“A Bite & a Blether”
Consultation Events with Older People in Glasgow
April to July 2013
Event Three – Southside Connections at Dixon Community Halls

Introduction

In Glasgow, the NHS, social work services, the Third Sector and the independent sector have produced their Draft Joint Commissioning Plan for 2013-2016. The plan sets out a vision for the development of services over the next three years. A city-wide consultation was launched on 15th April 2013 to engage with older people, carers and others, with an interest in the proposals, to discover their views on the plan.

Due to their collective ‘reach’ with older people four organisations received funding from the Change Fund to carry out a series of ‘voice and engagement’ events with older people throughout the city. The organisations involved were: Age Scotland; Glasgow Council for the Voluntary Sector; Scottish Seniors Alliance; and Glasgow and West of Scotland Forum of Housing Associations. The aims of the events were to introduce older people to the plan and to ask for their opinions on the key issues.

The events were branded ‘A Bite & A Blether’ and took place over the period April – July 2013. Nine events were held in total across the city. Five prompt questions were used for all nine events. After the first three events, three extra questions were added for use at the beginning of the subsequent six events (these were informed in part by the carers’ consultation). This report documents key findings from the event held at Dixon Community Halls in Govanhill in June.

Southside Connections (at Dixon Community Halls) – 12th June 2013

Background

Fifteen older people attended this session. The group was made up of members of the Southside Connections older person’s forum.

The event began with a short presentation on the key aspects of the Joint Commissioning Strategy. This was followed by the meeting splitting into two smaller groups to allow all participants to have their say on each question.

Question 4 (question 1 for events one to three, ie includes this event)
The draft plan for caring for older people recommends we use hospital services less and do more to support people to live at home. Do you agree or disagree with this? If you agree, what do we need to do differently to make this happen?

- Home Carers need more time
• Services sensitive to older people’s experience (eg gender match)
• Some rehabilitation services have poor reputation (Lightburn)
• Ensure people eat when in hospital – not as simple as putting food down in front of them
• Need better quality of hospital care (people not waiting ages for help to toilet etc; person not left in bed unnecessarily)
• Bring back Matron
• People have problems getting appointments
• Positive is health centre out of hours service at weekends (NHS 24?)
• Concerns over public transport to SGH from Crosshill area
• “one size doesn’t fit always all” - especially true of physiotherapy
• (services at) weekends are problematic
• some (home care) staff who are not interested - a few don’t remove their coat!
• Time is very limited and does not take account of “bad days
• important that new carers should be introduced to the client on a first visit
• Prime importance that it is made easy to get information about services
• some people are home several days (from hospital) before being assessed (for services they need)

There was a general agreement that RCOP would be beneficial for older people as they want to stay in their own home.

There was agreement that if this were to be successful then services would have to become more flexible and more attuned to individual needs. Home care services were frequently mentioned in this context. Another example was that there should be a smooth transmission from hospital to home but this does not always happen. Similarly some hospital care services were in need of improvement it was felt. Problems with transport services from this locality (Crosshill / Govanhill) to the main Southside hospital site were also cited as obstacles to ensuring better experiences for patient and carer with less long term use of hospital.

**Question 5 (question 2 for events one to three, ie includes this event)**
The draft plan for caring for older people also recommends we work closely with communities and community based groups and organisations to better support people in need. Do you think this will make a difference? If so what should we be doing to bring this about?

• People need help with household repairs etc – replacing curtains
• How to get communities more involved
• Some people want to know everything but don’t want to make the effort to be involved in groups to find out
There was an interesting range of responses to this question. Practical services to maintain people in their own homes were important – care and repair being the prime example. There was also some discussion of why people are not more involved with local organisations / groups that might help them, with a range of answers mooted. This included speculation that some people wanted information, for example, to always come to them without them being involved in seeking it out.

Question 6 (question 3 for events one to three, ie includes this event)
There are a wide range of services currently supporting older people in Glasgow. Not everyone always knows what services are available. What should we do to improve people’s understanding and knowledge about current services and to improve access?

- Advertise handypersons service more
- Newssheet through people’s doors
- Use Radio Clyde /STV
- CF West Dunbartonshire LinkUP
- Not everyone knew of NHS24 or Hospital Evening Visiting Service
- Some type of One Stop Shop and telephone number would be useful

There were gaps in information in the group itself as some members told others about specific services available in Glasgow (evening visiting being one, the care and repair service another) A number of attendees mentioned the need for one point of contact being invaluable. The LinkUp Project in West Dunbartonshire was felt to be a good example of this type of information points.

Question 7 (question 4 for events one to three, ie includes this event)
What new services should we be developing to meet the future needs of older people in Glasgow?

- Heart and stroke nurse out of hospital service – monitor medication; monitor activity; eating; check with carer
- Family members cooking and taking food into hospital
- Great need for practical help
- Promote Emergency social work helpline
- Meals on wheels type service
- Mobile library

Services to maintain people at home longer such as repairs and other practical services; meals on wheels; and health monitoring were suggested in response to this question. The discussion overlapped slightly with question eight (below)
Question 8 (question 5 for events one to three, ie includes this event)

What in your view should be our top priority over the next three years for improving services for older people?

- Clear lines of communication
- More local helpline services (linked into health centre)
- Someone to regularly review medication
- Someone to monitor food and drink intake when person discharged from hospital

Information, communication and health monitoring all featured in this section of the discussion. People were confused by who did what in different organisations and also how (if?) professionals communicated between one another. Adequate support and monitoring on discharge from hospital also concerned participants.

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27th August 2013