

Brampton and District 50+ Forum

Report of the meeting held on Tuesday 22 September 2015 in Brampton Community Centre. 15 members took lunch in the community café; 19 members attended the meeting which followed; several members sent their apologies.

The Vice-Chair, Ann Oswin, welcomed members and the guest speakers and gave several reminders and updates:

- 7:30pm that day (22 Sept): a free concert by Brampton Community Orchestra.
- The Nepal fund-raising day made £1025. The Community Action stall made £440 in sales and also received donations.
There will be a coffee morning later in the autumn, the date still to be decided.
- Age UK have a petition calling on the Government to invest more in social care. Members were encouraged to read this at the end of the meeting and, if they were in agreement, to support it by signing.

Ann then introduced the two speakers, Patricia McClelland and Amanda Green both of whom are employed by NHS and are involved in the review of provision of services in health and social care which it is hoped will lead to a more efficient use of resources.

GP practices in the Carlisle area now form what is called the 'Carlisle locality'. Last week 150 local GPs met to discuss how their practices work, how to maintain staff levels and to keep present staff. Some practices already work together to share resources. One aim is to ensure that everyone gets access to the same level of treatment wherever they are.

Now Forum members' opinions were being sought on a number of local issues.

- 7 day access - would this be helpful?
The point was made that we become ill not just on 5 days of the week so a service should be available every day. At the moment CHOC fills the gap but some prefer to see their own GP. Does CHOC have access to all our details? Doubts were expressed at the ability to staff a 7-day service. GPs already work long hours. How would new doctors be attracted to a more demanding job? Would providing the same level of care 24/7 also be the aim in hospitals?
- It is intended to offer more 'protected learning time' to nurses so that they can gain specialist nursing skills and also to increase the skill level of nursing assistants. Would members be happy to see a nurse (with a specialist skill) from a different practice? There seemed to be no general opposition to this but if travel to a different practice were involved this would be difficult for a significant number of people. A link between Brampton and Longtown would not be appropriate as there is no public transport between the two towns. Travelling from Brampton to Carlisle is less of a problem. Offering an appointment elsewhere would need to be accompanied by details of alternative transport methods, e.g. voluntary drivers.
- 'Primary care communities' are being promoted, linking health and social care. Coordinators are being appointed, the interviews are being held next week. The aim is to provide interventions to reduce the need to go to hospital, but instead to allow patients to be treated at home; also to get people back into their home from hospital as quickly as possible. All aspects of care need to be considered: cooking, transport, walking the dog, shopping, etc.. The health and social care coordinator would also be the link between the local pharmacy, local services, befriending services and the local medical practice. Better coordination between voluntary organisations would also help. There is funding from the health service, initially for 6 months. It was pointed out that this is not a new idea and at least one member expressed scepticism.

- Self management of health, e.g diabetes: looking at care from the patient's perspective - what is important to them, helping them to attain their health goals rather than just telling them what they must do. Would this approach be acceptable? If linked to advice, most members indicated that they would find this acceptable.
- Education: increasing awareness of the alternatives to going to A & E. Members were happy for this to be promoted. It was felt that this a less of a problem amongst the older generation especially when living miles from the hospital. People in Brampton have a high awareness of the help the local pharmacist can provide and would be more likely to visit their GP than the hospital for a minor ailment. One member suggested education in basic first aid in school might help.

Other questions asked by members:

- If more nurses are need for intermediate care, where are they going to come from?
- How will people know about the coordinator soon to be based in the community centre?
- Appliances / equipment. What happens to it? Locally it seems to be thrown away when most of it, after suitable cleaning, could be re-used. It was felt that this was a big waste of resources.
- A GP has to hold conversations with patients about their terminal illness. What training do GPs receive so that these conversations can be carried out in an appropriately sensitive manner?

The speakers were thanked by the Chairperson, Carol Saunders, and members showed their appreciation in the usual way.

Ann then informed the group:

- a new help-line for Carlisle Carers 01228 542156
This is open: Sat. 9-12 Mon 7-9am Wed 5-7pm
- The 50+ Forum now has a new website: <http://50plusforum.bramptoncumbria.uk>
This carries reports of meetings, useful links, updates and a photo gallery and can be viewed on a desktop computer, tablet or smart-phone.

After a reminder about the Age UK petition the meeting ended with tea and biscuits.

The next Forum meeting will be on **Tuesday 17 November 2015**.