

Health and Social Care Portfolio Report

Portfolio Holder:

Cllr Barbara Brownridge, Cabinet Member for Health & Social Care

This report provides an update on the main activity since the last Council meeting relating to portfolio responsibilities. Council is requested to note the report.

Public Health

HIV - With early diagnosis, HIV is now a treatable chronic manageable medical condition. National HIV Testing Week took place between 5-11 February 2024. The campaign website [It Starts With Me](#) has lots of information about HIV prevention, HIV testing, and HIV treatment and care.

Our local services supported the campaign by increasing HIV testing opportunities in local community venues, including at Oldham Baptist Church. [The PaSH \(Passionate about Sexual Health\) Partnership](#) delivers a comprehensive programme of interventions to meet the changing needs of people newly diagnosed with HIV, living longer term with HIV, or at greatest risk of acquiring HIV. Free HIV testing is also available from our local sexual health service throughout the year ([Oldham Sexual Health Hub](#)). People can get tested at the clinic, pick up an express test (from the hub at the ICC) or order a [postal kit](#). The service also offers free condoms to prevent transmission of HIV and [PrEP](#) which is a pill that, if taken correctly, can protect from HIV.

Place-Based Prevention - We have started to develop Place-based Prevention Budgets as part of the Greater Manchester Live Well programme, which is funded by the National Lottery. The GM ambition is that the ten localities across Greater Manchester, and the voluntary and community sector, will work together to support residents to maintain and improve their health, wellbeing, resilience and social connections. In Oldham, we will create the infrastructure to draw together existing funding from within the system, to be held by a local partnership and distributed to support community-led prevention approaches aiming to improve the health and wellbeing of residents. We will involve community partners and residents in decision making, and where possible transfer decision making power to communities.

Measles – Following the large outbreak of measles in the West Midlands, Greater Manchester is seeing cases of measles. In Oldham we are working as a system to increase MMR uptake across all ages to protect our population from this potentially very serious illness. Those at highest risk of complications include the very young, pregnant women, and those that are immunosuppressed.

Adult Social Care

The Director of Adult Social Care and the Cabinet Member for Health and Social Care have a statutory responsibility in accordance with the Care Act to ensure a sustainable care market. The Care Act statutory guidance states:

“Local authorities must work to develop markets for care and support that - whilst recognising that individual providers may exit the market from time to time - ensure the overall provision of services remains healthy in terms of the sufficiency of adequate provision of high-quality care and support needed to meet expected needs. This will ensure that there are a range of appropriate and high-quality providers and services for people to choose from. Local authorities should understand the

business environment of the providers offering services in their area and seek to work with providers facing challenges and understand their risks.”

It is crucial that the Council consults with providers to implement a sustainable fee increase for 2024-25. In Oldham, this includes the requirement for the fee uplift to cover the cost of the Living Wage Foundation rate. The fee consultation on the proposed rate for 2024/25 with Adult Social Care providers opened on 7th February and closes on the 20th February. Following this the consultation feedback will be reviewed and consolidated for a decision regarding implementation.

Adult Social Care (ASC) continues to prepare for the CQC Assurance process. A position statement outlining the ongoing work required has been completed recently, and governance has been established to provide oversight and assurance on the service's readiness for inspection.

The ASC Strategy is now ready for launch, and ASC are in the process of working with colleagues to plan the roll out, aligned to World Social Workday in March 2024.

I am pleased to confirm Oldham Total Care remains fully open, with occupancy gradually increasing, and recent estates issues resolved. ASC continues to work closely with the on-site team to develop the service, aligned to the needs of the borough and its position as a community asset in Chadderton.

Oldham Integrated Care Partnership (ICP)

Covid Vaccine Campaign

The winter COVID-19 vaccination programme has concluded. Uptake has increased in our elderly population, although there has been lower uptake in the younger cohorts. While this is consistent with the national picture the borough has adopted a range of methods to encourage uptake including pop up and dedicated clinics for residents with a Learning Difficulty, Serious Mental Illness and those who are immunosuppressed.

Urgent and Emergency Care

New pathways are being trailed in the Emergency Department at Royal Oldham Hospital to improve patient experience. A new 'pre-Emergency Department' pathway is being tested to manage people who present at A&E with a primary care need. The aim is to improve the patient journey, outcomes and reduce the amount of time they spend in the department.

A high number of A&E attendances are due to falls and a great deal of work is being done in the community to support falls prevention and to support residents to stay at home following a fall where it is safe to do so.

Integrated Neighbourhood Teams and Population Health

Work continues to develop our locality population health model and progress integrated neighbourhood team working.

Resident outcomes will be improved by a holistic and anticipatory model of care which helps manage existing conditions better and prevent or delay new conditions developing so people stay healthier for longer. Resident experience will improve with better care coordination based on individual need. Residents will become active in their care, empowering them to manage conditions with support. Adopting this approach results in a more efficient use of staff's time. Changing to a more integrated way of working will drive collaboration amongst staff across skillsets and organisations. Keeping more of the population healthier for longer will reduce demand on acute services. Focusing on prevention moves money out of acute care into more community driven health and care services and prevents escalations of residents from generally well to chronic and complex needs which reduces social care spend.

Recommendations: Council is requested to note the report.