

Minutes of: COMMITTEENAME

Date of Meeting: MeetingDate

Present: Councillor ChairPresentShortList (in the Chair)
Councillors MembersUsrTyp(C)PresentShortList

Also in attendance: GuestInAttendanceShortCllrRepresentingList

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence:AllExcuseShortCllrList

COUNCILLOR CHAIRPRESENTSHORTLIST

Chair

(Note: The meeting started at MeetingActualStartTime and ended at MeetingActualFinishTime)

This page is intentionally left blank

**WHITEFIELD AND UNSWORTH TOWNSHIP FORUM
ITEMS RAISED IN OPEN FORUM: 7th January 2014**

	Raised by	ITEM RAISED AT OPEN FORUM	Action by	Action
1	Yvonne Moore	Local resident has contacted Yvonne to raise issue of overgrown trees on someone else's property causing problems for the neighbours. Now in a dangerous situation as trees very shallow rooted Has been told by the council that there is a £400 fee to pay (per each aggrieved householder). Is this correct and what are reasons for charging?		Cllr Caserta said that he had recently looked into the same matter and believes that the money requested up front is a deposit that the council will pay back once they have retrieved it from the person responsible. Will get exact details of complainant from Yvonne, to investigate specific complaint. He will also check rules generally and report back to the next meeting. Kim spoke to planning enforcement 10 th January. The legislation came in 2005, High edges Bill under Anti social Behaviour Act and covers only conifers and such like trees. The cost has recently increased to £675. This is non refundable, and is to cover some of the costs incurred by the council in resolving the issues. These matters are very labour intensive and take a long time to look into and resolve, costs of going to court if necessary costs the authority even more money.
2	John Mallon	Can we have information on monitoring of crime on Metrolink stations, are there CCTVs operating? How many on each station and what is the usual response time in reporting to the police/ police getting there?	Metrolink	Possibility of invitation to Metrolink to attend or respond to next meeting of township Forum

3	Ken Irwin	<p>State of paving stones outside Forts of India. Wife recently fell and was taken by ambulance to hospital. Staff at Forts of India have said that this is a particularly bad spot and they have seen several accidents, some captured on their CCTV.</p> <p>Mr Irwin reported same issue in 2010 and Council still have record of this. He has been advised to sue the council but really just wants the pavement repaired</p>	Highways Insectors	<p>John Mallon reported that he has looked into this issue. 14 paving stones cracked outside Forts of India- Has met officer on site but he reported no remedial work required as problem is not bad enough to warrant work. There is a definite tripping hazard around the BT access point. Email has been sent to Councillor Isherwood</p> <p>Response from S Molloy, Highways Inspector on 17th January On 6th December 2013 I undertook a site inspection, with Mr Irwin in attendance.</p> <p>whilst on site he was informed that the cracked or uneven flags stones indicated , by Mr Irwin, do not meet the councils policy or criteria whereby remedial works are organised.</p> <p>Radcliffe New Road Whitefield is subjected to six monthly routine highway inspections and any remedial works deemed necessary will be organised at that time.</p> <p>Other issues around Nipper lane and other areas. Feels a full and proper survey should be done on all roads and pavements</p>
4	John Mallon	Street Light out at Top O' The Fields Entrance, (directly across the road from the entrance) reported but no work done yet	Street lighting	<p>Street Light at Top O' Th Fields fault has now been repaired and it is working.</p> <p>Bryan Holt Street Lighting Supervisor</p>
5	John Mallon	Cycling Event- Philips Park- called Hit the North. Have been told they can't hold it this year due to problems, but doesn't know why. Will this be a one off issue or ongoing?	Rangers	<p>Since the last event, an interim agreement has been put in place that the National Cycling Academy (NCA) will be taking over the maintenance and management of the MTB Trail @ Philips as a lead up to them moving into the buildings. Subsequent meetings have been held between the organisers of Hit The North and NCA. It is the</p>

				<p>understanding of Parks and Countryside that an agreement was not reached over</p> <ol style="list-style-type: none"> 1. whether the trail should be used for racing or not? as it was not technically designed for racing 2. the issues around maintaining the trail once the race had finished including related costs <p>It is suggested that the organisers once again approach NCA to seek agreement of the above terms</p>
6	Ann Adams 34 Elms Close	6ft length of drain on one side of path to the next drain. 2 new grid covers but problem is a cracked pipe, water is seeping into residents porches due to water coming down the path and this is causing terrible problems for residents of 34 and 36 Elms Close		<i>Pending reply from Swee Ong</i>

Kim Griffiths
8th January 2014

This page is intentionally left blank



Bury Clinical Commissioning Group

Your health, your care, your say

Transforming health and care services in Bury

Healthy lives strong communities

Welcome

- Community 'Conversations' about transforming health and social care are happening across Greater Manchester
 - Healthier Together
- Updating communities and gathering views about:
 - Joining up health and social care services
 - Enhancing GP and community services
 - Transforming hospital services
- This is our local conversation
 - We are committed to ensuring that you have the opportunity to get involved in our work

Here's where we've listened to local views before

- Open public forums in Bury (1st October 2012 & 15th August 2013)
- Focus groups including a carer focus group
- Overview and Scrutiny Committee (28th November 2012 & 28th August 2013)
- GP engagement events (summer 2013)
- Local Medical Committee (10th June 2013)
- Health and Wellbeing Board (10th June 2013)

Here's some of what we heard...

- Improving communications between health and social care is key
- The need to improve access to primary care (GP) services
- Patients with long term conditions need to be supported as a priority
- The importance of self care and putting patients in control
- A greater focus on illness prevention
- Transport and access issues need to be considered
- Having an open and honest dialogue in communities

Pressures on resources

- More people are living longer with multiple long term conditions
- Expectations are growing
- Services are fragmented and need to be more joined up

Bury's health challenges that need to be prioritised over the next two years:

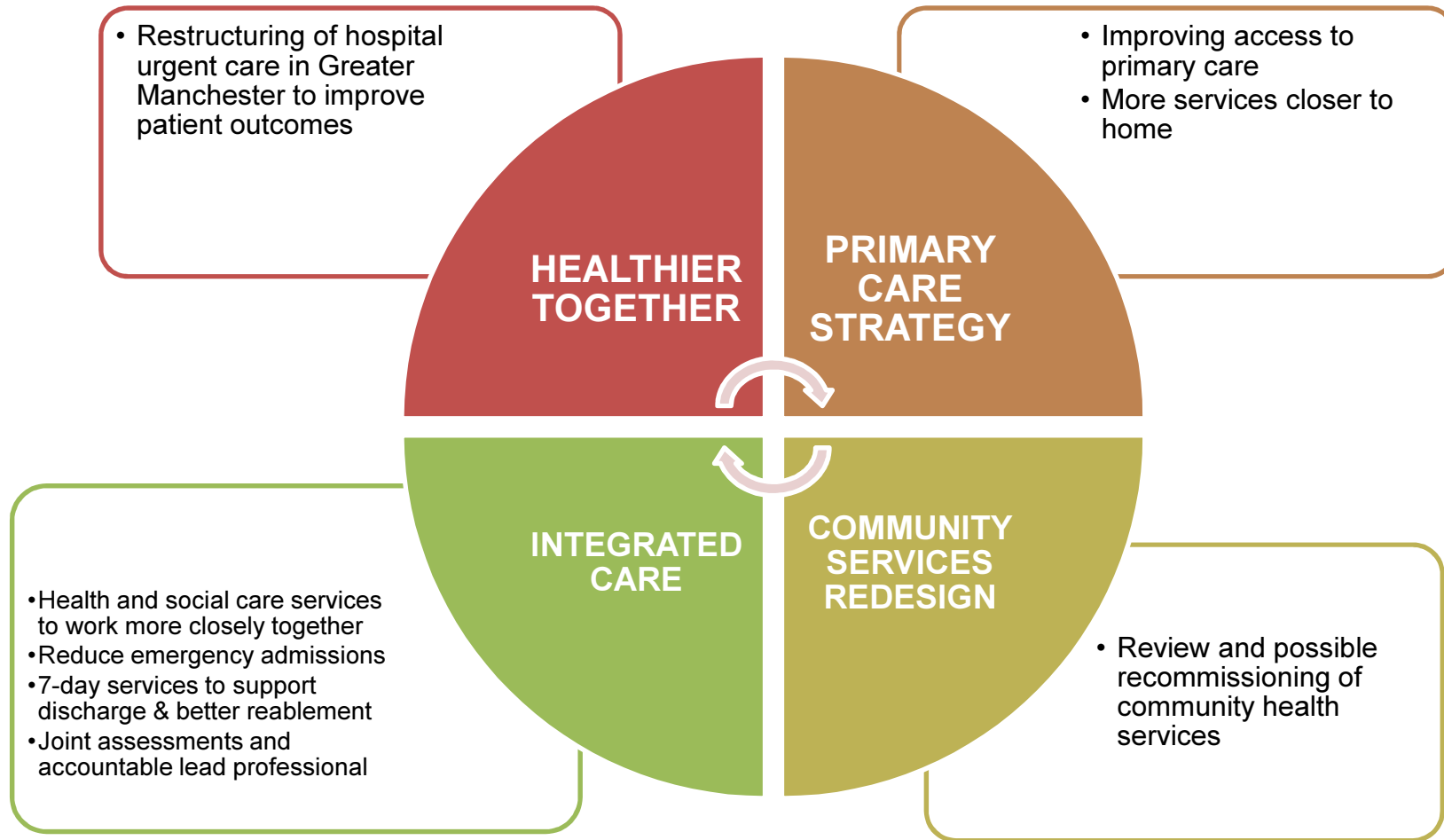
- Heart disease
- Lung and other cancers
- COPD (chronic obstructive pulmonary disease)
- Stroke
- Mental health and learning disabilities
- Alcohol and liver disease

The future vision

- There will be local services and specialist services
- Health services will work in a seamless way (GPs, hospital doctors, community services and social care) with patients at the centre
- Expertise will be pooled to develop centres of excellence to improve outcomes and patient experience

Healthy lives strong communities

High level changes at a glance



Healthy lives strong communities

...in 5 years...

We want local people to experience:

- A more joined up system of care
 - With enhanced access to GP services and community services
 - Safe and high quality hospital care
 - High quality urgent and emergency care services
 - More care closer to home
- Leading to
 - Improved health and reduced health inequalities
 - An improved patient experience of care
 - Support for people to retain their independence
 - More efficient use of resources

Healthy lives strong communities

How can we achieve this

Our two year operating and five year strategic plans encompass a vision for...

Integrating health and social care

- A single, seamless service with patients at the centre
- Less emergency hospital admissions
- Supporting people to stay well at home
- Improved outcomes, more sustainable and better value of public money

Transforming hospital care / care closer to home

- Local services and specialist services - the right care, in the right place, at the right time
- Improved access / waiting times reduced
- Pooled expertise, centres of excellence, improving outcomes for patients

Healthy lives strong communities

How can we achieve this continued...

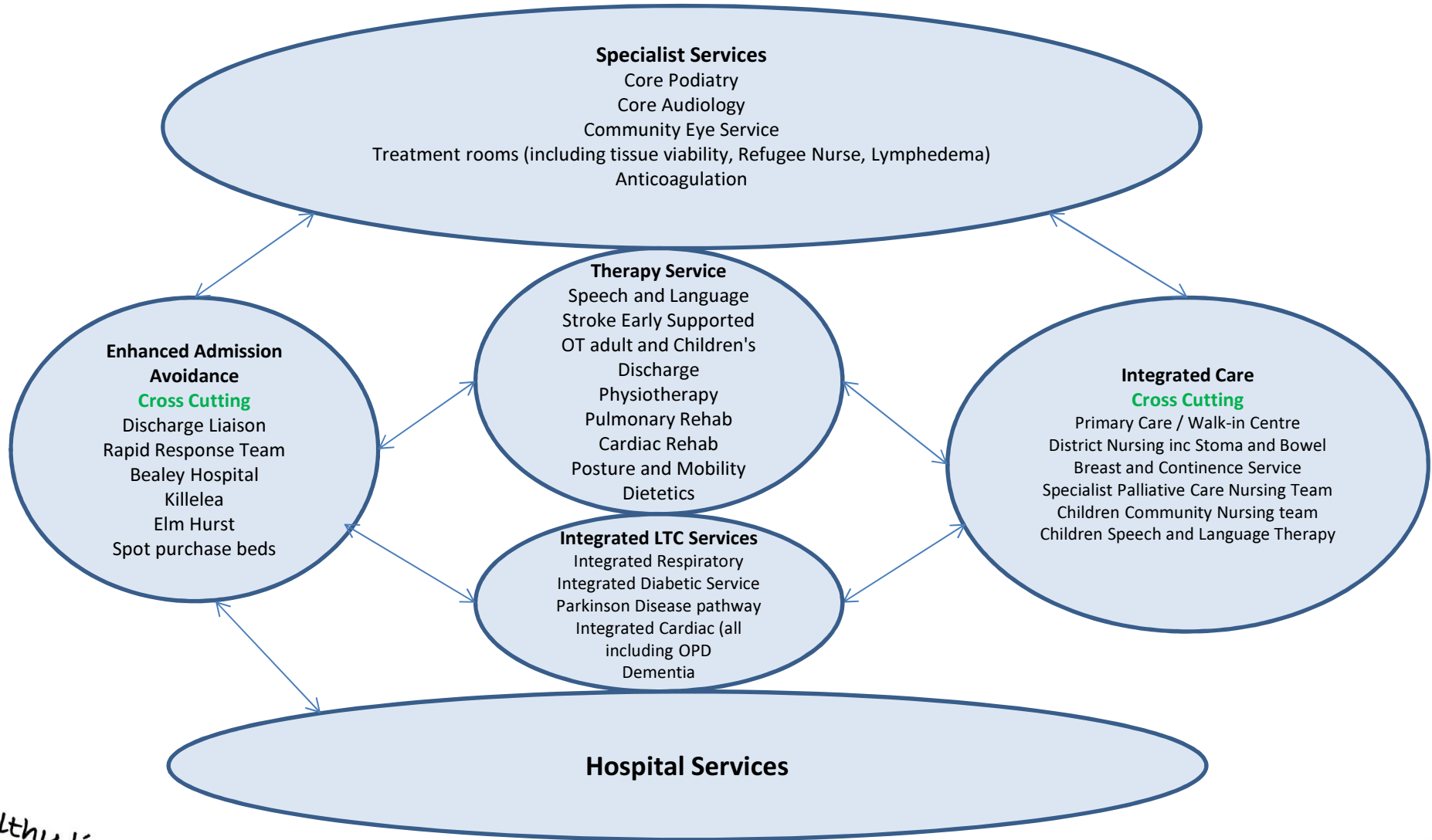
Optimising community services

- Community Services are key to delivering integrated health and social care
- Review and possible re-commissioning of existing services to meet local needs
 - More on this, next slide

Enhanced primary (GP) care services

- Improved access, 7 day services
- Reduce the need for patients to be admitted to hospital
- More focus on prevention and supporting people to remain independent
- Improved access and integration with other services
 - Healthier Radcliffe

Community Services re-design and themes



Healthy lives strong communities

Case study... what this means for Betty from Bury... now

Betty is a 72 year old widow who has diabetes

She tries not to bother her GP and so held off seeing him until she was so unwell she had to go to A&E late on a Friday

She was put into observation and seen by a consultant on Monday

She stayed for 2 weeks whilst tests were done and whilst she shook off an infection

She was discharged but remained poorly and confused

A week later Betty was back in A&E for an even longer spell...

Healthy lives strong communities

Case study... what this will mean for Betty from Bury... in the future

Betty was invited in for an assessment of her health and wellbeing

Her GP arranged for a specialist diabetes nurse to co-ordinate her care

The nurse's close links with social care meant that a personal health budget was set up to fund changes to help mobility

A tele-health system was set up in her home and now Betty's health can be monitored

If she feels ill, she has one number to call. When she did, the specialist nurse came to her home and changed her medication to keep her stable

She is living a healthy and happy life in her own home

Healthy lives strong communities

Next steps

- We want and value your feedback on the vision for transforming health and care services
- We will record your views, consider them locally and feed them into the wider Healthier Together process
- We will be participating in the Greater Manchester wide public consultation for Healthier Together later in the year
- Further opportunities for engagement and consultation on local models of care
 - Please tell us how you would prefer to be communicated and engaged with

Thank you for listening and providing your feedback

More information at...

www.buryccg.nhs.uk

www.healthiertogethergm.co.uk

Healthy lives strong communities

This page is intentionally left blank

Joint Strategic Needs Assessment

Diane Halton

Service Manager - Public Health

What is a Joint Strategic Needs Assessment (JSNA)?

- Assessment of local health and social care needs both now and in the future
- Defines where inequalities exist
- Highlights key findings
- Should be used to inform and guide commissioning of health, well-being and social care services

Inequalities

- Geographical and communities of interest
- Relationship with deprivation
- Highlighted by difference in Life Expectancy:

	Men	Women
Best Ward	82.0	88.7
Worst Ward	75.3	77.4
Difference	6.7 years	11.3 years

Inequalities in deprivation

Ward	Deprivation Score
East	40.0
Moorside	39.5
Radcliffe West	32.3
Besses	30.9
Redvales	29.0
Radcliffe East	28.1
St. Mary's	23.6
Radcliffe North	20.6
Holyrood	19.9
Sedgley	18.8
Unsworth	18.4
Elton	16.8
Church	14.3
Pilkington Park	12.6
Ramsbottom	12.5
Tottington	11.9
North Manor	9.8

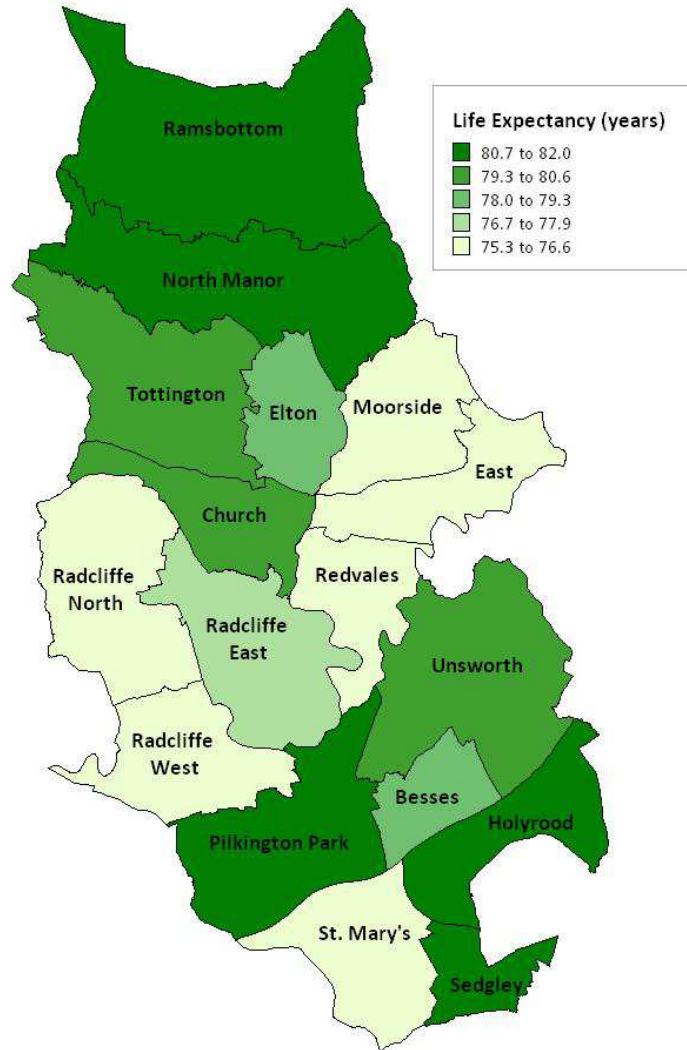
Most deprived



Least deprived

Inequalities in Life Expectancy

Life Expectancy at Birth - Males (2009-11)

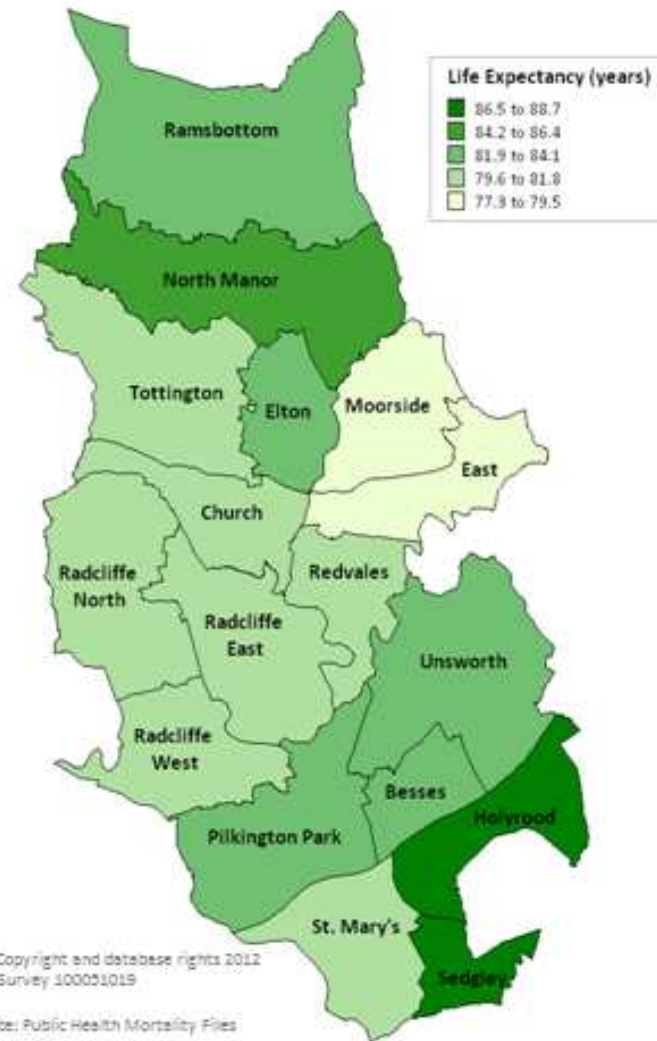


	Male Life Expectancy (2009-11)
Pilkington Park	82.0
North Manor	81.9
Sedgley	81.6
Ramsbottom	81.6
Holyrood	81.1
Unsworth	80.6
Church	80.5
Tottington	79.6
Besses	78.4
Elton	78.3
Radcliffe East	76.9
Radcliffe North	76.6
Radcliffe West	75.7
Moorside	75.7
Redvales	75.6
East	75.4
St. Mary's	75.3

Inequalities in Life Expectancy

	Female Life Expectancy (2009-11)
Sedgley	88.7
Holyrood	86.8
North Manor	84.7
Elton	84.1
Unsworth	83.8
Ramsbottom	83.6
Besses	82.6
Pilkington Park	82.3
Church	81.5
Radcliffe North	81.3
Tottington	80.8
Redvales	80.7
St. Mary's	80.5
Radcliffe West	80.2
Radcliffe East	79.7
Moorside	78.1
East	77.4

Life Expectancy at Birth - Females (2009-11)



A Lifecourse Approach

- Pregnancy and Early Years
- Children and Young People
- Lifestyle and the Living Environment
- Work and Welfare
- Vulnerability
- Ill Health and Mortality

Pregnancy and Early Years

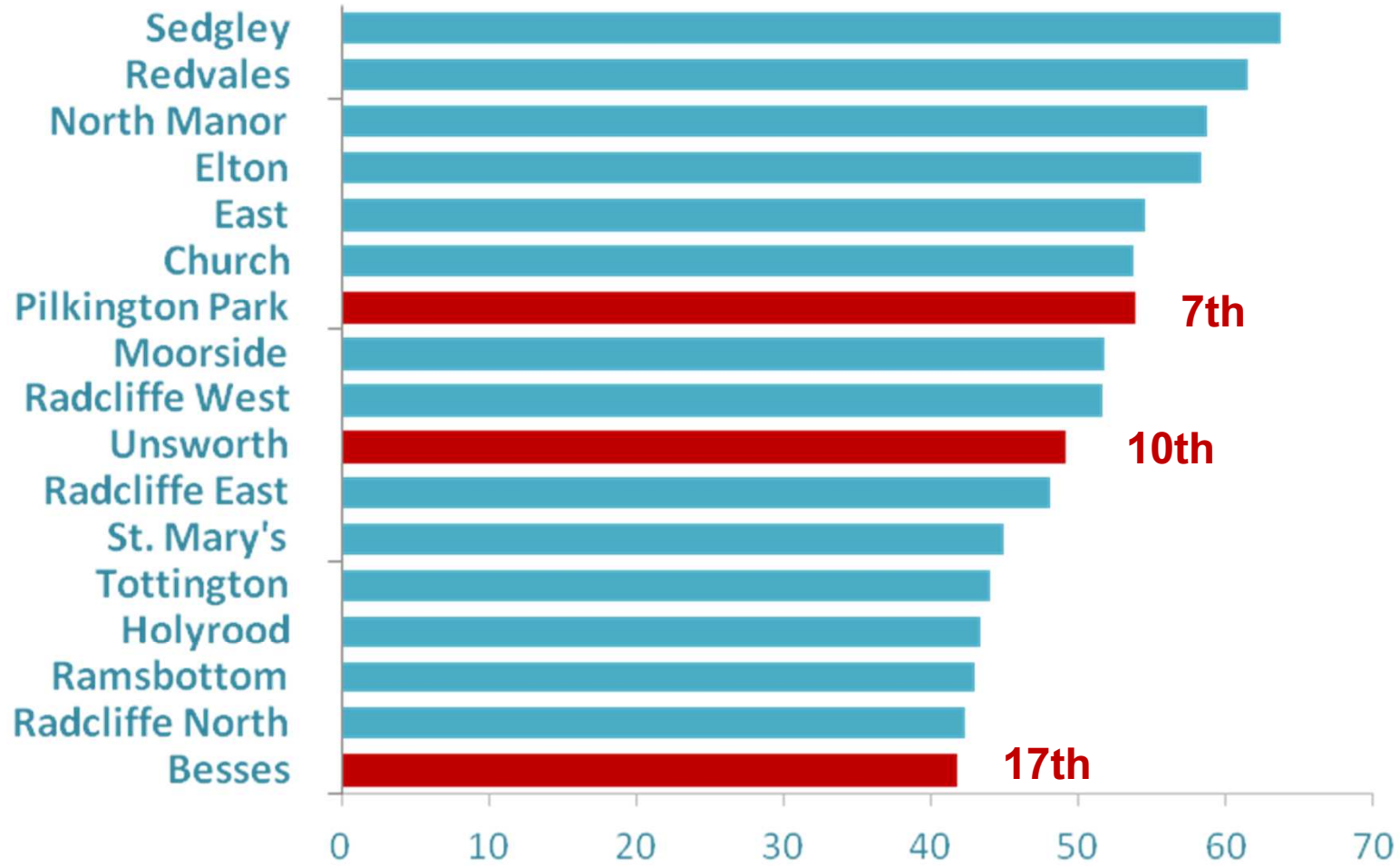
- Infant Mortality
- Low Birth weight

- Early Access to Maternity Care
- Breastfeeding
- Smoking in Pregnancy



Inequalities

Breastfeeding by Ward (Q1 and Q2 2012/13)



% breastfeeding at 6-8 weeks

Adult Care Services



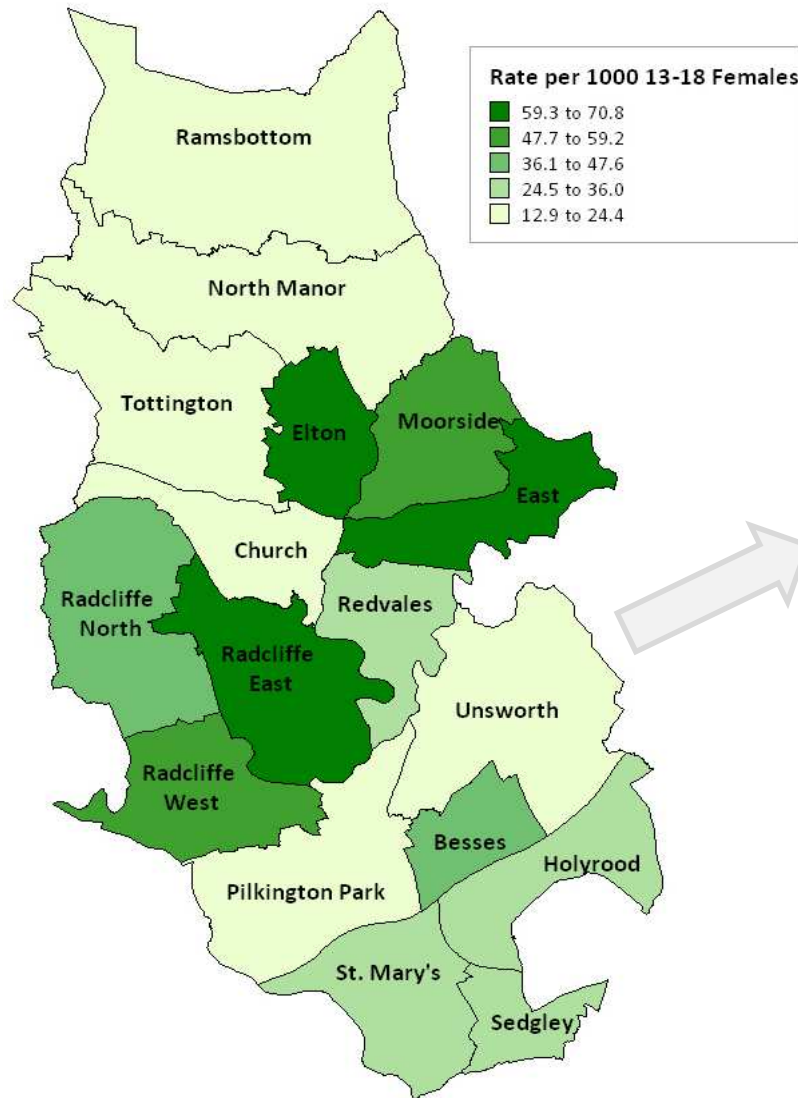
Children and Young People

- GCSE attainment
- Absence/Exclusion
- Physical Exercise
- Outcomes for Looked After Children
- Dental Care
- KS2 and Early Years Foundation Stage
- Teenage Conceptions
- Obesity



Inequalities

Teenage Conceptions 2009-11



Whitefield & Unsworth:

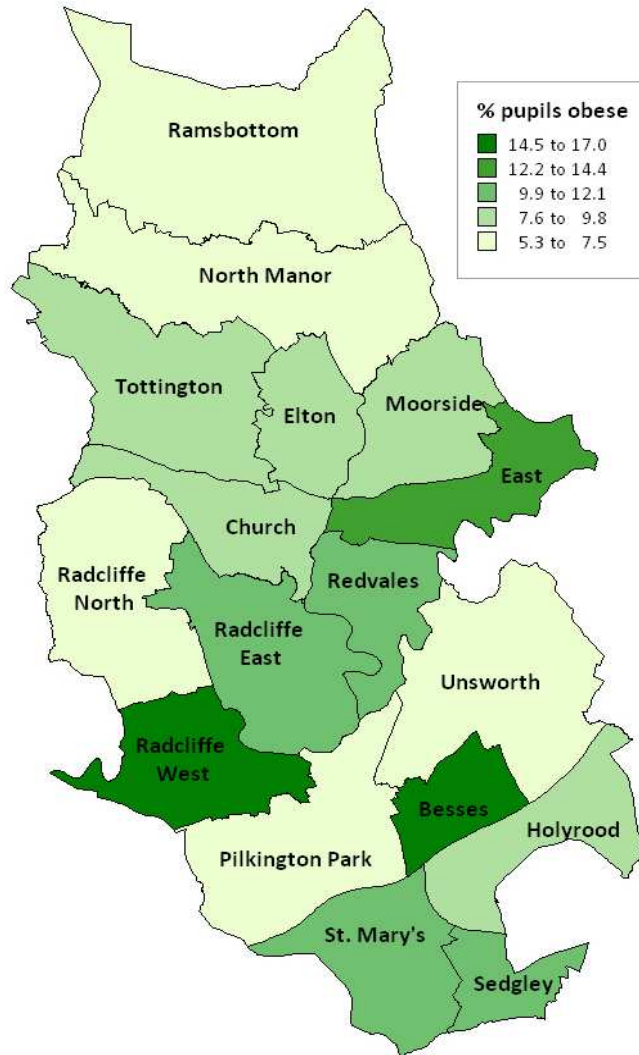
Besses – 6th highest

Pilkington Park – 14th highest

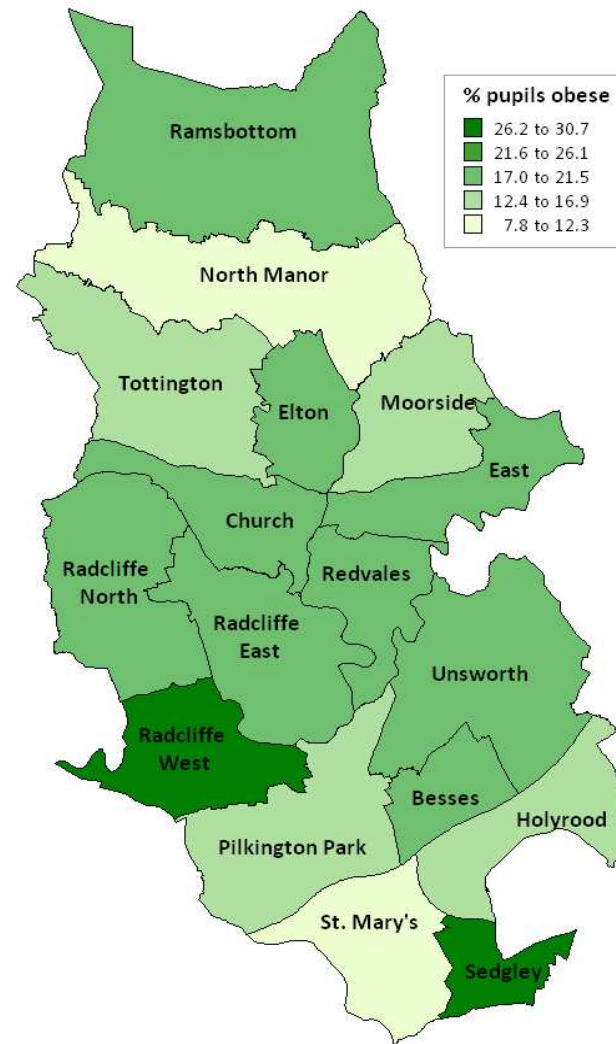
Unsworth – 12th highest

Inequalities

Year R Obesity (2011/12)



Year 6 Obesity (2011/12)



© Crown Copyright and database rights 2012 Ordnance Survey 100051019
 Data Source: GMBHIS Report (SUS, 2012); Census 2011

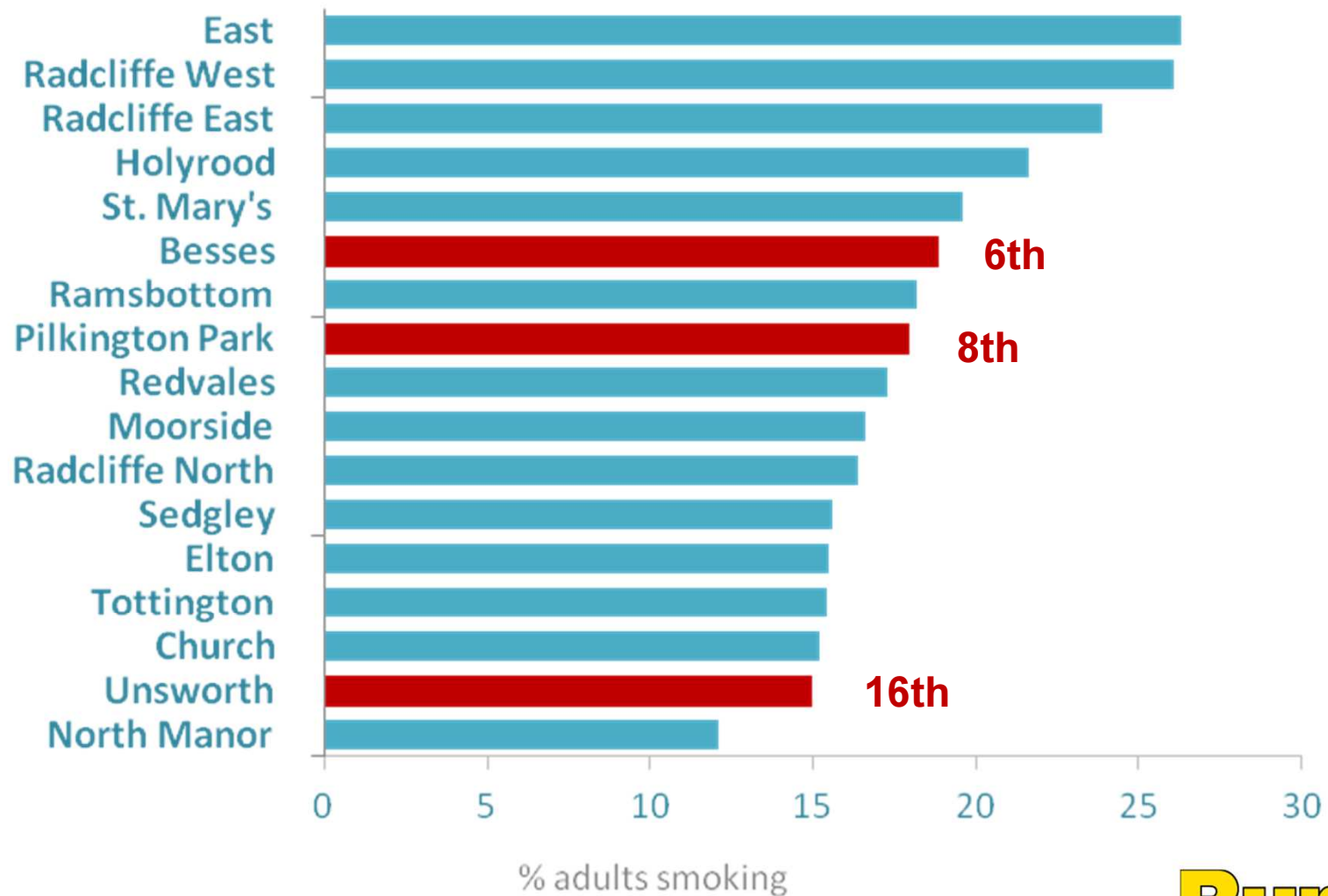
Lifestyle & the Living Environment

- Physical Activity
- Smoking
- Emergency Asthma Admissions



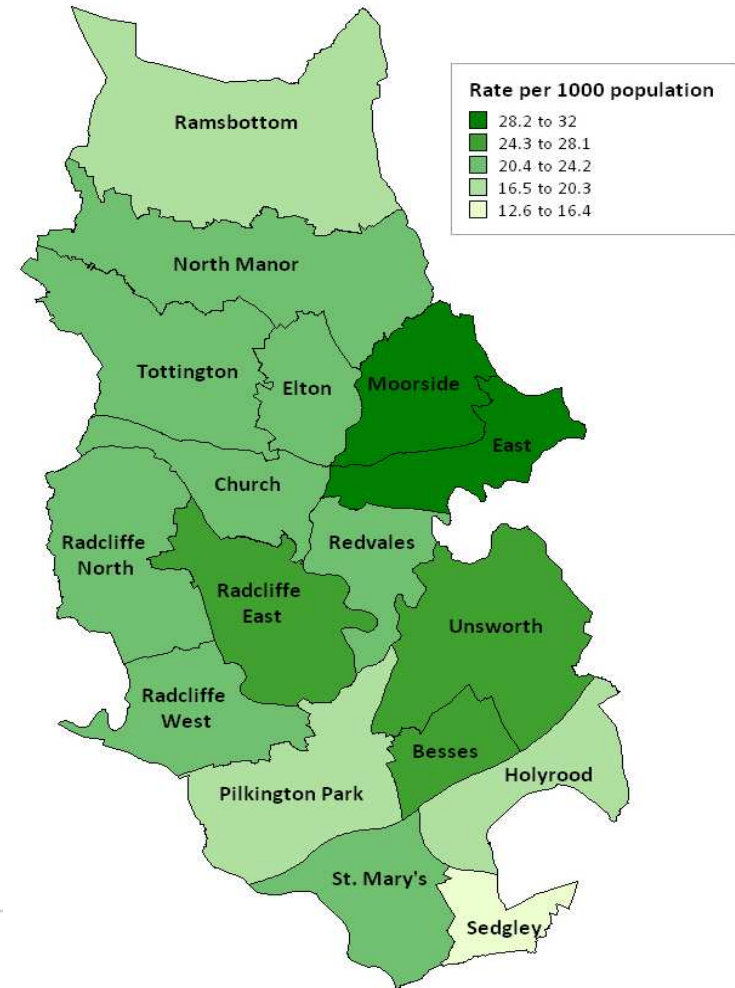
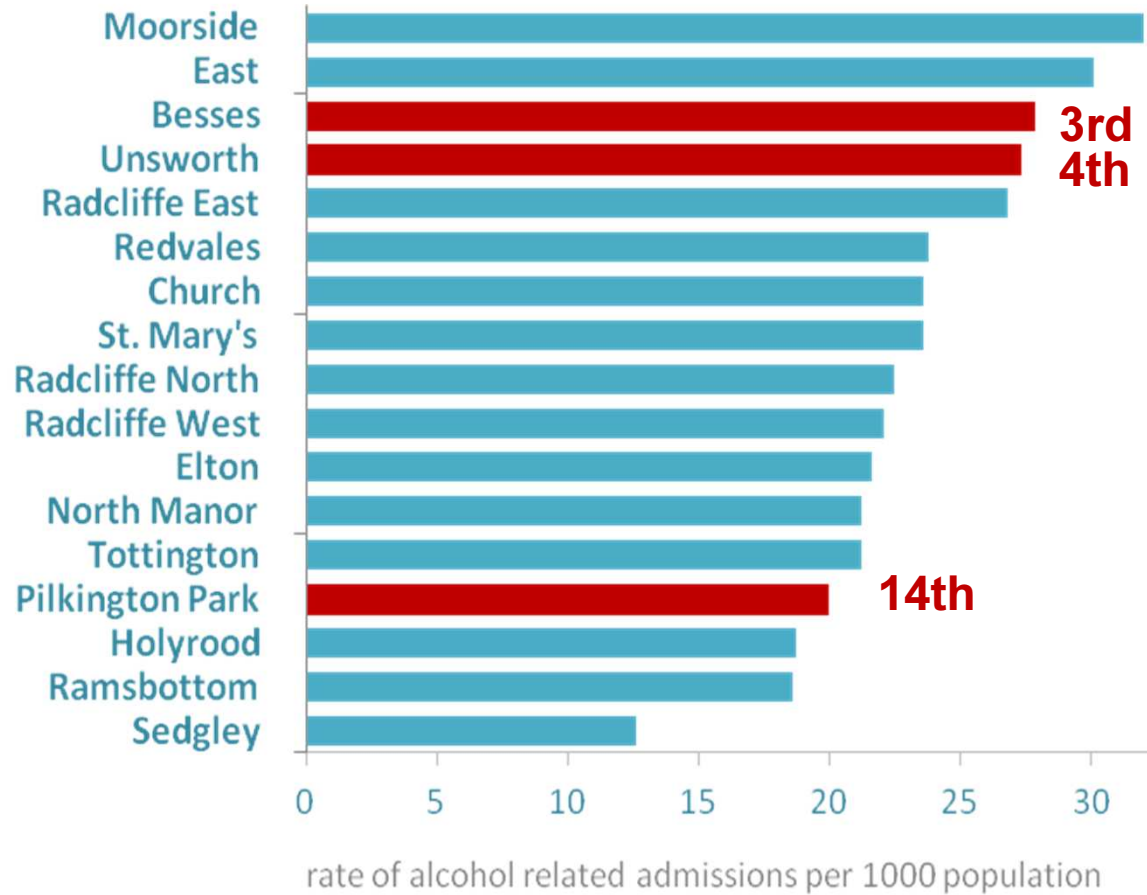
Inequalities

Smoking by Ward (2010/11)



Inequalities

Alcohol-related admissions



Work and Welfare

1 Educational Attainment

1 Unemployment and
benefits



Inequalities

Employment deprivation and JSA Claimants in Whitefield & Unsworth:

- **Besses** – ranked 5th highest for employment deprivation and has 4th highest number of JSA claimants
- **Pilkington Park** – lowest score in borough for employment deprivation; 3rd lowest for JSA claimants
- **Unsworth** – 9th highest for employment deprivation and 12th highest number of JSA claimants

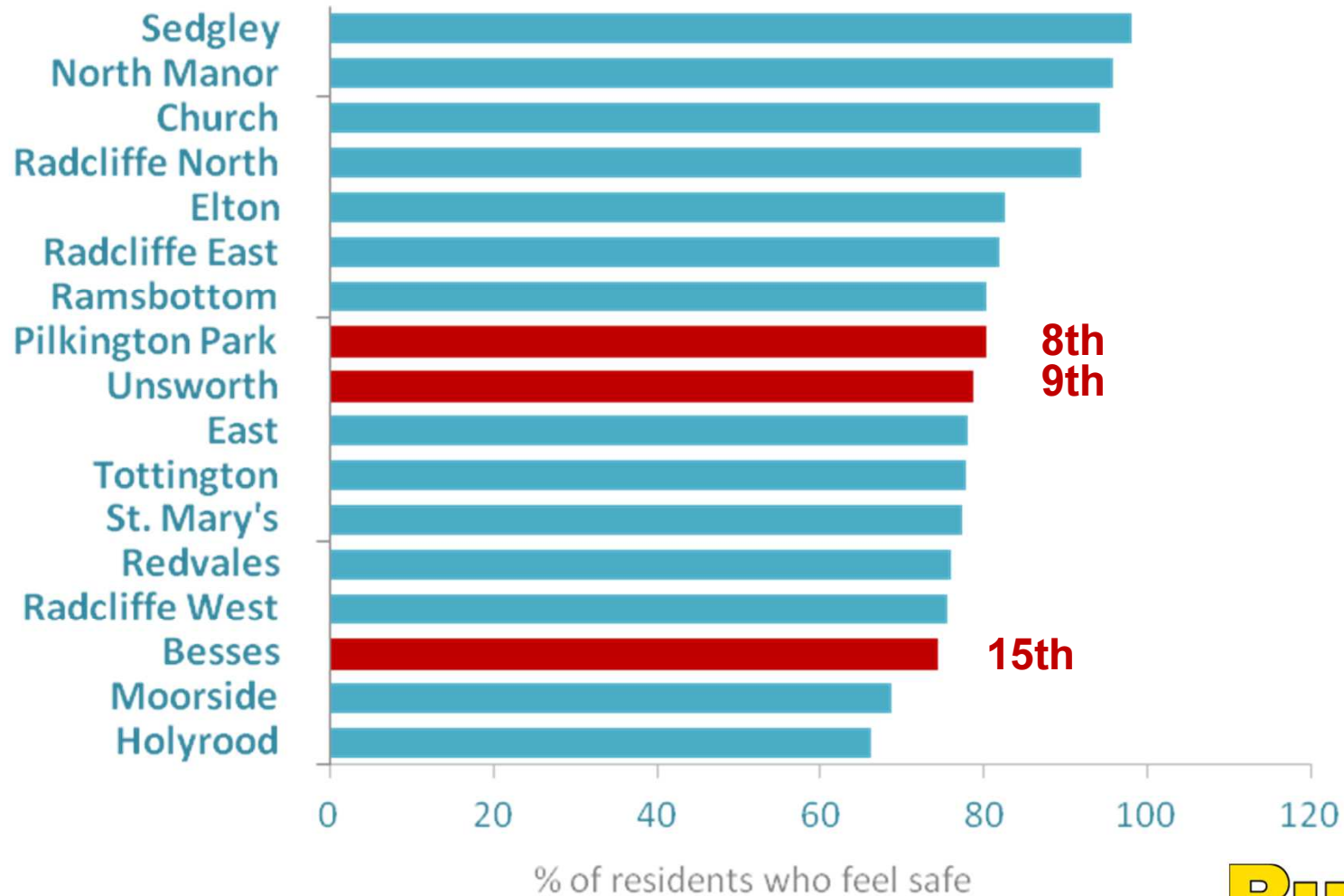
Vulnerability

- Quality of Life/Social Care Indicators
 - Admissions for Hip/Knee Replacement
 - Fuel Poverty
-
- Health checks re Learning Disabilities
 - Admissions for hip fracture
 - Family Homelessness



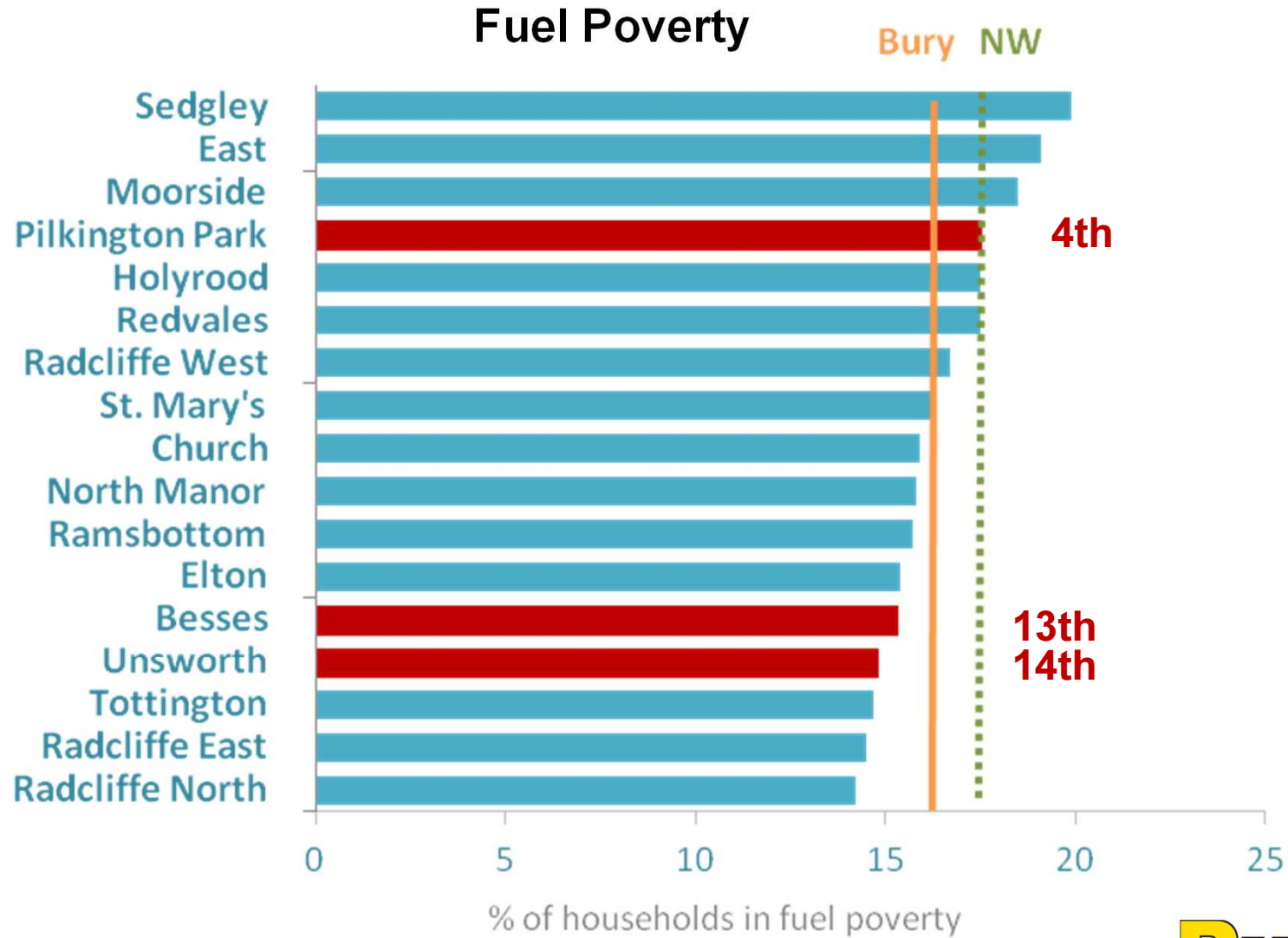
Inequalities

Fear of crime - % of residents who 'feel safe outside after dark'



% of residents who feel safe
Adult Care Services

Inequalities



Ill Health & Mortality

- Breast Screening
- Cervical Screening

- Prevalence of Cancers
- Mortality Rates



Emerging Priorities

- Address health inequalities: causes, deprived communities, understand needs of vulnerable people
- Emotional wellbeing and mental health
- Ensuring a best start in life for children
- Promoting independence for older people
- Promoting healthy lifestyles: Alcohol, Obesity, Physical Activity, Smoking
- Preventing premature mortality (especially cancers and circulatory diseases)
- Anticipating rising demand and need

The Consultation

- Runs from 18 Feb-31 March 2014
- Its asks:
 - Are these the right priorities?
 - Are there other issues that would benefit from further exploration and why these are important?
- Respond via Bury Council website at www.bury.gov.uk or via leaflet
- Consultation report
- HWB Board will consider findings and implications for the Health and Wellbeing Strategy and relevant commissioning plans.

This page is intentionally left blank