



# Older People's Working Group

Minutes of the meeting held on Friday 8<sup>th</sup> September 2017 (FINAL)

Present:	
Name	Organisation
Cllr Gul Khan (Chair)	RBC
Nina Crispin	RBC
Janette Searle	
Tony Hall	Civil Service Pensioners Alliance, Reading Group
John Walford	Whitley Community Development Association
Douglas Dean	Thames Valley Pensioners Convention
Barbara Hobbs	Age UK Reading / Readibus
Mark Drukker	
Laurence Napier-Peele	
Heather Cresswell	M.S. Society, Reading Branch
Mr & Mrs Millgate	
Alan Edgar	Thames Valley National Pensioners Convention
B T Chubb	Firtree
Judith El-Nager	
Lorna Walker	
Elaine Jalland	
Patience Odunsi	
Mr & Mrs England	Grovelands Walking Group
Barbara Hobbs	Grovelands Walking Group
Brian Tull	E.R.F.A
Marrion Huggins	CSRF
Michael Heath	
Mr and Mrs Froud	
Gladys J Rofani	
Jessie Serrano	
David Wicken	
G A Summers	
Joan Walker	NHSRF
Laxmi Kachwaha	
Pearl Gibson	

Yvonne Antrobus	
Fiona Price	Age UK Berkshire
Matt Taylor	Age UK Reading
Chris Cowap	MacMillan Engagement Lead
Robert Monk	Berkshire REMAP
Valerie Bond	
Brenda Jenkins	Pegasus Court / MacMillan
Diane Hilfi	

Apologies	
Name	Organisation
Cllr Sandra Vickers	RBC
Jennie Ingram	
Moira J Gomes	
Beth Poole	Reading Deaf Centre
Sylvia Simmonds	Reading Deaf Centre
Diane Seydoux	
Gail Borrows	Park 60+ Seated Dance and Music
Elizabeth Grugeon	
Liz Riddle	MacMillan
Miriam Sparkes	
<b>Cecily Mwaniki</b>	<b>Berkshire Healthcare Foundation Trust</b>

**Agenda item 1/2: Welcome and minutes of last meeting on 23<sup>rd</sup> June 2017**  
*Cllr Gul Khan*

The minutes of the meeting on 23<sup>rd</sup> June 2017 were and approved.

Matters arising:

- Clock outside the Old Civic Centre  
 Update from Property, Estates & Valuation Team  
*The clock will not be repaired. The clock was not working before the civic was demolished and during the demolition of the civic the electric supply was also cut off. In addition when the area is regenerated it is anticipated that the clock will be removed.*

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

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



### Agenda item 3: Better Care Fund Integration

*Jo Hawthorne, Head of Wellbeing, Commissioning and Improvement, RBC*

Better Care fund is a National programme but we are implementing our own local approach.

The National Better Care Fund programme is now in the third year. This is about making services more joined up particularly across Health and Social Care.

Nationally all areas are integrating their health and social care systems Each area of the country is adopting their own local approach. Our local integration aims are to enable people to tell the story once, enable people to stay at home, and move more services into the community.

#### **Our local vision for services**

*“ Local people are supported to improve their own health and wellbeing, and that when people are ill or need support, they receive the best possible joined up care”*

#### **An overview of the Integration projects that we have in place**

##### Discharge to assess

This is the Willows facility which enables people to move quickly out of hospital and begin their reablement and rehabilitation.

##### Community Reablement Teams

This is to enable people to receive home based reablement services for up to 6 weeks.

##### Delayed Transfers of care

This is where we are drawing together all front line professionals from across health and social care to concentrate focus on the individual and to more quickly enable people to move out of hospital.

##### Specialist support to Hospital discharge

Choosing a residential or complex care package can be a distressing time and this is a small specialist team based at Royal Berkshire hospital who are in place to help people make these choices.

### **Social Prescribing**

This is a service Social Prescribing is designed to support people aged 18+ with a wide range of social, emotional and practical needs, and supports improving emotional and physical wellbeing as well as supporting individuals to take greater control of their own health.

### **Rapid Response to Care homes**

The services offers the residents a co-ordinated and joined up health and social care service, reducing unnecessary admissions to hospital, improving the flow of patient from community to acute and back to community and avoiding unnecessary delays in discharges back to the care homes.

### **Connected Care**

This enables front line professionals to access both health and social care records enabling health and social care staff to understand peoples overall background and not just a medical or just a social care one, this will speed up the assessment and discharge processes. We will be amongst the first in the country to have this system later this year.

### **Integration Health and Social Care Hub**

There are currently a number of entry points for people into health and social care services through different referral routes and pathways. We are currently exploring options to establish an integrated health and social care front door and working to progress this during 2017-18. This will support our aim of people "telling their story once".

### **Falls and Frailty**

New scheme to provide a blue-light multi-disciplinary response to the older, frail patient who has fallen, through providing on scene assessments and treatment at the time of the fall. The FFR response will make the patient safe, functional and independent in their own home through immediate clinical and therapy input.

### **Street Triage**

The service consists of an experienced mental health practitioner [MHP] working alongside a Thames Valley Police [TVP] Officer. They provide a first point of contact to support other TVP officers who may have found a person in a public place [the street] in mental health crisis, so leading to appropriate mental health based interventions being delivered [rather than default police interventions] possibly preventing a Section 136 being applied and/or

preventing the patient being taken to a local Accident & Emergency department.

### Getting home

The scheme aims to reduce the time people spend in an acute, community or mental health inpatient bed at the point that they no longer need clinical care and to prevent avoidable admissions.

#### Schemes

Discharge to assess

Community Reablement team

Delayed Transfers of Care High Impact Model

Specialist support to Hospital discharge

Social Prescribing

Rapid Response to Care Homes

Connected Care

Integrated Hub (Health and Social Care)

Falls and Frailty

Street Triage – Mental Health

Getting Home

#### Aims

To reduce the length of stay for individuals who are fit to leave acute hospital care  
To reduce permanent admission to residential and nursing care  
To improve service user satisfaction  
To further enhance the number of service users at home 91 days post discharge from hospital  
To avoid hospital admission

Questions & Answers / Comments:
Q1: Vision for the future. Are you confident that there are enough staff for people to remain in their homes?
A1: We buy beds from providers to ensure the demand is met. We assess the needs of each individual. We believe we have provision in the market place but we can't forecast what the market place will do as some providers might not go out of business or stop running some services.
Q2: There won't be enough beds in the future. The market place is changing week by week. The BCF doesn't seem to be addressing problems re mental health and learning disabilities issues.
A2: We need to look at planning for future care needs. We check on a weekly basis that we have enough beds. Extra Care has been a preference for a majority of people as they want more freedom, independence, and control and access to their own front door.
BCF isn't all encompassing. It's a part of integration. BCF is NHS funding to pay for social care. The government said that they will not cut NHS funding but have cut health and social care funding.
Q3: Total changes need to be made within social care and health care.
A3: We do not use outside companies to provide care. The companies we use are accredited. The points raised are taken on board. We have to work within the system we have though.
Q4: Why are there two separate budgets for health and social care? They should be under one budget.
A4: We hear those points. There's a lot that can be done to improve health and social care in Reading.
RBC officers work within financial constraints and cannot be blamed for failures. But feedback is needed to improve things.

**Agenda item 4: MacMillan Cancer Education Project**

*Nisha Sharma, Rushmoor Healthy Living (RHL)*

**MacMillan Cancer Education Project**

The project is run for the South Reading CCG and is delivered in partnership with Rushmoor Healthy Living, for a period of two years (March 2017-2019).

The aims of the project are:

- Address and improve health inequalities in accessing cancer services.
- Help communities to access info about cancer in South Reading, isolated communities and those who do not have English as their first language.

The outcomes of the project are:

- Improved access to services
- Increased uptake of cancer screening activity (bowel, cervical, breast)

The activities run by the project coordinator:

- Identify different cultural needs and barriers to prevention and early diagnosis
- Training cancer ambassadors
- Run Cancer Awareness sessions
- Run cultural education and attend communication engagement sessions, events and activities (including work with Royal Berkshire Hospital, GPs, community groups)
- Provide information and signposting

South Reading CCG has a high prevalence of cancer. Many factors influence this result:

- Ethnic origin
- Education
- Access to screening facilities

The Census 2011 recorded 155,700 residents in Reading. South Reading CCG has approximately 110,204 residents from 2014 mid-year estimates.

- 139,844 people were registered in one of 20 GPs in South Reading CCG (July 2016)\*
- BME population in South Reading CCG: 30.5% (The Census 2011)



- White non-British population in South Reading CCG - 10.6% (The Census 2011)

Nisha Sharma, the project coordinator, can assist with information sharing. Not the clinical aspect.

It is important to adapt the information presented to fit in with the needs of the community. Some communities don't talk openly about cancer. In BME communities, this subject can be taboo.

### About cancer

Signs and symptoms

- 200 different cancers have been identified
- People tend to go to the hospital at the last minute.

The "Z" card is available from Macmillan. It shows signs and symptoms of various cancers, in males and females. Contact Nisha to request a supply of the "Z" card.

### Screening programmes

Because of lack of understanding, people don't attend screening programmes:

- Bowel cancer screening - for men and women 60-74 years old, recommended every 2 years. One off test available from 55.
- Cervical cancer screening - for all women 25-49 years old, every 3 years; 50-64 years old every 5 years
- Breast cancer screening - for all women 50-70 years old, every 3 years.

Advice:

- Do not ignore invitation letter
- Inform your friends and family
- Go and see GPs for symptoms
- Contact Cancer research UK, Macmillan Cancer Support

**Prostate cancer** is the biggest threat in men.

Symptoms include:

- needing to urinate more frequently, often during the night
- needing to rush to the toilet
- difficulty in starting to pee (hesitancy)
- straining or taking a long time while urinating

- weak flow
- feeling that your bladder has not emptied fully

#### Facts

- 40,000 new cases every year
- In men aged 50 or older
- More common in men of African-Caribbean or African descent, and less common in men of Asian descent

#### Risk factors

- Age, Ethnicity, diet, exercise, obesity, family history

The project is looking for volunteers to help inform people. If you would like to be part of this project, please contact Nisha.

For more information contact:

Nisha Tiwari Sharma

TEL: 01252 362660 / 07935409743

Email: [nisha.sharma@rhl.org.uk](mailto:nisha.sharma@rhl.org.uk)

#### Questions & Answers / Comments:

Q1: Why cut off screening for bowel cancer at 75?

A1: We are not able to give the reasons here today.

Q2: Why only South Reading?

A2: Different problems in community have been identified. South Reading has low rates of screening and intervention and survival rates. South Reading has a lower rate than the rest of the town. The low rate of screening uptake is affecting BME group in South Reading. The project aims is addressing health inequalities in that area.

Screening entitlement is the same across the country. South Reading CCG is lowest funded CCG across the country. North Reading CCG gets good screening rates.

Q3: Can you ask to get screening if your age is outside the screening band?

A3: Yes you can.

## Agenda item 5: Health and Wellbeing Updates - Flu Vaccination and Winterwatch

*Suzie Watt / Richard Lewis, RBC*

### How the cold can affect your health

The cold and damp weather - ice, snow and cold winds - can be bad for your health, especially if you're aged 65 or older.

It can make you more vulnerable to winter illnesses, such as coughs and colds, which could become very serious.

It also increases the risk of high blood pressure, heart attacks and stroke. However, there are things you can do.

### What can you do?

#### Take up the offer of the flu vaccination!

If you are eligible for the free vaccinations these will be available through your GP and also free through pharmacist.

#### Get expert advice

Always seek advice from your pharmacist at the first sign of a cough or a cold, before it gets more serious. It can lessen the impact of illness.

#### Buy over-the-counter medicines

Many over-the-counter medicines (including paracetamol and ibuprofen) are available to relieve symptoms of common winter ailments such as colds, sore throat, cough, sinusitis or painful middle ear infection (earache).

#### Keep yourself warm

Keeping warm, both inside and outdoors, over the winter months can help to prevent colds, flu and more serious health problems such as heart attacks, strokes, pneumonia and depression.

- Wear several layers of light clothes, as these trap warm air better than one bulky layer
- Heat your home to at least 18C (65F)
- Stay active - try not to sit still for more than an hour or so

#### Keep out the cold at night

Keep your bedroom window closed on winter nights. Breathing cold air can be bad for your health as it increases the risk of chest infections.

### **Winterwatch - Get the right help to keep your home warm**

Make sure you're receiving all the help you are entitled to. Learn how to make your home more energy efficient and take advantage of financial schemes to keep up with energy bills. See link: [Keep Warm, Keep Well](#) for details.

Visit [Go Energy Shopping](#), the Ofgem website, to find the best deal for your gas and electricity.

You can also check your heating and cooking appliances are safe and operating properly by contacting a Gas Safe registered engineer.

### **What is Winterwatch?**

Winterwatch is a fuel poverty campaign organised by Reading Borough Council to help vulnerable residents stay warm and safe during the winter months.

We carry out free home visits to see how energy is being consumed in your home and offer a more cost effective alternative.

Last year Winterwatch carried out 300 visits across the Reading helping residents keep warm and worry free for the winter ahead.

### **What can Winterwatch help you with?**

- Free energy checks in your home.
- Draught proofing.
- Setting up heating programmers.
- Adding residents to energy suppliers priority list.
- Providing free equipment such as heaters, dehumidifiers and bedding for additional warmth.
- Applying for Warm homes discount (£140 for those on certain benefits)
- Helping you switch energy suppliers.

### **Additional information**

Switching suppliers is an easy process and can save you a lot of money over the course of a year.

When your contract comes to an end your energy supplier will move you over to a "Standard contract" which will be more expensive.

Winterwatch, using information on your latest bill can help you find a cheaper supplier and help you through the switching process.

We can even look into Smart meters which will show how much energy you use on a daily basis.

For a free home visit from the Winterwatch team call Winterwatch on **0118 937 3747**

Questions & Answers / Comments:

Q1: What is your definition of low income?

A1: There's no freshhold, it can be anybody.

**Agenda item 6: Older People's Day 2017**

*Sarah Hunneman, RBC*

Older People's Day is on Monday 9<sup>th</sup> October at the Rivermead Leisure Complex.

The programme of event is ready and can be seen online at [www.reading.gov.uk/opday2017](http://www.reading.gov.uk/opday2017)

The last planning session is Monday 25<sup>th</sup> September at 1.30 pm, Council Chamber, Civic Centre.

The flyer has been translated in Nepali and Polish. Please help us publicise the event through your contacts. Let Nina Crispin know if you would like hard copies of the publicity flyer.

Questions & Answers / Comments:

Q1: Why was the date for the event changed from the Friday to the Monday 9<sup>th</sup> October?

A1: Monday 9<sup>th</sup> October fitted best in order to have use of the venue (Rivermead)

Q2: When is the national day for the event? Why not have the event on a Saturday?

A2: 1<sup>st</sup> October is the national day but also the United Nations Day. It is not always convenient for partners to join events on a weekend.

## Agenda item 7: Current issues and suggestions for future meetings

*Cllr Gul Khan*

### Current issues:

- World Mental Health Day is on Tuesday 10<sup>th</sup> October 2017. There will be various events in Reading to mark World Mental Health week.
- Monday 11 September 2017 - Responsible reporting on suicide media event. The Berkshire Suicide Prevention Strategy will be launched on 17<sup>th</sup> October 2017 at Wokingham.
- The Health and well-being board on 6<sup>th</sup> October 2017 has mental health theme
- **New bus route - Buzz 42**  
A new minibus route called BUZZ 42 will start on 2nd October. It will serve the route from Kenavon Drive to Rivermead Leisure Centre.

Rivermead will be served Monday to Saturday by the new BUZZ 42. On Sundays (and Bank Holidays) Rivermead is already served hourly by Greenwave 60a.

And on Mondays to Fridays the Community link bus 28 also serves Rivermead 3 times a day.

The new minibus service is being funded using the S106 money from the Kenavon Drive development so it will last as long as this money lasts. Continuance of the service beyond an expected 3 year period will depend on how much people use it so any help to encourage people to do so would be appreciated.

Fares for the new service are the same as currently;

- £1.30 single from town to Rivermead or vice versa.
- All other Reading Buses passes and tickets are valid and concessionary passes can be used in accordance with scheme conditions. (For disabled passes this is anytime, for OAP passes this is after 9.30am Mon-Fri, anytime at weekends.)

The frequency of the bus will be up to every 40 minutes for the Rivermead end.

Boarding in the town centre to go to Rivermead BUZZ 42 will serve

Minster Street stop MP (opposite rear of Primark), St Mary's Butts stop CS (outside Sally), and Greyfriars Road (by Greyfriars Nursery).

It will serve stops along Caversham Road at Fire Station, Swansea Rd and The Moderation and terminate at the stop on Richfield Avenue adjacent to Rivermead.

Coming back from Rivermead the bus will again serve Caversham Road stops then Friar Street stop FN (adjacent Novotel), Blagrove Street stop EO (opposite Blagrove Arms), and Kings Road (Jacksons).

A time and map schedule of the new bus route will be made available in the near future.

- **Cambridge oral history project**

A PhD student from the University of Cambridge is looking for volunteers to take part in an oral history project about memories of food and dieting in post-1950s Britain. The aim of the project is to uncover and record the food experiences of a diversity of individuals from the 1950s through to the present-day. Topics of interest include: memories of food in childhood, food and eating in early adulthood, and experiences of dieting and slimming. (Participants need not have been involved in dieting in order to take part.)

**Role of volunteers**

Volunteers must be at least 60 years of age in order to take part and will need to be available for interview at some time during the period September - November 2017.

Participation typically consists of one to two informal interview sessions, lasting approximately 60-90 minutes each time.

Interviews will be arranged to best suit the schedule of the participant and will ideally take place in a quiet location of their choosing (perhaps in an office, in a community centre, or in their home).

The interviews do not require any preparation and are intended to be as relaxed and informal as possible. All interviews are audio-recorded, however the anonymity of participants is safeguarded at all stages of the project.

**Do you want to be involved?**

If you are interested in volunteering, or if you have any questions about

the project, please do contact the project coordinator, Katrina-Louise Moseley. Email: [klm76@cam.ac.uk](mailto:klm76@cam.ac.uk) / Tel: +44 (0)7969 533670

- LGBT (**Lesbian Gay Bisexual and Transexual**) history projects for Reading base residents

A project looking at the history of LGBT residents in Reading. Contact Cllr Rachel Eden [rachel.eden@reading.gov.uk](mailto:rachel.eden@reading.gov.uk)

- Voting rights for women  
Celebration next year of Women's activities and involvements. Any stories are welcome of suffragettes being involved in campaigns. If you have any stories please contact Mayor Rose Williams ([rose.williams@reading.gov.uk](mailto:rose.williams@reading.gov.uk))

#### Suggestions for future meetings:

- Reading buses - updates on new bus routes and changes to current bus routes 9 / 19
- CCGs (**Clinical Commissioning Groups**) - to come and talk to question why we get differences in services and what can be done about it.  
Improvements in CCGs delivering services
- Merged Berkshire West CCGs
- Changes to NHS 111 service / CCG consortium
- Legionnaire disease

#### Next Meeting:

- Friday 3<sup>rd</sup> November 2017  
2 - 4 pm, Council Chamber, Civic Centre