

## Older People's Partnership

19 March 2014

10.00 - 11.55 am

Council Chamber, Fourth Floor, Easthampstead House, Bracknell



Present: Councillor Dale Birch  
Madeline Diver, CAB  
Mira Haynes, Bracknell Forest Council  
Tracey Hedgecox, Age Concern Bracknell  
Peter Smith, President of Bracknell Chamber Council  
Rhiannon Stocking-Williams, Bracknell and District Citizens Advice Bureau  
Councillor Clifton Thompson  
Linda Wells, Bracknell Forest Homes

In attendance: Jane Currie, Bracknell Forest Voluntary Action  
Angela Harris, Bracknell Forest Council  
Yvette Hockley, Bracknell Forest Voluntary Action  
Rhiannon Stocking-Williams, Bracknell and District Citizens Advice Bureau  
Chris Taylor, Healthwatch

Apologies: Rev Michael Bentley  
Janet Berry, Head of Community Learning and Skills  
Janet Dean, Bracknell Forest Voluntary Action  
Bob Pennell, Age Concern Bracknell  
Mark Sanders, Healthwatch  
Jayne Streak, Lifelong Learning Team  
Abby Thomas, Bracknell Forest Council

### Action Points

Minute	Item
24	<p><b>Minutes and Action Points from 4 December 2013</b></p> <p>The minutes of the meeting held on 4 December 2013 were agreed as a correct record.</p> <p><u>Matters Arising</u></p> <p>A meeting had been held regarding the terms of reference for the Board. These would be circulated for final comments.</p> <p>A progress column had been added to the action plan for partners to use.</p> <p>Age Concern had moved office before Christmas but did not want drop-in visitors at the new back office location.</p> <p>The Board agreed that as the Healthcheck programme was now being delivered that Kieth Naylor would liaise with Lisa McNally to gather any promotional</p>

	<p>information so that it could be circulated through the Board's networks.</p> <p>There was a need to undertake and comply with a self-assessment, which focused on a number of different criteria. Thanks were given to BFVA, Age Concern and the Chamber of Commerce for their input. A self-assessment tool would be circulated with a risk assessment for final comments by Board members by Friday 4 April, then it would be considered by Adult Social Care Departmental Management Team.</p> <p style="text-align: right;"><b>(Action: All)</b></p>
25	<p><b>Local Healthwatch Bracknell Forest - signposting needs of older people</b></p> <p>Chris Taylor, Healthwatch, was present at the meeting to discuss Healthwatch, <a href="http://www.healthwatchbracknellforest.co.uk">http://www.healthwatchbracknellforest.co.uk</a> .</p> <p>Healthwatch England were the consumer champion for health and social care, they used the information and feedback received from the Local Healthwatch network to influence policy at a national level. Each Local and Unitary Authority area, 152 in total had it's own Local Healthwatch organisation. Together, they formed the Healthwatch network.</p> <p>Healthwatch Bracknell Forest was a consortium of local organisations working together to deliver Healthwatch Bracknell Forest in response to a public consultation on this point in 2012. Healthwatch was the voice for Health and Social Care, representing people and directing them to existing services. Their purpose was three-fold:</p> <ul style="list-style-type: none"> <li>• Information and signposting – to help people make informed decisions about health and social care services, and to signpost them to the services they might wish to consider;</li> <li>• Gathering views and experiences – keeping records of concerns and comments received and aggregating into evidence to highlight to local commissioners and providers and also for Healthwatch England to inform policy, guidance, audit and inspection;</li> <li>• Helping to improve services - using statutory powers such as making information requests, providing reports and recommendations and undertaking Enter and View for or on behalf of providers and commissioners to help them improve their services.</li> </ul> <p>Healthwatch Bracknell Forest did this by being a service for everyone across health and social care including children and young people. Healthwatch used what they learnt and translated it into action, seeking to make an impact both locally and nationally, working with Commissioners and Providers.</p> <p>Healthwatch were independent and acted on behalf of people, challenging providers to deliver better health and social care services, identifying when things went wrong, and had the support of the law and the national strength of Healthwatch England. Healthwatch valued knowledge, sought data and intelligence to challenge assumptions with facts, and shared good practice.</p> <p>Healthwatch asked the Board to consider what it thought was good about health and social care services for older people, what could be improved and what it thought was missing; people's views were valuable in shaping work programmes</p>

	<p>and influencing priorities and recommendations.</p> <p>Healthwatch’s vision:</p> <ul style="list-style-type: none"> <li>• The right to essential services</li> <li>• The right to access services when needed</li> <li>• The right to a safe, dignified and quality service</li> <li>• The right to information and education</li> <li>• The right to choose</li> <li>• The right to be listened to</li> <li>• The right to be involved in decisions</li> <li>• The right to live in a healthy environment</li> </ul> <p>Although it was too early to identify trend as the numbers were still quite small, records kept for monitoring purposes showed that people generally contacted Healthwatch face-to-face, by telephone, by email and by Facebook and where people had requested information about services or signposting, the majority were from people seeking information on behalf of someone they cared for.</p> <p>The entire Healthwatch network was still developing and a current idea locally was to have an anonymised section of the website for people to make comments to help shape services. It would be useful to see case studies of what Healthwatch did, which included signposting people who wanted to make a complaint.</p> <p>To give an example of collaborative working, Chris highlighted that a section of the Local Healthwatch (LHW) website had been set up for staff at Wexham Park Hospital to make comments and staff were being made aware of this. Healthwatch were collecting information at present and looking at trends, and had met with health education from NHS England. An aim was to up skill staff to provide better customer services. Work was being undertaken closely with service managers.</p> <p>With regard to Enter and View, LHW was currently undertaking a recruitment campaign to recruit volunteers as Authorised Representatives to undertake Enter and View. Enter and View training guidance would shortly be issued by Healthwatch England to progress this action. This item would be brought to the Board at a future date.</p> <p>The Healthwatch Bracknell Forest Annual Report would be published shortly which would be circulated to the Board in due course. The Board would welcome a regular update on service usage information and Healthwatch agreed to explore how its monitoring information could be made available to the Board for this purpose.</p> <p style="text-align: right;"><b>(Action: Healthwatch Bracknell Forest)</b></p>
26	<p><b>CAB Internal Restructuring &amp; Welfare Changes in Health and Social Care</b></p> <p>Rhiannon Stocking-Williams, Chief Executive, Citizens Advice Bureau (CAB), Bracknell Forest, and Madeline Diver, Social Policy Adviser, CAB were present at the meeting to discuss the internal restructuring at the CAB in Bracknell and how it was supporting people with welfare changes in Health and Social Care.</p> <p>There were gaps in need for older people. CAB gave advice on subjects such as debts, housing, employment, and relationships. Some specialist services had been</p>

bought in to provide immigration and housing advice. People's issues were often complex.

Like all services, the CAB was doing its best in the face of funding cuts. The CAB was working with neighbouring CABs to hire a contractor to explore how, together, they could work more effectively and cost efficiently by sharing back-office functions for example,. Savings targets had not been identified as yet, it was primarily about making better use of current resources and extending capacity to front-line services as there were about 25-30 people a week unable to access advice sessions, and CAB Bracknell needed resource to process the 120-130 telephone that were not being answered first time, during September to December 2013, there were some 4,000 telephone callers to the CAB with some people trying between 1 and 10 times before getting through.

It was suggested that the CAB might limit the range of services it offered and focus on specific areas, then build up services over time. There was a triage system in place to identify the greatest need. People met with CAB advisers by appointment only now in Bracknell and drop-ins were no longer used. There was an adviser net and advisers were careful to go up to limits of what they could do. Targeting people was more difficult until an initial interview had been undertaken. In an attempt to manage capacity, the CAB urged members to promote the advice guide on CABs public website which people could be directed to in the first instance [http://www.adviceguide.org.uk/england/about\\_this\\_site.htm#h\\_adviceguide](http://www.adviceguide.org.uk/england/about_this_site.htm#h_adviceguide) .

It could be more difficult to engage older people sometimes as young people more often looked information up in the internet, and older people were less able to absorb large amounts of information and of recent concern to older people was the "bedroom tax". Home services had been cut but it was hoped that these could be re-established at some point. Kieth Naylor referenced a previous report to the Board by Madeline Diver about an in-reach pilot which reached out to people in hospitals to give advice before they hit a crisis point, as a good example of preventative practice which had a positive impact on demand for advice and information services.

A new source of demand was people who were separating who needed advice on the financial implications of this and the impact on children, for example, where they would live. Children returning from university sometimes moved in with grandparents in this situation, which had a knock-on effect on, for example, single person council tax for the grandparent if living alone, and caring for older people. People also sought advice on the impact of domestic violence.

The Board asked the CAB for a simple summary report similar to the request made upon Healthwatch Bracknell Forest. Rhiannon confirmed the CAB held large amount of client data but did not have capacity to produce regular monitoring reports as this was not part of the service level agreement with the Council and this should be discussed with the relevant council department. The CAB was not a statutory service but impact on the CAB in terms of demand would need to be considered when organisations were looking at developing services..

Tracey Hedgecox of Age Concern Bracknell Forest confirmed that like the CAB, telephone calls to their service had tripled and that generally more funding and that better signposting was needed, for example, people had approached Age Concern for help completing Blue Badge applications. This would be mentioned to the team dealing with these applications at the Borough Council to look at the issues with the new system for Blue Badges.

	<p style="text-align: right;"><b>(Action: Angela Harris)</b></p> <p>Information went out of date quickly in relation to welfare changes in health and social care.</p>
27	<p><b>Update on the Garth Hill extra care housing scheme</b></p> <p>Linda Wells, Housing &amp; Community Services Director, Bracknell Forest Homes (BFH) was present at the meeting to give an update on the Garth Hill extra care housing scheme.</p> <p>Clement House would be based in Sandy Lane in Bracknell on the old Garth Hill School site. It would be a landmark building with 65 extra care apartments for older people; 51 rented and 14 private sale. There would be a mix of one and two bed self contained flats with an innovative design round central atrium. A care team would be available on site 24 hours a day and a joint assessment panel would determine who would live at the scheme.</p> <p>Clement House facilities would include: a Bistro restaurant, Atrium lounge, Hairdressing salon, Activity room, Library / IT access, Spa bathroom, Treatment room, Buggy store, Laundry, Offices, Guest room for visitors, Impressive interior design, and Secure gardens. A typical flat would include a Hall, Fitted kitchen, Living room, Bathroom with (walk-in) shower, Bedroom(s), Storage, and a Balcony.</p> <p>BFH were involved in procurement with BFC; there would be a mixed range of high, medium, and low care needs to balance out the ratio of need; and staff offices and facilities, a staff overnight room and assistive technology. Clement House was due to be completed in Spring 2015.</p> <p>Board members were shown an artist's impression of what Clement House would look like, which would be Bracknell Forest's first independence care scheme. Residents at the scheme could make use of the services on site as their independence diminished. There was a growing interest in extra care and it was hoped that there would be a mixed population of couples and single people at the scheme.</p> <p>There would be events and activities at the scheme such as indoor bowls, tai chi, concerts, and Christmas events. There was a wall in the atrium which images could be projected onto and these images could be changed, for example, with the seasons. The aim was for the scheme to resemble a hotel rather than an institution and it would make use of self cleaning glass. The restaurant would be used to provide meals for the residents; Broadway House and Barnett Court did this as well.</p> <p>There would be assisted bath treatment and a cycle path from the town centre to Clement House. A central laundry facility would be available, although there would be space in each flat for a washing machine. Guest rooms would be available for visitors to residents at the scheme who wished to stay overnight, and there would be garden space surrounding the scheme. It was anticipated that owner occupiers may be more active in the beginning and some residents may have children with learning disabilities who needed to live with them.</p>

	<p>Vetting would be undertaken to decide the age of people allowed into the scheme but some people would have younger partners so there would need to be flexibility. Work was being undertaken with BFVA regarding volunteers for arts and crafts at the care scheme. The aim was to set up a programme initially and then ask people what they would like to do. There was sufficient parking at the scheme and this met with planning requirements.</p> <p>Social enterprise was being considered in relation to the restaurant; there would be a trained chef and the suggestion of apprenticeships. BFH had an employment project and provided placements at BFH or with partner organisations. Clement House would be used for placements if possible. Garth Hill College and Bracknell &amp; Wokingham College had been contacted regarding placements in relation to their social care and catering courses. Work was being undertaken to explore a befriending scheme. Clement House could be toured once completed. The Board was likely to consider the specification for care services and the provision of social activities.</p>						
28	<p><b>Members Updates</b></p> <p>Tracey Hedgecox commented that Adviza were looking for organisations to take on placements, for example, two days a week for three months with college one day a week. Jessica Tyrrell at the Borough Council was a good contact regarding placements.</p> <p>Councillor Birch requested that the urgent care centre be promoted where ever possible.</p> <p>Peter Smith mentioned that Experience Exchange had been launched. A link to this would be circulated to Board members.</p> <p>Angela Harris reported that she would be taking over from Naoma Dobson and would be working to set up assisted technology.</p> <p>Older People's Day was on 1 October 2014 and would be on the agenda for the next meeting of the Board.</p>						
29	<p><b>Future Meetings</b></p> <p>Future meetings of the Board would be held in the Council Chamber at Easthampstead House:</p> <table data-bbox="331 1771 890 1877"> <tr> <td>Wednesday 18 June 2014</td> <td>10am</td> </tr> <tr> <td>Wednesday 17 September 2014</td> <td>10am</td> </tr> <tr> <td>Wednesday 17 December 2014</td> <td>10am</td> </tr> </table>	Wednesday 18 June 2014	10am	Wednesday 17 September 2014	10am	Wednesday 17 December 2014	10am
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