

Minutes of the meeting held on Friday 4th NOVEMBER 2016 (F)

Present:	
Name	Organisation
Cllr Gul Khan (Chair)	RBC
Cllr Sandra Vickers	
Martin MacDonald	Alzheimer's Society
Janette Searle	RBC
Nina Crispin	RBC
Tony Hall	Civil Service Pensioners Alliance, Reading Group
Pearl Gibson	
John Walford	Whitley Community Development Association
Peter Staples	
Douglas Dean	Thames Valley Pensioners Convention
Brenda Jenkins	Pegasus Court / MacMillan Cancer Support
Barbara Hobbs	Age UK Reading / Readibus
Joan Walker	NHS Retirement Fellowship
Brian Oatway	
Mark Drukker	
Laxmi Kachwala	Readibus
Diane Seydoux	
Laurence Napier-Peele	
Jill Hodges	Southcote Forum
Gina Harris	
Ron Harris	
Jean Hutton	U3A
Marrion Huggins	Civil Service Retirement Fellowship (CSRF)
Valerie Bond	
Heather Cresswell	M.S. Society, Reading Branch
Sylvia Millgate	
Frank Millgate	
Jessie Serrano	
Hilda Kirkpatrick	Readibus
Kate Powell	Intelligent Health / Beat the street
Joy Adams	
Jean Campbell	

Neil Scott	Reading Buses
Ken and Jeni Tucker	
Melvyn Brant	John Lewis Partner Support
Brian Tull	
Alan Edgar	National Pensioners Convention
Val Barnes	
Jill Dray	New Directions
Dianne Hilfi	
Jennifer Ingram	
B Y Chubb	Firtree
Judith El-Nager	
Roy Allum	
Valerie White	
Anna Bailey-Bearfield	Alzheimer's Society
Sharron Herring	RBH
Libby Stroud	South Reading Patient Voice
Sarah Hunneman	Older People Neighbourhood Services
Pat Llewellyn	
Caroline Langdon	
Alison Morrow	The Stroke Association
Pauline Bradbrook	
Ann Coddington	

Apologies	
Name	Organisation
Ann Worsley	
Patience Odunsi	Unison
Miriam Sparkes	
Michelle Berry	Older People Neighbourhood Services
Cllr Rachel Eden	RBC
Yvonne Archibal	
Ryan Bonner	Royal Berkshire Fire & Rescue Service
Doug Buchanan	Royal Berkshire Fire & Rescue Service
Gail Borrows	Park 60+ Exercise (Margaret Morris Movement)

Agenda item 1: Welcome & matters arising
Cllr Gul Khan

The minutes of the meeting on 9th September 2016 were checked for accuracy.

Updates and matter arising from items raised at the meeting on 24th June:

- **Item 7.2 page 10:** Reading policies on building bungalows: the specific query is whether Reading Borough Council is avoiding giving planning permission for bungalows, and if so on what basis

RESPONSE FROM HEAD OF PLANNING (Giorgio Framallicco)

With regard to planning permission for bungalows, Reading Borough Council has no policies that would prevent bungalows and we are not aware of any bungalow applications in recent years at all. Bungalows would have to be judged against our housing policies as for any other type of house.

- **Item 7.2 page 11:** Consultation for building houses on Conwy Close, Tilehurst. Tilehurst residents not consulted. Some residents in Tilehurst feel they have not been properly consulted on the construction proposals at Conwy Close and have not received the relevant paperwork and information in the post.

RESPONSE FROM PLANNING DPT (DARYN INSTON)

A letter from Interim Managing Director, Simon Warren, to MP Alok Sharma was sent on 12th July in response to a Councillor enquiry. The consultation paperwork was posted to the inquirer, and the inquirer was invited to contact officers to have an opportunity to view the plans.

Updates and matter arising from items raised at the meeting on 9th September:

- **Item 2 page 4:** Pedestrian area on Broad Street: 'Another option which the group would like to be considered is making Broad Street fully pedestrianized.'

- RESPONSE FROM TRAFFIC MANAGEMENT (SIMON BEASLEY)

The reasons for making Broad Street pedestrianized relate to the shops along there needing to get delivery vehicles in and out. Reading Borough Council would be unable to make Broad Street fully pedestrianised as many of the businesses do not have any other form of access.

It's not just about loading/unloading there are also servicing (both to buildings and under the road), disabled & emergency vehicle access and other forms of access particularly for people with prams/pushchairs/mobility scooters. Just making Broad Street fully pedestrianised without sealing it all off in some way (like a shopping

mall) would not stop people from cycling through.

- **Item 7.2 page 12: CONCESSIONARY BUS PASS CONSULTATION**

RESPONSE FROM TRAFFIC MANAGEMENT (STEPHEN WISE)

The analysis of the responses to the consultation shows; 27 responses, 20 from Reading residents, 7 from Wokingham residents 15 responses referred to the change from 09.00 to 09.30 with 10 stating it would make getting to appointments more difficult. 6 responses referred to the removal of concessions form football services with cost being the main problem identified. 2 responses could not be interpreted as for or against the proposals 4 responses supported the proposed changes as they felt that elder people should also bear some of the pain of the financial cuts and the proposals were not a fundamental removal of the majority of the travel benefits currently being enjoyed.

There were a few ideas to help make these proposals work and for both the AM peak and football travel the suggestion was that concessionary pass holders could show their pass and buy a cheaper than full price ticket. No level of price was suggested but this would seem to be a sensible idea. If adopted it would still give OAP's a discount, would cost RBC nothing for their travel that time, and would give the bus company a greater income than the reimbursement rate they currently receive.

The consultation results will be formally reported to the Council.

The amended and approved minutes from the meetings are available from the Older People's Working Group page on the RBC website at:

<http://www.reading.gov.uk/opwg>

Agenda item 2: Reading Cycling Campaign (RCC)

Adrian Lawson, Chair of RCC

RCC has been campaigning for 33 years for a cycle friendly Reading.

For the past 10 year, AL has written articles in the local press admonishing cyclists to always to ride safely.

The data collected over the past years show that cycling in Reading doesn't generate serious accidents. However, there is a need to educate cyclists.

In the past four years, only 10 people have taken up free cycle training. RBC also has had 10 attending free training.

RCC suggested to Police to give people free cycling training instead of a penalty. There was no response from the Police.

We do our best but we can't do all we want.

Questions & Answers / Comments:

Q1: Do you have any objections to Broad Street being pedestrianised completely?

A1: Yes I have objections. Cycle Campaign would like Broad Street to be accessible to cyclists as it is a through route from the west to the east of Reading.

Q2: What would you like to see regarding people getting off their bikes?

A2: I represent the people who want to choose cycling as a method of transport.

Since 1999, 9993 people were injured in road traffic collisions in Reading. Of that number 1800 people cycling were injured by people driving motor vehicles (about 1550 of which were caused by the driver not the cyclist*). There were 33 people injured following collisions between pedestrians and cyclists.*

There was one collision between a cyclist and a pedestrian in Broad street resulting in an injury. The injury was slight and it was in the part of Broad street where cycling is permitted. It was in 1999#

*The data source for the numbers injured are from Crashmap.

#The proportion of cyclists injured in collisions caused by drivers where the driver was at fault came from Thames Valley Police Road policing section in a personal communication.

Q3: Readibus drops some people in Broad Street who are vulnerable. There should be better signing showing that they are not allowed to cycle in the same area as Readibus.

A3: There is no provision of somewhere safe for people to ride their bike. The Council has failed to set up a cycle network in Reading. We would like segregation but the Council is not facilitating this. Only two good segregated cycle networks in Reading since Forbury Road have been built. A lot of construction and road works do not include cycling facilities.

A culture has been created that a cycling network is not adequate and as a

result no shared facilities exist.
Q4: There is a cycle tract on the Henley Road, but cyclists do not use it.
A4: This is a dangerous cycling lane as cyclists need to give way to cars getting out of their homes. In addition, the road is not swept properly and can be slippery. Cyclists do not use facilities in general. They would if they were properly designed. The Highway Code doesn't force people to use cycling facilities.
Q5: Some cyclist go at 25mph. Cars wouldn't be with pedestrians at 25mph.
A5: Good Cyclists tend to ride according to road conditions. Speed limits do not apply to bicycles, only applies to motorized vehicles.
Q6: Oxford has four times as many cyclists as Reading. There is issue of aggression from road users. What research has been done about the problem? Have there been strategic meetings between Reading BC, cycling organisations and residents?
A6: Aggressive young men in cars try to move cyclists off the road.
The Council has a Cycle Forum which meets quarterly. It is felt that the views of cyclists are ignored. Road designers do not like to be told that the road designs are inept. Cycling lanes were put within door opening zone. And the suggestions from cyclists were ignored. The standards of design need to be improved. The recommended design for cycle lanes is 2 meters. In Reading cycle lanes are less than 1.2 meter, lower than the recommended standard.
Q7: Is it compulsory for cyclists to have bells and lights in front of the bike?
A7: a bell and light must be fitted at the time of sell.

Agenda item 3: Support for people with dementia
Anna Bailey-Bearfied, Alzheimer's Society
Sharron Herring, RBH

3.1 Fix Dementia Campaign, Alzheimer's Society (ABF)

ABF invited members to attend an event in January at the RBH, part of a national campaign 'Fix Dementia Care Hospitals'.

The campaign was launched in January 2016. As a result, the Alzheimer's Society decided to collaborate with Royal Berkshire Hospital to discuss and showcase best practice relating to people affected by dementia and to investigate the experience of people affected by dementia in hospitals, care

homes and homecare.

<https://www.alzheimers.org.uk/fixcampaign>

Members and partners are invited to the Fixed Dementia Care Event on Friday 27th January 2017 (afternoon). Further details will follow shortly.

Some key findings from the Facebook Survey done by the Alzheimer's Society:

- 90% of carers said the person with dementia they care for becomes more confused in hospital
- 92% of carers said hospital environments are frightening for the person with dementia they care for
- Almost 60% of carers felt the person with dementia they care for wasn't treated with dignity or understanding while in hospital

The Alzheimer's Society have put forward some recommendations:

Recommendation 1

All hospitals to publish an annual statement of dementia care that includes: satisfaction levels, number of falls, discharges at night, emergency readmissions within 30 days, levels of staff and board dementia awareness and training, prescriptions of anti-psychotics and examples of how care is being personalised.

Recommendation 2

Monitor to use the annual dementia statement as part of their Risk Assessment Framework to identify and take action in hospitals where dementia care is inadequate.

Recommendation 3

Care Quality Commission (CQC) to appoint a specialist dementia adviser and include dementia care indicators as part of their Intelligent Monitoring work to improve regulation of dementia services in hospital.

Actions taken so far:

- Almost 9000 eCampaigners have written to Simon Stevens, NHS Chief Executive, asking him to make it compulsory for hospital to publish an annual statement looking at the quality of dementia care.
- Over 170 MPs attended a parliamentary event in February that marked the launch of the report. 82 of them wrote to Simon Stevens

and backed the campaign.

- Locally we are working with hospitals resenting the report results and looking at how we can work together to improve dementia care.
- We are meeting key decision makers to ensure Monitor includes the annual dementia statement as part of their Risk Assessment Framework and CQC appoints a specialist dementia adviser and include dementia care indicators.

John's Campaign

The campaign is calling for the right of people with dementia to be supported by their carers in hospital.

The willing family carer should have the right to continue support and the patient to continue to receive it during their stay in hospital. This needs to be as universally accepted as the right of parents to remain with their children.

Some wards have now flexible visiting hours; it is working well, but need to ask ward sister first. Some carers can stay all night.

The Alzheimer's Society is endorsing the campaign.

<http://johnscampaign.org.uk/#/>

3.2 Royal Berkshire Hospital (SH)

There are good things going on at the RBH right now. Money from Department of Health was used to change wards for elderly care. SH shared with the group some pictures of the recent redesign at RBC in the elderly care wards. Redesigns included the following:

- The flooring was changed to wooden appearance so as to have less visual variations and not frightening.
- Nurses stations moved to be closer to patients and increase visibility of patients, also this helped reduce barriers between nurses and patients. Seated areas have been set up so that nurses sit with patients while writing notes.
- The Day room has been tidied up and changed to a theatre area. RBH are upgrading outpatient's areas everywhere in hospital!
- Entrance doors were changed, reducing confusion when people can't go through.
- We are using screens / old newspapers on walls to create images

of local area and encourage conversation.

- Pictures have been placed above beds to help people recognise theirs.
- Bays colour coded and clocks changed too.
- Using light and sensory therapy equipment, reminiscence items in recreation areas, for example sewing machine. Running reminiscence groups with MERL (Museum of English and Rural Life).
- Activities Care Crew implemented, staff provide activities such as singing, baking, hand massage. Helps improve sleep quality at night and reduces levels of distress. Good feedback from patient groups and now adopted by Royal college of Nursing. Project now being rolled out internationally as well.

Staff have given good feedback- may help improve recruitment and staff retention. SH want patients flagged more easily, trialling purple wrist bands.

Questions & Answers / Comments:

Q1: Are discharges at midnight still happening?

A1: Some hospitals allow this to happen, but we need to ensure that it doesn't happen with someone with dementia. We do have complaints that people go out of hospital late, but this is due to transport services coming to collect people late. A new campaign will address this: Home early settled and safe.

Q2: There is a lack of communication between wards and sheltered housing accommodations.

Q2: We are trying to work closely with Sheltered Housing to prevent this from happening. This is linked to the issue of securing nursing home beds.

Q3: A patient who had dementia but was in another ward, i.e. the orthopaedic ward. Can the dementia facilities be brought to another ward?

Q3: RBH is a large footprint; it is hard to get patients back down to the other end of the hospital. All nurses have dementia training, this is mandatory. RBH is trying to extend the dementia friendly facilities to the whole hospital. People could have dementia but be diagnosed with other conditions.

Q4: Do elderly care wards include Young People with Dementia (YPWD)? YPWD do not always have the attention they deserve.

A4: Elderly care wards are for people 65+. YPWD will be cared with the

conditions they have been diagnosed for at the hospital.

Agenda item 4: Health and Wellbeing Strategy Consultation

Janette Searle, RBC

Hard copies of the consultation questionnaire and paperwork are available today at this meeting.

On Monday 21st November - members and partners are invited to a public workshop on the HWB Draft Strategy in the Council Chamber, 1 - 4 pm. Strategy will be overseen by the Reading Health & Wellbeing Board (HWB Board). The members of the HWB Board include:

- the local authority
- Clinical Commissioning Groups
- the local Healthwatch

The HBW Strategy is delivered in partnership. The strategy aims to improve and protect the wellbeing of the whole population, it is for everyone who lives and works in Reading. The Health & Wellbeing Strategy sets out agreed priorities. In times of austerity, health inequalities are widening, and there is a need for more targeted approaches.

Mission statement

“to improve and protect Reading’s health and wellbeing - improving the health of the poorest, fastest”

Reading at a glance

This information is based on the Joint Strategic Needs Assessment (JSNA) for Reading (<http://www.reading.gov.uk/jsna>)

The JSNA is not available in paper format. It is constantly being updated as new data comes relevant.

- Reading population: 155,700 people
- Ethnically diverse town
- Has a younger population than the England average
- Higher than average earnings
- Higher levels of homelessness
- There are large pockets of deprivation in Reading leading to high risk of premature death or poor health in the most deprived areas - 10 year difference in life expectancy for men

The foundation blocks of the strategy are:

- Safeguarding vulnerable adults and children
- Recognising and supporting all carers
- High quality co-ordinated information to support wellbeing

Proposed priorities below are now out for consultation to get the views of people and ideas on how to implement an action plan:

- Healthy lifestyle choices
- Dental care, obesity, physical activity, smoking
- Reducing loneliness and social isolation
- Reducing the amount of alcohol people drink
- mental health and wellbeing in young people
- Living well with dementia
- Breast and bowel cancer
- Reducing tuberculosis

Comments received so far for each of the priorities:

- Supporting people to make healthy lifestyle choices
 - Eat for Health, Beat the Street, Stop Smoking services
 - Peer support groups
 - Modernising leisure facilities
 - Getting messages out through various departments and also community groups
- Reducing loneliness and social isolation
 - Voluntary groups which support people to develop social contacts
 - Community navigator type services - e.g. Living Well Co-ordinators, Social Prescribers
 - Tackling crime and the fear of crime
 - Transport
- Reducing the amount of alcohol people drink to safer levels
 - Alcohol has tended to be overlooked in Reading in the past. Better education about impact of drinking to excess.
 - Taxes
 - Pricing
 - Licensing applications
 - Promoting soft drinks

- Promoting positive mental health and wellbeing in children and young people
 - CAMHS
 - In-school support, e.g. PHSE, school nursing
 - Youth counselling
 - Social media
 - Access to sports and leisure activities

- Making Reading a place where people can live well with dementia
 - Through the Dementia Alliance there are links to dementia friends.
 - We are getting better at earlier recognition and diagnosis.
 - Carer Support

- Increasing breast and bowel screening and prevention services
 - Raise awareness of benefits
 - Target groups with lower take up
 - Offer access through different points
 - Review age cut-offs

- Reducing the number of people with tuberculosis
 - Raising awareness of symptoms
 - Targeting communities most at risk
 - Assuring people of confidentiality

Questions & Answers / Comments:
Q1: Is there any way of monitoring children who are being abused?
A1: The Safeguarding Team is making sure concerns are being addressed and children are being looked after.
Q2: Provision of leisure facilities in Reading is poor. Swimming pools are inadequate. Reading is closing Arthur Hill and central swimming pool is going to go. How quickly will these facilities be replaced?
A2: The whole of Reading leisure facilities and infrastructure will need to be looked at.
Q3: Provision of care services in Reading. Will care services be brought in house?
A3: We are looking at best value for money in the market in providing care services.

Q4: Why is TB an issue? I thought we had eradicated it in this country.

A4: we need to tackle TB as an issue as some people haven't had immunization and some new arrivals in the country come without proper immunisation.

Agenda item 5: Recycling Bins
RBC

Recycling Bins Officers were not able to attend the meeting, But they have given us a note an update as follows.

Reading Borough Council does not offer smaller bins as Neighbourhood Services team do not receive many requests for them from residents. Unfortunately, the team can only order smaller bins in large quantities from the supplier and this in turn causes a storage issue at the depot. Neighbourhood Services provide an assisted collection service for any residents who find it difficult and haven't got anyone else to help present their bins for collection at the edge of their property.

With an assisted collection, the crew will collect the bin from where it is stored at the front of a resident's property and return it to the same place once it has been emptied. Assisted collections can be arranged by emailing us at streetcareadmin@reading.gov.uk or telephoning 0118 9373787.

Agenda item 7: Current issues and suggestions for future meetings
Cllr Gul Khan

7.1 Citizen Advice Reading (Astrid Aldous)

AA presented information on how people can get help with meters, billing, budgeting and use of energy around the house.

A special campaign week which started on 31st October provides information and raises awareness about how people can save money on their heating bill - Free insulation, warm home discount, fuel allowance.

CAR can come and talk to groups about this.

CAR provide one to one appointments, people can have a telephone appointment also if they prefer. Residents can also contact USwitch for

advice (<https://www.uswitch.com/> / Tel: 0800 688 8244)

CAR are funded to help people get the best deals for their heating supply - help to find a better deal or help to change to another supplier. The service is impartial.

It is a good idea once a year to check that one is paying the best deal. It is best to check actual usage of energy and not pay estimated bills.

Smart meters are coming in. This system generates meter readings which are sent to the supplier automatically. Smart meters are not compulsory and are free of charge.

People with Complex medical needs can put their name on the Priority Service Register. This is a free service provided by all energy suppliers. If there is a power cut or an emergency, those who are on the Priority Service Register will get special assistance to respond to their needs.

People who have had smart meters installed reported that the installation process wasn't as smooth as anticipated. Some electric cupboards are too narrow to fit a smart meter. Some people might be contacted but are not be able to have one installed. Some smart meters are not compatible to all suppliers. However, AD confirmed that smart meters should be compatible.

There are 46 energy companies operating in Reading. Their core information is the same. But they can offer different payment options or displays.

Pre-payment tariffs are going to be capped next year through to 2020.

Contacts for CAR:
Citizens Advice Reading
Minster Street
Reading RG1 2JB

Tel: 0118 952 3022

Email: energy.admin@readingcab.org.uk

7.2 Older People's Day 2016

The event was held on 14th October at the Rivermead Leisure Complex.

It was a big success, with 375 in attendance and 50 Voluntary Sector

Organisations and services. 70 members of the Nepali community groups attend the event.

Rivermead offered more space than at previous venues.

We want to thank all the volunteers who helped run the event. There were 20 new volunteers this year!

A big thank you also Reading buses who put a shuttle bus to transport people from the town centre to the venue. This was a huge advantage. Only remark was that there wasn't a timetable available so people were not sure when exactly the bus were running.

There was good feedback about Rivermead as a venue. Rivermead staff were very helpful and flexible.

The Over 50s group at Rivermead also helped a lot with the event, this was much appreciated.

Another positive comment was in relation to the good networking opportunities the event offered.

There is room for improvement however. The sound system wasn't the best - some speakers offered to lend their sound system equipment for next year.

Also, having both presentations and speakers and information stands in the same room wasn't perhaps the best layout - when planning the event next year, we will need to look at different options.

Suggestions:

- To list agenda items for information
- Bus - printed timetables

7.3 Printing and posting OPWG minutes and agenda

As was mentioned in the invitation letter and email to this OPWG on 4th November, members were invited to consider whether they need to receive printed papers ahead of the meetings in future. We will make sure printed copies are available at the meeting. We will also put forthcoming agendas and previous minutes on our website, and use the rolling screens in the foyer at the Civic Centre to advertise dates.

If members are able to receive information from us by email in future, please

let us have these alternative contact details - either by email to opwg@reading.gov.uk or by completing the 're-registration' sheet at the November or December meeting this year.

From the beginning of 2017, we will only be posting out OPWG papers to people who have 're-registered' to receive these between now and the end of 2016.

Next Meeting:

- Friday 16th December 2016 - "Christmas social"
2 - 4 pm, Council Chamber, Civic Centre