

## North West Locality Engagement Forum Older People Services in NW Locality

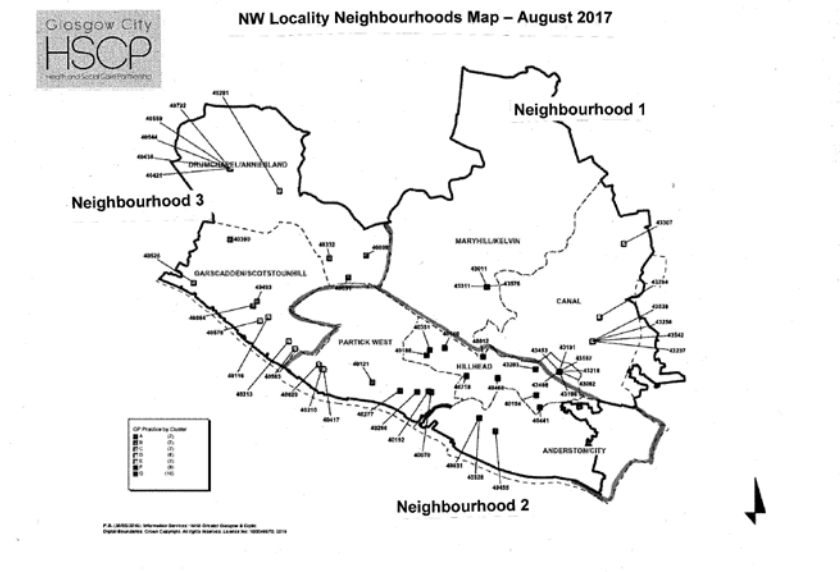
On the 30 November 2017 in the Albany Centre the NW Locality Engagement Forum (LEF) held a wider community engagement event focusing on Older People's Service in NW Locality.

Paul Adams, NW Locality, Head of Older People and Primary Care, gave a presentation on the new 3 Neighbourhoods service delivery model for Older People in the North West which will promote communication and links to GP Clusters and key partners including, Housing providers, 3<sup>rd</sup> Sector organisations and community groups.

The NW has 3 Neighbourhood Teams are:

- Maryhill/Possilpark (M/P)
- Partick/City Centre (P/C)
- Anniesland/Drumchapel (A/D)

The map showing each of neighbourhoods also highlights the GP practices, by a 5 digit number, within the neighbourhoods.



A Service Manager in each of the neighbourhoods will provide leadership and operational management for health and social care services and will have responsibility for a range of services across health and social work.

The services will include:

- Nursing
- Social Work
- Rehabilitation & Enablement
- Older People Mental Health (OPMH)
- Other hosted services

Paul then gave a short update on the National Anticipatory Care Plans implementation and proposed media campaign which will be rolled out in the near future. The participant then had the opportunity to attend two workshops from:

- the Dementia Strategy and implementation,
- the Fall Strategy,
- Cordia – Support at Home, and,
- Housing - Support for Older People.

### **Dementia Strategy Workshop** - Facilitator: Ann Cummings and Scribe: May Simpson

Ann Cummings (NW Older People's, Service Manager- Anniesland/Drumchapel Neighbourhood) provided participants with a very detailed presentation on the key ambitions, priorities and implementation of the 1<sup>st</sup>, 2<sup>nd</sup> and most recent National Dementia Strategy 2017 – 20. She highlighted that the most recent Strategy was more person centred, personalised and outcome focussed '5 Pillar' and '8 Pillar' approaches to post diagnostic support. The advanced model included end of life care and the support from a multi disciplinary specialist team for an individual affected by dementia.

Q What are your views on Post Diagnostic Support?

- It was felt that the 'funding crisis' of the HSCP impacted on the support offered to people who had a dementia diagnosis – more pressure on families and carers.
- Participants felt staff in care homes and nursing homes need more training on how to care for people with dementia.

Ann gave an example of Dementia Friendly location i.e. the staff in Silverburn were all given Dementia awareness training and when someone 'gets lost' or is in shopping – Silverburn staff now follow an agreed protocols and have greater understanding of how to help customers affected by dementia

- Early diagnosis is important but it's often difficult as people develop their own coping strategies (writing reminders on a calendar, keeping to the same routine/shops/groups etc) and makes it difficult identify and discuss. It's also a very sensitive and frightening for people and they don't wish to discuss it.

Ann detailed the training opportunities and support for individuals, carers and families in the community

Q What are your views on the supports provided to dementia carers?

- It was felt that the carer should be a key person when planning post diagnostic support.
- A carer at the workshop had received very little support and had not been offered training opportunities. Anniesland Carers Centre will make an appointment for the carer to look at organising support and training.

Q What more can we do to support the spirit of Post Diagnostic support within our local communities to support people with dementia and carers remain connected to the community?

- A member of the group commented that the social supports/opportunities in North West were limited – a monthly dementia cafe and it was cancelled the day she attended with her mother. It is held in the morning and it's often difficult to get an elderly person 'up and out' early in the morning. It was felt would be better if it started at lunch time.
- The group felt there should be more social supports/opportunities in the community
- It was felt that the care packages 'route' was inflexible, didn't offer choice or was person centred for people leaving hospital. All hospital discharges support packages are channelled through Cordia and when they cannot provide support or the support 'breaks down' or a complex support package is required - the HSCP go to 3<sup>rd</sup> Sector providers like Richmond Fellowship. It was felt that it was an unequal partnership.

Ann explained the reason behind the Cordia and reablement service for people discharged from hospital. This service focuses on the older person regaining lost skills and independence. After the input around 30% of people require a reduced number of homecare hours. Also the capacity of a large organisation like Cordia can accommodate and respond to care needs for a wide range of individuals. At the 6 month homecare review from Cordia, older people are offered to choose their own service provider through the personalisation process/self directed support.

- It was felt there should be more information in the community given to community groups, Community Councils etc about dementia, services and supports available in the community, referral pathways etc – using a variety of mediums.

**Falls Strategy Workshop** - Facilitator: Margaret Anderson and Scribe: May Simpson

Margaret Anderson (Lead for Falls Acute & Community) gave a very interesting and interactive presentation on falling and the Falls Strategy which was enjoyed by all the participants. She covered the following areas:

- What contributes to why people fall – looking specifically at older people,
- Reducing admission to hospital,
- Impact that has on the person who has the fall - recovery, loss of confidence and muscle tone etc,
- Looking at how to reduce risks - environmental, review medication, annual 'MOT' etc,
- The importance of exercise and the benefits of staying active and why that reduces the likelihood of falling,
- Tips on movement and generally keeping healthy – whatever your age,
- The Fall Team referral process, assessment, criteria, fall clinic, rehab and 'onward' referral to 22 service providers,

The workshop participants enjoyed a wide ranging discussion and lots of learning. Margaret distributed NHS Scotland – Up and About booklet, Falls booklets and information sheets  
The telephone number for the Fall Service is 0141 427 8311

**Cordia – Support at Home Workshop** - Facilitator: Yvonne Baillie and Scribe: Tony Devine

Yvonne Baillie (Team Leader, Cordia) spoke briefly about her role and Cordia services ranging from Re-ablement, Supported Care, Telecare, Transport and Support services, Equipu, Community Alarms and Hot Meals Service. Yvonne wanted to maximise the amount of time people had to ask their own questions and this was greatly appreciated by all those present.

Workshop participants were surprised by the range of services Cordia provided also that Cordia provided services to people with Addictions, Families and people with Learning Disabilities.

Q. Do the staff who work with people who addiction problems also work with older people?

A. Resources were deployed in the most efficient manner and there could be a crossover of staff delivering services to both all groups

Q. Who can make a referral? Can you self refer? How long does it take to receive assessment once you have been referred?

A. Cordia is the only 24 hour service provider and can offer a diverse and flexible service. The Hot Meal Service is provided between 11.30am and 2.30am 365 days a year with the meals being made locally at a facility in Queenslie in the North East.

Q. There seems to be a large turnover of staff and what training is offered to new staff receive?

A. New staff will receive a two week induction and are paid Living Wage rates. 200 hundred staff have been recruited in the last 3 months.

There were lots of questions on the Telecare service people were surprised the take up of 51% was not higher as they felt it was an excellent service.

Participants felt they got a lot of useful information from the session. Cordia telephone number is: 0141 353 9000

**Housing – Support for Older People Workshop** - Facilitator: Bridget Curran and Scribe Russell Robertson

Bridget Curran (Housing Options Manager, Wheatley Group) provided participants with an overview of Housing Options and services for older people. The following points were noted from the discussions:

- Data - we must share consent so information on tenant\client is widely available in terms of tenancy sustainment\support needs etc

- Housing 'walk ins'/annual visit – if was felt that housing officers should use yearly 'walk ins' to check that elderly clients\tenants are managing, if not, use opportunity to refer to HSCP or Voluntary provider to address the issues identified. Also use 'walk ins' to promote HSCP \VOL org services, particular to those elderly who would appear vulnerable, lonely, etc - lunch clubs, silver deal activity etc in the local area.
- Housing providers should be encouraged to get more involved with local HSCP and Voluntary organisation to explore potential joint working opportunities! For example the Good Morning Service and Knightswood Connects – can this be rolled out to other localities as good practice?
- Increased flexibility in terms of allocation policy – no Housing provider/RSL prioritises older peoples in terms of allocations policy but GHA are reviewing their allocations policy regarding older tenants\potential tenants and some RSLs also doing financial assessment for older tenants. GHA will consider older people's needs next year when they are building new homes – they will have a database of knowledge on housing required by older people.
- Owner Occupiers - conversations are being held in relation to 'how can older owner occupiers' can gain access health services as 'sheltered tenants' have the benefit of being looked after by housing officers and concierge services. It was also noted that some RSLs can 'buy back' properties from older clients who want to move into a 'sheltered environment'.
- Housing/hospital discharge affecting older people – are being addressed by Housing Options for Older People (HOOP - Wheatley group). Before discharge interviews and assessments take place in hospital environments as part of a multi disciplinary team. A HOOP worker will liaise with respective Housing provider regarding any issues that need addressed before the person is discharged form hospital. They also speak to all NW housing providers to look at voids and empty sheltered properties. It was noted that there is not enough information on HOOP or similar good work going on in the locales.
- Under- occupancy - there were lots of conversations on how to deal with this, it was agreed to look at from a GCC perspective as this move can free up properties for larger families and homelessness applicants.
- It was noted that although Glasgow City Council own very few houses ('tied houses' school houses etc) there was a role in relation to aids and adaptations

All agreed that this event was a great starting point for focusing on Older Peoples Housing needs and that housing for older peoples should be made a priority. GHA Freephone number 0800 479 7979