

IAC forum Meeting 10th November 2020: Summary of key points & updates

- Two staff members from Sheffield City Council (SCC) attended the IAC forum to give an overview of a Strategic Review of Adult Social Care; and one staff member from Sheffield Clinical Commissioning Group (CCG) attended the forum to give an update on activities in pharmacy.

Strategic Review of Adult Social Care



Leaflet_Strategic

Review of Adult Social Care



Easy Read_Leaflet

Strategic Review of Adult Social Care

Leaflets about the Strategic Review of Adult Social Care, the leaflet explains how this review will take place and how the public can engage/contribute towards the review to make adult social care better in Sheffield.

The below presentation was presented in the forum outlining:

- Why a Strategic Review of Adult Social Care is taking place?
- What do we want to achieve from this review?
- How will the review take place?
- The consultation stage of the review



Presentation on
Strategic Review of Adult Social Care

After the presentation two questions were asked to IAC members’:

1. What do people want to see in Adult Social Care services?
 2. How can these services work for the users?
- Forum members’ views and experiences highlighted that:
 1. What do people want to see in Adult Social Care services?
 - We need more specialist knowledge in services (e.g. mental health, drugs, autism). Everyone could have a base level of knowledge and everyone could have specialist knowledge in a particular area. Gaps can be identified using a demand-led approach. One member has found that generic social workers cannot provide the right support for adults with learning disabilities.

- People with lived experiences need to be able to share their feedback to support long term planning of service delivery.
- The idea about “resilient communities” needs to be supported by the whole local authority. The local authorities should have a responsibility to ensure that people have access to shops and services that benefit their wellbeing, e.g. vegetable shops.
- Encouraging independent activities could be done by working with the voluntary sector and returning funding to levels from 10 years ago e.g. if several disabled people share an interest they should be able to use their funding to employ someone to support them to pursue this interest.
- Testicular cancer should be included in annual health checks - people with particular needs may not be able to perform that check on their own.

2. *How can these services work better for the users?*

- One member faced issues with care packages and direct payments. They found it problematic that they had to log and predict care expenses down to the penny. This was especially challenging when they would need to predict how much might be spent e.g. on a day out. This member found there was no flexibility, and this made it hard to manage.
- It would be useful if the person could be included in all communication about their care.
- When a paid carer goes on maternity leave or sick leave, it is not clear who has to pay for this and for replacement carers; these contingencies are not factored in.
- There are some opportunities for experts by experience e.g. in academia. This member wanted to know if there are similar roles in the local authority for experts by experience to shape social care practice.

Pharmacy

- Key updates from the speaker included:
 - The joint working project between community pharmacists and their local surgery has been stalled due to the increasing work pressure on community pharmacists during Covid-19 as they were the most accessible form of healthcare open to the public.
 - Prescriptions can now be ordered online, it is understood that whilst a move to more virtual healthcare appoints can be inaccessible for some, many people approve of the virtual prescription ordering process.

- Currently, there is an ongoing piece of work looking into how people access stoma products. They are trying to understand the needs of people who need stoma products. They are looking at creating a phone line for people who need stoma appliances, specialist care and advice.
- There is a need to ensure that vulnerable and housebound people are taking their medications correctly. They are currently looking into how to make sure these people are getting support with their medications.

Forum members' views and experiences highlighted that:

Ordering of prescriptions:

- One member recognised when ordering repeat prescriptions through a phone number given by their GP surgery this worked well as the phone line had longer opening hours than the surgery. If a patient orders anything that's not on the repeat prescriptions, a member of staff gets in contact with the GP surgery to double check. It would be good if it were easier to access this number
- When you receive a bag of medications, a sticker with the number could be written on it. This might encourage people to call the number for future prescriptions.
- One member mentioned it was helpful when the call operator prompted them about an item they would normally order. This is good practice and helps people not forget about ordering important medication.
- Many forum members' agreed to receive a text when prescriptions are ready for collection is helpful.

Medicine support for vulnerable and housebound people

- One member recalled an experience visiting a relative where they discovered medication was duplicated, and the relative was taking the prescription at the wrong time. It's very important for people to be seen at home so healthcare professionals can address these issues.
- Members agreed that the NOMAD system¹ for taking medication is useful.

Dates for future IAC forum Zoom meetings. These are provisional and subject to change:

- **Tuesday 8th December, 13.00pm - 14.30pm**

¹ Drugs are dispensed into monitored dosage systems by the pharmacy.

- Tuesday 12th January, 13.00pm - 14.30pm