

INFORMAL HEALTH IMPROVEMENT BOARD

OUTCOMES of the meeting held on Wednesday, 9 May 2012 commencing at 2.00 pm and finishing at 3.20 pm

Board Members:	Councillor Mark Booty – in the Chair	
	Councillor Val Smith – Vice Chairman Jonathan McWilliam – Director of Public Health Ian Davies – Cherwell & South Northamptonshire District Councils Jackie Wilderspin – Assistant Director of Public Health Councillor Iain Brown – Oxfordshire County Council	
By Invitation:		

Officers:

Whole of meeting Chief Fire Officer & Head of Community Safety; Val Johnson (representing all District Councils); Julie Dean (Chief Executive's Office); Lynda Chalcraft (Joint Commissioning)

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 (<u>www.oxfordshire.gov.uk</u>.)

If you have a query please contact Jackie Wilderspin, Assistant Director of Public Health (Tel: (01865) 01865 336721; Email:)

	ACTION
1 Welcome	
The Chairman, Councillor Mark Booty, welcomed all to the meeting.	
2 Apologies	
An apology was received from Peter von Eichstorff (Clinical Commissioning Group)	
3 Note of Last meeting	
The note of the last meeting was approved.	

Matters Arising	
Item 4 – Jackie Wilderspin reported that the JSNA refresh report was not available in time for the meeting, adding that it would be circulated to members of the Boards shortly.	Jackie Wilderspin
Item 5 – Priority 2 – Jackie Wilderspin reported that the scope of the draft Children's Centre specification had altered and there was further work which needed to be undertaken. She assured other members of the Board that they would receive a further update.	Jackie Wilderspin
4 Joint Health & Wellbeing Strategy and the consultation process	
Dr McWilliam presented his report, together with a copy of the latest draft consultation document, for reference purposes. Clarification was received that the priorities relating to each Board would be considered by members of the Board prior to the production of the final consultation report.	
The Health Improvement Board AGREED the consultation process.	All to note
 5 Health and Housing – An overview of need and evidence- based good practice 	
Val Johnson presented the paper which set out work which had been undertaken by Ian Davies and colleagues at Cherwell District Council, at the request of this Board at its last meeting. It considered what the key housing services were; where there were gaps in services; and how service improvements were being taken forward (Annex 1). Guidance was sought from the Board with regard to priorities to enable them to be fed into the workshop. The Board thanked Ian for his very helpful paper.	
Views expressed during the discussion included the following:	
 The Supporting People programme was critical to the delivery of these priorities; One of the challenges had been around identifying, and communicating with, other organisations and groups whose priorities were similar and were able to tie in with those of the Board, to enable both to deliver without duplication. Key people should be invited to the workshop to ensure good partnership working; Jonathan and Jackie had visited all district council Chief Executives, Leaders and portfolio holders to discuss their role in ensuring a positive outcome for Health Improvement; Changes in Government policy may have an effect on 	

	vulnerable families, for example, the changes to Housing Benefit; Suitable outcome measures needed to be agreed for Housing issues and a final view on priorities would be taken at the close of the consultation process; AGREED that	
(a)	the key priority areas were to be:	
	Priority 1 – Homelessness prevention Priority 2 – Providing supported accommodation for vulnerable groups, in particular, young people (including teenage parents); victims of domestic violence; vulnerable adults, including users of drugs and alcohol, ex offenders, people with mental health issues and complex needs; and independent living and housing adaptations; Priority 3 – Health Impacts of poor quality housing, including mitigating the health impacts of poor quality housing, for example, HMOs and fuel poverty and adaptations; and	
(b)	to request those Partnerships involved in the delivery of some of the wider determinants of health, as set out in Annex 2, to account for their delivery of related key activities and outcomes. In particular, activities of the Children & Young People's Board, Adult & Social Care Board, Oxfordshire Skills Board and the Spatial Planning & Infrastructure Partnership.	
6 Alo The B Comm		
survei were t betwe be a g forged comm Strate be the health offenc	and Alcohol Surveillance. The Board also studied llance reports produced by the Public Health team which abled at the meeting. The report noted that the relationship en the OSCP and this Board on the issue of alcohol would ood 'test case' of how good working relationships could be as alcohol related harm was a health issue and also a unity safety issue and the approach taken by the Alcohol gy Group straddled the interests of both Boards. This would case for other community safety issues which were also issues such as substance misuse, domestic abuse and er health and its relation to reoffending.	
	hief Fire Officer, who was also the Chairman of the Safer nunities Partnership Business Group, declared himself in	

support of the report recommendations and undertook to submit a report from the OSCP to a future meeting on further development for the Alchohol Strategy Group to ensure compliance with the national strategy		Chief Fire Officer
Jackie Wilderspin undertook to draft a response to the Government' s Alcohol Strategy consultation document with particular reference to alcohol pricing, and to email it around the HIB for comment.		Jackie Wilderspin
The Chief Fire Officer undertook to bring information to a future meeting of the Board on Trading Standards enforcement action with regard to illegal sales and other health related activity.		Chief Fire Officer
Jonathan McWilliam also undertook to bring some suggestions to the next meeting on how the Community Safety Plan could be strengthened to include the above issues. He tasked Jackie to look at the evidence base from Health to ensure it matched/complemented the current action plans for community safety.		Director of Public Health/ Jackie Wilderspin
It was (a) (b) (c)	AGREED that: the governance and reporting arrangements currently led by the OSCP should continue for the Alcohol Strategy Group; the Board would proactively influence the agenda for the Alcohol Steering Group via the attendance of the Chairman of the OSCP Business Group and the Chair of the Alcohol Strategy Group; and Annual updates on alcohol related harm (more frequently on request) should be provided to the HIB.)) Jackie Wilderspin/Chief Fire Officer))
7 Pl	ans for the HIB workshop in July	
It was	AGREED that : There would be one workshop session to focus solely on housing and the other session focusing on the other issues; There would be 4 priorities in all, with one to be identified; Subject experts would be invited to lead the workshops on different topics;)) Jackie Wilderspin))
8 Fo	prward Plan	
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9 The meeting closed at 3.20 pm.

in the Chair

Date of signing