# OXFORDSHIRE HEALTH AND WELLBEING BOARD 13 MARCH 2025

Community Insight Profiles - Latest Publications, Evaluation report, Implementation Tools and Programme Legacy

Report by Director of Public Health and Communities

#### RECOMMENDATION

The Health and Wellbeing Board is RECOMMENDED to:

- a) Use the findings and rich insight contained within the Community Insight Profiles for Wood Farm and Witney Community Insight Area (CIA) and their relevance to the Marmot Place programme of work to inform service delivery plans of partner organisations on the Board and support the promotion and sharing of the findings with partners and colleagues across the system.
- b) Support the promotion of the interactive Community Insight Profile (CIP) Dashboard and the Community Insight Profile (CIP) development toolkit that will serve as a legacy of the CIP programme of work.
- c) Support the promotion and sharing of the findings from the first phase of an evaluation of the Community Health Development Officer (CHDO) and Well Together programmes with partners and colleagues across the system.

## **Executive Summary**

- 1. This paper presents three elements of the Community Insight Profiles programme of work, which includes:
  - (a) Two further Community Insight Profiles within Phase four of the programme: Wood Farm (Oxford City) and a bespoke area of Witney (West Oxfordshire) referred to as Witney Central Community Insight Profile area. The report highlights the links to the Marmot Places programme.
  - (b) A report on the first phase of evaluation of the Oxfordshire County Council funded Community Health Development Officer programme and the NHS ICB funded Well Together programme.
  - (c) Enablers to address inequalities as a legacy of the Community Insight Profiles, including the first iteration of an interactive Community Insight Profile Dashboard to increase accessibility to the data and insight and a

draft toolkit to support the development of partner led Community Insight Profiles in other areas.

- 2. Since 2021, Public Health have been working with partners to carry out a programme of work to develop Community Insight Profiles (CIP). The work was initiated after the publication of the <u>Director of Public Health (DPH)</u>
  Annual Report for 2019/20 which highlighted ten wards in Oxfordshire which have small areas (Lower Super Output Areas) that were listed in the 20% most deprived in England in the Index of Multiple Deprivation (IMD) update (published November 2019) and are most likely to experience inequalities in health. The publication of Community Insight Profiles for all ten areas was completed in December 2023.
- 3. Following on from this, a further four Community Insight Profiles are being developed for areas across the county identified as falling within the 30-40% most deprived nationally according to the IMD (2019) and where local partners identified that there would be added benefit to developing a profile. Wood Farm and a bespoke area of Witney are included in these areas. A CIP for Berinsfield was published in September 2024 and a further CIP for Bicester West is in development and will be published in June 2025, which will bring the Public Health led programme of this work to a close.
- 4. To support the taking forward of actions arising from the Community Insight report recommendations, Community Health Development Officer posts have been funded for each of the areas where a profile has been developed. Along with a small grants scheme to support community projects that help deliver the recommendations from the community profiles.
- 5. As the conclusion of the Public Health led CIP work approaches, the focus will be on sustaining the momentum and ensuring the long-term impact of the CIP programme. This includes the development of a Community Insight Profile Development Toolkit which brings together the learning gathered throughout this programme. The toolkit is aimed at supporting other areas of the county that want to develop Community Insight Profiles.
- 6. Another legacy of this work focuses on sharing updateable place-based data for the Community insight Profile areas. An Interactive Community Insight Profile Dashboard has been developed to make the data accessible and useful for ongoing and future projects. This work ensures that the impact extends beyond the immediate projects and continues to benefit the wider community.
- 7. Annexes 1 and 2 contain direct links to the recently published phase four Community Insight Profile reports. Annex 3 is a summary of the evaluation of the Community Health Development Officer role and the Well Together Programme while Annexes 4 and 5 contain links to the Community Insight Profile development toolkit and the interactive Dashboard respectively.

#### Background

- 8. The purpose of creating a Community Insight Profile is to ensure we understand as fully as possible the factors that influence health and wellbeing outcomes within areas in Oxfordshire where residents are most at risk of poor health, or experience health inequalities.
- 9. The profiles map the assets in each area, capture community insight around enablers and challenges to health and wellbeing and detail a data set of indicators for each area to help inform high level recommendations. The methodology of the community insight capture and asset mapping are explained in each of the individual community insight reports.
- 10. Each profile includes a series of locally led recommendations that outline objectives to enhance identified community assets and strengthen development opportunities. An action plan is developed for each area based on the specific recommendations of that profile.
- 11. The profiles link to the Joint Strategic Needs Assessment (JSNA) and contribute to the local evidence base to inform service delivery, as well as being a resource for local communities to support their work.
- 12. The work has been carried out in phases, with phases one to three covering the ten wards in Oxfordshire which have small areas (Lower Super Output Areas) that were listed in the 20% most deprived in England in the Index of Multiple Deprivation (IMD) update (published November 2019) and are most likely to experience inequalities in health.
- 13. A further four Community Insight Profiles (CIP) are being developed for areas across the county which have small areas (Lower Super Output Areas) identified as falling within the 30-40% most deprived nationally according to the IMD (2019) and where local partners feel there would be added benefit to developing a profile. The four areas covered in Phase four and dates of publication for previous phases are detailed in the table below. The CIP for Wood Farm and one for a bespoke area in Witney, referred to Witney Central Community Insight area are presented with this paper.

Overview of Community Insight Profile phases.

Phase	Areas	Notes
1.	<ul> <li>Abingdon Caldecott</li> <li>The Leys (Blackbird Leys and Northfield Brook combined)</li> </ul>	These were published in September 2022 and a report outlining the key findings from these profiles was taken to the Oxfordshire Health and Wellbeing Board on 6 October 2022.
2.	<ul> <li>Banbury Grimsbury and Hightown,</li> <li>Banbury Cross and Neithrop and Banbury Ruscote (a refreshed profile for Ruscote from an original proof of</li> </ul>	These were published in March 2023 and a report on the findings was presented to the Health and Wellbeing Board on 29 June 2023.

	concept -combined with the Neithrop profile)  Barton Rose Hill	
3.	<ul> <li>Littlemore</li> <li>A bespoke area of Central Oxford referred to as the Oxford Central Community Insight area</li> </ul>	These were published in December 2023 and a report on the findings was presented to the Health and Wellbeing Board on 14 March 2024.
4.	<ul> <li>Berinsfield</li> <li>Bicester West</li> <li>Wood Farm</li> <li>A bespoke area of Witney referred to as the Witney Central Community Insight area</li> </ul>	The Berinsfield CIP was published in September 2024 and a report on findings was presented to the Health Improvement Board in September 2024. The Bicester West CIP is currently in development and is due to be published in June 2025 while the Wood Farm and Witney Profiles and a report of findings are presented with this paper.

14. Completion and publications of the phase four reports by June 2025 will bring the Public Health led programme of this work to create profiles to a close. Focus will then move more to the legacy of how recommendations are taken forward in each of the areas.

## **Wood Farm and Witney Central Community Insight Area Profiles**

- 15. The two Community Insight Profiles (CIP) presented with this report are
  - Wood Farm Oxford City
  - Witney Central Community Insight Area (CIA) West Oxfordshire
- 16. For each area of the CIP work programme, the county council Public Health team have worked with a local steering group, convened to ensure coproduction of the reports with the local community. In Wood Farm, the existing Wood Farm Health and Wellbeing Partnership took on the task of acting as a CIP steering group. In Witney, a separate steering group convened by West Oxfordshire District council was formed. The steering groups vary in their make up in each area but may include representatives from local community groups, residents, health organisations, Councillors, Local Authorities etc. For both Wood Farm and the Witney Central CIA, Oxford City Council and West Oxfordshire District Council respectively, have been funded to support with project managing the CIP development process.
- 17. In each of the areas a community organisation has been appointed to carry out the community engagement and insight elements of the project.

  Healthwatch Oxfordshire were appointed for Wood Farm and Community First Oxfordshire were appointed for Witney Central CIA.

## Selection of findings and links to the Oxfordshire Marmot Place principles

- 18. The programme of work in Wood Farm and Witney aligns with the current Marmot Place programme by contributing to a more equitable and healthier Oxfordshire.
- 19. A selection of findings from the reports and their links to the Oxfordshire Marmot Place work are detailed in the table below.

## **Wood Farm**

Selection of findings	Links to current Marmot place work
Poverty and cost of living Respondents outlined that poverty, low income and the high cost of living affected their ability to look after their health and wellbeing. This is reflected in corresponding data which shows that unemployment-related benefit claimants and rates of children in poverty in Wood Farm were well above Oxfordshire averages.	Principle 4 – Create fair employment and good work for all
Problems with housing Residents noted concerns with the condition and maintenance of their homes and the impact of this on their health and wellbeing. Corresponding data highlights that the proportion of households in social rented accommodation in Wood Farm was above the Oxfordshire average.	Principle 3 – Ensure a healthy standard of living for all
Lack of facilities and activities Respondents mentioned that they felt there were not enough facilities on Wood Farm itself. Several residents also noted the lack of activities and facilities particularly for young people.	Principle 3 – Ensure a healthy standard of living for all Principle 1 - Best start in life

## Witney Central Community Insight area

Selection of findings	Links to current Marmot place work
Mental Health The community engagement revealed a general sense that there has been an increase in mental health issues since the pandemic and this has been compounded by the cost-of-living crisis.	Principle 3 – Ensure a healthy standard of living for all  Principle 4 – Create fair employment and good work for all
Younger People (aged 6-11) highlighted that a lack of social and recreational opportunities is contributing to congregation in certain locations. Children also discussed vaping and noted the risk of normalisation of the behaviour	Principle 1 - Best start in life
Asylum Seekers consulted during the engagement noted several health and wellbeing challenges, including a lack of money to access activities, limited access to healthy food, restricted ability to volunteer or work and the arbitrary nature of eviction to other parts of the country	Principle 3 – Ensure a healthy standard of living for all  Principle 4 – Create fair employment and good work for all  Rural inequalities work

## **Evaluation of the Community Health Development Officer role and the Well Together Programme**

- 20. As well as the anticipated longer term strategic action arising from the Community Insight Profiles, it was important that communities also saw some more immediate action. To follow on from each profile a grant fund of £25,000 was allocated for each area and a process was agreed with each of the steering groups in profiled areas, for how best to utilise the money to fund local community projects, that help meet the recommendations set out in the profiles.
- 21. For longer term sustainability of this in-depth community work, Oxfordshire County Council have funded the city and district councils to host a Community Health Development Officer (CHDO) post to cover each of the profiled areas. The City and District Councils have been able to take an approach that works best for them in terms of how the posts are recruited to and how they proportion the hours. CHDO's started at different times and where a profile was already produced, they started by supporting the delivery of the recommendations identified and, in the areas, where the profile was still

underway, they were able to support with community engagement in the creation of the profile, and the recommendations to be delivered once completed.

22. Community Health Development Officers have an important role of working with community partners to deliver actions arising from the recommendations set out in the community insight profile reports. They take a community-based approach to encourage collaborative work within communities, communicate health messages that support health and wellbeing, and facilitate health enabling activities to build social capacity and resilience in local communities.

### 23. The aim of a CHDO role is:

- a) To support effective working between statutory services and the voluntary and community sector to discover, develop and deliver a response to the locally identified need highlighted in the community profiles (in some areas to help produce them)
- b) To enable the involvement of key partners, stakeholders and each local community in the delivery of the action plan in each area.
- c) To build a county wide network of the Community Health Development Officer roles to test and learn from the programme, share good practice and provide mutual support. Reducing inequalities, strengthening community assets, giving communities a voice.
- 24. The CHDO's have become an invaluable resource in their communities, supporting with many activities and being a 'go to' from the Public Health team to cascade messages and share information with local communities.
- 25. Since the development of CHDOs, the NHS ICB has dovetailed with this work by directly funding a new programme called 'Well Together'. This is a grants programme which recognises the essential role community and voluntary organisations play in addressing health inequalities at a local level. The programme is investing in community-led health and wellbeing activities and projects for all ages by providing funding and support for new and existing groups and organisations in the 10 areas in Oxfordshire most likely to experience inequalities, with up to £100,000 available for each of these areas. The programme is providing groups with a minimum of one year of funding before the programme closes in November 2025.
- 26. Oxford University has been commissioned to evaluate the CHDO and ICB funded Well Together programme and there is expected to be engagement with Oxford University for a phase 2 evaluation which will go into greater depth around the value of longer-term investment in this type of approach. An executive summary of the findings from phase 1 can be found in annex 3 of this report.
- 27. An extract from the evaluation has been detailed below:

"Individual Community Health Development Officers and Well Together's Community Capacity Builders are particular strengths of each programme,

able to effectively engage with local communities through regular presence in community activities; excellent communication and networking skills; and active partnerships with existing organisations and networks."

28. Since the evaluation was commissioned the Oxfordshire system has decided to work with the Institute of Health Equity to become a Marmot Place. This approach to tackling the social determinants of health has a strong link to this community-based working and it is anticipated that the Marmot approach will strongly complement the existing CHDO programme

## **Legacy Implementation tools**

- 29. A Community Insight Profile Development Toolkit as well as an Interactive Community Insight Profile Dashboard are being developed to carry on the legacy of the community insight work. They ensure that the valuable data and insights we have gathered continue to benefit the wider community and inform future initiatives. By making this information more accessible, we can support ongoing efforts to address health inequalities and improve the wellbeing of residents across Oxfordshire.
- 30. The Community Insight Profile Development Toolkit is a comprehensive resource aimed at supporting the creation of Community Insight Profiles (CIPs). These profiles provide a detailed snapshot of the health and wellbeing of a selected community, including demographics, social issues, and economic conditions. The purpose of the toolkit is to guide local authorities, non-profit organisations, and community leaders through the process of developing these profiles. The toolkit will provide an accessible and userfriendly resource that will support communities to use an asset-based community development approach to develop an evidence base of their unique local enablers of health and wellbeing as well as any needs and challenges. It aims to provide a structured approach to data collection, analysis and reporting, making the process transparent and replicable. By following the steps outlined in the toolkit, users can create comprehensive profiles that inform decision- making and drive positive change towards reducing health inequalities.
- 31. The Interactive Community Insight Profile Dashboard is designed to make data on Oxfordshire's priority areas more accessible to our communities. It offers an updatable way to share health-related data, enabling a variety of users to find information about their local area which can foster greater community engagement with data and support participation in informed decision- making. The dashboard highlights key indicators and trends on health-related data as well as displaying key findings and quotes from the community insight work to help to amplify the voices of residents.
- 32. Links to both the Community insight Profile Development Toolkit and the Community insight Profile Dashboard can be found in Annex 4 and 5.

## **Corporate Policies and Priorities**

33. The creation of Community insight Profiles links to the strategic priorities in the Oxfordshire County Council Corporate Plan of tackling inequalities in Oxfordshire and prioritising the health and wellbeing of residents. This work also aligns with the Oxfordshire Health and Wellbeing Strategy and the BOB ICS strategy.

## **Financial Implications**

34. No direct funding implications from this report. The work described has been funded by the PH grant and the ICB Inequalities and Prevention fund.

Comments checked by:

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## **Legal Implications**

35. There are no legal implications generally in relation to the recommendations. There is some sharing of information and insight contained in the recommendation, but I understand that personal data is anonymised in that respect. If there are any concerns about personal data processing or data sharing then the board should seek advice from information services colleagues if a need arises.

Comments checked by:

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#### **Equality & Inclusion Implications**

36. The Community Insight Profiles programme of work seeks to help to address inequalities by providing insight into communities experiencing inequality, to help inform service planning and to act as evidence for funding applications for activities in those areas.

#### **Sustainability Implications**

37. There are no sustainability implications to note with this report.

Ansaf Azhar
Director of Public Health and Communities

## **Annex 1: Wood Farm Community Insight Profile**

Wood Farm Community Insight Profile Summary of findings
Link to Wood Farm Community Insight Profile Summary of Findings

Wood Farm Community Insight Report

<u>Link to the Wood Farm Community Insight Report</u>

Data for Wood Farm
Link to the Wood Farm Data Report

### **Annex 2: Witney Central Community Insight Profile**

Witney Central Community Insight Profile Summary of findings
Link to Witney Central Community Insight Profile Summary of Findings

Witney Central Community Insight Report Link to the Witney Central Community Insight Report

Data for Witney Central
Link to the Witney Central Data Report

## Annex 3: Summary of the Evaluation of the Community Health Development Officer role and the Well Together programme

Annex 3 is provided as a separate document attached to this paper.

## **Annex 4: Community Insight Profile Development Toolkit**

Link to the Community Insight Profile Development Toolkit

#### Annex 5: Interactive Community Insight Profile Dashboard

Link to the Interactive Community Insight Profile Dashboard

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