

HEALTH AND WELL BEING BOARD

12/09/2024 at 10.00 am

Present: Councillors Davis (Chair), Mushtaq, Nasheen, Shuttleworth and Sykes

Also in attendance: Rebecca Fletcher- Director of Public Health
Rev Jean Hurlston- Voluntary member
Simon Blair- OCL
Anne Mcann- Public Health Service
Charlotte Stevenson- Public Health Service
Gerard Jones- Children's Services
Anna Tebay- Public Health Service
Lorraine Black- First Choice Homes
Andrea Edmondson- NHS
Laura Windsor-Welsh- Action Together
Charlotte Walker- Adults Services
Susannah Reeves- OSFC Principal
Steve Senior- Consultant in Public Health
Dr John Patterson- NHS
Anna Da Silva- Northern Roots
Steph Wild- Northern Roots
Michelle Scholes- IGP Care
Justine Starr- IGP Care
Kristina Atkins- IGP Care
James Mulvaney- Policy Lead
Jon Taylor- Data Insight and Intelligence Lead
Emily Baylis-Tunney -Data Insight and Intelligence Analyst
GMP Representative
Durga Paul- Constitutional Services

1 APOLOGIES FOR ABSENCE

Apologies for absence were received from Cllr Brownridge, Jayne Ratcliffe, Paul Knight, Nasir Dad, Liz Windsor-Welsh and Mike Barker.

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 for this meeting to consider.

5 MINUTES OF PREVIOUS MEETING

RESOLVED that the minutes of the meeting held on 11th July 2024 be approved as a correct record.

JOINT STRATEGIC NEEDS ASSESSMENT

The Data Insight and Intelligence Analyst presented a demonstration of the Joint Strategic Needs Assessment (JSNA) Website. Work has been done to add detail to various sections of the site, so an overview was provided to the Board with updates to the site highlighted.

The Board were talked through navigating the website, starting with reviewing headline figures on the Home Page, and progressing into dedicated pages where more detailed reports and visual resources are provided.

The Board were informed that all data and reports available to the Council and in the public domain would be available on the JSNA website.

Members of the Board queried whether it was possible to look at the data at a Ward level, the Officer confirmed that all information in the Public Domain can be added to JSNA.

RESOLVED: That the Board noted and commended the work being done on the Joint Strategic Needs Assessment Website

OLDHAM CHILD DEATH OVERVIEW PANEL

The Board heard from Dr Steven Senior, Consultant in Public Health and Chair of the Bury, Oldham, and Rochdale Child Death Overview Panel.

The Bury, Rochdale, and Oldham Child Death Overview Panel (CDOP) reviews all deaths of children normally resident in the three local authority areas.

The Board heard a report which provided an analysis of deaths reported to CDOP and reviewed by CDOP in 2021/22, 2022/23, and 2023/24. It also includes key demographic data on the population of children in Bury, Rochdale, and Oldham, as well as data on important contributors to child mortality, such as rates of premature births, child poverty, and homelessness among families with children.

Birth rates in Bury, Rochdale, and Oldham have fallen since 2016 but remain above average for England. The Office for National Statistics projects that the numbers of children living in the three local authority areas will be similar in 2030 to 2023.

Numbers and rates of child deaths in Bury, Rochdale, and Oldham have fluctuated year to year but overall stayed constant. Child death rates have tended to be higher than average for England in Oldham and Rochdale while rates in Bury have been similar to the England average.

Children living in areas of higher deprivation continue to be more likely to die, as are children from Asian ethnic background

(potentially because they are more likely than White children to grow up in areas of deprivation). Rates of child poverty and homelessness have increased since 2020/21 in all three areas covered by the report.

Along with the effects of poverty, CDOP continues to identify known, modifiable risk factors in its reviews of child deaths. 57% of deaths reviewed by CDOP between 2021/22 and 2023/24 had one or more risk factors identified. The most common category of modifiable factor were factors relating to the physical environment and factors relating to service provision (both present in 41% of deaths reviewed).

Known modifiable risk factors identified in reviews of child deaths included: smoking, alcohol misuse, and substance misuse during pregnancy and in the households; Unsafe sleeping arrangements, potentially linked to overcrowded housing or alcohol use by one or both parents; and Parents who are blood relatives, linked to 25.9% of deaths categorised as due to 'chromosomal, genetic, and congenital anomalies'.

Based on the analysis of deaths reported to and reviewed by CDOP, as well as of the publicly available data presented above, this report recommends that:

- Child poverty: Health and Wellbeing Boards should note the worsening in measures of child poverty and to work with local partners to ensure that local antipoverty plans address increases in childhood poverty.
- Smoking, alcohol, and substance misuse: Health and Wellbeing Boards, with partners, should continue to work to reduce smoking, alcohol, and drug misuse in pregnancy by:
 - 1) Ensuring smoking status and alcohol or substance misuse problems are identified early by ensuring that pregnant people are asked about smoking status, alcohol use, and substance use, that this information is recorded, and referrals to appropriate services are made; and
 - 2) Continuing wider work to reduce the prevalence of smoking, alcohol misuse, and substance misuse across the population and ensuring provision of smoking cessation and drug and alcohol treatment services.
- Safe sleeping arrangements: Health and Wellbeing Boards, with partners, should continue to promote safe sleeping practices, noting the possible relationship between unsafe sleeping arrangements and overcrowded or otherwise inappropriate housing and with alcohol use by parents. Safeguarding partnerships should ensure for children who have additional vulnerabilities that are captured in child protection or child in need plan.
- Consanguinity: Health and Wellbeing Boards should work with partners and community organisations to raise awareness of the increased risk of death and illness faced by children born to parents who are close blood relatives and assure themselves

that genetic counselling and testing services are being offered appropriately.

Members discussed the work being done to tackle some of the issues highlighted in the report and noted that smoking in pregnancy was at an all-time low and below 10%. Work is also being done to educate parents on safe sleeping and progress has been made.

Members were in agreement that child poverty seems to be the underlying cause of the majority of child deaths and tackling child poverty should continue to be a priority.

RESOLVED that, the Health and Well Being Board note the Child Death Overview Panel Report.

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CORPORATE PLAN

The Board received an update on the development of The Oldham Plan. This is a refreshed plan with more focus that moves away from Covid Recovery which was heavily featured in the previous Oldham Plan. The Board were provided with a summary of the Partner feedback and insight on Housing, Economy and Environment, Education and Skills, Health and Well Being, Public Spaces and Community Safety, Poverty and Inequality.

The emerging priorities identified 4 key missions;

1. Building Homes, Building Futures
2. Communities that thrive
3. Delivering Economic Growth and Opportunity
4. Pride in Oldham

The Board were provided with a brief summary of the Vision and Actions within the Oldham Plan to achieve the key missions.

Members provided feedback on the presentation and suggested amending some of the working to avoid confusion to residents about some of the changes happening in Oldham. The Officer noted that the plan was still in draft stages and changes could be made.

RESOLVED that, the Health and Well Being Board note The Oldham Plan.

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HEALTH INEQUALITIES PLAN UPDATE

The Board heard of how in June 2022, the Health and Well Being board agreed a health inequalities plan broadly aligned to the Marmot review 'Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives'. The Oldham plan has 6 thematic areas and 57 actions. Each theme had an identified senior sponsor to drive the work.

- Children and Young People – Gerard Jones,
- Health in all Policies/ Communities and Place – Mike Barker and Laura Windsor Welsh

- Health and Wellbeing, and Health Services – John Patterson and Rebecca Fletcher
- Work and Unemployment – Majid Hussain and Charlotte Walker
- Housing, Transport and Environment – Paul Clifford and Nasir Dad
- Income, Poverty and Debt – Sayeed Osman.

Many of the actions were not new but have been brought together in this plan as means of coordinating the approach, accentuating delivery and raising visibility. Each of the thematic areas had the opportunity of a focused review at a Health and Wellbeing board to share good practice and raise system barriers. This piece of work was in response to the stark inequalities that Oldham experiences between the borough and England average, and within our least and most deprived wards of Oldham. The gap in inequalities has not reduced as a result of this piece of work but has been pedalling against a backdrop of a cost living crisis.

The Head of the Public Health Service provided a brief summary of each of the areas and reflected on the last 2 years work.

Members noted that some of the Sponsors named in the plan were no longer in post and questioned what was being done in their absence. The Director of Public Health confirmed the actions and workplan set were still being carried out by Officers, but that new sponsors would be introduced to lead.

Members of the Board suggested the creation of a sub-committee to track the progress of the Health Inequalities Plan.

RESOLVED that,

1. The Health Inequalities Plan be noted by the Health and Well Being Board.
2. The Board look to create a Sub Committee to track the progress of the Health Inequalities Plan.

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NORTHERN ROOTS

Anna Da Silva and Steph Wild from Northern Roots presented to the Health and Well Being Board. The Board heard about the Social Prescribing work being done at Northern Roots and how there are thousands of papers which evidence the mental, physical, social and communal benefits of gardens, gardening and access to nature.

The Board heard of how the Charity began and how far it has come, as well as being given an overview of the current staffing.

Northern Roots is long term person focused, and they have supported 67 participants so far but with the additional funding they expect to have more users. Specific user experiences and outcomes were shared with the Board to highlight instances of progress and the good work being done.

RESOLVED that, the Health and Well Being Board note The Northern Roots Presentation.

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MEMBERSHIP UPDATE

RESOLVED that, the Membership update be noted by the Health and Well Being Board.

The meeting started at 10:00am and ended at 12:00pm