

HEALTH AND WELL BEING BOARD
22/03/2022 at 2.00 pm



Present: Councillor M Bashforth (in the Chair)
Councillors Birch and Moores

Also in Attendance:

Sayyed Osman (Deputy Chief Executive)
Katrina Stephens (Director of Public Health)
Stuart Lockwood – OCLL
Kirsty Rowlinson - OCLL
Laura Windsor-Welsh – Action Together
Dr John Patterson – Oldham CCG
Claire Smith - Executive Nurse (Oldham CCG)
Elaine Radcliffe – Oldham CCG
Julie Holt – Public Health Specialist
Simon Watts – Public Health Registrar
Peter Thompson – Constitutional Services
One member of the public

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Chauhan, Councillor Leach, Councillor Sykes, Tamoor Tariq, Majid Hussain, Dr Keith Jeffery, David Jago, Joanne Sloan, Donna Cezair, Harry Catherall, Gerard Jones and Mark Warren.

2 **URGENT BUSINESS**

There were no urgent items of business for this meeting of the Health and Wellbeing Board to consider.

3 **DECLARATIONS OF INTERESTS**

There were no declarations of interest received.

4 **PUBLIC QUESTION TIME**

There were no public questions received.

5 **MINUTES**

Resolved:

That the Minutes of the meeting of the Health and Wellbeing Board, held 25th January 2022, be approved as a correct record.

6 **PHARMACEUTICAL NEEDS ASSESSMENT**

The Health and Wellbeing Board considered a report of the Director of Public Health, which presented the draft Pharmaceutical Needs Assessment, 2022.

The meeting was informed that Oldham's Health and Wellbeing Board had a statutory responsibility to publish and keep up-to-date a Pharmaceutical Needs Assessment (PNA). The Department of Health and Social Care had determined that the publication of PNA's would be suspended during the Covid-19 pandemic with the deadline of October 2022 now being set for publication of the PNA.

The Public Health Service's Medicines Optimisation Team, acting on behalf of the Council, had undertaken the process of developing the PNA according to the guidance that had been issued by the Department of Health and Social Care.



It was planned that the draft Oldham PNA would be presented for review and approval, so that it could undergo a 60-day mandatory consultation period. This consultation period was planned to be held between 9th May – 10th July 2022. Following consultation, the final version, subject to any necessary amendments, would be presented at the Health and Wellbeing Board's scheduled meeting on 13th September 2022 for final approval, prior to publication on the Council's website by October 2022. The draft PNA referred to the possibility of new housing developments in the Borough of Oldham. Therefore, it was suggested that should any new housing development progress as expected and if one or more new village centre(s) were planned then the Board should support proposals that it would be beneficial to have a new pharmacy as part of any such development(s).

Resolved:

1. That the draft Pharmaceutical Needs Assessment, as detailed in the Board's report be approved for public consultation
2. That the Board recognises and acknowledges the timescale for the activity required to complete the Pharmaceutical Needs Assessment.
3. That should any housing development scheme progress as expected and if one or more new village centre(s) are planned then the Board supports a proposal that it would be beneficial to have a new pharmacy as part of any such development(s).

7

PREHAB FOR CANCER

The Board received a presentation from Oldham Community Leisure's Prehab4Cancer Programme Manager regarding their Prehabilitation Programme.

The meeting was advised that Prehabilitation enabled people with cancer to prepare for treatment through promoting healthy behaviours and through needs-based prescribing of exercise, nutrition and psychological interventions. Prehabilitation is part of a continuum to rehabilitation.

The programme operated by Oldham Community Leisure closely followed the programme that had been devised for Greater Manchester. The Greater Manchester model was the first 'prehab' system to be launched in the country, back in April 2019. It was described as a 'whole system, Multimodal approach' to Prehabilitation and Rehabilitation, which was clinically led and adhered to an evidence-based practice approach.

It followed a three Point programme – Exercise, Nutrition, Wellbeing. Patients were referred from multi-disciplinary teams

and they were assessed at set time points using validated measures. There then followed a tailored and progressive exercise programme; that followed specialised exercise guidelines, wellbeing intervention and dietic support. The programme was locally based and was accessible across Greater Manchester. There was an equity of access for patients across Greater Manchester. There were standard practices for raising concerns and feeding back to clinical teams, with steering groups to support and shape the service including Patient representatives.

The benefits in terms of surgery and treatment included: shortened and less complex recovery, potential reduction in length of stay, reduced treatment-related complications, improved adherence and completion of treatment, potential reductions in toxicity, improved cardiorespiratory function and a reduced impact of Sarcopenia.

The benefits in terms of longer-term rehabilitation included: improved functional capacity, improved strength and bone health, improved Mental wellbeing, improved confidence and self-esteem, improved aspects of Neuro-cognitive functions, a potential transition to lifelong habit of physical activity, a reduced risk of cancer specific mortality, a reduced risk of all-cause mortality and a reduced risk of recurrence.

The Board discussed the presentation in detail, noting the benefits for the community that can be gained through adherence to this programme and which can only be increased as the programme becomes more readily available and widely known about. The Board requested that an update report/presentation on this matter be brought to a future meeting for consideration.

Resolved:

1. That the presentation be noted and welcomed.
2. That a further presentation and/or a report on the Prehab for Cancer programme be considered at a future meeting of the Health and Wellbeing Board.

8

LIFE EXPECTANCY UPDATE

The Health and Wellbeing Board considered a report of the Director of Public Health that provided an update on the latest data on life expectancy in the Oldham borough, which has been produced for Oldham's Joint Strategic Needs Assessment.

The report did not include information on the key contributors to the life expectancy gap between Oldham and England, as Officers were waiting for national data in this regard to be updated.

The report was closely related to the Health Inequalities Plan, as the focus of that plan was on reducing inequalities in life expectancy and health life expectancy.

It was reported that for the period 2018 - 2020 revealed that Oldham's life expectancy at birth was lower than the England, North West and Greater Manchester averages for both males and females. The most recent life expectancy at birth figure for Oldham males is 77.2 years and for Oldham females is 80.5 years. The latest life expectancy at birth figures represented a slight decrease for both males and females in Oldham compared with the figures for 2017 - 2019.

Life expectancy at age 65 years is lower in Oldham than for England, North West and Greater Manchester for both males and females. In addition, Oldham had the fifth lowest life expectancy at birth for males across Greater Manchester. Oldham females rank fourth lowest.

For males, the Borough's Alexandra, Werneth and Coldhurst Wards had the lowest life expectancy at birth, whilst Saddleworth South, Saddleworth North and Royton North Wards had the highest. There was an 11.8-year life expectancy gap between the Ward with the highest and lowest life expectancy.

For females, the Borough's Alexandra, Coldhurst and St. Mary's had the lowest life expectancy at birth, whilst Saddleworth North, Saddleworth South and Chadderton North had the highest. The gap in life expectancy for women between the wards with the lowest and highest life expectancy stood at 12.8 years.

The Latest figures (for the 2017 – 2019 period) revealed that the percentage of life spent in good health has increased slightly for Oldham males and decreased for females compared with the previous reporting period of 2016 - 2018.

The Board was informed that life expectancy at birth was a measure of the average number of years a person could expect to live based on contemporary mortality rates. For a particular area and time-period, it was an estimate of the average number of years a new-born baby would survive if he or she experienced the age-specific mortality rates for that area and time-period throughout his or her life.

Oldham's male life expectancy at birth for 2018 - 2020 was 77.2 years, 0.4 years lower than the figure for 2017 - 2019 of 77.6 years. This was in line with national and regional decreases. Most recent 2018 - 2020 figures showed that Oldham's male life expectancy at birth was falling short of the England average by 2.2 years, the North West's average by 0.8 years and the Greater Manchester average by 0.3 years. From 2001 - 2003 until the most recent reporting period of 2018/20, the overall increase in male life expectancy was similar between Oldham (4.7%), the North West (4.5%) and England (4.2%).

Oldham's female life expectancy at birth for the 2018 - 2020 period was 80.5 years, which was 0.5 years lower than the figure for 2017 - 2019 of 81.0 years. This was in line with national and regional decreases. The most recent 2018 - 2020 figures showed that Oldham's female life expectancy at birth

was falling short of the England average by 2.6 years, the North West average by 1.2 years and the Greater Manchester average by 0.8 years



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Overall, from 2001 - 2003 until the most recent reporting period of 2018 - 2020, the overall increase in female life expectancy was similar between Oldham (2.4%), the North West (2.9%) and England (3.0%).

Across Greater Manchester there were considerable inequalities in life expectancy at birth for males. Oldham ranked 5th lowest across Greater Manchester at 77.2 years. Trafford ranked highest at 80.2 years and Manchester was lowest at 75.5 years. Only Stockport and Trafford had rates higher than the England average.

A similar pattern emerged with the female rates. Oldham ranked 4th lowest at 80.5 years. Trafford ranked highest at 83.8 years and Manchester was the lowest at 79.9 years. Stockport and Trafford were, again, the only Greater Manchester authorities to exceed the England average.

In considering the report the Board requested that further extracts and information, appertaining to the Joint Strategic Needs Assessment be included on future agendas for meetings of the Health and Wellbeing Board.

Resolved:

1. That the Health and Wellbeing Board notes the data presented in the submitted report and the implications for policy, planning and delivery across the Oldham borough's system.
2. The Board request that further extracts from the Joint Strategic Needs Assessment be included on the agenda for future meetings of the Health and Wellbeing Board.

9

A HEALTH INEQUALITIES PLAN FOR OLDHAM

The Health and Wellbeing Board considered a report of the Director of Public Health that provided an update on the development of the Health Inequalities Plan for the Oldham borough.

The meeting was reminded that in November 2021, Health and Wellbeing Board members had discussed the development of a Health Inequalities plan for Oldham and a process for development. Since then, a series of working group meetings have taken place, with a significant amount of work outside of the working group, reviewing key themes highlighted in the Greater Manchester Marmot Build Back Fairer report.

The working group's membership included: Oldham MBC Councillors, colleagues from the Public Health service, representatives from Employment Services, Children's Services, Organisational Development, Housing, Oldham CCG/Integrated Care Service, Action Together, First Choice Homes, Oldham

As each theme was reviewed, recommendations from each session were drawn together to form the Health Inequalities Plan for the borough.

In terms of engagement and development of the plan there had been a retrospective review of various residential engagement exercises that had been carried out ahead of the working group sessions and the key themes from the engagement exercises were presented to inform the discussion and these included:

- a. The work of the doorstep engagement team, which reviewed themes generated from extensive conversations that had been held 'on the doorstep' with residents between from the period August 2020 to November 2021.
- b. Mental health, concerns about Anti-Social Behaviour, the environment and money issues were all key concerns that were raised.
- c. The Insight Tracker had reviewed all insights that had been recorded in the insight tracker by professionals across Oldham up to November 2021, with a number of themes raised around learning disabilities and mental health.
- d. The Community Champions Network had drawn on key themes that had emerged from several community champion network meetings during the pandemic.
- e. The Poverty Truth Commission had examined emerging themes around the extent to which staff can associate and empathize with people in poverty informed elements of the plan.
- f. The Early Years Strategy Consultation had observed a wide range of points raised by residents which informed the Children and Young People element of the plan.
- g. The Authority's Homelessness strategy was studied to determine if it could be used as part of the development of the health Inequalities Plan.
- h. The Authority's Covid-19 recovery plan included feedback from a wide range of residents who had offered their views on the impact of Covid-19 on their lives, which was particularly relevant to the employment related themes.
- i. The 'Let's Talk Oldham' programme had seen residents identify a number of priorities that were relevant to the health inequalities plan as part of this engagement around the corporate plan.

The members of the working group had offered their accounts of client/service user experiences in each individual working group discussion. Dedicated engagement had taken place in the form of a Poverty Truth Commission session focusing on residents' experiences of using health services. Wider themes around issues relating to access, trust and relationships had emerged which were relevant to all aspects of the health inequalities plan. Further engagement was planned with residents to review it in draft form and to 'sense check' the priorities outlined therein. It was stressed that further conversations with residents would still

be needed to inform how actions were to be developed and delivered.



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Resolved:

1. That the report be welcomed.
2. That the Health and Wellbeing Board notes the report and support further engagement with residents and wider stakeholders as the Borough's Health Inequalities Plan is further developed.
3. That after further consultation and engagement a finalised version of the Health Inequalities Plan be presented to the Board's next meeting on 21st June 2022, for approval.

10

DATE OF NEXT MEETING

Resolved:

That the next meeting of the Health and Wellbeing Board be held on Tuesday, 22nd June 2022, starting at 2.00pm, in the Civic Centre, Oldham.

The meeting started at 2.00pm and ended at 4.05pm