



# Older People's Working Group

**Minutes of the meeting held on Friday 22<sup>nd</sup> June 2018 (FINAL)**

<b>Present:</b>	
<b>Name</b>	<b>Organisation</b>
Cllr Gul Khan (Chair)	RBC
Cllr Tony Jones	RBC
Janette Searle	RBC
Nina Crispin	RBC
John Walford	Whitley Community Development Association
Douglas Dean	Thames Valley Pensioners Convention
Laurence Napier-Peele	South Reading Patient Voice
Elaine Jalland	
Patience Odunsi	
Marrion Huggins	CSRF
David Wicken	
Joan Walker	NHSRF
Miriam Sparkes	
Diane Hiles	Oddfellows
Caroline Langdon	U3A
Jean Hutton	U3A
Sue Winyard	Engage Befriending
Shaheen Kausar	Reading Community Learning Centre
Steve Smith	Thames Valley Police
Michelle Noone	Thames Valley Police
Brian Oatway	
Lorna Walker	
Michael Heath	
Mark Drukker	
Uda Chalk	
Jessie Serrano	
Anne and Jack Beard	
Kathryn Dacre	Invisible Cats: Memorable Dementia
Judith El-Nager	
Laxmi Kachwaha	Readibus
Colin Ferguson	Firtree

Janice Scruby	Firtree
Molly Haines	
Claire Williams	Royal Berkshire Hospital
Jill Hodges	Southcote Residents
Catherine Carmana	
Phyllis Buddy	
Bernadette O'Rourke	Crossroads Care
Sally Ellis	Berkshire Healthcare NHS Foundation Trust (BHFT)
Pearl Gibson	
Pauline Bradbrook	
Derek Woad	
Jean Boustead	

Apologies	
Name	Organisation
Liz Johnson	(ReadiBus)
Sandra Vickers	RBC
Melvyn Brant	(John Lewis Partnership)
Diane Seydoux	
Barbara Annells	
Yvonne Antrobus	
Brenda Jenkins	

**Agenda item 1/2: Welcome and minutes of last meeting on 6<sup>th</sup> April 2018**  
*Cllr Gul Khan*

The minutes of the meeting on 6<sup>th</sup> April were approved.

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: Matters arising from last meeting on 6<sup>th</sup> April 2018**

#### **Healthwatch consultation**

Feedback from Janette Searle, Wellbeing Team, RBC:

The Council is grateful to everyone who responded to this consultation. Some of the feedback was quite detailed and we are keen to ensure we analyse this fully as part of planning for future Local Healthwatch arrangements in Reading. In the meantime, Reading Borough Council has re-commissioned Healthwatch Reading to continue to provide a Reading-only service.

#### **Recovery College:**

Agenda item 8: Current issues - Page 11. An item about the Recovery College will be added to the agenda on 7<sup>th</sup> September.

#### **Cycling signage**

Agenda item 8: Current issues - Page 12 - Cycling in town centre

Question raised: What actually is wrong with the signage? Can this be clarified?

### **Agenda item 4: Reading 2050 Vision**

*Prof. Tim Dixon, Reading University*

The aim of the project is to explore what Reading could be like in 2050 as a place to live and to play in. The project has already been running for 5 years.

The project runs in collaboration with University of Reading, Reading UK CIC, and Barton Wilmore (local Architectural practice).

#### **Why are cities important?**

- 70% of people now live in cities
- A variety of people now access cities

### **Why do we need visions?**

- Visions provide the framework to discuss and debate how we want to reach our goals
- They give a sense of purpose, vitality and belief systems

Similar projects have been run the UK and internationally: Bristol, Glasgow, Johannesburg.

A lot of the visions are based on Fears about climate change.

### **Local examples of city visions are:**

- Oxford 2050
- Milton Keynes
- Basingstoke Horizon 2050
- Windsor 2030

Over the past 5 years we have worked and networked with a number of cities.

### **Quadruple Helix - Urban Innovation**

The concept of the quadruple helix is to bring together in a co-creation movement University, Industry, Government and People.

### **Smart and sustainable Reading 2050**

The project has been exploring how using technology could benefit people's lives. The areas covered include:

- improving access to transport and transport facilities,
- planning services for older people for assisted living in their homes,
- protecting the environment,
- creating jobs,
- making Reading a place more inclusive for children and grandchildren

**Reading is at the heart of Greater Reading** and the Reading 2050 vision is also looking at the areas around Reading which has a total population of 318,014 (from 2011 Census).

Our working definition of Greater Reading (as a primary urban area) includes wider consideration of the following areas (although of course they are important administrative areas in their own right):

- Wokingham
- West Berkshire
- Arborfield
- Woodley
- Theale
- Crowthorne
- Earley

Reading is the largest town in UK.

We have run a series of engagement activities, including workshops and a public consultation. The feedback received helped us develop the vision.

### **What does the vision look like?**

- A green technology city - we want to enhance our strengths in science, technology and the creative industries to provide a thriving collaborative economy and employment opportunities for all, as part of a smart & sustainable city
- A city of culture and diversity - we want a city that delivers heritage, arts and cultural opportunities which are accessible to people of all ages/backgrounds and supports the evolution of stronger communities with a clear sense of place, city-wide.
- A city of rivers and parks (Kennet / Avon / Holybrook) - we want to capitalise upon our corridors of green and blue to provide vital open space, connectivity and places to rest and play.

Our overarching vision statements.....

- Share success to support and enable thriving communities
- Deliver a real sense of place and identity
- Thrive on cultural and cross-generational diversity
- Recognise our heritage and natural assets
- Embed technology to deliver innovation and low carbon living for

all

- Welcome ethical and sustainable businesses who support Reading

Reading 2050 is referenced in the corporate plan and commitment from Reading Borough Council.

### Next steps...

We want to communicate the Vision to the community, UK-wide and internationally and seek further feedback & engagement. We will also seek to further develop the steering committee and leadership - Reading 2050 Futures Commission.

The aim will be to set a route map of incremental steps for the most ambitious ideas and to report back to the wider business and local communities.

If you are interested in learning more about vision, please contact us:

Website: [www.reading2050.co.uk](http://www.reading2050.co.uk)

The project also works in partnership with the Reading Museum:

The Where's Reading Heading film is at:

<http://www2.readingmuseum.org.uk/get-involved/projects-consultation/where-s-reading-heading/>

### Questions & Answers / Comments:

Q1: Reading was not designed to have the amount of traffic it has. Issues which are still current include transport / buildings / size of the roads.

A1: The way Reading has evolved has facilitated some of the issues; we need to encourage people on Public transport and to walk and encourage cycling. We anticipate an impact of the 2019 Crossrail house prices. But there is no easy answer.

Q2: There doesn't seem to be much forward thinking on a transport strategy. There is also a lack of general publicity for Reading 2050. Have RISC (Reading International Solidarity Centre) been approached?

A2: The transport system is a difficult topic. Cooperation between the Local Authority and across boundaries areas is important. There are public lecture series on Reading 2050 on the London Road Campus. More will be done about that. A link for that series can be shared with this group:

<https://www.reading.ac.uk/architecture/architecture-public-lectures.aspx>

We have good links with RISC - will contact them to explore more with them.

A3: Planning for Older People's Day 2018. We would like to invite to attend. Might be useful for the event.

Q3: Good idea to explore.

Q4: More needs to be done to educate older people for accessing technology. Reading has an ageing population. Can older people adapt and cope? People are afraid with the new generation focused on technology

A4: Education skills apply to all groups of society and this is something that we will consider.

There are a number of resources available to help older people improve their IT skills, older people could find out information here:

<https://www.ageuk.org.uk/berkshire/activities-and-events/silver-surferscomputer-classes/silver-surferscomputer-classes-in-reading/>

Q5: We are concerned about the provision made for older people made in terms of health and social care in that scenario.

A5: This is a framework. We are not taking away the responsibility from the Local Authority and the services it offers, we don't have specific plans for health. There is a need to think about the quality of the environment, place and building, to help people enjoy living in Reading. Active lifestyle is very important.

In respect of the situation of the Royal Berkshire Hospital and other hospitals in Reading, a lot of traffic is generated by the hospitals and some of the ideas are around exploring options to decentralise the hospitals.

Q6: How about the ability for the Local Authority to invest on traditional living rather than fancy living?

A6: The balance of housing in Reading doesn't mean knocking down old housing but to look at which areas can be renovated. We need to celebrate the nature and parks we have in Reading.

## **Agenda item 5: Loneliness and Social Isolation Project**

*Sungeeta Gupta, British Red Cross*

This presentation is a brief introduction to the British Red Cross' new Connecting Communities programme and our partnership with the Co-op to highlight and tackle loneliness and social isolation in communities across the UK.

The Co-op approached Red Cross to work on a project and we were able to raise 9m for this project.

### **The British Red Cross**

The British Red Cross is volunteer-led humanitarian organisation that helps people in crisis, whoever and wherever they are. We enable vulnerable people at home and overseas to prepare for and respond to emergencies in their own communities. And when the crisis is over, we help people recover and move on with their lives.

We have been providing health and social care services in hospital and at home since the NHS was first established, almost seventy years ago. We currently deliver more than 200 such services in all four nations of the UK.

Each year, we help thousands of vulnerable people live independently in their own homes and confidently in their communities, through services such as our wheelchair loans and mobility aids, Support at Home and Home from Hospital

Our services give people the support they need to recover from crises, regain their independence and to reconnect with their families and communities - providing everything from help with shopping and getting around, to a friendly voice and a cup of tea.

The staff and volunteers delivering these services, just like me, have found that the challenges faced by the people we support are increasingly complex - and that loneliness and social isolation is a common, recurring factor. Every day we see their damaging effects.



## **The partnership with the Co-op: A common commitment to our communities**

In July 2015, the British Red Cross and Co-op announced we were partnering together to highlight and tackle the issues of loneliness and social isolation in the UK.

These were serious issues we had both seen were having serious impacts in our communities:

British Red Cross volunteers and staff - through the hundreds of services we provide to help thousands of people each year to live independently and confidently Co-op colleagues and members working and living in 1500 communities across the UK - 1 in 3 of whom have said they know someone they think is lonely.

Together we felt this was a crisis we could not ignore.

Brought together by our common commitment to strengthening our communities, we would:

- Provide vital care and support for thousands of isolated and lonely people who feel they have no-one they can turn to
- Campaign for change - raising awareness of the widespread scale and impacts of loneliness, and inspiring and empowering people to take action.

### **What we have achieved so far**

Our partnership came out of the Co-op's largest ever charity partnership vote - 78,000 Co-op members took part in the vote, choosing tackling loneliness with the British Red Cross as the issue they cared most about in their communities.

Since then, inspired by the strong connection Co-op colleagues and members and British Red Cross have with the issues, our partnership has achieved notable successes.

We have gone far beyond our original fundraising target of £3.5m - raising over £6 million in just 18 months, and with every single Co-op Food store contributing to the fundraising for the first time ever.

We have produced pioneering research into the scale and impacts of loneliness in the UK, uncovering a hidden epidemic with over 9 million people always or often lonely. Through our findings we have played an important role in highlighting how loneliness affects people of all ages, with serious impacts going far beyond the older age groups the issue is often identified with.

Our research has also secured massive national, regional, online and social media coverage for the important issues. An evaluation of its publication found we reached more than 55% of the UK adult population. And by sharing our findings with partner organisations for their campaigning, we have continued to shine a light on this hidden crisis.

We have also announced that we are introducing brand new services to help tackle loneliness in nearly 40 areas across UK. These services are now starting to bring together over 50 staff, like myself, and more than 500 volunteers to help thousands of lonely and socially isolated people connect with their communities.

### **Trapped in a bubble**

Before deciding how we would spend the money raised by Co-op colleagues, members and customers, we wanted to build a comprehensive understanding of the issues and identify best practice and gaps in existing support.

We looked at what we knew ourselves in British Red Cross, learning more about how loneliness and social isolation affected the lives of the people using our existing independent living services.

We then undertook a review of over 100 pieces of research from the past 40 years. This uncovered some gaps in knowledge, particularly around personal experiences of loneliness and how people of all ages can be affected.

To fill these gaps, we commissioned leading social research agency Kantar Public to work with 45 experts and over 2,500 members of the public, including more than 100 people with personal experience of loneliness.

## **An identity crisis : the role of life changes as triggers for loneliness**

Major life events can change someone's sense of who they are, what their role is in life, and their ability to connect with other people.

To learn more about this, in our research, we focused in particular on six groups of people whose identity has been disrupted:

People with mobility limitations

People experiencing health issues

Young new mums

People recently bereaved

People recently divorced or separated

Retirees or people living without children at home

At the British Red Cross, we strongly believe in giving a voice to the people we support. So here, in their own words, are some people you might not expect talking about their experiences of feeling socially isolated and lonely.

Video: case studies highlighting how loneliness affects adults of all ages:

<https://www.youtube.com/watch?v=Po0pek1iT6M&t=5s>

## **Connecting communities : our response**

All of this evidence, combined with Co-op's fundraising, provided the strongest of foundations for our response.

In December 2016 we announced 49 new services - a brand new network of 45 Community Connectors and 4 additions to our proven Support at Home services.

We located these in 39 communities across all four nations of the UK - from the north of Scotland to the west of Cornwall. We looked at existing services alongside issues such as national statistics population data and indexes of multiple deprivation to identify the communities where additional support was needed most.

These new services bring together 50 dedicated staff and more than 500 new volunteers to provide vital support to thousands of people who feel they have nowhere to turn

Unlike many existing schemes to tackle loneliness, these are available to adults of all ages. Whether they're seriously struggling to cope with the demands of life or they simply don't know where to turn for a friendly chat, our new teams can help.

We expect many people using our services to have gone through one or more of the life changes we focused on in our research - but our services aren't limited to people in those groups. Almost anyone experiencing or at risk of loneliness can benefit from our support.

People can come to us via GPs and health and social care partners - but as people can be reluctant to ask for help through formal channels, they can also contact us directly or be put in touch with us through family or friends or groups and networks in their local community.

### **An overview of our services**

During an initial period of up to three months, we aim to help each person to feel better connected and able to enjoy the benefits of being more involved in their local area.

Everything we offer is built around enabling people to realise the things they want to achieve.

Together we'll develop a specially tailored plan of activities focused on helping each person towards the brighter and better-connected future they want. For each person, our support looks a little bit different. But typically we will help someone to:

Rediscover their interests - through an introductory chat with one of our local team members, together we'll explore the person's interests and what they want to achieve. We'll identify ways the person can start to do the things they want to do - or maybe try something similar but new.

Rebuild their independence - over the next couple of months, a volunteer will regularly meet up with the person to chat about how they're feeling and provide the support they need to be able to achieve their goals. Together they'll take part in some of the local activities they've found out about. And reflect on the person's experiences of being involved

Find new friends - by joining the person in local activities that match their interests, we'll introduce them to people who like doing the same things. Drawing on the confidence and sense of independence they've built, each person will have the chance to build new friendships that last.

Enjoy staying involved - as the person becomes more connected to their community, our support will become less intensive. But we'll still be here when the person needs us.

### **Our journey to connection**

#### **Contact:**

- person finds out about Connecting Communities
- person contacts the local team

#### **Plan:**

- staff/volunteer meets with the person
- explores their situation, interest, goals for future and steps they could take to achieve them

#### **Support:**

- Volunteer advises of relevant local groups / activities and joins them at the sessions
- Person is supported to achieve goals up to 12 weeks of calls, visits and community activities

#### **Review:**

- Volunteer regularly helps person to review / reflect on involvement in local activities and progress towards their goals

#### **Connect:**

- Person stays involved with interests / groups / activities / people they connected with through our support
- Service remains available if required.

### **Who can access our support?**

Our Connecting Communities services are open to adults of all ages who have a service in their area - that's people aged 18 and over in England, Wales and Northern Ireland and 16 and over in Scotland.

We typically support people who have been highlighted as experiencing or at risk of loneliness due to a life-changing trigger, such as experiencing

bereavement, ill health or mobility limitations. This includes but is not limited to the people in our research groups.

People should have aspirations to improve their state of loneliness /social isolation and be able to consent to our support.

For people whose situations are particularly complex, such as those with acute mental health issues or drug/alcohol dependencies, we may initially refer to more specialist support - but Connecting Communities remains open to them once their situation has stabilised.

They should also be registered with a local GP - although our referrals come from a far wider range of our community networks. These include

- > Self- referrals
- > Family or friends

Existing British Red Cross services

Hospital discharge

- > Community-based health and social care partners
- > Health and wellbeing partners
- > Third sector partners

Local community groups and networks

Local Co-op stores, services and networks

Contact details:

Sungeeta Gupta

Community Connecting Service Coordinator, Reading

Mobile: 07808246715

Email: [Sgupta@redcross.org.uk](mailto:Sgupta@redcross.org.uk)

#### Questions & Answers / Comments:

Q1: Who funds the service? How does it fit in within existing network of services provided by other organisations for lonely and elderly people? Why are you doing it at this time?

A1: We are a new initiative to give people confidence. It's not a befriending service.

It takes one person to put their hand out and to be kind to others. One of our volunteers supporting a young person is 101 years old.

Q2: how is the safety of the person and volunteer meeting through the scheme achieved?

A2: the first visit will be in a coffee shop or outside the home.

**Agenda item 6: Adult Social Care - opportunities and challenges**  
*Maura Noon, Interim Head of Adult Social Care (RBC)*

Health services are better known and understood than Social Care services. Just about everybody uses Health services at some time, but Adult Social Care is only used by a minority of people and often the first contact they have with the service is at a time of crisis. Adult Social Care is a service which may be used for a little bit of time or for the rest of one's life.

**Directorate of Adult Care and Health Services**

The position of Director of Adult Social Care Services is one required by Law. In Reading, Public Health sits alongside Adult Social Care under one director - this is a good arrangement for focusing on prevention of Adult Care needs and for linking with health services.

Professionals as well as members of the public may have limited understanding of how Adult Social Care works and what the options are. If a GP says 'you need residential care', check that out with a Social Care professional. This isn't a medical issue, and health staff aren't trained and kept up to date on the various options for keeping people with care needs both well and independent. A care needs assessment is required to decide if residential care - or other support - is needed.

Another difference between Health and Adult Social Care is that social care is not free at the point of delivery in the same way as NHS services. Support is means tested, so some people will get free social care whereas others may have to pay a contribution or the full cost.

**Adult Social Care services include:**

**Short-term/urgent support**

If you come to us in a crisis we will offer some short-term care and support services to keep you safe until your situation is more stable and you are in a better position to make decisions about your long-term care.

### **Information and advice**

Part of Adult Social Care's role is to ensure that there is accessible advice and information to let people know what is available to help them stay independent and healthy as long as possible. Information and advice is FREE and available to all Reading residents. You can also find information and advice on the Reading Service Guide: [www.reading.gov.uk/servicesguide](http://www.reading.gov.uk/servicesguide)

### **Preventative services**

We offer services which could help maintain or improve your independence and prevent, and reduce or delay your need for more intensive social care support. This includes working with your friends and family to help you make the most of your own support networks, reablement services to help you regain your independence, providing alarms, adaptations and equipment for your home to help keep you safe and helping you to access social and leisure activities.

Most preventative services are free and available to ALL Reading residents whose initial assessment suggests they would benefit from this help (\*there is a small weekly fee for community alarm services).

### **Ongoing care and support at home**

We can help you choose and plan the services you want to meet your eligible needs. For example:

Day services - where the person finds company and the facility to have a bath and a wash

Shared lives - foster care for adults / older people and people with learning disabilities

We can arrange and manage your care and support services for you or, if you would like more choice and control over your care arrangements, we can give you the money we would normally contribute towards your care costs and you can make your own arrangements. This is called direct payment. We will only suggest a permanent move to a care home if your assessment shows you have substantial and complex care and support needs which can't be met at home.

### **Safeguarding adults service**

The Council works closely with the other councils in the West of Berkshire, the police, probation, health and a range of private and voluntary agencies to try and prevent adult abuse occurring and stop it when it happens.



## **The Challenges**

- With a growing older population, 20% of older people will come in into social services. Most of those using the service at older age are women.
- More people now survive into adulthood with complex health conditions. We need to rethink about the way we deliver services. It is more likely that we will have people coming into services than coming out of services.
- The population is becoming vibrant and more diverse.
- Hospital admissions and discharges - we need to work closely with health services to ensure people are getting the right care at the right time and in the right place, e.g. at home as soon as that's safe.
- There is a growing number of people with Dementia, however not every older person will develop dementia
- Financial - we need to think of different ways to deliver services to meet all of our financial commitments
- The Independent sector delivers most of the services on our behalf. We need a good solid local market to keep it sustainable.
- Self-funders - a number of residents have the means to pay for services without input from social care services, but we need to make sure they can get the information they need to make good decisions about care.

## **The Opportunities**

- Transformation of Adult social care to have more emphasis on prevention and supporting people to manage their health
- Assistive technology - various forms of equipment can help people to live independently with reduced need for other more expensive forms of support.
- Focusing on people's strengths. The emphasis now is on how can you help yourself and how can we help you help yourself. We carry out an 'asset based' assessment of your needs, which means we put people, families and communities at the centre of the picture and look at what needs to be put in place around that to support people maintain their independence for as long as possible.

- Working closely with health services
- Supporting young people in transition from Children's to Adults' Services and helping them stay independent longer
- Looking at how we commission services, so we buy high quality support which delivers value for money, including:
  - Home care
  - Residential care
  - Extra care housing
  - Nursing and residential care homes

**We want people to**

- Remain independent
- Have their own front door
- Have more control over their care and support
- Receive high quality services - including from the independent sector
- Be safe

**Questions & Answers / Comments:**

Q1[comment]: There is a growing interest in developing the sustainability and resilience of the care system by exploring technological support for physical care and mental health problems. There are some fascinating examples around the world of robots performing caring tasks.

Q2: Do you find the funds are sufficient to do what you want to do?

A2: It's always a challenge. You can't do everything all at once. The challenge is having the financial resources to do it when we want to.

Q3: In other areas, the voluntary sector is doing intergenerational work - e.g. shared extra care living arrangements. Could this be introduced here?

A3: There are no plans not have this in Reading. The scheme is based on matching younger people looking for accommodation with older people who have a spare room they are willing to let in exchange for a commitment to doing basic tasks around the house. We would be happy to explore this.

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

*Cllr Gul Khan*

- Suggested items for future meetings:
  - Redevelopment of 3Bs
  - StreetCare - litter in the town
  - Reading Bus 23 -
  - Recovery College
  - Berkshire Coroner's service
  - Reading Cemetery and Crematorium service and the future of that service

- Current issues

- Older People's Day 2018

Future planning meetings

- Wednesday 4<sup>th</sup> July, in Council Chamber, from 1.30 pm - 3 pm
- Wednesday 29<sup>th</sup> August, in Council Chamber, from 2 pm, - 3.30 pm
- Wednesday 12<sup>th</sup> September, in Council Chamber, from 2 pm - 3.30 pm

- Bus service: bus 23.

- Active Retirement - Walking football / Archery  
New schemes from the Reading Play. The activities started at the beginning of June and everyone is welcome to join, regardless of abilities.  
The venue for the Walking Football is Prospect Park Astro Turfs Courts, on Wednesdays from 11 am til 12 pm.  
Archery is at the Milestone Centre (Northbrook Road, Caversham, Reading RG4 6PF) every Tuesday from 1:30 pm to 2:30 pm and from 2:45 pm to 3:45 pm

- Charges for green bins - proposals to put charges up by £10

- Pot holes / humps

- Travelers - Council policy and approach

- Changes times of use of bus passes for disabled people

- Beggars - things are beginning to happen and some positive changes are noticeable.

Next Meeting:

- Friday 7<sup>th</sup> September 2018  
2 - 4 pm, Council Chamber, Civic Centre