



**Minutes of Sheltered Focus Meeting**

**5<sup>th</sup> November 2009**

**Held at Eliot Gardens, Wigan**

**Tenants Present:**

9

**Staff Present:**

Sam Ryan	Resident Involvement Officer
Pauline Melling	Operations Manager Extra Care
Jamie Weston	Assistant Director Asset Management

Items Discussed	Action
<p><b>Welcomes and Introductions:</b></p> <p>Pauline Melling welcomed everyone and introduced members of staff to everyone at the meeting.</p> <p><b>Morning Agenda</b></p> <ul style="list-style-type: none"> <li>• Welcome &amp; Introductions</li> <li>• Aids and Adaptations Review</li> <li>• Sheltered Update               <ul style="list-style-type: none"> <li>➢ Service Standards</li> <li>➢ Mobility Scooter Policy</li> <li>➢ Guest Room Procedure</li> <li>➢ Training for Resident Participation at Interviews</li> <li>➢ Code of Practice</li> <li>➢ Support Plans</li> </ul> </li> <li>• Resident Involvement Update</li> <li>• The Emergency Call Review</li> </ul> <p><b>Afternoon Agenda</b></p> <ul style="list-style-type: none"> <li>• The Scheme manager Review</li> <li>• Any Other Business</li> </ul> <p><b>Aids and Adaptations Review</b></p> <p>Jamie Weston explained that Adactus are currently doing an Aids and Adaptations consultation looking at the following criteria:</p> <ul style="list-style-type: none"> <li>• Do residents know how to go about getting an adaptation carried out to their property?</li> <li>• Ideas on how to advertise the service across the Group?</li> <li>• If any of the residents present had had adaptation work carried out to their property, how could this process be improved.</li> </ul>	

- Would residents consider moving to a property that already had an adaptation? If not why not and what would it take for someone to move.

Residents present agreed that most residents were not familiar with Adactus Aids and Adaptations process. One resident had approached their scheme manager about adaptations, and the scheme manager had said that they would contact social services, therefore it was agreed that Adactus would have to provide more information to scheme managers who could then share this with residents.

Jamie also stated that from the time of notification, adaptations should take no longer than 6 months.

Residents at Ambergate said that their electrical sockets were too low; Jamie explained that this was considered a minor adaptation.

### **Sheltered Update**

#### **Service Standards:**

- July - 94% of support plans completed and 100% residents received a morning call
- August – 95% of support plans completed and 97% residents received a morning call
- September – 85% of support plans completed and 100% residents received a morning call

Pauline explained that support plan discrepancies were due to residents being on holiday or in hospital, but that scheme managers should be arranging support plan reviews around holidays. Little could be done to compensate for the support plan shortfall if residents are in hospital.

#### **Mobility Scooter Policy:**

Pauline explained that the draft policy was a very generic document because of the variety of Adactus sheltered schemes. Different schemes have different facilities, space (internal and external) and therefore the document was just a guide that each scheme could use to ascertain the best option for them.

#### Key Principals of Draft Policy

- Where a scooter storage facility exists rules of operation will be in force and a waiting list will be held for spaces
- Under no circumstances should residents leave trailing leads in communal corridors when charging up their mobility scooters.
- Where no storage facility exists and requests have been made for storage, the scheme manager can explore other options such as disused storage areas, garages or a purpose built scooter storage facility
- Costs – Funding is limited and will need to compete with other funding requests such as scheme improvements, capital works programme and aids and adaptations.
- Before a resident purchases a mobility scooter, they must seek permission from Adactus Housing Group. This is to ensure that there is adequate storage space available before bringing a scooter onto the Scheme
- Mobility scooters should not be stored in communal corridors due to health and safety and fire regulations
- Mobility scooters should be stored and charged within a residents flat if no

**Jamie  
Weston**

facilities exist

- Mobility scooter and motorised wheelchair owners must ensure that they have appropriate insurance in place. This should include liability insurance in case of either damage to the building or injury involving other people who may be living at, working at or visiting the scheme.

#### **Guest Room Procedure:**

- Resident's friends or family can either stay in flat or use the guest room.
- The guest room/suite is provided primarily for the use of family or friends to support or care for a resident who is unwell. A charge for the use of the facilities under these circumstances is discretionary.
- At other times the guest room can be used by friends or family, prospective residents or existing AHG residents from other sheltered schemes on a first come first served basis.
- Where emergency use is required (for example to care for a resident who is unwell) guests staying socially will be asked to vacate the room at short notice.

Pauline explained that currently the guest room is primarily used for relatives and friends visiting residents for either social reasons, or because the resident maybe unwell. Pauline explained that it had been suggested that residents from other schemes could be allowed to use the guest rooms; it would give them an opportunity to see another area and it would be at a very reasonable rate.

It was made clear that someone may have to vacate the guest room at short notice if a resident is ill and the family need somewhere to stay.

Everyone present felt that this was a good idea.

#### **Training for Resident Participation at Interviews:**

- We would like residents to take an active part in interview panels at schemes
- This would involve having training to do this
- We would like suggestions on how we go forward
- Do we have a pool of residents that can be called upon to sit on a panel in any area?
- Or do we have designated residents at each scheme trained to participate at interviews?
- How would residents be chosen to represent their scheme?

The group agreed that resident should be present on interview panel, but that more consultation was needed to determine which was the best way forward.

Sam explained that Resident Involvement would be doing a consultation in the new year.

#### **Code of Practice:**

Pauline updated residents on the code of practice.

- Where are we up to now?
- What are 'Bolt on' standards?
- When can we expect to submit for accreditation?
- Who will be contacted?

- What sort of questions will be asked?

### **Support Plans:**

- At the last Focus meeting residents were asked to look at the questions and comment on their 'Plain English' and relevance
- As a result of information received, questions were changed to make them more user friendly and less intimidating
- The new Support Plan has been well received both by residents and Scheme Managers

### **Resident Involvement Update:**

Sam gave out the Sheltered Focus newsletter. She asked if everyone enjoyed the Away Day and asked if anyone wanted to be part of the editorial panel.

The Newsletter contained Information on:

- Residents Away Day 2009
- Green Grants
- AHA and BHA Newsletters
- Procurement
- Upcoming Training Opportunities
- Garden Competitions
- Group Focus Competitions
- Aids and Adaptations Consultation
- Glass Half Full Project

### **Emergency Call Review:**

#### **Why are we doing the review?**

- We currently have 10 providers for approx 2000 units
- These have varying costs and services linked to location

#### **What have we done so far?**

- Met existing and potential new providers
- Consulted residents
- Set up residents working group
- Started to draft specification

#### **What are we doing next?**

- Prepare specification
- Discuss proposals with Supporting People
- Consult residents on service and cost
- Prepare final specification
- Report to Board
- Tender service

#### **What we hope to achieve?**

- Flexible Service
- Cost Effective
- Improved Customer Satisfaction

### **Emergency Call Review Consultation Areas for Tender**

- Service Standards?
- Quicker response
- Set time for morning calls
- Face to name
- Better technology

### **Next Step**

- Consult residents and staff on draft proposals

Sam explained that most schemes only had a monitoring service, but that some schemes in Manchester have mobile wardens and weekend calls. Adactus Group currently has 10 different emergency call providers, providing different levels of service.

Adactus are looking for 2 (2 so that 1 does not have the upper hand if there are any problems) providers to ensure the service is consistent throughout the 2,000 units. These providers will have to tailor their service to individual residents needs; e.g. if a resident want a morning and weekend call or not etc.

These needs will be addressed in a consultation to ascertain what residents want from the emergency call service.

Sam explained that the cost of the service differs throughout the providers and that it would be more cost effective to use 2 providers who will service more units, and therefore will be cheaper. Also because the service will be tailored to individual's needs, if a resident needs a lesser service it would be cheaper.

Residents were worried about cost implications for them. Some residents were also worried that people on benefits would be able to have all the services offered, and that residents not receiving benefits would have to bare the cost.

Sam explained that the new tender would hopefully reduce costs not increase them, and that further consultation would be carried out before any decisions were made.

### **The Scheme Manager Review 2009**

Pauline started the afternoon off and explained the objectives of the review. There were four priorities that had come from the questionnaires to staff and residents, both had the same feelings.

#### **Why we're doing the review...**

- 40 sheltered schemes
- 7 RSLs
- Inconsistent terms and conditions
- Funding constraints

#### **What we've done so far...**

- Consulted residents
- Met Supporting People staff
- Researched best practice
- Consulted staff
- Further meetings with SP teams

#### **What we have to do next...**

- Develop new service delivery model/cost it
- Consult residents and staff on draft proposal
- Consult SP teams on draft proposals

- Review Proposals
- Report to board

#### **What we hope to achieve...**

- Reduce SP deficit/deliver affordable service
- Increase customer satisfaction
- Increase staff satisfaction

#### **4 Priorities from Resident Questionnaire**

- **Paperwork**

- Biggest priority identified by residents
- What paperwork do we complete
- Why? Do we need to?
- Frequency?
- Can we do it differently?

- **Social activities**

- Clarify SM Role
- SM is there to facilitate
- \* Not there to collect £ \*
- Resident and staff expectation. 1 person participating is a success

- **Visits to residents**

- Current position SM has very approx up to  $\frac{3}{4}$  hour per week per resident for support.
- Reason for visits
- To check the resident is well- or not- and summon appropriate assistance
- Friendly face/chat?
- What criteria should be used to determine if someone needs a home visit?
- Can this be done differently?

Pauline expressed that Scheme Manager visits were primarily if a resident is unwell. The idea of encouraging more social activities would lessen the need for Scheme Managers to visit residents socially.

Residents agreed that the scheme manager should only visit residents if:

- They haven't seen the resident for a while
- If a resident has just come out of hospital
- If a resident is not well

Sam suggested social activities become a standing agenda point for Sheltered Focus meetings, and that residents could swap ideas for social activities.

- **Scheme Manager off site**

- Scheme Managers away from the scheme
- Why are they off site?
- Training, team meetings, induction, Social Services meetings, promoting service in community, cover
- Supporting People work relates to 75% of job
- Therefore 25% of job is for other duties
- So....Do SM need to be off site?
- Frequency?

➤ Can we do things differently?

Residents present were not happy that the scheme manager is off site so much. Pauline explained that this is unavoidable to a certain extent; and that cost implications meant that it was more cost effective to ask scheme managers to cover each others absences due to sickness or annual leave (so that residents did not have extra costs to incur), but that we would look at training and ensure that it was spread as evenly as possible throughout the year.

**Agenda for Future Meeting**

Making time for residents to swap ideas on social activities in their scheme.

**Any Other Business**

**Meeting Closed at 3:00pm**

**Next Meeting: To be confirmed : April/May 2010**