not funded through the Change Fund. With North Lanarkshire working in partnership with statutory services in developing the carers journey - based on talking points. If the conversation is right it may not lead to a carers assessment - only 5 or 10% are coming through support. We are also working with statutory agencies to roll this out.

A- We are working with Midlothian council and have recently developed a new assessment form – it is light years away from previous. Focus is on the conversation and what is important to the carers. Some practitioners are on board - one said no needs were identified at the time, but the carer fed back 2 weeks later and said the conversation made a big difference in raising their confidence. Some practitioners are grappling with it, others resistant. Something you need to embed in work - work with staff on culture and practice, it's not about changing forms.

Moira Oliphant, Carers Policy Branch, Scottish Government

Moira gave an update on the development of the proposal to bring forward legislation for carers and how carers and other stakeholders can feed in their views.

Questions and Discussions

Q: It has taken 8 years for us to get to this point. It will be another 3 years until it could become law. Why isn't it possible under current legislation - to introduce these measures to see progress

A: A lot of people say progress has been made over the last few years because of the push by government and partners in relation to support for carers - not across the board, but there is some change. There is concern with the current financial climate that there will be a regression. There is a commitment to support carers further, this needs to be done with partners. Legislation such as the SDS Act will bring changes, so will Integration - this is the right time to look at carers legislation and Ministers are committed to it. Ministers have said they want the pace of change to be much quicker. Many carers are still feeling they aren't getting the support they need

The Carers Rights Charter will soon be coming into force, The Minister has said he wants this to be effective, this will come into affect before the Carers Bill and will also be a step forward

There is a 20% reduction in resources going into social care. There are challenges with local authorities with deficits etc, the Minister at the Carers

Parliament admitted we are in difficult financial time and we've got to work with what we've got. Ministers need to look at resource implications and the government will need to fund some of these measures

Q: Short breaks are important, also information and advice and other forms of support. It's hard to put a value on these or decide that one is more important than another. They need to be treated with equal weight.

A: We will be taking this into account in the consultation

Q – We have done a piece of work looking at analysing census figures. There is not a sizeable increase in the carer population, but an increase in the number of people caring over 10 years and a shift in intensiveness of caring. Shifting the balance of care is a shift to more caring by family members. How will this fit in with eligibility criteria? We need to look at this bracket, such as the challenge to keep in employment those caring 20 plus hours and supporting those caring over 50 plus is also very challenging. We need to look at giving rights to carers who are caring more intensively.

Comment: Eligibility criteria can put duties on local authorities and it becomes who gets what in a restricted pie. Decisions made by those who hold the resources.. Carers need to be involved in the development of the criteria and in where the cut off is. In Glasgow they are developing criteria - high tariff carers will get support and those at the lower end will get directed to the local carers centre.

A: As we've seen with other services such as Learning Disability Centres, if people are not involved in decisions, this moves everything around but power stays with service providers. People should have the power. A lot of consideration is going into this issue

Discussion Groups – Message Boards

This session focused on how have things changed for carers since Care 21 launched in 2006. What evidence do we have of change and improved outcomes for carers.

Close of meeting

Sheena thanked everyone for coming and closed the meeting