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## WEST OLDHAM DISTRICT EXECUTIVE Agenda

Date Wednesday 17 January 2018

Time 6.00 pm

Venue Crompton Suite, Civic Centre, Oldham, West Street, Oldham, OL1 1NL

Notes

- 1. DECLARATIONS OF INTEREST If a Member requires advice on any item involving a possible declaration of interest which could affect his/her ability to speak and/or vote he/she is advised to contact Paul Entwistle or Fabiola Fuschi at least 24 hours before the meeting.
- 2. CONTACT OFFICER for this Agenda is Fabiola Fuschi Tel. 0161 770 5151 or email Fabiola.fuschi@oldham.gov.uk
- 3. DISTRICT CO-ORDINATOR is Zaiem Khan , tel. 0161 770 5162 or email Zaiem.khan@oldham.gov.uk
- 4. PUBLIC QUESTIONS Any member of the public wishing to ask a question at the above meeting can do so only if a written copy of the question is submitted to the contact officer no later than 15 minutes prior to the commencement of the meeting.
- 5. FILMING The Council, members of the public and the press may record / film / photograph or broadcast this meeting when the public and the press are not lawfully excluded. Any member of the public who attends a meeting and objects to being filmed should advise the Constitutional Services Officer who will instruct that they are not included in the filming.

Please note that anyone using recording equipment both audio and visual will not be permitted to leave the equipment in the room where a private meeting is held.

Recording and reporting the Council's meetings is subject to the law including the law of defamation, the Human Rights Act, the Data Protection Act and the law on public order offences.

MEMBERSHIP OF THE WEST OLDHAM DISTRICT EXECUTIVE IS AS FOLLOWS:

Councillors Akhtar, Azad, F Hussain, Iqbal, Jabbar, Malik, Rehman, Toor (Chair) and Ur-Rehman

Item No



2	Urgent Business
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Urgent business, if any, introduced by the Chair

#### 3 Declarations of Interest

To Receive Declarations of Interest in any Contract or matter to be discussed at the meeting.

#### 4 Public Question Time

To receive Questions from the Public, in accordance with the Council's Constitution.

5 Minutes of Previous Meeting (Pages 1 - 4)

The Minutes of the West Oldham District Executive meeting held on 29<sup>th</sup> November 2017 are attached for approval.

- 6 Dementia in Oldham (Pages 5 10)
- 7 West Oldham District Plan and Budget Report (Pages 11 14)
- 8 Petitions

Standing item

#### 9 Date of Next Meeting

The next meeting of the West Oldham District Executive will be held on Wednesday 14<sup>th</sup> March 2018 at 6pm

## WEST OLDHAM DISTRICT EXECUTIVE 29/11/2017 at 6.00 pm



Present: Councillor Toor (Chair)

Councillors Akhtar, Azad, Iqbal, Jabbar, Malik and Ur-Rehman

Also in Attendance:

Fabiola Fuschi Constitutional Services Officer
Zaiem Khan West Oldham District Co-ordinator

#### 1 APOLOGIES FOR ABSENCE

There were no apologies for absence received.

#### 2 URGENT BUSINESS

There were no items of urgent business received.

#### 3 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

#### 4 PUBLIC QUESTION TIME

There were no public questions received.

#### 5 MINUTES OF PREVIOUS MEETING

**RESOLVED** that the minutes of the West Oldham District Executive meeting held on 11<sup>th</sup> October 2017 be approved as a correct record.

#### 6 WERNETH PARK MUSIC ROOMS UPDATE

An update on Werneth Park Music Rooms site had been requested by the Committee at its last meeting. The District Coordinator for West Oldham informed the Elected Members that the asset comprised a derelict Grade II Listed Building. The Council held Werneth Park and its associated buildings in Trust and this was registered with the Charity Commission. The Council had closed the buildings in September 2001 due to the high maintenance cost. Whilst the buildings had been vacant, numerous incidents of vandalism had occurred. However, the site was now secured.

Following consultation with property services, there were four options that could be considered for the site:

- Do nothing with the asset;
- To review grant funding opportunities;
- To convert the site to residential use:
- To demolish the site following approval.

It was also explained that, as the property was subject to a charitable trust where the Council was the sole trustee, the Council's Charitable Trust Committee would have to make a decision on the asset. However, should the site be considered for selling or leasing for commercial use, the consent of the Charity Commission would need to be sought.

Members agreed to seek the opinion of the relevant Ward Members on the above options and submit the matter to the Charitable Trust Committee for a decision.



#### **RESOLVED** that:

- 1. The verbal update regarding Werneth Park Music Rooms be noted.
- 2. Following consultation with the relevant Ward Members, the matter be submitted to the Charitable Trust Committee for its consideration.

#### 7 WEST OLDHAM DISTRICT PLAN AND BUDGET REPORT

Consideration was given to a report of the West Oldham District Coordinator on the agreed District Plan priorities and proposed funding allocations for the current Municipal Year.

#### **RESOLVED** that:

- 1. The content of the report be noted.
- 2. £4,000 Revenue and £4,000 Capital be allocated to Love Coppice Development.
- 3. £8,000 Revenue be allocated to Neighbourhood Advice Sessions.
- £3,000 Revenue be allocated to Werneth and Freehold Community Development Project – Women's Support Work.
- 5. Figures concerning residents' use of the Neighbourhood Advice Sessions be presented at the next meeting of the Committee.

#### 8 **PETITIONS**

Consideration was given to a report of the Constitutional Services Officer on a petition concerning Environmental Health issues at Trafalgar Street, Coldhurst. The petition had been acknowledged on 17<sup>th</sup> October 2017. The District Coordinator for West Oldham informed the Committee that work had been undertaken with the relevant Ward Councillors to ensure that all residents were consulted on the issue.

It was explained that Environmental Services' intervention could entail a substantial expenditure; therefore, residents would be requested to contribute to the cost.

A meeting with the residents would be arranged in order to seek their views on the necessary actions to resolve the matter.

#### **RESOLVED** that:

- 1. The information concerning petition Ref. 2017 02 be noted.
- West Oldham District Coordinator arrange a meeting with the residents to discuss the necessary actions to resolve the issue.

#### 9 DATE OF NEXT MEETING

**RESOLVED** that the next meeting of the West Oldham District Executive be held on 17<sup>th</sup> January 2017 at 6 p.m..







### **Briefing to West Oldham District Executive**

## **Dementia in Oldham**

Portfolio Holder:

Cllr E.Moores Cabinet Member for Health & Wellbeing

Officer Contact: Maggie Kufeldt, Executive Director, Health

and Well-Being

**Oliver Collins, Principal Policy Officer** 

Report Author: Oliver Collins, Principal Policy Officer

Ext: 4702

17<sup>th</sup> January 2018

#### Reason for report

At a recent meeting of the Oldham West District Executive, members were asked to appoint a District Dementia Champion. Cllr Jabbar was nominated and he joins seven other members who are Dementia Champions for their respective Districts.

It was also requested that a further report that provides them with a better understanding of dementia, what the prevalence of Dementia is in Oldham and how that compares with other areas. Additionally, a focus on Dementia within BAME communities (attitudes, stigma, and interventions) was requested given the demographic of the Oldham West district.

#### Recommendations

The Oldham West District Executive is asked to:

- Note the content of this report,
- Discuss the information included in this report
- Commit their support to helping to make Oldham as Dementia Friendly as possible.

#### 1. Report details

#### 1.1 What is Dementia?

According to the Dementia Friends website, Dementia is;

"caused by a number of diseases that affect the brain. The most common is Alzheimer's but diseases also include vascular dementia, dementia with Lewy bodies and Pick's disease.

Different types of dementia affect the brain at different rates and in different ways, but other things like someone's personal circumstances, the people around them and the environment in which they live, will affect their experience of dementia. Dementia progresses in a way that is unique to each individual.

The word 'dementia' describes a set of symptoms that may include memory loss and difficulties with thinking, problem-solving or language. These changes are often small to start with, but for someone with dementia they have become severe enough to affect daily life. A person with dementia may also experience changes in their mood or behaviour.

It is true that more people over 65 have dementia but it is not exclusively an older person's disease; younger people get dementia too."

One of the key things to know is that each person is unique and will experience dementia in their own way. The different types of dementia also tend to affect people differently, especially in the early stages. Other factors that will affect how well someone can live with dementia include how other people respond to them and the environment around them.

A person with dementia will have cognitive symptoms (to do with thinking or memory). They will often have problems with some of the following:

- day-to-day memory for example, difficulty recalling events that happened recently
- concentrating, planning or organising for example, difficulties making decisions, solving problems or carrying out a sequence of tasks (such as cooking a meal)
- language for example, difficulties following a conversation or finding the right word for something
- visuospatial skills for example, problems judging distances (such as on stairs) and seeing objects in three dimensions
- orientation for example, losing track of the day or date, or becoming confused about where they are.

A person with dementia will also often have changes in their mood. For example, they may become frustrated or irritable, apathetic or withdrawn, anxious, easily upset or unusually sad. With some types of dementia, the person may see things that are not really there (visual hallucinations) or strongly believe things that are not true (delusions).

Dementia is also a progressive illness, which means the symptoms gradually get worse over time. How quickly this happens varies greatly from person to person. As dementia progresses, the person may develop behaviours that seem unusual or out of character. These behaviours may include asking the same question over and over, pacing, restlessness or agitation. They can be distressing or challenging for the person and those close to them.

A person with dementia, especially in the later stages, may have physical symptoms such as muscle weakness or weight loss. Changes in sleep pattern and appetite are also common.

#### 1.1.2 Young on-set Dementia

People with dementia whose symptoms started before they were 65 are often described as 'younger people with dementia' or as having young-onset dementia. The age of 65 is used because it is the age at which people traditionally retired. However, this is an artificial cut-off point as opposed to having any biological significance.

Early-onset dementia is caused by broadly similar diseases to dementia in older people ('late-onset dementia'), but there are some important differences. There is a wider range of diseases that cause young-onset dementia and a younger person is much more likely to have a rarer form of dementia.

Young-onset dementia is also more likely to cause problems with movement, walking, co-ordination or balance. This is one reason why younger people with dementia may see a neurologist (a specialist in diseases of the brain and nervous system) rather than - or as well as - a psychiatrist (a specialist in mental health).

However, people under 65 do not generally have the co-existing long-term medical conditions of older people - especially diseases of the heart and circulation. They are usually physically fitter and dementia may be the only serious condition that a younger person is living with.

Early-onset dementia is more likely than late-onset dementia to be hereditary. In perhaps 10% of all people with young-onset dementia the condition seem to have been inherited from a parent. If dementia has been inherited, the diagnosis may have implications for birth relatives of the person such as their siblings (brothers and sisters) or children.

#### 1.2 Dementia Prevalence in Oldham – what we know

Estimated Dementia Diagnosis Rate (+65) = 83.4% (3<sup>rd</sup> highest in North West)

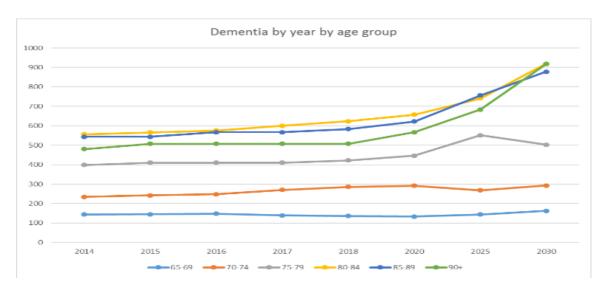
England = 67.9%North West = 73.2%

Dementia Prevalence (+65) = 4.91% England = 4.29%

North West = 4.46%

We know that we have an ageing population and the prevalence of dementia is increasing. The Department of Health statistics state that 1 in 3 people over the age of 65 will live with some form of dementia before they die. The diagram below

shows at a local level the estimated projection (up to the year 2030) of dementia prevalence in the borough broken down by the year and age range.



#### 1.3 Services in Oldham for Dementia

The Council and CCG have worked together over the past few years to ensure they coordinate the commissioning of Dementia support services in the borough.

#### These services are;

- 1.3.1 Dementia Action Alliance Support Making Space includes developing and support the Oldham Dementia Action Alliance, promoting dementia awareness week, organising the Oldham Dementia conference and developing the dementia friends programme.
- 1.3.2 Memory Assessment Service Pennine Care Foundation Trust offers a diagnostic and treatment service for dementia as well as wide range of post diagnostic support for people found to have dementia, their families and carers. The aim of the service is to promote early diagnosis of dementia and provide on-going emotional and practical support in order for people to live well with dementia.

#### The service offers:

- A memory liaison practitioner a specially trained link nurse who can offer information and advice about dementia as well as completing annual dementia reviews.
- Post diagnostic support and information groups.
- Occupational therapy, psychology assessments and support and speech and language therapy.
- Advice and support to help people to remain independent and live well with Dementia.
- A drop in café for younger people living with dementia
- Dementia awareness sessions for anyone concerned with memory problems held weekly in libraries around Oldham

- 1.3.3 Mental Health Care Home Liaison Team Oldham Pennine Care Foundation Trust provides mental health care and treatment to care home residents across Oldham. The team also provide education and support to care home staff and in primary care.
- 1.3.4 Making Space also provide post-diagnosis support to those who have been diagnosed with Dementia, and their families and carers, helping them deal with the diagnosis and help them to make the adaptations in their lives to ensure they are prepared and comfortable with the support around them.
- 1.3.5 There are other community focused interventions provided by organisations such as the 'Enhanced memory service', which is made up of the memory assessment service, AGE UK, Alzheimers society and Making Space. Additionally, there are numerous community led initiatives across Oldham, such as the Springboard Carers group, which is a charity in its own right, and the Dementia Engagement Empowerment Programme (DEEP) group "Let's be Heard" which is a group ran by/with people living with Dementia
- 1.4 Dementia within BAME community.

More than 25,000 older black and minority ethnic (BME) people live with dementia in the UK, in part due to vascular risk factors such as hypertension often found in African-Caribbean and South Asian UK populations.

For some people, the experience of what it means to live with dementia will be unfamiliar. They may not have seen or cared for someone with dementia in their family if they left their country of origin for work when young, for example. Knowledge of dementia and dementia services is limited in other BME groups. For example, in one Chinese community, negative perceptions of dementia resulted from poorly-translated terms which give dementia the meaning of 'lost intelligence disease'. A similar challenge is seen within South-East Asian communities, where there is no word for 'Dementia'. Instead, the disease is seen more as madness, rather than the A perceived or actual cultural bias in assessment tests and diagnosis may limit their value or appropriateness for some BME older people (3).

Engagement with social and health care services may be resisted by some BME communities because they fear discrimination or they find services are difficult to access. Chinese older people said they feared a relative in care would be the only person from that community and thus be isolated. A delay in seeking support may mean the person is not in contact with services until disease is advanced or the person or family is in crisis.

There is evidence that minority ethnic carers are more likely to be isolated from mainstream services. Some may view using a service as a source of shame. In Islam, Hinduism and Sikhism the duty of care is apparent or is regarded as a 'test from God'. There is stigma around dementia is some cultures; it may be regarded as a punishment for past misdemeanors or a family member with dementia may damage the marriage prospects of a young relative.

There is also evidence that people from BME communities are not sure where or how to find information about dementia. This is exacerbated by language barriers or when people have lost cognitive skills, or if online information is not available in community languages. People may confuse the symptoms of dementia with 'normal ageing' and not seek the support that is available. That is why access to sector organisations which can support navigation of the system is so important.

Establishing links between the commissioners and service providers with culturally-appropriate voluntary and community groups as well as interpreters who can support communication with families will provide the opportunity to discuss diagnosis and treatment options. There are examples of good practice in dementia care for those from BME communities but expertise needs to be shared more widely across the provider sectors.

In Oldham, work has been done to try and increase and improve the awareness of Dementia and the Dementia support services that are available in the borough. Work has included:

- Amending the 'Dementia Friends' training programme to ensure it is more relevant and practical for BME communities.
- ODEM (Oldham Ethnic Minority Reference Group) group designed to build relationships, improve awareness and provide co-designed and culturally appropriate information, training and post-diagnostic support to Oldham's ethnic minority groups.
- Axa Homes Ladies Group
- European Islamic Centre group

Whilst anyone is welcome at any of the groups running for those dealing with Dementia, Making Space have indicated that it is very rare that anyone from the BAME community would access them, instead preferring a service within their own community that is specifically tailored for and targeted at them. It can also be hard mixing men with ladies and vice versa. So although Oldham does has a fantastic offer of overall support for those with Dementia, Making Space and the other providers have had to work hard in developing something specific for south Asian communities.

#### 2. Recommendations

- 2.1 The Oldham West District Executive is asked to:
  - Note the content of this report,
  - Discuss the information included in this report
  - Commit their support to helping to make Oldham as Dementia Friendly as possible.



## **Report to West Oldham District Executive**

# West Oldham District Plan and Budget Report

Portfolio Holder:

**CIIr B Brownridge, Cabinet Member for Cooperatives & Neighbourhoods** 

Officer Contact: Maggie Kufeldt, Executive Director, Health and Well-Being

Report Author: Zaiem Khan; District Coordinator,

Ext. 5162

17<sup>th</sup> January 2018

#### Reason for report

This report sets out the West Oldham agreed District Plan priorities and proposed funding allocations.

#### Recommendations

That the District Executive agrees the following funding allocation - Coppice Alleygates - £6,000 Capital

#### West Oldham District Executive

#### West Oldham District Plan and Budget Report

#### 1 Background

1.1 West Oldham District Executive agreed its District Plans priorities in June 2016 for 2016-2018, which provide a framework to align actions and budgets against priorities

#### 2. District Executive Budgets 2017/18

Budgets						
Revenue:	£30,000					
Councillors (Revenue):	£45,000 (£5,000 per Councillor)					
Total Revenue:	£75,000					
Total Capital:	£30,000					

#### 3 West Oldham District Plan Priorities

3.1 The following priorities have been identified for West Oldham District:

#### 3.2 Improving the Environment

Support communities to improve, enhance, and maintain the local environment

#### 3.3 Improving Community Facilities

Support local hubs and services that people can easily access

#### 3.4 Improving health and well-being

Support local people to adopt healthy lifestyles

#### 3.5 Supporting local community groups

Encourage co-operative activity and build community capacity

#### 3.6 Educational Achievement and employment

Support the aspirations of families and young people to achieve a good educational foundation.

#### 3.7 People feeling safe in their local area

Work with partners and communities to foster safer neighbourhoods

#### Funding Proposal:

To install alleygates in the Coppice neighbourhood of Medlock Vale

To approve £6,000 Capital funding apportioned to the Medlock Vale ward.

## 4. Budget position

The table below shows the latest budget position and lists the previously committed budget and the recommended allocations

Project	Revenue			Capital		
	Coldhurst	M Vale	Werneth	Coldhurst	M Vale	Werneth
Opening Budgets	£10,000 x 3 = £30,000		£10,000 x 3 = £30,000			
Additional grit bins	£2,348.48	£298.56	£298.56			
Cottam Street – play and opening	£1,000					
Westwood – youth engagement/activities	£1,000					
Darker nights	£1,000	£1,000	£1,000			
Tudor St Sensory Garden						£5,000
Chelmsford St Open Space						£2,000
Over 50s project	£2,500					
Cottam Street equipment				£4,000		
WFCDP – Womens Support work			£3,000			
CAB Funding		£4,000	£4,000			
Love Coppice Development		£4,000			£4,000	
Coppice Alleygates					£6,000	
Total allocations	£2,848.48	£9,298.56	£8,298.56	£4,000	£4,000	£7,000
Remaining	£2,151.52	£701.44	£1,701.44	£6,000	£0	£3,000

## 5 Budget Recommendations

That the District Executive agrees the following funding allocation - Coppice Alleygates - £6,000 Capital

