

Task and discussion plan for Making it Real (MiR) Board

Meeting held on Friday 10th July 2020



Attendees – 9 (apologies in blue):

Representative for the Central Advisory Group (Expert by experience and Board Chairperson) - Jon Hancock / **Representative for the South Advisory Group** (Expert by experience) - Katie Stone / **Head of Adult Social Care** - Tanya Miles / **Community Partnership Team Manager** – Kate Garner / **Experts by experience and representatives for PACC** – Zara Bowden and Sarah Thomas / **Public Health** - Penny Bason / **NHS** - Rose Howard-Jones / **Development Officer** - Stewart Smith

Director Adult Services and Housing - Andy Begley / **Portfolio Holder for Adult Services** - Dean Carroll / **First Point of Contact** – Claire Mobberley Julie Mellor & Fiona Williams –Taking Part (Advocacy Service) / **SW Team Leader** - Sue Bunker / **Mental Health SW Team** – Fiona Williams

Item	Notes	Actions / Outcome
1	Introductions	The meeting shared individual work and home life experiences of the Covid pandemic.
2	Plan on a page – the rethink <div> <p>JH started the discussion saying that he'd been considering our plan on a page and although it may be time to rethink our ways of working (e.g. using technology more) – he felt that the basic principle of MiR expressed was positive and right.</p> <p>'People want to have a life not a service' We believe that all Social Care Services should be devised and enhanced with the participation of people who use services, giving shared opportunities to solve problems and design services.</p> </div> <p>ZB & ST stressed the importance of the relationship between children's and adult's services as young people move through to adulthood and their own independence.</p>	Action: Keep Plan on a page up-to-date
3	Direction of ASC post Covid-19 <p>TM highlighted the work of ASC during the Covid-19 pandemic, saying that ASC entered Covid-19 in a strong position. It has a good culture of involving people using services as well as staff.</p> <p>In just 4 months we have changed a lot. Now it's time to pause and reflect on what we've learned and what we want to take forward in the new norm. Examples:</p> <ul style="list-style-type: none"> Day opportunities. In the last 4 months we have rethought our day opportunities provision for adults with learning disabilities. Over the last 10 years this reduced from a service for 200 plus individuals to a smaller set up that was still buildings based. Now looking at opportunities that involve, communities, work, leisure and home and not just daily attendance at centres. People being in their own homes and not care homes. This was happening before Covid-19 but has now tied in completely with people not wanting to enter into care homes due to the coronavirus. 	Action: Organise a blended session to encourage pause and reflect discussions on MiR (involve MiR / PACC / NHS)

		<ul style="list-style-type: none"> Mental Health is an area where bigger issues and impact may be looming – but this is a key area where the MH Partnership Board involves a range of organisations and is co-chaired with an Expert by Experience. KS spoke about the improvement in her review which was carried out via MS teams. Key was that it the review and support plan were written there and then while in conversation and KS could discuss and agree what was written rather than having to wait for it to be typed up and forwarded later. Discussion raised question of whether this would work for all people. <p>ZB stressed that it is important to look for what works and what helps development of individuals. Importance of getting the balance of communication right (electronic and face to face).</p>	
4	Joint working with the NHS	<p>PB & RHJ felt that there are opportunities for working together although working culture might be different (NHS / Children / ASC). The population that we serve is the same and to work together would be good use of limited resources.</p> <p>As we restore and recover from Covid-19 it is an important time to come together. Personalisation – gives opportunity to work in similar ways – person centred, e.g. social prescribing works best collaboratively, collectively and across systems. Relates well to good use of personal health budgets.</p>	Action: Organise a blended session to encourage pause and reflect discussions on MiR (involve MiR / PACC / NHS)
5	Direct Payments	<p>The new Direct Payments vision and visuals were shared highlighting the positive Direct Payment's coproduction that has taken place recent months. It was agreed that the next Board meeting would be a good opportunity to give an update on DP developments and the lessons being learned about coproduction. It was felt that it would be good for the wider board to witness the journey and work around direct payments.</p> <p>Note: The Direct Payments session for Care Provider agencies discussed in March was postponed due to the Covid pandemic and the challenge facing all care providers.</p>	Action: DP work to be focus of next Board meeting
6	Peer Review	<p>Pause and reflect peer challenge on the work of ASC during Covid-19. What has been good and worth taking forward? Note: this is not the planned MiR pause and reflect opportunity.</p>	Action: Pause and reflect review to take place in August 2020.
	Next meeting: Note: The next Board meeting is being postponed until after Making it Real has organised a series of its own pause and reflect sessions.		