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**HEALTH AND WELL BEING BOARD**  
**27/06/2017 at 2.00 pm**



**Present:** Councillor Dearden (Chair)  
Councillors Blyth, Chauhan, Harrison, Moores and Price

Dr Zuber Ahmed	Oldham CCG
Jax Effiong	Greater Manchester Fire and Rescue Service
Neil Evans	Greater Manchester Police
Carolyn Wood	Director of Nursing (ROH)
Katy Calvin-Thomas	Pennine Acute Hospitals NHS Trust
Caroline Drysdale	Pennine Care NHS Foundation Trust
Denis Gizzi	Managing Director, Oldham NHS Clinical Commissioning Group
Majid Hussain	Lay Chair Clinical Commissioning Group (CCG)
Dr Keith Jeffery	Oldham CCG
Maggie Kufeldt	Executive Director – Health and Wellbeing
Alan Higgins	Director of Public Health
Dr Ian Wilkinson	Oldham CCG
Liz Windsor-Welsh	Voluntary Action Oldham

Also in Attendance:

Oliver Collins	Principal Policy Officer
Sian Walter-Browne	Constitutional Services

1            **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Nicola Firth, Cath Green, and Stuart Lockwood.

2            **URGENT BUSINESS**

There were two items of urgent business.

1) Manchester Arena

The Chair said the following

“I just wanted to express, and I am sure all Board members will join me in this, my thoughts and thanks, to all the officers and organisations that were involved in the immediate response, and subsequent support provided to the victims, families and friends of those affected by the Manchester bombing attack on the 22<sup>nd</sup> May.

The response to events that took place that night will have been planned and practiced for by the emergency services, in the hope that they never had to be put into practice. Unfortunately they did, but all indications are that the response from all involved was first-rate. From the co-ordinated Police, Ambulance and Fire Service response within minutes of the attack, to the Hospitals across Manchester who cared, and are still caring, for those injured in the attack, and to the counselling

and community services that are supporting the affected individuals and communities come to terms with the aftermath of the night”.

## 2) Fire Safety in Tower Blocks

Jax Effiong updated the Board on the risk assessments and reassurance visits being undertaken. Where in-depth assessments had been undertaken, there had been a number of failures found in relation to cladding, fire doors and escape routes.

A community event would take place locally in conjunction with FCHO, for which a date was yet to be fixed.

## 3 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

## 4 **PUBLIC QUESTION TIME**

The following public question was received:-

### RE: NHS England missing target for ‘Urgent’ eating disorder referrals

On the NHS England news site on the 23rd May 2017, there was an item on the above topic. I ask this body to look at this item and bring it to the next Health & Wellbeing Board in June.

I would like to know:

- 1) Does this affect anyone within this borough
- 2) If so, what is the current position of what is stated on this item, on the time people have to wait
- 3) Will you be looking if patients with eating disorders are having to wait to be seen longer than stated within the report.
- 4) I would like to see updates when appropriate to be brought to the Board.

The following responses were provided:-

- 1) No
- 2) Not applicable
- 3) All patients have been seen within the guidance times.
- 4) The Board is happy to provide this information as it moves forward. It is worth noting that, as this is a national requirement, CCGs and providers are both monitored in relation to this.

Further information was also provided. A new Community Eating Disorder Service (CEDS) has been developed (commenced 4 July 2016) across the footprint of Pennine Care NHS Foundation Trust (due to economies of scale). As the guidance stipulates a minimum 500,000 total population footprint, Oldham has jointly commissioned the service with neighbouring CCGs to ensure adequate population coverage. A single borough model with an enhancement to current eating disorder provision, with a

dedicated eating disorder community-based team in the south (Trafford, Stockport and Tameside & Glossop) and north (Oldham, Bury, Heywood Middleton and Rochdale); and a single service model with dedicated eating disorder community-based team across all localities. The service is in line with the recently published “Access and Waiting Time Standard for Children and Young People with an Eating Disorder Commissioning Guide” (2015), i.e. waiting times are achieving national targets:

- Children and young people with eating disorders (urgent cases) that wait 1 week or less from referral to start of NICE-approved treatment.
- Children and young people with eating disorders (routine cases) that wait 4 weeks or less from referral to start of NICE-approved treatment.

The service currently operates from temporary accommodation, but a permanent base has been sourced. Once the permanent base is operational, drop-in/activities provision will be available out-of-hours (1-8pm Monday to Friday) and at weekends (10am-4pm), with space for an information/mini library. Young people will be able to have up to 3 sessions per week, offering early evening or weekend times to support working parents and school/college attendance. Day provision will continue to be offered on a case-by-case basis through the Horizon inpatient unit with the community eating disorder service facilitating step down to intensive home and community support. Healthy Young Minds (formerly known as CAMHS) will be required to support service delivery where there is co-morbidity and utilise the community eating disorder staff for consultation and supervision around the eating disorder aspects of the young person’s presentation. Whilst there are many benefits of this model, it is anticipated that this service will see a reduction in those children and young people who self-harm and negate the need in some circumstances for crisis intervention.

It is an innovative community-based eating disorder service with a framework for service delivery that is entirely congruent with the Future in Mind ambition.

For further information regarding the service, please see Healthy Young Minds website:

<http://healthyyoungmindspennine.nhs.uk/eatingdisorders/>

5 **HEALTH PROTECTION MINUTES**

RESOLVED that the minutes from the Health Protection Group meeting held on 12<sup>th</sup> April 2017 be noted.

6 **MINUTES OF PREVIOUS MEETING**

RESOLVED that the minutes of the meeting held on 14<sup>th</sup> March 2017 be approved as a correct record.

7 **ACTION LOG**

RESOLVED that the Action Log from the meeting held on 14<sup>th</sup> March be noted and the JSNA terms of reference be agreed.



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8 **MEETING OVERVIEW**

RESOLVED that the meeting overview for the Health and Wellbeing Board held on 23<sup>rd</sup> June 2017 be noted.

9 **GM HEALTH & SOCIAL CARE PARTNERSHIP**

The Board gave consideration to a report updating them on recent meetings of the GM Health and Social Care Partnership.

The Board considered in particular:-

- GM Business Rate Retention Pilot
- GM Children's Health & Wellbeing Board
- GM Working Well

The Board were informed that resources would not be pooled at GM level and would go to individual authorities. The main choice in relation to priorities remained with the Board and local partners.

The Board noted the terms of reference for the Children's Health and Wellbeing Board. This would be a strong partnership to take the agenda forward and there would be a review of current children's groups in Oldham to identify how they could best connect together and to Greater Manchester.

The Board noted the GM Working Well plan that was mainly aimed at those people who were at risk of losing their employment though ill health.

**RESOLVED that** the update be noted and that further reports would be received as matters progressed.

10 **ICO DEVELOPMENTS AND GM TRANSFORMATION FUND – DEVELOPMENT OF THE STRATEGIC COMMISSIONING FUNCTION AND INTEGRATED CARE ORGANISATION**

The Board gave consideration to a report and received a presentation updating them on the progress made with the design of both the Strategic Commissioning Function (SCF) and the Managed Care Organisation (MCO), and a timeline of activity going forwards.

It was intended that services would become more blended and less isolated. Prime providers would manage whole delivery not just their own organisational outcomes. This was considered to be an easy model for providers to move towards quickly, avoiding the risk of only a single provider.

**RESOLVED that:-**

1. The report be noted
2. The matter be considered for further discussion at the Board's development session in July.

11

### **DEMENTIA BUDDY GUARDIAN ANGELS**

The Board gave consideration to a report the Dementia Buddy Guardian Angel project, aimed at supporting people living with Alzheimer's and Dementia and also helping their respective families and carers.

The project aimed to provide Dementia and Alzheimer's sufferers with two free 'Guardian Angel' devices, which were very simple to use. The Board noted that the devices had been developed to allow members of the public to use their phones in a contactless method to scan the device. The 'Tap Your Phone To Get Them Home' method would give them the name and an emergency contact number of the person who is in need of help.

The devices were intended to be worn all the time to give people an increased level of independence to go out, whilst helping to make them as safe as they possibly could be.

#### **RESOLVED that:-**

1. The report be noted.
2. The Board thanked the Project for taking the time to come and talk to them and asked that the Project be invited to the next meeting of the Dementia Partnership in August.

12

### **HEALTH PROTECTION ANNUAL REPORT**

The Board gave consideration to the Health Protection Annual Report. This Report enabled the Director of Public Health to provide assurance to the Health and Wellbeing Board (HWBB) that the health of the residents of Oldham was being protected in a proactive and effective way.

The Annual Report summarised the main areas of work considered by the Health Protection Sub-Group (HPSG) over the period of 1st April 2016 -31st March 2017. It included a range of priorities identified including performance measured against the Public Health Outcomes Framework.

The Board were informed that the themes were a combination of maintaining good outcomes and addressing any poor performance. The HPSG had also raised and discussed over the last two years any emerging priorities identified from partner organisations where additional assurance is required.

The Report provided examples of some of the Health Protection successes, challenges and asks of the HWBB.

**RESOLVED that** the report be noted.

13

### **CAMHS TRANSFORMATION PLAN**

The Board gave consideration to the refreshed CAMHS Transformation Plan. This plan particularly focussed on the changes that the additional CAMHS Transformational Plan

investment had brought about over the course of the last eighteen months. It addressed the following areas: ambition, early intervention and governance. Additionally, the 'transparency' and 'challenges' sections had been strengthened.

The Board were informed that the revised and refreshed Plan included a comprehensive action plan. The Board noted that there was a change in approach to young people's mental health and it was intended to provide young people with much easier access to lower-level mental health provision

**RESOLVED that** the Plan be approved.

14

## **MH2K**

The Board gave consideration to a report that updated them with regard to the MH:2K mental health project.

MH:2K was a pilot project delivered in Oldham From September 2016 – June 2017, funded by the Wellcome Trust People Award, Oldham Council and Oldham Clinical Commissioning Group. MH:2K aimed to enable young people to explore mental health issues and influence decision-making in their local area and empower 14-25 year olds to:

- Identify the mental health issues that they see as most important;
- Engage their peers in discussing and exploring these topics;
- Work with key local decision-makers to make recommendations for change.

In Oldham 20 motivated young adults were recruited from diverse backgrounds to become the first MH:2K Citizen Researchers. The Citizen Researchers selected 5 key priorities to address through the pilot: Self-harm; Stigma; Professional Practice; Family and Relationships; The Environment and Culture of Education.

The Board noted the team delivered Roadshow events to schools, colleges and community groups across Oldham and the project exceeded its original target of engaging 500 young people across Oldham. Roadshow events were delivered to a wide range of organisations. The project leads were devising the full project report that would include details of the full recommendations.

The Board were informed that the Youth Council had put forward a motion with regard to mental health, to be considered at the next Council meeting.

## **RESOLVED that :-**

The HWB noted the findings from the MH:2K report and supported the following implementation process:

- The children and young people's emotional wellbeing and mental health partnership will lead on the implementation of the recommendations of the MH:2K

report. They will form a task and finish group made up of members of the partnership to drive this work forward.

- Undertake comprehensive mapping of what activity is currently in place and the identification of any gaps.
- The Task and Finish group will devise a prioritised action plan
- The action plan will be presented to the Health and Wellbeing Board in Autumn for approval.
- The Children and Young People Emotional Wellbeing and Mental Health partnership will drive the action plan and report directly into the HWB.
- Members of the HWB will be asked to become Champions for action plan and associated project work.



15

#### **DATE OF NEXT MEETING**

RESOLVED that the next meeting would be a Development Session, to be held on 25<sup>th</sup> July 2017 at 2.00 p.m.

The meeting started at 2.00 pm and ended at 4.00 pm

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