

**BRECKLAND OLDER PEOPLE'S FORUM
NEWSLETTER 22nd January 2019**



For further information on Breckland Older People's Forum
contact brecklandopf@gmail.com or Tel: 07546 152695

For information regarding meetings & any submissions for newsletters
contact Linda Heanue (Secretary) lheanue@btinternet.com

*Our next Professionals Meeting & AGM will be on Friday, 5th April 2019
1.30pm at Breckland Council Offices, Dereham*

Members of the Public welcome

ON THE FOLLOWING PAGES YOU WILL FIND INFORMATION ON -

**The Herbert Protocol
Healthy Ageing Toolkit
NCC – Living Wills
Norfolk & Waveney STP
National Pensioners Convention
Norfolk Warm Homes
TV Licensing Survey**

Herbert Protocol

Norfolk's Herbert Protocol was relaunched in November 2018. **PLEASE** note the following clarification on how the protocol is to be used. You are asked to destroy all previous versions of the protocol (including overview information).

Please share and cascade this instruction to all your colleagues and networks.

The protocol can be used in 2 ways:

1. It can be completed by a relative, friend, neighbour or carer, and **kept at home or in a safe place** until it might be needed. If the vulnerable person goes missing, the relative/carer **MUST** call the police on 999. At this point they should tell the police control room that they have a Herbert Protocol, and give a copy to a police officer on request.

Relatives/carers can download a protocol to complete from
<https://www.norfolk.police.uk/advice/personal-safety/missing-people>

2. It may be completed by a police officer in the course of their normal duties. If a police officer considers a person is vulnerable to going missing, they will record the relevant details on the police system and this may also lead to a protocol being completed.

Samantha Cutting, Norfolk Safeguarding Adults Board Business Support Officer
Adult Social Services
(Part time – Tuesday, Wednesday and Thursday) Tel: 01603 224073
Bay 13-15, Floor 8, County Hall, Martineau Lane, Norwich, Norfolk



If you don't know where your children are in the house, turn off the internet and watch them magically appear.

Healthy Ageing Toolkit

Cold weather can be tough for everybody, but it's especially hard for people aged 65 and over. This winter, Norfolk County Council has worked with NHS, District Councils and Third Sector colleagues to produce a healthy ageing toolkit. This toolkit sets out some practical ways that we can all work together to enable older people to stay safe and well at home this winter.

The toolkit is free for anybody to use: www.norfolk.gov.uk/healthyageingtoolkit

You can really help us by...

Thinking about how you can use the toolkit to enable older people in your local community to stay safe and well at home this winter. Sharing the toolkit with your friends and colleagues who are connecting with older people in the community.



ADVANCE DECISION (Living Will)

FYI – for any family/carers it could make a very difficult situation in the future less complicated. An advance decision to refuse treatment lets your healthcare team know your wishes if you aren't able to communicate them.

What is an advance decision?

An advance decision (sometimes known as an advance decision to refuse treatment, an ADRT, or a living will) is a decision you can make now to refuse a specific type of treatment at some time in the future.

It lets your family, carers and health professionals know your wishes about refusing treatment if you're unable to make or communicate those decisions yourself. The treatments you're deciding to refuse must all be named in the advance decision.

You may want to refuse a treatment in some situations, but not others. If this is the case, you need to be clear about all the circumstances in which you want to refuse this treatment. An advance decision isn't the same as an advance statement. Read about advance statements. Deciding to refuse a treatment isn't the same as asking someone to end your life or help you end your life. Euthanasia and assisted suicide are illegal in England.”

<https://www.nhs.uk/conditions/end-of-life-care/advance-decision-to-refuse-treatment/>

“There are a number of ways you can make your Advance Decision

Fill out the forms online. The quickest way is to create your own Advance Decision or an Advance Statement online using our free website: www.mydecisions.org.uk You'll need to print out the forms and sign them when you've finished. You'll also need to get other people to sign them

If you can't use the online forms - You can download the forms and complete them by hand. Alternatively contact us on 0800 999 2434 or info@compassionindying.org.uk and we can send a form and guidance notes to you in the post”

<https://compassionindying.org.uk/choose-a-way-to-make-an-advance-decision-living-will/>

Rosemary Henderson, Development Worker (information) - Adult Social Services
Tel: 01603 223529 | Mobile: 07450 655469
8th Floor, County Hall, Martineau Lane, Norwich, NR1 2DH

Norfolk & Waveney Sustainability & Transformation Partnership (STP)

More Than Half a Million Pounds Awarded for New Health and Care Networks

Health and care professionals in Norfolk and Waveney have been given more than half a million pounds to help build new multi-agency partnerships. The money is being used to develop Primary Care Networks (PCNs), a new way for local professionals such as GPs, social workers, mental health practitioners and community services to work together within local communities.

NHS England has awarded a total of £535,000 to the Norfolk and Waveney Sustainability and Transformation Partnership (STP) which is made up of local NHS organisations, Norfolk County Council and Suffolk County Council as well as the voluntary sector and Healthwatch.

There are 20 Primary Care Networks being developed across Norfolk and Waveney, each one based around a list of registered patients of between 25,000-70,000 people. The aim is for GP practices within each PCN to work in partnership with each other and other professionals in community and social care to deliver care that is more joined up and delivered closer to home.

Dr Simon Cooke of the Oak Street Medical Practice in Norwich said: “By developing PCNs we can offer patients truly joined-up services closer to home so they won’t have to keep repeating their story to multiple health and care professionals. They will get the continuous and personalised care they value. “But PCNs will also benefit health and care professionals because we will become part of a larger and more resilient partnership. GP practices within each PCN can work much more closely with each other as well professionals from other organisations to develop and share resources and expertise.”

Patricia Hewitt, Chair of the Norfolk and Waveney STP, said: “I am delighted that by coming together as a partnership, the STP is bringing additional money into the area so that we can offer real, positive change for our residents.”

A spokesperson for NHS England said: “Primary Care Networks build on the core of current primary care services and enable greater provision of proactive, personalised, coordinated and more integrated health and social care. Clinicians describe this as a change from reactively providing appointments to proactive care for the people and communities they serve. Where emerging PCNS are already in place in parts of the country, there are clear benefits for patients and clinicians.”

The following organisations are part of the Norfolk and Waveney Sustainability and Transformation Partnership (STP).

NHS Great Yarmouth and Waveney CCG
NHS North Norfolk CCG
NHS Norwich CCG

NHS South Norfolk CCG
NHS West Norfolk CCG
James Paget University Hospitals NHS Foundation Trust
Queen Elizabeth Hospital King's Lynn NHS Foundation Trust
Norfolk and Norwich University Hospitals NHS Foundation Trust
Norfolk County Council
Suffolk County Council
Norfolk and Suffolk NHS Foundation Trust
Norfolk Community Health and Care NHS Trust
East Coast Community Healthcare CIC

Oversight Group December 2018 update

As a partnership of local health and care organisations, we are working to provide better and more coordinated care for patients and carers. We can only do this by really understanding what health and care services are like for the people that use them.

So in a change to how our meetings normally run, we started our December meeting with Jane Shuttler, who lives locally, telling us about the care her father received when he was diagnosed with a terminal illness and the support she was given as his carer.

Jane's talk was insightful, thoughtful and difficult to hear at points when she shared missed opportunities to make relatively small changes that would have improved the care her father received and the support she was given. She reminded us of the importance of good communication, both with patients and their carers, but also between health and care staff.

Jane praised individual members of staff for the excellent care they'd provided, but said she felt that the health and care system they were working in was too disjointed and lacking in compassion, both for patients and their carers.

It was encouraging to hear that improvements have been made over the past couple of years as a result of Jane sharing her story and campaigning for greater compassion in health and care services. Jane remains an actively involved patient advocate and has supported other families experiencing a terminal illness.

Jane's story and her experience stuck with us throughout our meeting as we discussed how we can create an integrated care system and how we can improve local mental health services.

Rt Hon Patricia Hewitt
Independent Chair of the Norfolk and Waveney STP

[Click here to receive the updates straight to your inbox](#)

Mental health care in Norfolk and Waveney

Mental health was the focus of a large section of our meeting. This was the first time we had met together since the CQC published its report about the Norfolk and Suffolk NHS Foundation Trust (NSFT), which is our largest provider of mental health services. Antek Lejk, Chief Executive of NSFT, updated us on some of the immediate actions they've taken as an organisation to address the issues highlighted by the CQC.

As a partnership we are committed to working together to make the improvements to mental health care that we need to. Over the past few months we've been reviewing both adult mental health services and child and adolescent mental health services. We have also been working closely with our Suffolk colleagues, who have been conducting their own review.

On Monday, 10 December we published the first draft of our ten-year mental health strategy for Norfolk and Waveney – read it on the Healthwatch Norfolk website. This is just a first draft. There has already been extensive engagement with service users, carers, staff and other stakeholders to develop it, and more will follow in the new year.

Based on what we have heard, our vision is to develop and deliver 'place based' services wrapped around primary care through integrating mental and physical health services in each of our localities - Great Yarmouth and Waveney, North Norfolk, Norwich, South Norfolk and West Norfolk. It will be important to take a 'whole system' approach to improving mental health and wellbeing, working with schools, police, the voluntary sector and other partners.

At the moment we are working closely with our national NHS colleagues, our counterparts in Suffolk and NSFT itself to ensure that the necessary short-term changes take place quickly and effectively while we're developing a new model of care, based on prevention, primary care and community.

As part of this work, we are conducting another phase of public engagement, so that future mental health provision is genuinely co-designed with service users, carers and the public. Tell us what you think of our draft strategy by completing our survey.

What might an integrated care system for Norfolk and Waveney look like?

We hope to have an early opportunity to submit an expression of interest to become an Integrated Care System (ICS). So what is an ICS?

Integrated care systems are a partnership of NHS organisations, local councils, the voluntary sector, care organisations and others taking collective responsibility for managing resources, improving the health of their population and ensuring high quality services.

We held a workshop session as part of our meeting to discuss what our ICS might look like. Learning from other parts of the country, and from the excellent work already being done in many parts of Norfolk and Waveney, we are considering what we could do differently at these three levels to better integrate services and provide more joined-up care:

At “neighbourhood” level: We will create 20 “neighbourhoods” – four in each CCG area, serving a population of between 25,000 and 70,000 people. At this neighbourhood level we have some really exciting ideas about how we can transform care, based on what the most effective GP practices are already doing.

In each neighbourhood we want to create primary care networks – teams based around groups of GP practices and made up of professionals from a range of different backgrounds, for example there would be an adult social care lead and team, mental health workers and community healthcare colleagues.

These multi-disciplinary teams would work closely with local voluntary and community groups and other statutory services; social prescribing will be a key tool for helping tackle the underlying causes of ill-health. We’ve just been awarded £535,000 from NHS England to develop our primary care networks. Watch this video to find out more about primary care networks and the benefits they’ll bring to people living in Norfolk and Waveney.

At place level: We have five CCG areas which are very different from each other in many ways. For example Norwich is urban and has a much younger population than rural North Norfolk, and so there are some instances when we need to adapt services to meet the needs of each area. We are creating local delivery groups in each of the five places, involving the District Council(s) and other key partners including the voluntary and community sector. Across Norfolk and Waveney: There are times when it makes sense for us to make decisions and provide services for the whole area or ‘system’, particularly to remove the unwarranted variations in quality and care that still exist. We need to be clear about when this is the case and equally to understand when we’d be better to make a decision at a more local level.

We’ve already started talking with voluntary sector colleagues and patients, service users and carers about what they think we need to do differently at neighbourhood, place and system levels. We’ll continue to do so in the coming months as we develop our expression of interest for becoming an ICS and our plans for integrating local health and care services.



Happy New Year from the National Pensioners Convention.

Please find a link to the January 2019 issue of the NPC's Campaign! Bulletin [here](#). We have also produced a print friendly version which reduces the amount of ink needed when the document is printed out. This can be found [here](#).

Neil Duncan-Jordan (National Officer NPC)

Norfolk Warm Homes

Norfolk councils are working together to tackle fuel poverty and improve cold homes across the county.

Can you help us reach those living in cold homes who may benefit from extra help to keep warm?

Do you support people who:

have long term health conditions, low income, and/ or disabilities?

live in cold homes without central heating?

may be struggling to pay their heating and electricity bills?

need extra help to stay warm and well?

Norfolk Warm fund project can help eligible households* with:

Installation of first-time central heating for private owned or rented properties without central heating (up to 75% grant funding for landlords with eligible tenants).

Grants up to £500 to help with emergency work such as repairs to domestic heating systems.

***Households are likely to eligible if they have:**

No central heating (this includes homes currently heated by storage heaters, electric radiators, open fires or gas fires), and

A low income or receive certain benefits.

Please note, grants are available on a first come first served basis.

Norfolk Warm Homes team will also support individuals with advice on energy saving, fuel debts, grants, switching suppliers, income maximisation, charity grant applications, priority service register and signposting to other services.

The Warm Homes Team can offer home visits for the most vulnerable households.

To find out more, contact Norfolk Warm Homes Team 01603 430103

warmhomes@broadland.gov.uk

The Norfolk Warm Homes Fund is a partnership to tackle fuel poverty and improve the lives of Norfolk Residents. The project is led by Broadland District Council and funded by the Warm Homes Fund - a £150m fund provided by National Grid and administered by Affordable Warmth Solutions



WINTER WARMERS

Keep warm, hot drinks, lots of layers of clothing,
have a blanket handy to wrap up in and
keep furniture away from radiators



These new, ten minute briefings from the NPC aim to give you a quick analysis of the current debates surrounding older people in the UK.

Save the Over 75 TV Licence

Introduction

In 2015, the Government announced that it would be passing over the responsibility for funding the concessionary TV licence for the over 75s to the BBC from 2020. Last November, the BBC launched a consultation on the future of the concession, and made it clear that the current arrangement was not to be considered. The purpose of this briefing is to therefore encourage members to take part in the BBC's consultation process and make the case for the free TV licence to continue.

The quickest way to take part is to fill in the online survey at: <https://bbcconsultation.traverse.org.uk/>, but if you are not online you can still send your comments and views to Sir David Clementi Chairman, BBC Board, BBC Broadcasting House, Portland Place, London W1A 1AA. The deadline for the consultation is 12 February 2019.

Model answers

Please give the following answers to the online consultation form questions:

1. The BBC should be copying the current concession – tick number 1
 2. (a) Tick None of these
 2. (b) Tick I'm not in favour of this reform
 2. (c) Tick I'm not in favour of this reform
 2. (d) Tick None of these
 2. (e) Leave blank

3. Other comments – include any or all of these points:
 - For many years the free TV licence has been part of the Department for Work and Pensions' (DWP) remit, and quite rightly has been seen as part of government's wider welfare role in tackling social isolation among the older generation.
 - Successive governments have avoided improving the state pension, and instead have offered older people individual concessions, such as the free TV licence for the over 75s. According to the OECD, the UK state pension is the least adequate in the developed world. Removing this concession, without addressing the value of the state pension is therefore grossly unfair.
 - In any democracy, access to information is crucial to enable citizens the opportunity to be informed and make decisions.

- Loneliness among older people is now regarded as a growing problem. 1 in 4 pensioners view the TV as their main form of companionship.
- The provision of such a concession should therefore be seen as playing a vital role in tackling this problem. However, the BBC has no such obligation or responsibility to tackle such issues. This is the responsibility of government.
- As such, the concession is clearly funded from general taxation by society as a whole. This correctly reflects the obligations that we all have – including tax paying pensioners – to make a contribution towards benefits and services which we deem to be worthy.
- Around 6.5m older people have an income of less than £11,800 a year. The TV licence – as a proportion of income, therefore represents quite a considerable amount, and I have no doubt that if the concession were to be removed, many would simply be unable to pay.
- Means-testing a benefit costs ten times as much as it being paid universally, and experience shows that those who need it most, tend to be the ones who don't claim.
- The BBC also needs to look at its other areas of expenditure, such as the salaries paid to some of its top employees and on screen talent, before it makes a decision to cut this concession.

Next steps

In addition to the consultation, the NPC has also joined forces with Age UK and others to launch an online petition against the changes to the concession. Please sign it and encourage others to do so. It can be found here: www.ageuk.org.uk/tvpetition. A hard copy version is also available from the NPC office.

The Convention is also calling a national protest outside the Department for Culture, Media and Sport 100 Parliament Street (off Whitehall) for 12 noon on 7 March 2019.

National Pensioners Convention
Marchmont Community Centre
62 Marchmont Street
London
WC1N 1AB
www.npcuk.org