

HEALTH AND WELL BEING BOARD
24/01/2023 at 2.00 pm



Present: Councillor M Bashforth (Chair)
Councillors Brownridge, Moores and Sykes
Majid Hussain, Mike Barker, Sayyed Osman, Gerard Jones,
Laura Windsor-Welsh, Stuart Lockwood and Katrina Stephens

Also in Attendance:

H. Ramsden – Assistant Director of Joint Commissioning
C. Stevenson – Consultant in Public Health
R. Fletcher – Consultant in Public Health
D. McLaughlin – NHS Northern Care Alliance
A. Tebay – Head of Service - Public Health
V. Morris – Assistant Director (Human Resources)
S. Larkin – Children’s Services
L. Black – First Choice Housing Oldham
J. Wareham – Public Health Service
J. Taylor – Public Health Service
P. Thompson – Constitutional Services

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Munroe, Jayne Ratcliffe, Nasir Dad, Paul Clifford, Dr John Patterson, Tamoor Tariq, Joanne Sloan and David Jago.

2 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

3 **URGENT BUSINESS**

There were no items of urgent business received.

4 **PUBLIC QUESTION TIME**

There were no public questions for the meeting to consider.

5 **MINUTES**

Resolved:

That the Minutes of the meeting of the Health and Wellbeing Board held on 15th November 2022, be approved as a correct record.

6 **JOINT STRATEGIC NEEDS ASSESSMENT**

The Health and Wellbeing Board received a presentation from the Data Insight and Intelligence Lead regarding the Oldham Drug and Alcohol Needs Assessment 2022.

Oldham had a total population of 237,628 (according to the Mid-Year Estimate, 2020) of which 49.4% are male and 50.6% female. Those who were 18 years or older represent 75.0% of the population. It is currently estimated that White/White British ethnicities comprise the largest concentration (71.3%) followed by Asian/Asian British communities with 22.4%.

In terms of Indices of Multiple Deprivation (IMD) Oldham is 19th worst in England and had five LSOAs (Lower Super Output Areas) which now sit in the most deprived 1% nationally.



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As of March 2022 the number of adult drug users in treatment in Oldham was 1,197 compared to 1,046 in the previous year – an increase of 14.4%. The number of adult alcohol-only clients also increased significantly by 17.9% from 385 in March 2021 to 454 in March 2022. These increases are significantly greater than averages for Greater Manchester, the North West region and England. The number of new presentations to adult drug treatment services in Oldham increased sharply by 28.9% from 450 to 580 which was accompanied by a rise of 18.3% amongst alcohol-only clients from 268 to 317. Again, increases in this context were far higher than sub-regional, regional and national averages.

Estimates of unmet need, based on the proportion of people who are dependent on opiates and/or crack cocaine or alcohol not in the treatment system, show that rates amongst Oldham's population, except for 'crack (only)', are inferior to national averages. Successful completions since 'historic lows' in 2018/19 are currently showing signs of recovery, approaching 6% amongst opiate users and a four-year high of 37.2% amongst non-opiate clients. The rates of successful completions are now beginning to compare well with national and 'local outcome comparator' group averages.

In the past 12 months the rates for re-presentations within six months of a successful completion are also, to a large extent, improving. Amongst non-opiate users, rates have dropped to zero and typically 0% to 4% amongst the combined user category of 'Alcohol & Non-opiates'. Rates amongst opiate users fell from 42% in March 2021 to 17% in March 2022. However, amongst alcohol only clients the rate increased to 17% during the same period following a consistent period of sub-five percent rates.

Within Oldham's adult in-treatment drug user population 72% are male. White/White British ethnicities represent 85% of this cohort, with Asian/Asian British communities being the next largest grouping at 8%. This means that while White ethnicities are overrepresented in the treatment population, South Asian communities are significantly underrepresented when compared to the general population. In terms of age, 30- to 49-year-olds account for 63% of adult in treatment. 9. Almost 7% of drug users in treatment indicated 'urgent housing problems' and 13% cited other 'housing problems. Approximately two-thirds (65.7%) had a 'mental health treatment need identified' when they presented to drug treatment services in Oldham. In March 2022 the largest referrers to drug treatment services in Oldham were 'Self, Family & Friends' (53.1%) with the next largest proportion of referrals coming from 'criminal justice' agencies (22.6%).



From 2018/19 to 2021/22 the key trends in substance involvement amongst adult drug user engaging with treatment are as follows:

- i. Upward trend in combined opiate/crack cocaine use from 31.3% to 33.5%
- ii. Cocaine (powder) almost doubling from 11.1% to 21.4%
- iii. Cannabis up more than 1½ times from 19.0% to 30.3%
- iv. Alcohol citations up by almost one-third from 22.9% to 29.7%.

Deaths in drug treatment increased from 13 in 2019/20 to 19 in 2020/21. The proportion of adults Oldham with opiate problems in treatment for 6 years or more was now 33% compared to 27% nationally. The proportion of missing data with regards to adult drug user clients declaring their parental status when presenting to treatment services in Oldham has decreased from 13.8% in 2020/21 to 5.7% in 2021/22. This compares to a national average of 1%. It is important all information in relation to parental status and clients declaring whether or not they live with children is accurately recorded for safeguarding purposes.

Amongst adult alcohol only clients in treatment in Oldham 62% are male and 38% were female. More than nine in ten (94%) are from White/White British backgrounds. Almost one in five (19.2%) are aged 30-39 years, 28.9% aged 40-49 years and almost 36% aged 50-64 years. Approximately 1.3% of alcohol only clients in treatment indicated 'urgent housing problems' and 8.2% cited other 'housing problems', whilst approximately two-thirds (65.9%) had a 'mental health treatment need identified' when they presented to alcohol treatment services in Oldham.

In March 2022 the largest referrers to alcohol treatment services in Oldham were 'Self, Family & Friends' (51.7%) with the next largest proportion referral coming from 'hospital' (12.0% up from 6.7% in the previous year). The third highest proportion was via GPs with 7.3%. The monthly consumption of alcohol units amongst alcohol only clients presenting to treatment indicated increases in higher values. For instance, the proportion of those stating that they consumed 1,000 or more units per month almost doubled from 10.6% in 2018/19 to 19.2% in 2021/22.

The rate per 100,000 of hospital admissions decreased from 835 in 2019/20 to 681 in 2020/21, however, although lower than the North West average (795), it remains higher than that of England (587). Alcohol specific mortality per 100,000 population in Oldham in 2020 (latest figures) was 15.9 which was similar to GM (15.8) and the North West (14.6) averages but almost 1½ times the rate for England (10.9). Mortality due to chronic liver disease (per 100,000 population) in Oldham was 19.3 which was similar to GM (18.1) but higher than North West (16.8) and England (12.2) averages.

In considering the report and presentation the Board expressed its concerns at the degree of addiction issues that were prevalent across the Borough, noting various other, underlying

issues that were making the problems much worse, such as poverty and deprivation.

Resolved:

1. That the report be noted.
2. That the Director of Public Health be requested to commission a piece of work, consulting all relevant agencies, regarding the underlying issues that were adversely affecting addiction levels, in the Borough of Oldham and scoping an improvement plan that could be put in place.

7

HEALTH INEQUALITIES THEMATIC REVIEW; WORK AND UNEMPLOYMENT

The Health and Wellbeing Board received a detailed review of one of the key thematic areas, that had been extracted from Oldham's Health Inequalities Plan and considered progress, opportunities and challenges. The themes that were discussed included 'work and unemployment'.

A key area of focus was work around reducing inequalities in working practices. Work to counter this included encouraging 'anchor' organisations to work together to develop more equitable and accessible recruitment practices. This would in turn help to maximise the benefit and learning from NHS Northern Care Alliance (NCA) work and how this can be shared more broadly across anchor organisations. Another measure involved reviewing adult education course uptake data and the development of plans for improving uptake in those areas of highest socio-economic need, developing a targeted offer and engagement strategies and considering course time commitments and how they link to recognised thresholds.

There were initiatives ongoing to drive the uptake in the living wage and the Greater Manchester employment charter across Oldham – which offered opportunities and protection to some of the city-region's most vulnerable groups. Actions in this regard included the development of campaigns to increase participation in the Greater Manchester employment charter and living wage for Oldham, including enabling social care providers to pay the living wage. There were aims to strengthen Social Value Procurement, with an emphasis on the need to be seen to be a 'good and fair paying employer'.

There was an identifiable need to improve the understanding of inequalities associated with employment matters across the Borough. This could be achieved by collating data relating to employment practices and look to share the data across the Borough, thereby obtaining an understanding of the 'need' in the Borough, aided by the development of plans and monitoring progress. It would also monitor unemployment data, including those who are inactive due to illness or caring.

A key outcome would be to maximise opportunities into employment in Oldham, particularly in the most under employed areas. In this regard work was ongoing to connect pathways from lifelong learning into employment opportunities, maximising

opportunities from leveraging pre-employment programmes (such as the NCAs) and connecting into further learning opportunities.



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The board was advised that there had been a 'workshop' held in November 2022, which had focused on Recruitment – exploring best practice and opportunities. The key recommendations arising from the workshop included: for foundation roles, recruitment needed to be in plain English – adverts, job descriptions and interview questions; the issue of 'appointable candidates' being retained in a 'jobs pool' for future opportunities – which was considered a positive way forward. There had been recruitment fairs which could lead to offers of employment and/or training. Recruitment activity to penetrate communities with low employment prospects was another key outcome. Finally in terms of job vacancies there had been an identifiable need to join with education establishments as part of a pipeline into employment gaps.

The Board was advised that the NCA provided a nationally recognised programme to support Refugee and Asylum-seeking medics obtain a licence to practice within the UK, which was known as the REACHE programme. Since May 2019, 13 REACHE doctors have received Clinical practice training (CPT) at Royal Oldham Hospital. REACHE was being rolled out into other professions – pharmacy, midwifery, nursing and dentistry. In terms of the NHS there were approximately 350 Careers. The local uptake of employment was 59.4%.

The NCA was developing a youth employment a charter, recognising good practice. There were plans to revise their apprenticeship offer. There was also the NCA kickstart programme and the Graduate offer working with the University of Manchester and Manchester Metropolitan University. There were schemes to provide work exposure, to support adult education courses (including around domiciliary care) and more recruitment events.

Resolved:

That the Health and Wellbeing Board offers its full support to the programmes and initiatives outlined above and will continue to work proactively with partner organisations.

8

HEALTH INEQUALITIES THEMATIC REVIEW; HOUSING, TRANSPORT AND ENVIRONMENT

The Health and Wellbeing Board received a further detailed review of one of its key thematic areas, that had also been extracted from Oldham's Health Inequalities Plan. The themes that were discussed included 'housing transport and the environment'.

The Council's Cabinet was due to consider a report that would seek approval and adoption of the Oldham Transport Strategy and the Board received a presentation outlining the strategy, its aims and its links to other key strategic areas.. The Oldham Transport Strategy set out how Oldham would meet the

ambitions set out in the Greater Manchester Transport Strategy 2040 and sub strategies, whilst ensuring investment was prioritised to ensure that Oldham's Transport and Highways Network supported a Healthy, Clean and Thriving borough.



The Vision for Oldham was to create a connected borough with increasing use of public transport and active travel that provides all people with safe and inclusive access to opportunities and healthy choices. The Transport Strategy set out the council's transport and highways ambitions in relation to:

- A Healthy Oldham
- A Clean Oldham
- A Safe Oldham
- An Accessible Oldham
- A Connected Oldham and
- A Thriving Oldham

The Oldham Transport Strategy and Delivery Plan was aligned with the Greater Manchester Transport Strategy 2040 'Right Mix' ambition for half of all journeys to be made by active and sustainable transport modes by 2040.

The aim of Oldham's Transport Strategy was to reduce carbon emissions from transport, increase cycling, walking and public transport use and enable the borough to become an increasingly attractive place to live, work and visit.

The Delivery Plan set out transport interventions to be delivered over the following time periods:

- short term 0 - 5 years;
- medium term 5 -10 years;
- long term 10 – 20 years (up to 2040); and
- beyond 20 years - 2040 onwards.

The Transport Strategy also included the first proposed sub-strategy - an update to the Oldham Town Centre Parking Strategy. The refreshed Town Centre Parking Strategy was necessary to support the current regeneration proposals for the town centre.

Resolved:

That the Health and Wellbeing Board support and endorse the Oldham Transport Strategy including the Delivery Plan.

9

PUBLIC HEALTH UPDATES

The meeting received a Health Protection and Health Improvement Highlights report. The Health Improvement Highlights report examined issues relating to teenage health and pregnancies; healthy weight and physical activity; tobacco related issues (including dependency and smoking cessation); 'Healthy Start' (the development and delivery of infant mortality action plans); drug and alcohol treatment services and governance issues (including the establishment of a Health Improvement Group that would report to the Health and Wellbeing Board).

The Health Protection Highlights included outbreak support (the management of outbreaks of communicable diseases – including respiratory and new and emerging infections; infection prevention and controls in high-risk settings (such as GP Practices, Care Homes and Early Years settings); the combating of flu, including the rolling out of the autumnal/winter vaccination programme; and Healthcare Acquired Infections and anti-microbial resistance (via the provision of support to prevent and reduce attendant risks)

Resolved:
That the report be noted.

10 **HEALTH AND WELLBEING STRATEGY**

Resolved:
That consideration of the Oldham Health and Wellbeing Strategy be deferred, to the next scheduled meeting of the Health and Wellbeing Board on Tuesday, 21st March 2023.

11 **ADULT SOCIAL CARE DISCHARGE FUND 2022/23**

The meeting considered a report of the Assistant Director of Joint Commissioning (Adult Social Care) which provided the Health and Wellbeing Board with details of the Adult Social Care Discharge Fund 2022/23 and to obtain retrospective sign-off in line with the requirements of the national conditions.

The board was advised that in September 2022, the Department of Health and Social Care (DHSC) had announced £500m of temporary funding nationally to support timely and safe discharge from hospital into the community by reducing the number of people delayed in hospital awaiting social care. In November 2022, the funding allocations and detailed grant conditions were published, including the requirement to spend the funding by 31st March 2023 and submit fortnightly activity and spend returns, the first of which is required on 6th January 2023.

DHSC had allocated part of the funding directly to local authorities, and part of the funding to Integrated Care Boards (ICB), with a requirement for ICB's to agree its distribution with local authority partners, dependent on local context and challenges.

The funds for Oldham, allocated directly to the local authority were £935,295. The funds allocated to Oldham via Greater Manchester NHS Integrated Care were £1,638,593. Funding was to be paid in two tranches, the first in December and the second in January, subject to completion of the first monitoring return.

As a locality and in the context of Greater Manchester, Oldham performed well in respect of timely hospital discharge, but this came at a cost, particularly in relation to home care packages, care home placements and equipment. Capacity in the care sector was significantly challenging, with workforce availability cited as the greatest contributing factor.

Fortnightly reporting is required to be submitted, providing total activity, discharge specific activity and spend information. The first return was completed on 6th January 2023 which also included baseline information of all local authority funded activity for the period 1st October - 31st October 2022. A final spending report is required to be submitted to DHSC, alongside the wider end of year BCF report by 2nd May 2023. The Section 75 agreement, which deals with the Better Care Fund is required to be amended to incorporate the Adult Social Care Discharge Fund.

Resolved:

1. That the Health and Wellbeing Board approves the content of the Oldham Adult Social Care Discharge Fund Plan
2. That the Health and Wellbeing Board notes that Schedule 8 of the Section 75 agreement, pertaining to the Better Care Fund, will be amended to reflect this funding.

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DATE OF NEXT MEETING

It was noted that the next meeting of the Health and Wellbeing Board will be held on Tuesday, 21st March 2023 at 2.00pm, in the Civic Centre, Oldham.

The meeting started at 2.00pm and ended at 4.05pm