

Minutes of: Health and Wellbeing Board

Date of Meeting: 8 December 2022

Present: Councillor T Tariq (in the Chair)
Councillors R Brown, N Boroda and T Pilkington
H Tomlinson, W Blandamer, S McCambridge, J Hobday, K
Wynne-Jones, A Crook

Also in attendance: C Tickle – Commissioning Programme Manager, GM NHS
Bury, D Aston – Senior Commissioning Manager, H Smith, S
Senior – Consultant in Public Health, J Eastham – Collaborate
Out Loud, M Kidd – Creative Inclusion, Community
Collaborators – Tik, Johnathan, Jason and Mia.

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

Apologies for Absence: Councillor E O'Brien, J Richards and Councillor L Smith

HWB.32 APOLOGIES FOR ABSENCE

Apologies for absence are noted above.

HWB.33 DECLARATIONS OF INTEREST

Councillor Tariq declared an interest in the Health and Wellbeing Board and Healthwatch, as he sits on the Health and Wellbeing Board in Oldham and is employed by Healthwatch, Oldham.

HWB.34 MINUTES OF PREVIOUS MEETING

The notes of the meeting held on the 20 October 2022 were agreed as an accurate record and signed by the Chair.

HWB.35 MATTERS ARISING

There were no matters arising.

HWB.36 PUBLIC QUESTION TIME

There were no public questions.

HWB.37 ANTI-POVERTY STRATEGY UPDATE

Jon Hobday, Acting Director of Public Health provided an update on the anti-poverty strategy and shared the feedback received from the cost of living summit and follow up summit. A range of key themes were highlighted which included voluntary community organisations and volunteers struggling with the cost of living crisis, positive feedback given around warm spaces, the need to reduce the stigma around people needing support and that different groups of people were now accessing help and support. Jon Hobday advised that we need to continue to listen to our residents to

see what the challenges are, and how we can best support them.

Jon Hobday highlighted the progress around the anti-poverty action plan which included an update around a more substantial food pantry model, promotion of the healthy start vouchers, healthy eating for less and cooking demonstrations, promotion of the ask for 'Jesse' campaign, household support fund, fuel poverty road shows and a dedicated support line.

In response to a question raised around how to reach out to people who don't use the internet, Jon Hobday explained that there are physical resources such as posters and leaflets. They will work with community hubs to understand where the highest need is, to ensure leaflets are dropped through doors and posted in community venues.

Sharon McCambridge advised of a piece of work that Public Health and Six Town Housing are doing around damp, mould and condensation. Sharon explained that in relation to fuel poverty there are 233 Six Town Housing properties where the gas is capped off, a survey is taking place around the reasonings for this and explained that work should be done to link the findings into the wider piece of work around damp, mould and condensation.

It was agreed:

1. To thank Jon Hobday for his leadership around the cost of living crisis.

HWB.38 COMMUNITY AND PERSON CENTRED APPROACHES - COMMUNITY COLLABORATORS

Matthew Kidd, Creative Inclusion provided an update around the community and person centred approaches. Creative Inclusion and Collaborate Out Loud started working together in 2019 on a co-production project called the Elephants Trail. Activities and projects that have taken place to date were outlined which included a film made in partnership with the Guardian, working in co-production on Bury's Homeless Strategy and bringing grassroots groups together around the Covid response. They had recently won a bid for the Greater Manchester Workforce Collaborative funding and are now 5 months into the project. The funding has been used for a number of projects including reverse mentoring which a number of senior leaders have committed to, developing a community first mindset programme for neighbourhood teams, the MaD Theatre Production to explore the impact of different ways of working within the community, work with the Steering Group around co-production and to share tools with the social care workforce. In January, through community conversations and the recruitment of the collaborators, work will start to build a network of people that are aware of the priorities in their communities, making sure their priorities are aligned with this Board.

Juliet Eastham, Collaborate Out Loud shared some of the work that she had done within the community as part of the Greater Manchester Workforce Collaborative. Juliet listed different places where she had worked within the community. Juliet shared how she has worked in collaboration within the communities and gave an example of how community centres want to do more but don't have the funding or volunteers to help run groups, which the community collaborates are helping to support.

Community Collaborators attended the meeting, they introduced themselves and shared their lived experiences and the work that they do within the community to encourage people to collaborate. Their work in the community included community led playgroups, trying to create groups for the under 25's which will be focused on the wellbeing of young people, a walking group and being the voice for the people who don't have a voice.

In response to a question around connections with Six Town Housing, the Mental Health Services and Pennine Care, Matthew Kidd explained that connections with Six Town Housing are good; a Six Town Housing representative attends regular meetings but connections with the Mental Health Services and Pennie Care are not that strong. Kath Wynne Jones agreed to help make connections with the health services.

It was agreed:

1. Board Members thanked Matthew, Juliet and the Community Collaborators for attending the meeting, sharing their lived experiences and the work that they are doing within the community.

HWB.39 HEALTH RELATED BEHAVIOURS - THE WELLNESS STRATEGY

Jon Hobday, provided an update on the Wellness Strategy. Bury's proposed wellness model looks to reduce inequalities in health and life expectancy across a population level, focusing on physical health. There are currently wellness services such as the Live Well Service and BEATS, although they get positive results, they do not get significant numbers of people through these services and from a population health perspective, are not making enough of an impact. As such, the plan is to shift our model to a strength based, community focused way of working that aligns with other strategies that are available. The model will support physical, social, emotional and mental health with a key driver of the model being around physical activity. Current staff will shift away from the current 1-1 provided service to become the centre of the eco system, at the heart of this will be a small wellness service team working in the community to increase levels of physical activities of people who are experiencing inequalities and are not physically active. This will be done by universal and targeted provision, working with communities and working with sports clubs to ensure that the offer is inclusive. The new wellness model will be data and insight driven and more inequality focused.

In response to a question for a Community Collaborator around people who cannot afford to attend a gym, Jon Hobday advised the Wellness Model is an open model where the leisure centre could be the community hub and from there people could go for a coffee or go for a walk.

HWB.40 HEALTH AND CARE SERVICES - CANCER

Damian Aston and Catherine Tickle provided an update on the cancer inequalities work. In September 2021, the Cancer Board approved a GM Cancer Tackling Inequalities Strategy. Multiagency engagement took place to co-produce a Bury Locality Cancer Inequalities Action Plan. A summary of key findings were shared which highlighted cancer inequalities in Prestwich, East Bury, Whitefield and North

Bury. The highlights of the action plan were shared which included an uptake of smoking cessation services within East Bury and Whitefield, Neighbourhood Leads to align CHD prevention work with cancer prevention, discussions with GM on the national lung checks initiative and shared the current initiatives.

There were two questions asked of the Board:

1. Is the Health and Wellbeing Board assured that the gaps identified through the inequalities work have been mitigated through the Bury Cancer Inequalities Action Plan?
2. Will the Health and Wellbeing Boards support enable the delivery of the Bury Cancer Inequalities Action Plan across the local health and social care system and beyond?

Board Members considered the questions proposed and in response, the Chair agreed that there are key people on the Board who can contribute to the work that is being done around cancer inequalities. It was suggested that Board Members can play a key role in delivery and monitoring the action plan.

Steven Senior questioned if we can ever be assured around the gaps identified through the inequalities work. Steven suggested further work across the length of the cancer pathway, looking at patient experiences and outcomes and capturing insight from the patients themselves. It was reported that the East Neighbourhood has made bowel cancer screening one of their priorities. At a GM meeting earlier this week, there was a discussion around the impact that screening programme has on patients. It was explained how screening programmes can widen inequalities and advised of a screening assurance group that looks at the inequalities of the take up of screening programmes.

In response to a question around bowel cancer and breast cancer being two key areas to work on, Damian Aston reported that there are screening programmes to ensure that people are accessing the programmes and raised the importance of getting an early diagnosis of symptoms through the GP. Work is being carried out to raise awareness within communities through PCNs, and are trying to gain further funding to work within communities around the screening programmes. The VCFA are doing ongoing work around the anticancer screening programmes.

It was agreed:

1. To note the actions in the plan and identify opportunities to support its implementation through the Bury Integrated Care Partnership.

HWB.41 WIDER DETERMINANTS - THE EVIDENCE UPDATE OF THE GM PROSPERITY REVIEW

Due to time restraints, it was agreed:

1. To defer the item to the next Health and Wellbeing Board meeting.

HWB.42 OUTCOME AND PERFORMANCE UPDATE

Due to time restraints, it was agreed:

1. Helen Smith, Head of Strategic Performance and Intelligence to circulate the update to Board members by e-mail.

HWB.43 BETTER CARE FUND

Adrian Crook, Director of Social Services presented the Better Care Fund Report to the Board and highlighted the spending plan of £28,326,369 for this current year which runs out in March 2023.

It was agreed:

1. That the Health and Wellbeing Board note the content of the report.
2. That the Health and Wellbeing Board approve the Better Care Fund 22/23 Planning Template and ratify the decision to submit to the national Better Care Fund team for assessment.
3. That the Health and Wellbeing Board approve the Better Care Fund Narrative plan for 22/23 and ratify the decision to submit to the national Better Care Fund team for assessment.
4. That the Health and Wellbeing board approve the Better Care fund Intermediate Capacity and Demand template for 22/23 and ratify the decision to submit to the national Better Care Fund team for assessment.

HWB.44 DRAFT PUBLIC HEALTH ANNUAL REPORT

Steven Senior, Consultant in Public Health presented the draft public health annual report 2020-2022. The report focuses on the Covid-19 pandemic in Bury and includes the impact the pandemic has had on health, the local response, the vaccination programme and the learning from the pandemic.

It was agreed:

1. The Board agreed the content of the draft report.

HWB.45 GM PH BOARD FEEDBACK

Jon Hobday, Acting Director of Public Health provided an update from the Greater Manchester Population Health Board. The Kings Fund have commissioned a write up of the progress of Greater Manchester's journey and their ambition to become a population health system, Bury has been seen as an exemplar for our journey as a population health system. A range of senior leaders have been interviewed for the write up. Jon Hobday advised that he would share the details of the write up with the Board once it is available.

HWB.46 URGENT BUSINESS

There was no urgent business.

COUNCILLOR T TARIQ
Chair

(Note: The meeting started at 6.05 pm and ended at 8.06 pm)