BRIEFING TO OLDHAM HEALTH AND WELLBEING BOARD

**Report Title:** Joint Strategic Needs Assessment (JSNA) Working Group and Health Protection Working Group minutes

**Report Author:** Alan Higgins

**Date:** 20th January 2014

**Requirement from the Health and Wellbeing Board:**

To note receipt of the minutes from the two working groups of the Health & Wellbeing Board;


2) Health Protection Working Group – 3rd December 2014
## Minutes

### Joint Strategic Needs Assessment Working Group

**Tuesday 2\textsuperscript{nd} December 2014**

**Lees Suite, Civic Centre, West Street, Oldham.**

3.00pm

<table>
<thead>
<tr>
<th><strong>Present:</strong></th>
<th><strong>Position</strong></th>
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<tbody>
<tr>
<td>Alan Higgins</td>
<td>Director of Public Health, Oldham Council</td>
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<td>Evelyn Desai</td>
<td>Consultant in Public Health, Oldham Council</td>
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<td>Kuiama Thompson</td>
<td>Public Health Registrar</td>
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<tr>
<td>Rene Guenther</td>
<td>Intelligence Hub Manager, Oldham Council</td>
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<td>Helen Smith</td>
<td>Public Health Intelligence, Oldham Council</td>
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<td>Jacqui Greenfield</td>
<td>Voluntary Action Oldham</td>
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<td>Joanne Walsh</td>
<td>Regenda</td>
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<td>Oliver Collins</td>
<td>Corporate Policy Officer, Oldham Council</td>
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<th><strong>Apologies:</strong></th>
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<tr>
<td>Cllr. Jenni Harrison</td>
<td>Chief Executive, First Choice Homes Oldham</td>
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<tr>
<td>Cath Green</td>
<td>Director of Performance and Delivery, Oldham Clinical Commissioning Group</td>
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<tr>
<td>Kath Wynne-Jones</td>
<td>Assistant Executive Direct, Adult and Commissioning Services Oldham Council</td>
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<td>Maggie Kufeldt</td>
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1 Minutes from 1st October Meeting & Actions

The minutes from the 2nd October meeting were reviewed and accepted.

Alan recapped the reasons why the Working Group exists;
- Branch out across the Oldham Partnership and increase input into the JSNA
- Ensure the work of the JSNA keeps proceeding, how best to structure it and tackle any issues that may arise in the production of it.

2 JSNA work plan & Local Voice schedule

Rene presented the schedule for future JSNA and Local Voice work.

Feedback from the group;
- Amount of content results in very small text. Look at turning it into a 2-sided document or if best being produced on A3
- An introduction would be worthwhile at top of document to explain exactly what the JSNA is, how it works and what the work plan shows
- Progress Section would be good in the HNA & Additional Projects section, especially against the timescales that are shown. This could be done by a couple of sentence and/or a RAG rating system
- The timescales shows when the HNA will be assimilated into the JSNA, not the completion of that piece of work
- Local Voice – make this section clearer what this is and how it influences the JSNA – Used to fill the qualitative gap in the JSNA
- Healthwatch, Housing associations surveys and Young people (Youth Council and Schools) to be included in the Local Voice Section.
- More specific with timelines – month and year rather than annual/biennial

ACTION: Work Plan to be a standing item for all future meetings

ACTION: Rene to liaise with Joanne to discuss Housing Surveys and how they can be incorporated

ACTION: Oral Health HNA to be brought to the Sub-Group in February

ACTION: Evelyn to share with Jacqui Greenfield the Carers HNA
3 Needs Assessment Examining Life Expectancy Gap in People with Severe Mental Illness

Kuiama provide an update on her work in examining the Life Expectancy Gap in People with Severe Mental Illness (SMI). Key points were:
- There is a significant gap in life expectancy between those with SMI and those who don’t have SMI.
- 13 years (male) and 12 years (female). For comparison, the difference in life expectancy between communities is 9 (male) ad 11 (female).
- Oldham has a x4 higher rate of death in young people with SMI than the England average.
- Approximately 2000 young people in Oldham are registered with GPs as having a SMI
- Next Steps – to identify commissioners, providers and if possible, those with SMI to discuss what services are provided, how are they used and what can and should be improved
- One major issue is that there is a disconnect in the system between GPs and Providers. Neither are fully sure of what they are responsible for doing. The pathway just isn’t working as well as it should be.
- One possible recommendation is to improve the collection and reporting of data across Oldham, as well as within communities i.e. White, BME, Eastern European.

ACTION: Update to be brought back to the next meeting.

ACTION: Identify where Oldham data is used, and where England data is used in report

4. Suicide Prevention
Evelyn provided an update to the group in regards the Suicide audit work that was completed last year. The key points are;
- Isn’t a major issue in Oldham (on average 21 suicides a year), compared to nationwide (approx. 4200) a year. Isn’t on the CCGs key priorities for the future.
- There is a high cost (physical, mental and economic) to a death by suicide
- It is a preventable means of death
- Reduction in Secondary care bed availability has appeared to cause an issue. Support is passed to the voluntary and community care sector.

ACTION: Evelyn to turn report/data into a one page factsheet that’s easy to read and distribute. Should also include where people can go to if they require advice about themselves or someone they know feeling suicidal.

ACTION: Joanne to feed this back to OHIP, Jacqui to VAO to keep them aware of this work and engage with in the future.

ACTION: Take this to the April development session of the Board, which is focussed on the Mental Health System in Oldham.
5. **JSNA Website**
Helen Smith gave the group a demonstration of the JSNA website. It is still currently in production and isn’t available for the public to view.

Helen asked if the go live date can be pushed back until mid-January, to ensure the content for the living, learning and working well life course is available and to allow for sufficient user testing before going live.

Feedback;
- There should be an emphasis on the ‘Positives & Assets’ of any sections, rather than the ‘Needs’.
- Works with Comms to ensure that searches for the key themes draw people to this site.
- Develop a ‘How to use this site’ to make it more user friendly.
- Will be available as sections/chapters, rather than the 1 big document it has been in the past.

**ACTION:** Alan H to review the website once pages are fully populated, before going live.

**ACTION:** Go live date pushed back to January.

6. **Living, Learning & Working Well**
Evelyn presented the content for the Living, Learning and Working Well life course that will be available on the JSNA website when complete.

Key Points;
- Education and Learning will largely be covered in the ‘Giving Every Child the Best Start in Life’ section, though the absence of Adult Skills and +19 learning should be addressed
- More work needs to be done in regards Deprivation in Oldham
- Present through infographics rather than text. Feedback from Public Health Annual Report shows this is better received than simply text based documents.
- The story needs to be told – i.e. explain exactly what this is and how it will influence the provision of services in the borough.

**ACTION:** Alan to work with Helen and Evelyn on how the information is to be presented on the site, and how the Oldham story can be told.

**ACTION:** Trial presentations of the site content to be used and user feedback recorded to determine best way of presenting the information.

7. **DATE AND TIME OF NEXT MEETING**
Thursday 26th February 2014
Minories

Health Protection Working Group

3rd December 2014

Crompton Suite

Present:  Councillor Susan Dearden (Chair)  Councillor, Oldham Council
         Alan Higgins  Director of Public Health, Oldham Council
         Neil Crabtree  Head of Service, Public Protection, Oldham Council
         Matthieu Pegorie  Public Health England
         Julie Walker  AGMA Civil Contingencies and Resilience Unit
         Evelyn Desai  Consultant in Public Health, Oldham Council
         Elaine Flynn  Lead Health Protection/Infection Prevention Nurse, Oldham Council
         Harriett Unwin  Oldham Council
         Alastair Rutherford  Screening and Immunisation Team, NHS England

Apologies:  Gloria Beckett  Infection Prevention and Control Nurse, Oldham Council
           John Rooney  Head of Housing and Response Services, Oldham Council
           Nadia Baig  Oldham Clinical Commissioning Group

1  APOLOGIES FOR ABSENCE

Apologies were received from Gloria Beckett, John Rooney and Nadia Baig.

2  MINUTES FROM THE LAST MEETING

Minutes from the last meeting held 2nd July 2014 were agreed as a correct record of the meeting.
3 MATTERS ARISING FROM 2ND JULY 2014 MEETING

Tuberculosis
- A GM group has been set up, rather than a NW board and has been
given the go ahead to meet
- Oldham CCG invited to attend as lead to next GM TB board
- GM TB Strategy to be developed and passed down

Antibiotic Guardians
- This was promoted internally at the council and at the CCG through
social media channels

4 MEETING OVERVIEW

The meeting overview document was noted.

5 Services and Infection Control & Health Care Associated Interventions
Elaine provided the group with an overview of what agencies and partners are
responsible for what in respect of Infection Control & Health Care Associated
Interventions in Oldham. The key points were;
- GP clusters need to work with local care homes to ensure they have
  same GPs for all residents, this isn’t currently the case
- CCG aren’t fully clear of their role

ACTION: Elaine to develop a ‘performance report. This will show us
which plans are in place and how effective they are. The performance will
be RAG rated as well as stating what further work needs to be done to
remedy the performance. This will be reported back to at this group, but
also fed into the main Health & Wellbeing Board and the CCG.

This to be developed for the start of the 2015/16 year.
6 Season Flu Update
Alistair provided the group with an update as to the Season Flu uptake and work for this year’s Flu season. The key points were;
- 34/45 surgeries have reported their data back
- CCG are chasing the remaining surgeries to see why they haven’t submitted
- Oldham is 4th ranked CCG in GM
- Reporting continues through to January
- Promotional roadshows – begin Monday 8th December
  - ‘Not too late to get your jab’ is the key message
  - Held in Spindles
  - Won’t be administrating the vaccine
- There is up to a 20% opt-out rate in some surgeries. These will be looked at by the CCG after March ahead of the 2015/16 flu season
- Has been quite vocal response to the comms the council have put out.
- There is no uptake target for 2/3/4 year olds. 75% is target for over 65s, under 6 months (30% current and consider this good) and pregnant women (34.3% but good considering new service)
- New Comms and Marketing material will be shared with partners to promote
- 59% of healthcare workers have had their flu jab – chase up of non-submitted data

ACTION: Harriet to compile the feedback received to the council and share with the group

ACTION: Anonymized data to be shared with the group when available, and a update to be brought to the next meeting

7 Tattoo Studios
Neil provided an update on this workstream. The key points were;
- Draft legislation currently with Council legal team for review. Will need to be approved by full council before can be implemented.
- Neil has placed this into his service’s top 3 priorities in their service plan for 2015/16.
- Mediscreen have quoted £145 per course for Heptitis vaccinations for tattoo studios. Could be offered as block sale and may reduce cost. Some Las have offered this at a partially or fully subsidized.
- Work still on track for implementation from April 2015
- More detailed costings and work plan will be brought to the February meeting

ACTION: Update with detailed costings and work plan to be brought to the next meeting of the group.
GM Update from Public Health England

- A GM Ebola exercise was held last month to test procedures should a case of Ebola be confirmed in the GM region.
- Lessons learnt report due soon and will provide update to the group at next meeting
  - Main issues are;
  - Command & Control structure and clear understanding of these
  - Comms Strategy should case be confirmed
  - Clarity on key role of local partnership – Oldham Leadership Board (public assurance, managing of social unrest, consequences of case etc.)

- Still low risk of a case occurring in England, even lower for GM region
  - Limited numbers arriving from main hotspot areas through Manchester Airport. PHE are also screening at the airport.
  - Expected wave of health workers returning from West Africa just after Christmas

- Public Health England are currently heavily focusing on Ebola, Acute Care and hospital infections (MRSA, C Difficile etc.). As such, work in regards TB and other strategic goals has dropped off.
9 GM Civil Contingencies & Resilience Unit
- Operation Cygnus didn’t take place as the Ebola exercise took its place
- 2 new plans are currently in development; Flooding Response and Town Centre Evacuation
  1) Flood Response
   - Follows GM template and relates specifically to the rapid response catchment areas should flooding occur. Also covers evacuation and shelter options.
   - Currently out for consultation within the Council and will be signed off at GM
  2) Town Centre Evacuation
   - GM Template again
   - Is at final development stage
   - Based around zone exclusion, and if town needs to be evacuated, what zones and how to direct people away.
   - Training exercises will likely be held on both of these scenarios in 2015/16
- Other areas include Winter planning – all staff prepped and ready, as are the gritting lorries and grit stores
- The government’s Decomtaminaton Service are holding a GM session in January. They will cover their role, responsibilities and how to access them if necessary.

   ACTION: Julie to share details of the Decontamination Service session.

10 Health protection performance
Evelyn presented the updated performance document.
   - Bowel screening is missing and needs to be added
   - Also add Diabetic I data and AAA (Abdominal Aortic Aneurysm)

   ACTION: Evelyn to link with Alistair to obtain AAA data

   ACTION: Quarterly reporting to be standing item on agenda. February meeting will have Q3 (Oct – Dec 2014 data)

11 Close
Next meeting: 12th February 2015 2pm – 4pm