

Carers' Voice Somerset



CARERS' VOICE SOMERSET

Working together to improve the lives of unpaid carers in Somerset

www.carersvoicesomerset.co.uk

Somerset's Commitment to Carers Solution Focused Workshop Report

27.9.17

Wynford House, Lufton Way, Yeovil, BA22 8HR

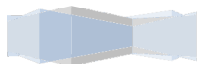


Spend more time with the solution than the problem.

Tony Robbins

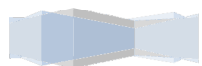
Vicky Chipchase – Senior Commissioning Officer Adults & Health Commissioning

Deborah Penny - Carers' Voice Somerset Development & Engagement Officer



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Background

Carers Voice Somerset is an influencing body concerned with improving the lives of unpaid carers and former carers in Somerset. It is made up of carers, former carers and representatives of organisations and agencies who have a role in supporting carers in the county.

Carers Voice Somerset is working closely with Somerset County Council and the Somerset Clinical Commissioning Group. Somerset's Commitment to Carers was launched in February 2016 and now a number of organisations are developing action plans to show how they are contributing towards the priorities set out within the document. A number of the organisations have formally endorsed the Commitment, including Somerset's Health and Wellbeing Board.

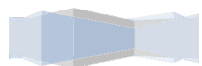
Following the completion of the Commitment, Somerset County Council and Somerset's Clinical Commissioning Group have initiated a review of carers' support services in Somerset. The aim of the review is to consider all of the feedback received so far and work with carers, former carers, commissioners and service providers to design a new service that has been subject to a competitive tender process.

Listening, acting and making a difference

One of the primary aims of Carers' Voice Somerset is to encourage and support carers and former carers to contribute to the monitoring and development of the Commitment. It enables them to voice their opinions, ideas and suggestions about what they need to help them maintain a good level of health and wellbeing and lead meaningful and purposeful lives, outside of their caring role.

Carers' Voice Somerset is doing this by actively engaging with carer and former carers across Somerset and supporting them to establish "Vision Groups". Vision Groups:

- Provide opportunities for carers and former carers to contribute to the monitoring of *Somerset's Commitment to Carers*.
- Show how carers' and former carers' contributions can help to improve carer support services in Somerset.
- Enhance the ways that carers, former carers and carers' service providers communicate and work together through a planned, co-ordinated and solution focused approach.
- enable carers and former carers to discuss *Somerset's Commitment to Carers*, look at what has been achieved, identify what is working well, what still needs to improve and share ideas and thoughts in a solution focused way.



Carers' Voice Somerset is also working with organisations to help them utilise their existing carer engagement activities for this purpose. GP practices are now also signing up to endorse the Commitment and develop their own Vision Groups.

Feedback is gathered by Carers' Voice Somerset through all of these sources and this is then shared with service providers, commissioners and organisations.

Somerset's Commitment to Carers Solution Focused Workshop

Carers' Voice Somerset creates opportunities for organisations, and commissioners of services to listen closely to what unpaid carers are saying and then work together to develop solutions.

The Purpose of Somerset's Commitment to Carers Solution Focused Workshops is to bring together commissioners and service providers and representatives of Carers' Voice Somerset to monitor and develop the Commitment. At these workshops we all work together to analyse carer feedback, share progress and information in relation to Commitment Action Plans. Together we discuss what still needs to be done or improved, share ideas and celebrate successes. We work together to identify solutions to problems and plan ways that we might work together, sharing expertise, knowledge and resources.

Vicky Chipchase – Senior Commissioner Adults & Health Somerset County Council explains why the ongoing monitoring and development of the Commitment is so important:

Carers Voice Somerset, with Somerset County Council, presented Somerset's Commitment to Carers to the Health & Wellbeing Board on 26th May 2016.

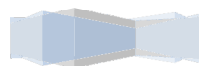
The Health & Wellbeing Board (HWBB) were asked to formally endorse the document. We now have a further opportunity to present to the Board on 16th November. It will be important to highlight to the HWBB the number and range of organisations that have also formally endorsed the Commitment, many of which have now produced action plans to demonstrate how their organisations are contributing towards the outcomes. The direct impacts of these action plans include improved health & wellbeing for carers across Somerset and therefore deliver objectives within the Health & Wellbeing Strategy. It will be important to demonstrate to the HWBB this impact to show where there are shared benefits from the work. The summary of the action plans can be provided to HWBB members to show the breadth of activity across Somerset. Further to the development of the action plans, HWBB members will also be interested in hearing how commissioners, service providers and carers are working together to develop creative solutions to some of the issues that have been raised by carers. We can describe how Carers' Voice Somerset will continue to receive feedback from carers via the Vision Groups that have been set up across the County. We can also describe how Carers' Voice Somerset will continue to facilitate solution

focussed workshops for carers, commissioners and service providers to come together to celebrate successes and achievements and to also have the time and space to think more creatively of how to respond to areas that require improvements. There is now a well-established network that will meet twice a year. Carers' Voice Somerset will also be providing an on line Forum for solutions to continue to be developed in between workshops.

The outcomes from the workshops will be of great benefit to commissioners when reviewing carers services and seeking to develop more local, sustainable solutions for carers. This model of engagement, involvement and on-going review is considered to be a great example of co-production.

Workshop attendees 27.9.17

Kathy Bartley	Redgate Medical Practice – Practice Manager
Tanya Burns	Penhill Surgery
Vicky Chipchase	Somerset County Council – Lead Commissioner
Claire David	Somerset Parent Carer Forum
Rhys Davies	Community Catalysts – Micro Provider Service – Project Co ordinator.
Margaret Egbo	Somerset Partnership NHS Foundation Trust – Carers Assessment Worker
Becky Foster	Cannington Health Centre – Carers Champion
Wendy Gray	St.Margarets Hospice - Community Palliative Care Nurse Specialist
Nicky Griffin	Young Carers Service – Young Carers Project Worker
Hartnell Beavis Susan	Carers' Voice Somerset Author " <i>If Only I'd Known That</i> "
Richard Hobbs	Vice Chair - Carers' Voice Somerset
Michael Hope	Carers ' Voice Somerset
Mike Jackson	Marie Curie – Volunteer Co ordinator
Angela Kerr	Citizens Advice South Somerset - CEO
Alice Knight	Careline - Manager
Tessa Mason	Mind – Promotion & Development Lead - Mindline
Caroline Mead	Somerset Partnership NHS Foundation Trust – Carers Service Development Manager
Claire Merchant Jones	Somerset County Council -Young Carers Transitions Lead
Sally Oxford	Milborne Port Surgery – Carers Champion/Health Coach
Deborah Penny	Carers' Voice Somerset - Development & Engagement Officer
Kellie Pimm	Ashford's Solicitors - Solicitor
Dianne Ramsey	Age UK – Development Manager – Ageing Well Manager
Neil Richards	Carers' Voice Somerset - Chair
Barbara Ruff	St.Margarets Hospice
Chris Rugg	Mind – Project Leader
Mandy Seaman	Compass Health & Wellbeing – Co ordinator
Allison Scott	Redgate Medical Practice – Carers Champion
Paul St.Quintin	ADASS - South West Regional Carers Leads Network Chair
Caroline Toll	Carers' Voice Somerset & Age UK
Tim Warren	You Can Do Somerset - Manager
Diana Wiseman	Health Connections Mendip
Julie Woan	Alzheimer's Society – Dementia Support Worker



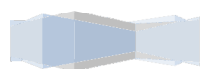
The purpose of today's workshop

Aim

Providing an opportunity for commissioners and service providers to work together to improve the lives of unpaid carers in Somerset.

Outcomes

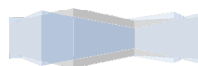
- Identify ways that organisations can work together to help create solutions.
- Formulate plans that help create solutions focusing on the following topics:
 - 1. Improving the hospital discharge service in order that we can support the carer/s before, during and after a patient is discharged.**
 - 2. Improving and supporting the Carers Champion role.**
 - 3. Identifying young carers, supporting them through transitions.**
 - 4. Improving the health and wellbeing of older carers.**
 - 5. Reducing the isolation and loneliness of carers.**
 - 6. Using community solutions within health and social care to improve the lives of carers.**
- Share information and updates.



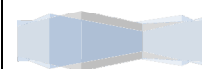
Discussion notes

1 – Improving the hospital discharge service in order that we can support the carer/s before, during and after a patient is discharged.

Solutions identified:	How outcomes could be achieved:
<p>One point of contact. One person to take charge of discharge process. Care package: respite care/ medication/ transport. Have a liaison role – named liaison person from admission. Early identified after care follow up.</p>	<p>Based in hospital but freedom to follow up. Responsible for discharge planning starting at point of admission. One number to ring. New role – specialist liaison worker – would refer to carer’s assessment / support. NB.Triage discharge liaison worker (not needed for everyone). Case Worker has awareness of all services. Recruit for workers which could save money in long run. Refer carer to respite point of contact. Support for health coaches.</p>
<p>Carers being listened to. Channels of communication being open. Clear signposting in wards. Inclusion of carer in discharge process. Nursing staff discuss discharge with carers about what their specific needs are. Information for patients and carers and signpost.</p>	<p>Having a discharge liaison person. Signposting in initial stages of admission. Carers Champions in hospitals involved in discharge. Touch screen for carer’s information. Discharge at appropriate time for both patient and carer. Health & Social Care assist with flow through. No late night discharges – planned discharges. Clear signposting for services offered to all carers not just in acute cases. “Triangle of Care” Carer is asked what the issues are – not just liaison with the patient. Follow up after care. Carers referred to carers services.</p>
<p>Changing the culture in acute hospitals and involving carers. No late night discharges without</p>	<p>Carer’s liaison officer in hospital. Courtesy calls to family, carer and patient post discharge. Signposting</p>



<p>care packages. Carers involved in discussions. Carers to be aware of medication needs. Telephone contact with carer. Liaison officer for hospital.</p>	<p>ensuring care packages in place. Timely information and discharge summary with carer – contact information included. Need for professionals to recognise carers and signpost to carer’s services. Support for carers to recognise themselves as carers.</p>
<p>Dashboard of patients care and readiness for discharge with carers can assess – to be updated by health professionals. Stand – communication.</p>	<p>Finance for computer programme for readiness for discharge dashboard. Access to dashboard for carer. Discharge dashboard pilot in hospital. Internet based. Apply to NESTA for funding with emphasis on supporting carers. Tailoring existing dashboards. CCG to implement nominated discharge buddy who can access the dashboard for those without internet access. Trial to assess to get it working properly. Trial to assess to get it working properly.</p>
<p>Maximum involvement from the start for the cases. Conversations with carers about resources and existing services. Link worker from hospital would liaise with patient and carer (not a clinical role). Simple point of contact. PALS Worker cases link workers within hospital (acute).</p>	<p>Point of admission patients/carer given key contacts. Hospital responsible for contacting carers. Mental health model of family liaison carers contacted within 48hrs of admission. Working with agencies that provide care/OT’s etc. Identified paid worker to work with patient/carer from admission to discharge. Home information about PALS service. Planned discharge from worker link with Village/Community and Carers Agents for follow up. Hospital based worker with some clinical knowledge including medication etc.</p>
<p>Being involved from admission. Staff need to talk to carers – listening to carers.</p>	<p>Liaison worker in hospital to co-ordinate discharge with a discharge plan. 2 week care package for anyone</p>



<p>Carers can give relevant info about the patient.</p> <p>Communication between staff and carers. Use of health and welfare Lasting Power of Attorney.</p> <p>Care package in place before discharge. Carers Champions attached to wards ensure smooth discharge.</p> <p>Care package in place includes transport organised and checked for discharge.</p>	<p>discharged with need for follow up care.</p> <p>Discharge plan goes with patient to next hospital/home care.</p> <p>Discharge pathway.</p> <p>Funding and staffing for liaison worker – non clinical role band 4 or 5.</p> <p>Carer can liaise with discharge co coordinator post discharge.</p> <p>Discharge information pack. Discharge plan for patient.</p> <p>Visit to Poole & Bournemouth (contact: Debbie Hyde) employed by the council and jointly funded with health.</p> <p>Deborah.hyde@bournemouth.gov.uk.</p>
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2 - Improving and supporting the Carers Champion role.

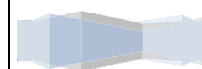
Solutions identified:	How outcomes could be achieved:
<p>Statutory role, more not add on.</p> <p>Role recognised within practice and other organisations.</p> <p>Badges, leaflets about the Carer Champion – visible i.e. staff photo.</p> <p>Liaise with Health Connectors. Up to date information.</p>	<p>Funding, training, part of the discharge system, Practice Manager, consult with carers – what would they like the role to be? time, Independent carers advocate.</p> <p>Health coaches to be on role.</p>
<p>Protected role – to all professionals & patients.</p> <p>Job description – separation of role – STP.</p> <p>Identify best practice across the county.</p>	<p>Training agreed by CCG.</p> <p>Carer path – part of CCG.</p> <p>Need information.</p> <p>Networking locally.</p> <p>Carers' Voice Training.</p> <p>Surgeries to take seriously – changing attitudes.</p> <p>Carers' Voice persistent lobbying.</p> <p>Secret shopping.</p> <p>Fundraising for above.</p> <p>Health & Wellbeing.</p> <p>Concrete plan.</p>
<p>Time.</p>	<p>Job description.</p>

<p>Training. Identification for Carers Champion i.e. badges. Surgery positive about carers. Room for carers.</p>	<p>Carers Champions getting together in federations. Carers' Voice delivers training. Carers Agent Service – link with.</p>
<p>Information re services including young carers. Register of CCS. Network events and publicise role.</p>	<p>GP Practices recognition of role. Screens showing information. Support services contacting Carers Champions – statutory and voluntary: Health Connectors/ Health Coaches, Carers Agents, Volunteers - Invite to Carers Champion meetings.</p>
<p>Local knowledge. Meetings of Carers Champions at least quarterly to include some training. Clearly designed role. Support from Practice Manager.</p>	<p>Sharing good practice. Overall lead – CCG. Time for role. Practice Manager. Links with: Carers Agent Service, Volunteer Supporters, and PPG.</p>

3. Identifying young carers, supporting them through transitions.

Solutions identified:	How outcomes could be achieved:
<p>Local places and local offer - flexible. Coaching/Life Skills. Employment Support. Time for them.</p>	<p>Transport. 1:1 package – support in the home/or where suits. Personalised support or when needed. Resources i.e. volunteers. Young carers recruiting volunteers to facilitate this. Young carers service work with adult carers service – agreed transition plans and linked assessment starting at 17yrs.</p>
<p>Robust identification prior and referral process / info joint system. Have a <u>code</u> for young carers. Recognise as individuals not to generalise. Education – help complete education, social life, do “normal” stuff.</p>	<p>Simple process to refer in -. can be completed by someone other than a GP. Block bureaucracy. Create coherent system which is manageable. Use communication through social</p>

<p>Meet other young people of their age. Helping YC to know who they are and recognise what would help them as individuals to move forward in their lives.</p>	<p>media. Improve system for identifying YC's. Develop a robust social media support system.</p>
<p>Having regular respite made available. Identify YC – Choice. Parents identify their children.</p>	<p>Leaflets & information. Attendance allowance kids. Fun parties, clubs with other children, school support. Identify young carers early and introduce them to support groups/activities with other young carers. Support via phone or person. A trusted agent to support and advice. Constant planning of respite in place for all.</p>
<p>Making caring COOL. Making it possible for people to do things as everyone else.</p>	<p>Broaden advocacy to younger age range. Early identification. Encourage schools to support reducing stigma and the isolation of YC's. Advocate make caring COOL. Recognise transference issues. Social contact online Q&A. GP's and practice workers identifying. Finding out what is needed. Online internet support groups.</p>
<p><u>Individual support carer</u> led with <u>choice at the heart</u>. All age carer's service. Make sure that they can talk about their caring role. Seamless transitions handover over years not day and weeks long-term if needed, clear sign posting of services. Normalising of Young Carers. Reduction in rigid cut off. Peer support – a slightly older person helping to manage transition, face to</p>	<p>Carer's assessment – what does this look like? Gradual response. Needs assessment – rather than carer's assessment. Designed by young people/young adults.</p>



face; online, phone. Peer support for young carers including social media.	
Co-produce <u>Young Carers</u> approach service <u>with</u> young people.	Specific model of approach which incorporates the needs/aspirations. Create a Young Carers Summit. Discuss across children's and adults commissioners <u>current offer</u> and <u>future</u> .

4. Improving the health and wellbeing of older carers.

Solutions identified:	How outcomes could be achieved:
Carers referral scheme/linked with carers assessments/GP's & OT' assessments etc. Community Services signpost to all support services needed/identified/required – help find solutions. Relationship building. One person to help solve all of these problems. VA/HC GP referral scheme for carers – identifying carers, joined up service. Joined up/low cost. Car share. Volunteer drivers. Sitting service. Building trust/relationships to allow them to leave. Sitting service consistent.	Admissions – more inquisitive, utilise Village Agents/Carers Agents. Training volunteers/advocates more about what is available. MECC Admissions Service Adult Social Care. Somerset Partnership. Third sector organisations.
Networking – sharing – information – texting – carer's newsletters – direct marketing – countrywide campaign regarding information about HWB Activity. Range of activities – Pilates (Chair based), Connective people, network of drivers, PPG, Information sharing,	GP Surgeries, Parish newsletter, Church magazines, Lunch Clubs, ALC's. Carers Champions, Village Agents, Health Coaches – Joined up.

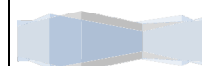
Village Agents.	
<p>Campaign to recognise carers to recognise themselves as carers. Offer support – signposting to agencies/respice/HWB activities to look after themselves. Neighbourliness. Asking for help – losing independence.</p>	<p>GP's to kick start campaign, get a countrywide register in place. Flu clinics to start. Coffee morning's feedback forms – pharmacies/Post Offices etc. Provide information stands at flu clinics – posters too. Better communication channels. Get children to identify their parents. More advertising. Practice Managers meetings. Coding. Nurse welfare officer popping in occasionally Meals on Wheels</p>
<p>Respice (planned) so that they can go to HWB activities together or apart – bank of carers to contact/Time bank volunteer – share skills & time.</p>	<p>Respice based or need – assessment required. Money budget for choice, cinema, theatre, trips etc., health spa. Minibus service – utilising spare transport.</p>
<p>Community buss – Drs surgeries/village halls. Popup flexercise/befriending (Community support – exercise hub). Community Champion to have exercise class at their home.</p>	<p>Sharing bus with likeminded organisations. Sponsorship. Unlock health grants. Burns the bread gives out bread – could be distributed. Consultation bus. Meals on wheels. Roadshow “How to look after yourself”. Identifying gaps. Organic & holistic. Neighbourliness. Create list of volunteers (see Time bank model). Conversation with Public Health & Local Authorities. Reaching communities. Conversations with animal welfare bodies. Exeter University research/evaluation. RBL SCF</p>

<p>Listen to Carers needs when they are speaking to you – it takes a lot. Respite/rest/relief with them in same. Building – dual alone or together. Tap into lunch clubs & grow them add ons.</p>	<p>Lunch clubs/active living tapped into – local skills utilised – college – beauty students – podiatry – integrational. Confidence clubs – with their loved ones. Utilising local halls/community centres. U3A help outs & rotary clubs. Paid staff required “Events management”. Budget from SCC/STP Social prescribing money, Reaching Communities, Big Lottery Budget. Round Table/Rotary etc.</p>

5. Reducing the isolation and loneliness of carers.

Solutions identified:	How outcomes could be achieved:
<p>Carers need time for themselves.</p>	<p>Social enterprise person to engage local businesses to offer carers reduced rates – accessible via a range of routes – Village Agents, schools. Youth Worker, Health Coach, Carers Champion, Community Foundation.</p> <p>“Thank you scheme” rather than label “Carers Scheme” especially for Young Carers – Voucher for two + friend.</p> <p>Respite Care.</p>
<p>Sign post to information of local tailored support already in existence. Buddy with other carers. Respite – talking helplines. A good support network with a clear understanding of who I need to go to for any need. Need volunteers to keep all information up to date and relevant to</p>	<p>GP Surgeries, Village Agents, Carers Champions, Health Coaches to all be well informed and clearly sign posted. Information to be up to date. Use Village boards/notice boards. Match carers – via carer support agency, create activity events not “Carer Events” such as cooking/art. Buddy likeminded people.</p>

<p>locations and community.</p>	<p>Respite – simple as “pamper day” – something to look forward to. Free counselling in GP surgery “a chat” – Health Coach. Confidentiality, risk assessment – (could meet in public place). Funding – build a community*. *If carer looked after – invested in – health & wellbeing improved - less GP appointment time for carer & cared for & less cost to NHS.</p>
<p>Respite for carer to go out and socialise. Knowledge of local up to date activities and signposting. Transport availability. Time for recreational activities – choices of going out. Someone to talk to – talking therapy. Additional note: Carers become more isolated in the winter particularly in rural areas and then become withdrawn and less likely to join community groups.</p>	<p>Build communities to support one another facilitated by Village Agent or Carers Agent, Health Coach etc. Helpline to support and signpost nationally 24/7 carers helpline/online facility. Everyone should invite their next door neighbours to coffee or tea so that a small community is informed.</p>
<p>Knowledge of support already available. Respite – time away from caring. Befriending scheme. A chance to integrate with likeminded others not to be hindered by transport or mobility issues. Access 24hr support. Offer better care through schools and colleges.</p>	<p>GP surgery – person based in the surgery such as a Carers Champion, Health Coach – promote what is available – posters. “Are you a carer?” Person in place to call upon – sitting service. Planned break – to suit individual need. Access to sitting service must be easy. Directory of services must be easy to access and understand – lists of services and activities in local area.</p>
<p>Short break for carers away from home with care in place at home for cared for.</p>	<p>Provided by Micro Providers, private care companies, in own home, 6 monthly, individual need.</p>



Provision of local information, up to date and relevant and easily accessible.	GP surgeries, IT – Via post code, social media, charities. Staffing & finance. One goal.
Information sent to carer. Complete break from looking after the cared for – holidays for carers maybe with others helping to reduce feelings of guilt. Clear entitlement to a break. Regular respite times i.e. monthly. Respite twice a year with cared for staying in their own home with 24 hr care and the carer staying away for their rest. Knowledge of existing support.	Develop a strong network of other carers to obtain support and advice from. Financial and staffing support.
Buddy for carer with goods local knowledge. Raise awareness of information. Better knowledge within GP surgeries.	Sitting service to allow carer to get out. Access to buddy at community drop in and or GP surgery. Buddy to do home visit if required link with Village Agent, Health Coach etc. Insure carer has local information and support available. Lower the cost of community transport.

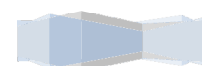
6. Using community solutions within health and social care to improve the lives of carers.

Solutions identified:	How outcomes could be achieved:
Early help – preventative Community resilience Local, connected, resilient caring workforce. Men's Shed, Community bus x 1000, volunteers.	Network mapping – confidence and permission to give and receive help – turning goodwill into action. Identify and connect with people, networks and services. Health Connectors, Health Coaches, Village Agents, Carers Agents – Signpost to local people who can

	stick to this.
GP identifying hidden carers – discussing strengths, interests – what matters to them. Social prescribing by tested person in trusted environment. Needs to be different in different areas.	Partnerships with VSCE organisations. Identify local people. Sharing and learning across sectors. Holding events, information.
Small stuff – get help that people need. Sitting service.	Better understanding of carer role. Support through education / teachers. Identifying the key players and ingredients to make it happen – Connectors, Agents, Coaches. Engage with above.
Carers given a wider variety of services and support to get a good life. People can look out for each other. Can give people the confidence and persuade them to look after each other.	Minimise barriers to: information, Admin, Myth busting, opening the doors. Create the space. Coffee morning.
Increase awareness of the hidden carer – into network of support – informed support – Peer support – Friends – Contacts. OK to say yes to help. “Cool to be a Carer” Local links	Carer Friend – like Dementia Friend. Importance of relationships and trust Not focussing on need – problem – Focus on networks & connections
Spotting and identifying carers in and out of school. <u>Supportive networks</u> Somebody to be with in a way that works for you. Change stigma of the caring role.	More tie and space to think about. Referral to <u>Village Agents/ Carers Agents</u> who can stick to people like glue.

Summary

Today’s workshop was lively and productive and many new and improved ways of helping to improve the lives of unpaid carers were identified. Some initial ideas for potential actions were discussed and discussions will continue outside of this workshop.



Next steps

Consulting, creating workable solutions and planning a way forward.

Vicky & Debbie will analyse the above summaries by the end of October and pull together possible actions to take forward. This information will be shared.

Carer feedback

A summary of carer feedback received prior to this workshop will be circulated by the end of October. **Action:** If you do have any further feedback from carers in relation to the progress of the Commitment can you please send in to Debbie no later than 15.10.17.

2018 Solution Focused Workshops

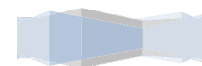
Wynford House, Lufton Way, Yeovil, BA22 8HR

Extended time: 9.30am – 3.00pm

please bring a packed lunch, tea and coffee provided.

2018 Dates: **21st March, 4th July, 17th October** (All dates are a Wednesday).

DRAFT



WORKSHOP EVALUATION

1. What did you enjoy most about today's workshop?

- *Meeting lots of different people from other organisations.*
- *Coming up with solutions*
- *Meeting and getting to know people that are relevant to my work.*
- *Brainstorming*
- *The formula of quick rotation*
- *Brainstorming and people moving around*
- *Speed*
- *Chance to explore ideas*
- *How we covered the subjects accurately with the facilitator in a prompt way*
- *Free exchange of ideas and information*
- *Generating ideas with colleagues*
- *Good format "Speed Dating"*
- *Listening to issues that affect carers and agencies*
- *Chance to share ideas*
- *Finding carer led solutions*
- *Connecting with other people*
- *Hearing ideas of others and working in teams*
- *Meeting other people involved in the "Carers" industry and listening to their views and opinions*
- *Collecting new information – re Village Agent & Services. Being able to express my thoughts and ideas.*
- *Networking – time out of the office!!*
- *Meeting new people and chatting!*
- *Discussing the interesting topics that were covered today.*
- *Networking, discussions.*

2. Were all of the topics explained clearly to you and did you understand what you needed to do during the activities?

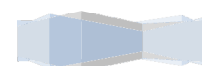
20 people said yes

Other comments:

Clear structure

Yes – useful information

Yes, well facilitated sessions that kept to time



3. Were the accompanying resources clear and easy to understand?

21 people said **yes**

Other comments:

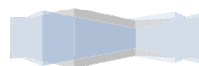
Yes very useful

4. What was the most useful aspect of today's workshop?

- *I gained information that will be very helpful in my role as Carers Champion*
- *Pinpointing the transition for 1st October*
- *Meeting new people – networking*
- *Sharing ideas and finding out about services already in place*
- *Sharing of information, collecting of new information*
- *Discovering the resources available*
- *Some really good ideas across all teams*
- *Sharing thoughts and ideas, bringing them together*
- *Ability to hear multiple views*
- *Connecting with others around the topic*
- *Generating ideas*
- *Structured facilitators kept us on track. Hearing from other experts*
- *Listening to other people's ideas*
- *Meeting with other organisations who all have carers as a focus*
- *All*
- *Applying our knowledge to come up with solutions*
- *Hearing the different visions of people for a perfect world*
- *Networking*
- *Getting up to date with current situation*
- *Listening to information about the new service and the young carers transitions workers*
- *Good to have the facilitators as they helped steer the discussion and kept us on track*
- *Meet new people and exchange ideas*
- *Sharing ideas, help to focus your own work*
- *Short 15 min slots to discuss topics worked really well kept people focused on identifying solutions.*

5. How could our Solution Focused Workshops be improved in the future?

- *Now I am aware it's really great to be involved and a really useful forum*
- *Perhaps fewer themes to give more time*
- *Possibly an even wider service groups attending*



- *More frequent and more participation*
- *I think it worked really well*
- *Split up people from the same organisation or profession*
- *Have some investment to buy an idea and pilot it*
- *Good to see if our solutions taken forward and the outcomes to see if our ideas work / how they are being implemented.*
- *More discussion time*
- *Maybe a speaker*
- *Longer time to feedback/share good ideas*
- *Bit more time to talk, need more than 15 minutes*
- *Maybe some input from carers. To hear their point of view.**
- *Increase the focus activity times from 15min slots to 20 mins*

**Carers input are part of the Commitment Monitoring Process and a summary of carer's feedback will be circulated. Recap of this process to be provided at the next workshop.*

6. Was the venue suitable for today's workshop, easy to find, accessible and comfortable?

19 people said yes

Other comments:

Yes to all

Yes very

Yes, great location, room a little chilly at times.

7. Other comments:

Thank you

Any opportunity to network

Very good

Good networking opportunity

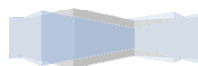
8. Other feedback received via email:

I thought the morning was very successful with lots of useful information and ideas, a morning well spent.

Fabulous morning and everyone seemed to really enjoy it.

Judging by the number of note that was being made. A worthwhile morning I think.

INFORMATION SHARING



1. Somerset's Carer Service – Update by: Vicky Chipchase

The new Somerset Carers Service will commence from 1st October 2017 and will be run and managed by the Community Council for Somerset (CCS) in partnership with Spark, Engage and Somerset Partnership. There is a very close and natural fit with the Village and Community Agents service which the Community Council has been running in the county since 2012. The way the service will work for carers is that there will be a dedicated team of Carers Agents based out in local communities able to offer a mix of telephone, one to one support for individuals and families, group support and signposting and liaison with a huge range of other statutory, health and voluntary sector providers. There will be a dedicated advice line and a fresh new website which will be a joint website with the Somerset Partnership NHS Trust Mental Health Carers support service. This way carers will only need to visit one website to access all the information they need.

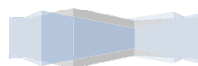
The service will provide a single point of contact for Carers irrelevant of age or need. The Carers Service will have a working agreement with the Young Carers Service to ensure that referral pathways are effective and that there is targeted support for young adult carers during transitions. The service has developed systems that will enable the sharing of information with NHS colleagues so carers only have to tell their story once.

A series of publications and communications will be available soon.

Call: 0800 31 68 600

Text: Carer to 78070

Web address: www.somersetcarers.org



2. Carers' Voice Together We Care Roadshow 2018

(Funded by Somerset Community Foundation).

During the road show carers will also have the opportunity to:

- Socialise and connect with other carers, members of Carers' Voice and a number of organisations.
- Learn more about how Carers' Voice Somerset, carers' support services, initiatives and projects are working together to help carers, in Somerset.
- Contribute to the monitoring of Somerset's Commitment to Carers.

The information gathered at these events, from carers will help us to:

- Determine the progress of Somerset's Commitment to Carers.
- Explore ideas and suggestions in relation to the ongoing development of Somerset's Commitment to Carers and about how we might develop new and improved ways, to support carers in Somerset.
- Collate and share findings which can help with the commissioning, design and continual improvement of all carer's services in Somerset.
- Shape the future direction, development and work plans of Carers' Voice Somerset.

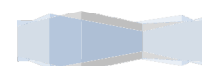
The roadshow will comprise of a series of 5 events across the county:

8.3.18	venue to	Times to	Frome
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Please note that the details for the above event will be confirmed by the end of October 2017.

11.4.17	Victoria Park Gardens	Morning	Bridgwater
23.5.18 (Weds)	Guild Hall	All day	Chard
7.6.18 (Thurs)	The Beach Hotel	Morning	Minehead
9.6.18 (Sat)	Red Brick Building	2.00pm – 6.00pm	Glastonbury

(Please note 9.6.18 will take the form of a Young Carers Music Event).



3. Carers' Voice Somerset - Carers' Gathering

Funded and hosted by Carers' Voice Somerset.

Sharing the outcomes of our roadshow, providing a further opportunity for carers to connect and contribute to the monitoring of Somerset's Commitment to Carers. This gathering will help us to determine the future direction of Carers' Voice Somerset and celebrate our successes.

26.9.18 Cheddon Fitzpaine Memorial All day Taunton
Hall

Getting involved

Are you interested in getting involved with any of the above 2018 Carers' Voice Somerset events?

Promoting your service

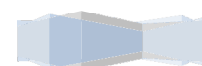
Are you interested in booking a space to display information about your service at this event? The charge for a space at this event is £10.00. Please note that spaces are limited please contact Debbie for more information and to book a space.

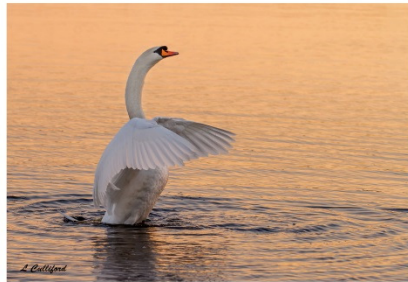
Carers' Champion, Health Coach/Connector information

would you like to enhance your role by finding out more about the role and function of Carers' Voice Somerset, attend our meetings or events?

For more information regarding the content of this report or any of the above information please contact Debbie:

dpenny@somerset.gov.uk **07866 785438**





Thank you

Carers' Voice Somerset would like to thank Somerset Clinical Commissioning Group (CCG) for the use of their venue at Wynford House.

Carers' Voice Somerset would like to also give a special thankyou to Lee Reed - Quality & Equality Lead at the CCG for preparing the venue for us.

