

## **Divisions Affected - All**

### **HEALTH AND WELLBEING BOARD**

**7 July 2022**

### **CHAIR'S REPORT OF THE HEALTH IMPROVEMENT PARTNERSHIP BOARD 19<sup>th</sup> MAY 2022**

**Report by David Munday, Deputy Director of Public Health,  
Oxfordshire County Council**

#### **RECOMMENDATION**

1. The Health and Wellbeing Board are asked to note the content of the most recent Health Improvement Partnership Board meeting on the 19<sup>th</sup> May and the Board's contribution to the implementation of Oxfordshire's Joint Health and Wellbeing Strategy.

#### **Background**

2. The Health Improvement Partnership Board (HIB) has identified 3 priority topic areas to focus on;
  - (a) Tobacco Control
  - (b) Mental Wellbeing
  - (c) Healthy Weight and Physical Activity
3. Action on these priority areas is supported by an approach which is focused at addressing health inequalities and taking a preventative approach in all we do.
4. The most recent meeting of the HIB was on 19<sup>th</sup> May 2022. The HIB receives updates on all of the priority areas at each meeting but selects one for a more in-depth look each time. At the May meeting there was a focus on Healthy Place Shaping which supports taking an "up-stream" approach to addressing health inequalities and is closely aligned to the health weight/ physical activity and mental wellbeing priority areas. Full agenda and papers are available at; <https://mycouncil.oxfordshire.gov.uk/ieListDocuments.aspx?CId=899&MId=7040&Ver=4>.

#### **Healthy Place Shaping**

5. Healthy Place Shaping (HPS) involves local government working in partnership with a wide range of local stakeholders to create sustainable, well designed communities where healthy behaviours are the norm and which provide a sense of belonging and safety, a sense of identity and a sense of community.

6. HPS is a priority for the Health and Wellbeing Board and the Future Oxfordshire Partnership. As such it is important to gather evidence on the impact of work being undertaken across the county to embed this approach at a strategic and policy level and to deliver place based healthy place shaping activities. The HIB therefore welcomed the progress that was presented in developing a range of indicators that monitor the wider social determinants of health and that can report on the impact of healthy place shaping across the county. A summary of these indicators is included in Appendix 1.
7. The HIB also received a report on access to nature which is part of the HPS work programme. An increasing body of evidence suggests that access to greenspace and connection with nature are key determinants of physical and mental health and wellbeing. This includes a positive effect on a wide range of specific outcomes, such as overall mortality, self-assessed general health, healthy weight, mental wellbeing, common mental disorder, and emotional wellbeing and cognition in children.
8. The strategic objectives laid out in the paper were agreed upon and the examples of existing initiatives in this space were encouraging to see. The HIB agreed that this is an important area of work and that progress should be reported back in 6-9 months to ensure it continues to develop and utilise the opportunity to benefit residents health and wellbeing as much as possible.

## **Healthy Weight and Physical Activity**

9. The Board reviewed the data that shows that in Oxfordshire 21% of residents are considered physically inactive. Although an improved picture for the last data period, it is still worse than pre-pandemic levels. It was also noted that significant variation exists between different population groups.
10. Active Oxfordshire presented some of the challenges in improving physical activity rates, but also how some innovative partnership working, through programmes like You Move, is part of the solution. The Board agreed that actions focused on traditional ways of promoting physical activity were not sufficient and that stronger partnership working in this area was crucial.

## **Mental Wellbeing**

11. There was not a specific item on mental wellbeing at the 19<sup>th</sup> May meeting. However, as referred to in the section on Healthy Place Shaping, much of this work- especially the access to nature programme- has a positive impact on mental wellbeing and helps keep a focus at the preventative and non-medicalised end of the spectrum of interventions which is of great importance to a significant proportion of local residents.

## **Tobacco Control**

12. There was not a specific update on Tobacco Control at the HIB in May. The performance report demonstrated no change to the rate of smoking at the time of delivery and that the numbers of people quitting smoking exceeds the target set. At the next HIB there will be a “deep dive” into tobacco and review of current activity against the recently published Independent Khan Review <https://www.gov.uk/government/publications/the-khan-review-making-smoking-obsolete>

## **Additional items and Future meetings**

13. NHS England’s Thames Valley Screening and Immunisation team presented the HIB with information on the local programmes and how they had been impacted by the pandemic and recovery planning where needed. The programmes discussed where;
- (a) Measles Mumps and Rubella vaccination in 0-5s
  - (b) Flu vaccination
  - (c) Cervical Screening
  - (d) Breast Screening
  - (e) Bowel Screening
14. Overall, the programmes had either continued to run over the course of the pandemic, or where interrupted had now fully or partially caught up. There remain some challenges around the timeliness of Breast Screening. The uptake data compared well to benchmark but in some cases was below target. It was agreed that the data at an Oxfordshire level which looks good, often masks quite significant variation within the county. The Board agreed that further joint work between NHS England and partners on the HIB was needed to address this.
15. Healthwatch summarised reports on; people’s experiences of using interpreting services to access healthcare, a report with Communities First Oxfordshire focused on rural isolation and the Community Participatory Action Research projects that have run locally. It was agreed that this is an invaluable contribution to the HIB as it provides a voice into the Board from groups seldom heard from.
16. The next meeting of the HIB will take place on 15<sup>th</sup> September 2022. The Board will continue to work on progressing delivery against its priorities through “deep dives” on performance on its priority areas and reviewing progress on partnership work.

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Appendix: Appendix 1- Health Place Shaping data indicator set

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