

## HEALTH IMPROVEMENT PARTNERSHIP BOARD

**OUTCOMES** of the meeting held on Monday 2 February commencing at 1.00 pm and finishing at 4.00 pm.

### Present:

**Board Members:** Councillor Ed Turner (Vice Chairman), Oxford City Council – in the chair

Councillor Hilary Hibbert-Biles, Oxfordshire County Council,  
Cabinet Member for Public Health & Voluntary Sector  
Councillor Alison Thomson, Vale of White Horse District Council  
Jackie Wilderspin, Public Health Specialist  
Dr Jonathan McWilliam, Director of Public Health  
Ian Bottomley, Oxfordshire Clinical Commissioning Group  
(substitution for Dr Paul Park)  
Ian Davies, Cherwell and South Northants District Council

### Officers:

Whole of meeting Sophie Kendall, Oxfordshire County Council  
Katie Read, Oxfordshire County Council

Part of meeting  
Agenda item 7 Natalia Lachkou, Oxfordshire County Council

Agenda item 9 Eunan O'Neill, Oxfordshire County Council  
Stephen Pinel, Oxfordshire County Council  
Paula Jackson, NHS England  
David Munday, NHS England

Agenda Items 9 & 11 Kate Eveleigh, Oxfordshire County Council

Agenda Item 11 Dale Hoyland, Affordable Warmth Network

Agenda item 12 Shaibur Rahman, Oxford City Council

*These notes indicate the outcomes of this meeting and those responsible for taking the agreed action. For background documentation please refer to the agenda and supporting papers available on the Council's web site ([www.oxfordshire.gov.uk](http://www.oxfordshire.gov.uk).)*

*If you have a query please contact Katie Read (Tel 01865 328272; Email: [katie.read@oxfordshire.gov.uk](mailto:katie.read@oxfordshire.gov.uk))*

ITEM	ACTION
<p><b>1. Welcome</b></p> <p>The Vice-Chairman, City Councillor Ed Turner, welcomed all to the meeting.</p>	
<p><b>2. Apologies for Absence and Temporary Appointments</b></p> <p>Apologies have been received from:</p> <p>Councillor Mark Booty, Councillor George Reynolds, Councillor Judith Nimmo-Smith, Aziza Shafique, Paul McGough, Val Johnson.</p> <p>Ian Bottomley was present as substitute for Dr Paul Park, Oxfordshire Clinical Commissioning Group.</p>	
<p><b>3. Declaration of Interest</b></p> <p>No declarations were received.</p>	
<p><b>4. Petitions and Public Address</b></p> <p>No petitions or public addresses were received.</p>	
<p><b>5. Minutes of 25 September Meeting</b></p> <p>The minutes of the September meeting were approved.</p>	
<p><b>6. Minutes of Last Meeting</b></p> <p>The minutes of the September meeting were approved.</p>	
<p><b>7. Housing Related Support Update</b></p> <p>Natalia Lachkou introduced a report on the progress of implementing changes to housing related support services.</p> <p>Oxfordshire's Health and Wellbeing Board and Oxfordshire County Council's Cabinet considered suggestions at their latest meetings and approved the plan. This decision will be made formal on 4<sup>th</sup> February if there are no objections.</p> <p>New short term (11-12 months) contracts will be signed in February to cover the period 2015-16, whilst re-commissioning of the new pathway is underway, ready for April 2016. The Housing Support Advisory Group was asked to consider what indicators should be used to monitor the interim contracts. The Group reviewed the current basket of housing indicators, but wanted to see the shape of new services before making suggestions. <b>Suggestions for housing indicators are to be presented at the next Board meeting.</b></p> <p>More detail was requested on the new contractual arrangements. <b>Natalia Lachkou will circulate this later in February, after new contracts have been signed.</b></p>	<p><b>NL/HSAG chairman</b></p> <p><b>NL</b></p>

<p><i>The tabled housing performance data was discussed during this item:</i></p> <p>Jackie Wilderspin highlighted two new pieces of data under indicators 10.1 and 10.5; the number of households in temporary accommodation housed in bed and breakfast accommodation, and the number of people estimated to be sleeping rough.</p> <p>Concern was expressed at how high the result in West Oxfordshire is for households in temporary bed and breakfast accommodation, at 50% though the number of cases was still very low compared to other districts. <b>This figure will be queried with West Oxfordshire District Council for further explanation.</b></p> <p>It was clarified that bed and breakfast figures cover accommodation with shared facilities, so the figures would not include “nightly charged” temporary accommodation. <b>Future performance reports should include a clarification of terms.</b></p>	<p>KR</p> <p>KR</p>
<p><b>8. Public Involvement Network Update</b></p> <p>Jackie Wilderspin updated the Board on the status of the PIN representatives – their tenure is ending and their duties are transferring to Healthwatch. The Board is in a position to determine the roles and responsibilities of the new Healthwatch Ambassador representatives, including how many are invited to sit on the Board.</p> <p>The chair thanked Aziza Shafique and Paul McGough in their absence for their dedicated and highly productive contribution to the Board as PIN representatives, and proposed sending a letter of thanks on behalf of the Board. <b>A letter will be sent to the PIN representatives.</b></p>	<p>KR &amp; MB</p>
<p><b>9. Performance Report</b></p> <p>Jonathan McWilliam presented the performance report and preceded it with a reminder that expectations and targets were set high to push standards up.</p> <p>At 8.1 – the Board should recognise that the geographical area of the NHS area team has recently grown and it needs to ensure that Oxfordshire is receiving its fair share of resources.</p> <p>At 8.2 - The quarter 2 ‘actual’ figure was corrected from 6.4% to 11.6%, making the RAG rating green.</p> <p><b>A report card on opiate and non-opiate users (8.5 &amp; 8.6) was requested for the Board’s next meeting.</b></p> <p>At 9.3 – The source of the data for Didcot at 9.3 is to be further understood before quoting again. <b>An email update is to be sent to the Board if necessary.</b></p>	<p>JW</p> <p>JW</p>

<p>Ed Turner reported that Oxford City Council has embraced breastfeeding at their public facilities and they are looking into encouraging food establishments to support breastfeeding on their premises through environmental health inspections. He requested <b>an update on what all members have done and plan to do to encourage breastfeeding.</b></p>	<b>District councillors /KR</b>
<p>At 11 – Immunisation activities are still part of the remit of the larger NHS area team. There was discussion about reduced uptake of MMR immunisations and <b>a report card on immunisation was requested for the Board’s next meeting.</b></p>	<b>PJ</b>
<p>The Board agreed that <b>a letter should to be sent to NHS England about addressing the falling immunisation numbers in Oxfordshire.</b></p>	<b>JMc</b>
<p>Paula Jackson provided a short update on immunisation activities. NHS England is looking to commission a small number of outreach immunisation nurses per practice to address the remaining small percentage who are not being successfully immunised.</p> <p><u>Report card 1 – NHS Health Checks</u></p> <p>Eunan O’Neill and Stephen Pinel expanded on the report card.</p> <p>Referring to invitations sent, there are now only three providers who have not yet sent official invitations to clients, rather than the six reported. <b>Cllr Hibbert-Biles requested for detail to be sent to her on those three providers.</b></p> <p>Eunan O’Neill reported that management of the Health checks contract has improved - Stephen Pinel has already done the following:</p> <ul style="list-style-type: none"> <li>• started discussions with providers about sharing resources,</li> <li>• created performance dashboards to display missed opportunities for individual providers, and</li> <li>• undertaken a number of quality assurance activities.</li> </ul> <p>Although it was recognised that GPs are under pressure, a tougher contract management approach was recommended to drive up results.</p> <p><u>Report card 2 – Bowel screening</u></p> <p>David Mundy and Paula Jackson presented the report card.</p> <p>Oxfordshire has better rates of uptake for bowel screening than the national average – between 3,000 and 4,000 postal tests are sent to patients each month.</p> <p>David Mundy expanded on the actions and initiatives currently</p>	<b>SP</b>

<p>underway to raise awareness of bowel screening and encourage uptake, including work with GPs, BME communities and new trials.</p> <p>Paula Jackson advised that the area team is waiting for the new, simpler 'Fit test' to be signed off nationally before it can be rolled out locally.</p> <p>The Board discussed the difficulties of engaging the relevant section of the population about bowel screening, particularly men aged 60 or older. There is no prominent national campaign or publicity on bowel screening because of the legal implications of 'informed choice'. It was suggested that older people's groups known to district authorities could be used to promote screening and provisions could be included in mental health contracts.</p> <p><b>Paula Jackson and her team to make suggestions to the Public Health Protection Forum about how they can best contribute to activities that will help increase the uptake of bowel screening.</b></p> <p><u>Report card 3 – Smoking cessation</u></p> <p>The report card was presented by Kate Eveleigh who explained that a new provider of smoking cessation services will be in place from 1 April 2015 and the drop off in quit rates is reflected nationally, not just locally.</p>	<p>PJ</p>
<p><b>10. Draft Alcohol and Drugs Partnership Strategy</b></p> <p>Jackie Wilderspin introduced the strategy.</p> <p>The strategy is a statutory requirement for the Safer Communities Partnership, but is also to be governed through the Health Improvement Board. An assessment of need highlighted that alcohol related hospital admissions are high in Oxfordshire and there is a high level of binge drinking in Oxford City. There is also a growing threat from legal highs and a high number who are starting treatment, but not completing it.</p> <p>The Children's Trust has been approached about monitoring the targets for children and young people in the strategy. Action planning has already started with partners; working groups will be developing plans and meeting once a year as a partnership. Reports will be presented to the Board on the progress of work.</p> <p>It was highlighted that there is an opportunity for overlap between mental health services and drug and alcohol services using Turning Point. There could also be opportunities to work with the licencing authority around prohibiting legal highs at festivals and other licensed events.</p> <p>The Board agreed the strategy.</p>	

<p><b>11. Fuel Poverty and Affordable Warmth Network Update</b></p> <p>Kate Eveleigh and Dale Hoyland presented the report explaining that the reported figures are high, but a high proportion were enquiries about increasing income from benefit entitlements.</p> <p>Dale Hoyland reported that encouraging take up of the Green Deal has been difficult because of people's resistance to taking on debt. This reflects the national picture. Locally a fuel poverty grant is held where small fixes are needed, amounting to a few hundred pounds per property.</p> <p>The need for district authorities to continue liaising with others was emphasised – particularly with GPs in terms of targeting relevant people.</p>	
<p><b>12. Making Every Adult Matter Pilot Progress Report</b></p> <p>Shaibur Rahman provided an update on the MEAM pilot, starting with a summary of the initiative and Oxfordshire's approach to it.</p> <p>He reported that support workers have found the 'MEAM status' is already opening doors and impacting on the flexibility of services.</p> <p>Shaibur confirmed that Turning Point have been involved in the project, as it is about identifying where services are seeing the same people and having a joined up approach to support.</p> <p>The pilot has been extended until August 2015. Shaibur confirmed that the MEAM status is retained by individuals if they 'disappear' and return later on.</p> <p>The Board welcomed the update and recognised the good work of the project so far.</p>	
<p><b>13. Public Health Campaigns Report</b></p> <p>Cllr Hibbert-Biles updated the Board on the major Public Health campaigns undertaken in 2014 and set out plans for campaigns in 2015-16.</p> <p>The Board discussed ways to join up campaigns. The Board acknowledged and supported the plans for public health campaigns in 2015-16.</p>	
<p><b>14. Forward Plan</b></p> <p>No items on the forward plan were discussed.</p> <p>From the meeting, the following items will be added:</p> <ul style="list-style-type: none"> <li>• <b>Report on revised housing indicators.</b></li> </ul>	<p><b>KR</b></p>

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| <ul style="list-style-type: none"><li>• <b>A performance report card on opiate and non-opiate users.</b></li><li>• <b>A performance report card on immunisation.</b></li></ul> |  |
| The meeting closed at 3.40pm   |  |

..... in the Chair

Date of signing

DRAFT