

INFORMAL HEALTH IMPROVEMENT BOARD

OUTCOMES of the meeting held on Wednesday 20 March 2013 commencing at 2.01 pm and finishing at 3.56 pm

Present:

- Board Members:**
- Councillor Mark Booty – in the Chair
 - Councillor David Nimmo-Smith – Oxfordshire County Council
 - Councillor Steven Curran – Oxford City Council (In place of Vice Chairman Councillor Val Smith)
 - Jackie Wilderspin – Public Health Specialist
 - Ian Davies – Cherwell & South Northamptonshire District Councils
 - Peter von Eichstorff – Oxfordshire CCG
 - Anita Higham – PIN representative

By Invitation:

- Officers:**
- Lesley Sherratt, West Oxfordshire District Council and Chairman of the Supported Housing Group
- Whole of meeting
- Val Johnson – Oxford City Council (representing all District Councils);
 - James Martin Oxfordshire County Council (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 (www.oxfordshire.gov.uk.)

If you have a query please contact James Martin (Tel 01865 32 3344: ; Email:James.Martin@Oxfordshire.gov.uk)

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| <p>1. Welcome</p> <p>The Chairman, Councillor Mark Booty, welcomed all to the meeting including Councillor David Nimmo-Smith attending his first Health Improvement Board meeting, replacing Councillor Iain Brown as the County Council representative.</p> | |
| <p>2. Apologies for Absence and Temporary Appointments</p> | |

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| <p>An apology was received from Dr Jonathan McWilliam</p> <p>Councillor Steven Curran deputising on behalf of Vice Chairman Councillor Val Smith</p> | |
| <p>3. Declaration of Interest</p> <p>Anita Higham informed the Board that she is now a Parliamentary Advisor to Tony Baldry MP and Andrew Smith MP</p> | |
| <p>4. Note of Decision of Last Meeting</p> <p>The note of the last meeting was approved.</p> | |
| <p>5. Performance Monitoring</p> <p>Jackie Wilderspin presented the monitoring report noting the indicators that are rated red and detailing the reason for this:</p> <ul style="list-style-type: none"> • <u>Indicator 8.2: 2,000 adults receiving bowel screening for the first time</u> <p>This indicator is currently on red due to delays in the sending out screening invitations to those aged between 60 and 69 years old. These invitation have now gone out as have invitations to those aged up to 74 years old. The effect of this has not been shown in the results to date but it is anticipated that the actual numbers receiving bowel screening for the first time will have increased for quarter 3.</p> <p>It was highlighted that the figures only include numbers from those receiving bowel screening from this particular scheme and the Oxfordshire figure as whole will be higher as the reported figure does not include GP referrals or those who have been prompted by marketing.</p> <ul style="list-style-type: none"> • <u>Indicator 9.1: Ensure that the obesity level in Year 6 children is held at no more than 15%</u> <p>Although the figure is currently 15.9%, Oxfordshire is performing well given the national figure of 19%. Work is on-going to reduce childhood obesity across Oxfordshire.</p> <p>Discussion focussed on how the Health and Wellbeing Board can ensure the monitoring and influence of the health of young people given the academy status of many schools.</p> <p>It was agreed that:</p> | |

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| <p>a) Jackie Wilderspin will contact the Children & Young People's Board to understand how access to academies is currently gained</p> <p>b) The issue will be discussed at the District Member Health Leads meeting on the 22 March</p> <p>Jackie Wilderspin also drew attention to indicator 9.2: 60% of babies are breastfed at 6-8 weeks of age. This indicator is now on green and has been aided by the work of the Community Nurses.</p> <p>The JSNA report was introduced to the Health Improvement Board and its content noted. The report concludes that the current priorities are the right priorities for Oxfordshire and are what we will need to continue work towards in the future.</p> <p>The JSNA will shortly be support by a web based resource.</p> | <p>JW</p> <p>VJ</p> |
| <p>6. Housing and Health</p> <p><u>Fuel poverty in Oxfordshire</u></p> <p>Jackie Wilderspin presented the paper that included a report of a meeting with the Warm Homes Healthy People project and the Oxfordshire Affordable Warmth Network. The paper also makes recommendations to the Health Improvement Board.</p> <p>The main concern identified by the Health Improvement Board is the sustainability of the two groups and how the future commissioning of services to alleviate fuel poverty will be resourced.</p> <p>The momentum of the two groups needs to be maintained to ensure the most vulnerable people in the county are supported.</p> <p>The recommendations have been noted and the following agreed:</p> <p>a) The Health Improvement Board will provide leadership in times of change to ensure the right structure is in place that will broker sustainability of fuel poverty work in the County.</p> <p>b) Jackie Wilderspin and Dave Etheridge will take forward the conversation to Adult Social Care regarding identification of vulnerable householders who are at risk of fuel poverty.</p> <p>c) A letter will be sent to Tony Baldry MP and Andrew Smith MP asking what contribution energy companies can make towards enabling the most vulnerable people having more affordable access to energy. Particular reference to the use of electricity cards.</p> <p>d) Jackie Wilderspin will investigate whether it is possible to</p> | <p>All</p> <p>JW & DE</p> <p>AH & JM</p> <p>JW / JM</p> |

invite a representative of an energy supplier to answer questions at a future meeting of the Board.

Supported Housing Group Terms of reference

Lesley Sherratt, Head of Housing at West Oxfordshire District Council and Chair of the Core Strategy Group, presented the terms of reference. These were accepted by the Board.

During the discussion that followed it was agreed that term of reference describe the new arrangements to take forward the former Supporting People specialist services required to support the most vulnerable people. However the remit does not cover the prevention of homelessness. It was noted that there are separate wider strategic housing issues such as extra care housing and housing changes arising from the ageing profile of the county which do not come within the remit of this Advisory Group. This later aspect requires separate consideration.

It was, however, noted that there will be overlaps and connections with this wider work. It was therefore agreed that the Advisory group will also maintain its intelligence function and maintain a wider overview of homelessness issues.

The Health Improvement Board agreed that there needs to be a break from the Supporting People brand and a new name for the group needs to be agreed.

It was **agreed** that:

- a) The terms of reference will be circulated to the Adults and the Children Boards.
- b) Wider consideration will be made regarding the new name of the Core Strategy Group at its next meeting on the 3 April

Homelessness Prevention

Lesley Sherratt presented the paper that detailed the homelessness prevention work that is currently going on across the county.

Key points included:

- More people are requesting support worried by the risk of becoming homeless
- From April 2013 on the introduction of the welfare reforms, more people will be getting less financial support.
- 500 households have been identified across West Oxfordshire that will be affected by the 'bedroom tax' and will need to be provided with advice and support.
- Appealing any decision will take place locally with

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| <p>successful households being funded through a central government fund distributed to housing authorities.</p> <p>The discussion that followed raised the following points:</p> <ul style="list-style-type: none"> • People recently released from prison are not having access to 'no second night out'. Discussions are taking place with the Thames Valley Probation Service that will be seeking to address this. • There is likely to be a rise in 'sofa surfers' as a high proportion of those being made homeless is due to benefit payments reducing or ending. • The reconnection service across Oxfordshire is helping to prevent homelessness by putting people back in touch with family and friends across the UK and beyond when they have not connections within Oxfordshire. <p>The question was raised 'what value can the Health Improvement Board add to the work of the Core Strategy Group?'. The following responses were received:</p> <ul style="list-style-type: none"> • Provide a lobbying and a supporting role on specific health aspects • Task other groups such as the Oxfordshire Safer Communities Partnership to have linkages <p>The Chairman thanked Lesley Sherratt for her contribution</p> <p><u>Basket of indicators</u></p> <p>The basket of indicators were presented to the Health Improvement Board and agreed as the indicators to be charted, that pending wider consultation from all districts.</p> <p>It was agreed that:</p> <ol style="list-style-type: none"> a) Val Johnson will take the proposed indicator to the District Member Health Leads Meeting on the 22 March b) Pending agreement the data will be collected and presented at the next Health Improvement Board. Outcome measures for the priority work on housing and health will be selected from indicators being monitored. | <p>VJ</p> <p>JM</p> |
| <p>7. Update from the PIN</p> <p>Anita Higham updated the Health Improvement Board on the issues bubbling up from the PIN:</p> <ul style="list-style-type: none"> • Impact of Welfare reforms and likely repercussions • Anxiety about the ability of CQC and Ofsted to 'field' sufficient resources, so as adequately to inspect all the | |

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| <p>wide variety of NHS and Social Care providers across Oxfordshire</p> <ul style="list-style-type: none"> • Transport provision/connections between the Horton Hospital and the 3 Headington Hospitals, arising from the proposed consultation concerning restructuring of provision by OUHT on the Horton campus • How to 'educate/inform/engage Patient Participation Groups adequately, so that the OCCG and Social Care's Locality Groups can participate in an informed manner in the decision making of the commissioners <p>It was agreed that:</p> <ol style="list-style-type: none"> a) For further meetings a paper will be presented by the PIN representative to ensure that the Health Improvement Board is informed prior to the board meetings to help facilitate a two dialogue. b) Anita would report back to the PIN Core Group on the discussions concerning welfare benefit changes that have taken place at this meeting and the ensuing work to prevent homelessness c) Jackie will ensure that issues raised that are more relevant to other partnerships are forwarded to them. | <p>AH</p> <p>AH</p> <p>JW</p> |
| <p>8. Report on the joint HIB and AH&SCB workshop</p> <p>Jackie Wilderspin presented the paper that reported back on the joint workshop and proposed recommendations to the Health Improvement Board.</p> <p>The discussion focussed around the next steps in terms of taking forward work around workplaces as a setting for health Improvement, that is to who is best placed to take this work forward.</p> <p>The recommendations were noted by the Health Improvement Board and it was agreed that:</p> <ol style="list-style-type: none"> a) Jackie Wilderspin will look at scoping what might be possible with a view to think about a potential priority in the future | <p>JW</p> |
| <p>9. Health Protection Forum</p> <p>Jackie Wilderspin introduced the Health Protection Forum to the Health Improvement Board.</p> <p>A role of the Director of Public Health is to be a watchdog of all health protection functions across a range of organisations. It is recommended that the Health Protection Forum will be a body that owns these responsibilities and the Health Improvement</p> | |

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| <p>Board will become an overview body that will have governance responsibilities and call the HPF to account.</p> <p>The Health Improvement Board agreed with the recommendations and the terms of reference for the HPF will be brought to the next meeting</p> | <p>JMcW</p> |
| <p>10. Forward Plan</p> <p>All proposed dates are to be maintained and to be in public unless otherwise agreed.</p> <p>It was agreed that at the May meeting that a decision will be made whether or not the July meeting will be a workshop or board meeting</p> | |
| <p>The meeting closed at 3.56 pm.</p> | |

..... in the Chair

Date of signing