

Recommendation Tracker

Oxfordshire Joint Health Overview & Scrutiny Committee

Councillor Jane Hanna OBE, Chair | Omid Nouri, Health Scrutiny Officer, omid.nouri@Oxfordshire.gov.uk

The action and recommendation tracker enables the Committee to monitor progress against agreed actions and recommendations. The tracker is updated with the actions and recommendations agreed at each meeting. Once an action or recommendation has been completed or fully implemented, it will be shaded green and reported into the next meeting of the Committee, after which it will be removed from the tracker.

KEY	Report due	With Cabinet / NHS	Complete
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Recommendations:

Meeting date	Item	Recommendation	Lead	Update/response
21-Nov-24	OUHFT Maternity Services in Oxfordshire	1. To ensure that maternity staff receive ongoing training around improving OUHFT Maternity Services. It is recommended that staff are also trained in patient-centred care.	Yvonne Christley; Rachel Corser; Dan Leveson	Partially Accepted (see item 5)
21-Nov-24	OUHFT Maternity Services in Oxfordshire	2. To continue to improve the support for the welfare and wellbeing of maternity staff in the context of improving OUHFT Maternity Services. It is especially crucial that staff are not subjected to undue negative pressure due to their working in maternal services or as part of efforts to improve OUHFT Maternity Services.	Yvonne Christley; Rachel Corser; Dan Leveson	Accepted (see item 5)
21-Nov-24	OUHFT Maternity Services in Oxfordshire	3. To develop a maternity trauma care pathway for ongoing support for mothers (and their partners) to include those who have experienced difficult births, complications, premature babies, and still births and bereavement. It is recommended that this is undertaken in co-production with voluntary organisations that work with families experiencing trauma and who include experts with lived experience. It is crucial to be proactive in reaching out to such patients and their partners in this regard.	Yvonne Christley; Rachel Corser; Dan Leveson	Partially Accepted (see item 5)

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Meeting date	Item	Recommendation	Lead	Update/response
21-Nov-24	OUHFT Maternity Services in Oxfordshire	4. To establish robust processes through which to monitor and evaluate the effectiveness of measures aimed at improving OUHFT Maternity Services.	Yvonne Christley; Rachel Corser; Dan Leveson	Partially Accepted (see item 5)
21-Nov-24	OUHFT Maternity Services in Oxfordshire	5. To ensure that coproduction remains at the heart of the design as well as the improvements of OUHFT Maternity Services. It is also recommended for collaboration amongst relevant system partners, to explore the opportunity for coproduction work to maximise the potential of health checks for supporting women who have given birth, with a view to improve their physical and mental wellbeing and that of their families in the long run.	Yvonne Christley; Rachel Corser; Dan Leveson	Partially Accepted (see item 5)
21-Nov-24	OUHFT Maternity Services in Oxfordshire	6. For there to be clear communication with patients, including in indigenous languages for those who may not be fluent in English.	Yvonne Christley; Rachel Corser; Dan Leveson	Partially Accepted (see item 5)
21-Nov-24	Oxfordshire Healthy Weight	1. To explore support to local businesses supplying food in the takeaway market to provide healthier offers that meets both business and health needs. It is recommended that effective measures are adopted to address the concerns of local takeaway businesses about losing business in the event of switching to healthier food products	Derys Pragnell	With NHS
21-Nov-24	Oxfordshire Healthy Weight	2. To support food banks and larders in providing healthier food options; and for there to be further liaison and cooperation between the County Councils' Public Health Team and food larders and banks. It is recommended that there is further celebration of the role of volunteers and voluntary sector organisations in this regard.	Derys Pragnell	With NHS
21-Nov-24	Oxfordshire Healthy Weight	3. For the development of clear and measurable KPIs so as to evaluate the impacts and progress of the work to promote healthy weight.	Derys Pragnell	With NHS
21-Nov-24	Oxfordshire Healthy Weight	4. For there to be clear communications as soon as possible with residents as to the benefits and risks associated with obesity medications, especially for anyone who has not been encouraged to	Derys Pragnell	With NHS

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Meeting date	Item	Recommendation	Lead	Update/response
		lose weight by their GP and is considering buying weight loss drugs privately or online without medical supervision.		
21-Nov-24	Oxfordshire Healthy Weight	5. For there to be clear mapping and identification of individuals with comorbidities. It is crucial that there is ongoing coproduction of healthy weight services that would include input from those with comorbidities or from vulnerable population groups.	Derys Pragnell	With NHS
21-Nov-24	Oxfordshire Healthy Weight	6. For system partners to work collaboratively to promote greater physical activity amongst residents of all ages. It is recommended that consideration is given to launching a public event to celebrate good practice in schools around promoting eating well and moving well. This could help to raise awareness of the importance of healthy eating and physical activity for all children.	Derys Pragnell	With NHS

Action Tracker

Oxfordshire Joint Health Overview & Scrutiny Committee

Councillor Jane Hanna OBE, Chair | Omid Nouri, Health Scrutiny Officer, omid.nouri@Oxfordshire.gov.uk

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KEY	Delayed	In Progress	Complete
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Actions:

Meeting date	Item	Action	Lead	Update/response
No outstanding action items				

Recommendation Update Tracker Oxfordshire Joint Health Overview & Scrutiny Committee

Councillor Jane Hanna OBE, Chair | Omid Nouri, Health Scrutiny Officer, omid.nouri@oxfordshire.gov.uk

The recommendation update tracker enables the Committee to monitor progress accepted recommendations. The tracker is updated with recommendations accepted by Cabinet or NHS. Once a recommendation has been updated, it will be shaded green and reported into the next meeting of the Committee, after which it will be removed from the tracker. If the recommendation will be update in the form of a separate item, it will be shaded yellow.

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
14-Nov-23	Oxfordshire Healthy Weight	1. To ensure adequate and consistent support as part of secondary prevention for those living with excess weight; and to improve access to, as well as awareness of, support services that are available for residents living with excess weight.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"
14-Nov-23	Oxfordshire Healthy Weight	2. To ensure effective support for ethnic groups that are more likely to develop excess weight, and to raise awareness amongst these groups of the support available to them.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"
14-Nov-23	Oxfordshire Healthy Weight	3. To work on providing support to the parents, carers, or families of children living with excess weight, and to help provide them with the tools to help manage children's weight.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"
14-Nov-23	Oxfordshire Healthy Weight	4. To explore avenues of support for residents who may struggle to afford healthy diets in the context of the cost-of-living crisis.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"
14-Nov-23	Oxfordshire Healthy Weight	5. In light of recent findings relating to the risks of excess weight medication (GLP-1 receptor agonists), it is recommended that the BOB Integrated Care Board review the availability of these medications and any associated risks; and to update the Committee on this.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"

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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
14-Nov-23	Oxfordshire Healthy Weight	6. To orchestrate a meeting with HOSC, to include senior Planning/Licensing officers, Chairs of Planning Committees of the District Councils and lead officer responsible for advertising/sponsorship policy as well as the relevant Cabinet Member to discuss the planning and licensing around the presence of fast-food outlets in certain areas around the County and the advertising of HFSS products.	Derys Pragnell	Updated in 21-Nov-24 during "Oxfordshire Healthy Weight Item"
14-Nov-23	Health and Wellbeing Strategy	1. To ensure careful, effective, and coordinated efforts amongst system partners to develop an explicit criterion for monitoring the deliverability of the strategy; and to explore the prospect of enabling input/feedback from disadvantaged groups as part of this process.	David Munday	Update due
14-Nov-23	Local Area Partnership SEND	1. For Leadership over the Partnership and of Children and Young People's SEND provision to be explicitly set out and communicated clearly to families and all stakeholders; as well as clear measures of how leadership will be developed and demonstrated at all levels, and to demonstrate how new ways of working with stakeholders will put families at the heart of transformation.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during "Local Area Partnership SEND update"
14-Nov-23	Local Area Partnership SEND	2. To ensure good transparency around any action planning and the improvement journey for SEND provision for Children and Young People, and to develop explicit Key Performance Indicators for measuring the effectiveness of improvements that are open to scrutiny. The Committee also recommends for more comprehensive action planning after the publication of the initial action plan requested by Ofsted, and for this action planning to be made fully transparent. The SIB will consider at its inaugural meeting how best to ensure information easily and publicly available.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during "Local Area Partnership SEND update"

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14-Nov-23	Local Area Partnership SEND	3. For the Leadership to adopt restorative thinking and practices with utmost urgency to reassure affected families, and for this thinking to be placed at the heart of any co-production exercises to help families feel their voices are being heard as well as for the purposes of transparency.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	4. To ensure adequate and timely co-production of action planning to improve SEND provision, and for the voices of Children and their families to be considered in tackling the systemic failings highlighted in the report. The Committee also recommends that the Partnership considers timely allocation of seed funding for the development of co-production involving people with lived experience; and for joint commissioning of training and alternative provision across Oxfordshire, involving multi-agency stakeholders, the voluntary sector, and families.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	5. To continue to improve working collaboration amongst the Local Area Partnership to integrate support mechanisms and services as effectively as possible, and for rapid improvements to be demonstrated on clear and efficient information and patient-data sharing on children with SEND.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	6. For every effort to be made for children and young people with SEND to receive the support that is specifically tailored toward and appropriate to their own needs and experiences; and for those involved in providing support services to be aware of the additional/ alternative services available which a child may also need a referral to. It is also recommended that improvements in one-to-one communications with families should be prioritised by Oxfordshire County Council, using the budget agreed by cabinet immediately following the Ofsted report.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”

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14-Nov-23	Local Area Partnership SEND	7. To consider the use of digital resources for enablement, including at an individual level; and to ensure EHCPs are up to date and that they constitute living documents for families.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	8. For SEND commissioning to be developed using the Ofsted report as a baseline, and to place person-centred mental and physical health of children and their families with SEND at the centre of decisions on how funding is spent to maximise social value. The Committee also recommends for the Local Area Partnership to map all funding sources available for, and to explore joint commissioning of services and training that could improve the overall health and wellbeing for children with SEND.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	9. To ensure that there is clarity of information on any physical or mental health services for children with SEND, to reduce the risk of confusion and lack of awareness of such services amongst parents, carers or families of children who require support for their mental or physical health.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	10. To exercise learning from how other Counties and Systems have provided well-coordinated and effective SEND provision; particularly where measures have been adopted to specifically reduce the tendency for poor mental or physical health amongst affected Children and Young People.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
14-Nov-23	Local Area Partnership SEND	11. To ensure that staff involved in Health, Care, Education, and any relevant Voluntary Sector organisations are sufficiently trained and aware of children that may be neuro-divergent, have a learning difficulty or a disability (SEND); and for such staff to be adequately aware of the support and resources available, and the processes for referring such	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”

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		children for any relevant mental or physical health services that they might require.		
14-Nov-23	Local Area Partnership SEND	12. For HOSC to continue to follow this item and to evaluate the impact of any changes or improvements made, with specific insights into the following; the Partnership’s Action Plan as requested by HMCi; the overall measures taken to address the concerns raised by the Ofsted/CQC inspection; the progress made by CAMHS in reducing waiting times for treatment of children with SEND who require mental health support; and on how the NHS is working to increase the overall acquisition and availability of data on SEND children’s mental health from key mental health providers.	Lisa Lyons	Updated on 28-Feb-25 at Education and Young People OSC during “Local Area Partnership SEND update”
30-Jan-24	Children’s Emotional Wellbeing & mental Health Strategy	1. To work on developing explicit and comprehensive navigation tools for improving communication and referral for services at the neighbourhood level and within communities. It is recommended that piloting such navigation tools in specific communities may be a point of consideration.	Cllr John Howson; Cllr Kate Gregory	Update due
30-Jan-24	Children’s Emotional Wellbeing & mental Health Strategy	2. To ensure adequate co-production with children and their families as part of continuing efforts to deliver the strategy, including considerations of how children and families can be placed at the heart of commissioning. It is also recommended for an early review with the users of the digital offer once this becomes available; to include testing with neurodivergent children and other children known to be at higher risk of mental ill health.	Cllr John Howson; Cllr Kate Gregory	Update due
30-Jan-24	Children’s Emotional Wellbeing &	3. To continue to explore and secure specific and sustainable sources of funding for the Strategy to be effectively delivered in the long run.	Cllr John Howson; Cllr Kate Gregory	Update due

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
	mental Health Strategy			
30-Jan-24	Children's Emotional Wellbeing & mental Health Strategy	4. To ensure that children and young people and their families continue to receive support that is specifically tailored toward their needs. It is recommended that a Needs-Based Approach is explicitly adopted, as opposed to a purely Diagnosis-Based Approach. This could allow for early intervention to be initiated as soon as possible.	Cllr John Howson; Cllr Kate Gregory	Update due
30-Jan-24	Children's Emotional Wellbeing & mental Health Strategy	5. That consideration is given to the use of a simple and evidence-based standardised evaluation measure, that is suitable across all services that are working on Children's mental health in community settings.	Cllr John Howson; Cllr Kate Gregory	Update due
27-Apr-24	Director of Public Health Annual Report	1. For the fully published DPH Annual report to come to a future HOSC meeting, with a view to further scrutinise the report and the deliverability of the commitments around climate action and health.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	2. For the full DPH report to incorporate a section with insights into Population Health, and to include an update on progress on recommendations from the previous DPH Annual report.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	3. For there to be clear and thorough engagement and co-production with key stakeholders around the commitments to climate action and health after the publication of the report. It is recommended that the local contexts and sensitivities are taken into account, with a view to balance these with national directives around climate action and health.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	4. For there to be clear transparency and indications as to the barriers and enablers surrounding commitments to climate action and health. It is recommended that sufficient avenues of	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"

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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
		funding and resources are secured for the purposes of delivering these ambitions, and for collaboration with key system partners for the purposes of this.		
27-Apr-24	Director of Public Health Annual Report	5. For there to be clarity around any governance structures or processes around climate action and health. It is recommended that there is transparency around any key leads responsible for relevant policy areas around climate and health to understand individual/organisational commitments, as well as to understand any associated regulatory or legislative barriers to these commitments.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	6. To ensure that clear processes are in place for monitoring and evaluating the measures taken as part of climate action, with specific attention to the implications that such measures may have on residents' health and wellbeing.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	7. To raise educational awareness and understanding of the importance of climate action and its implications on health.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
27-Apr-24	Director of Public Health Annual Report	8. For next year's DPH Annual report to be brought as a full draft to the Committee's Spring meeting, with a view to scrutinise the draft and provide feedback in a public meeting ahead of its official publication.	Ansaf Azhar	Updated on 06-Mar-25 at during "Director of Public Health Draft Annual Report"
06-Jul-24	GP Provision	1. To ensure continuous stakeholder engagement around the Primary Care Strategy and its implementation; and for the ICB to provide evidence and clarity around any engagements adopted, to include evidence on key feedback themes and from which groups within Oxfordshire such themes were received from. It is also recommended that there is a clear implementation plan to be developed as part of the Primary	Julie Dandridge; Dan Leveson	Update by July 2025

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		Care Strategy, and for this to be shared with HOSC and key stakeholders.		
06-Jul-24	GP Provision	2. To continue to work on Prevention of medical and long-term conditions besides cardiovascular disease.	Julie Dandridge; Dan Leveson	Update by July 2025
06-Jul-24	GP Provision	4. That the ICB checks which practices are closing e-connect and telephone requests for urgent appointments and for what reasons, and that it is also checked as to whether/how the public have been communicated with around such closures. It is recommended that there is improved clarity and communication about the statistics concerning access to appointments.	Julie Dandridge; Dan Leveson	Update by July 2025
06-Jul-24	GP Provision	5. For there to be clarity and transparency around the use of any competency frameworks as well as impact and risk assessments around the role of non-GP qualified medical staff who are involved in triaging or providing medical treatment to patients. The Committee urges that the advocacy needs of patients are considered/provided for, and that patients are clearly informed about the role of the person who is treating them and the reasons as to why this is a good alternative to seeing their GP.	Julie Dandridge; Dan Leveson	Update by July 2025
06-Jul-24	GP Provision	6. That an expected date for the signing of the legal agreement on Didcot Western Park is provided to the JHOSC, so there can be reassurance about the likely timescale for the tendering process.	Julie Dandridge; Dan Leveson	Update by July 2025
12-Sep-24	Dentistry Provision	2. To support the creation of new practices within Oxfordshire with urgency, and to explore avenues of funding to support the ICB in developing solutions in this regard.	Hugh O'Keefe; Dan Leveson	Update by September 2025
12-Sep-24	Dentistry Provision	3. That urgent progress is made in improving the accuracy and the accessibility of information on dentistry services available to	Hugh O'Keefe; Dan Leveson	Update by September 2025

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		people; and that where groups are targeted for help, they can benefit from an effective outreach.		
12-Sep-24	Dentistry Provision	4. For the Oxfordshire system to seek to influence a timely consultation in Oxfordshire on the fluoridation of the County's water supply.	Hugh O'Keefe; Dan Leveson	Update by September 2025
04-Oct-24	Palliative/ End of Life Care in Oxfordshire	1. To ensure that carers receive the necessary guidance as well as support in being able to maximise the support they provide to palliative care patients.	Dr Victoria Bradley; Kerri Packwood; Karen Fuller; Dan Leveson	Update by October 2025
04-Oct-24	Palliative/ End of Life Care in Oxfordshire	2. To secure sustainable sources of funding and resources for the RIPEL project, as well as Palliative Care Services more broadly.	Dr Victoria Bradley; Kerri Packwood; Karen Fuller; Dan Leveson	Update by October 2025
04-Oct-24	Palliative/ End of Life Care in Oxfordshire	3. To secure additional and sufficient resourcing and support for palliative transport services. It is recommended that transport services for palliative care patients are organised in a manner that avoids delay and distress for patients.	Dr Victoria Bradley; Kerri Packwood; Karen Fuller; Dan Leveson	Update by October 2025
22-Nov-24	Winter Planning	1. To continue to ensure that clear plans and processes are in place to help reduce time spent in emergency departments by patients during the winter months when pressures are likely to be higher.	Dan Leveson; Lily O'Connor	Update by November 2025
22-Nov-24	Winter Planning	2. To continue to ensure a careful balance between providing patient flow on the one hand (including through reducing lengths of stay across step down beds), whilst providing the personalised care that each patient needs.	Dan Leveson; Lily O'Connor	Update by November 2025

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
22-Nov-24	Winter Planning	3. To ensure that there is sufficient capacity within primary care (particularly with GP services) to cater for any increased pressure during the winter.	Dan Leveson; Lily O'Connor	Update by November 2025
22-Nov-24	Winter Planning	4. To ensure that adequate preparations are in place for a potential surge in infection rates, and to secure the availability of vaccinations. It is recommended that there is also clear communication with the public in relation to both viral infection patterns as well as how residents can reduce the likelihood of spreading/contracting diseases.	Dan Leveson; Lily O'Connor	Update by November 2025
05-Nov-24	Adult and Older Adult Mental Health in Oxfordshire	1. To ensure that adult eating disorder services are personalised in a manner that takes the unique needs and experiences of each individual patient. It is recommended that this service is coproduced with adults with eating disorders as much as possible.	Rachel Corser; Dan Leveson	Update by November 2025
05-Nov-24	Adult and Older Adult Mental Health in Oxfordshire	2. To take adequate measures to tackle loneliness amongst older adults, and to make every effort to reach out to older adults (with lived experience) and to include them in the designing of older adult mental health services. It is recommended that there is liaison with the Oxfordshire Mental Health Partnership to explore avenues to improve coproduction here.	Rachel Corser; Dan Leveson	Update by November 2025
05-Nov-24	Adult and Older Adult Mental Health in Oxfordshire	3. To ensure that patient history is effectively communicated and shared amongst professionals/organisations providing mental health support, and to avert the prospects of patients being or feeling bounced between various mental health services.	Rachel Corser; Dan Leveson	Update by November 2025
05-Nov-24	Adult and Older Adult Mental Health in Oxfordshire	4. That voluntary sector stakeholder organisations who work in Oxfordshire on suicide prevention are invited to register with a VSO suicide prevention stakeholder register. It is also recommended that there is adequate resource, engagement,	Rachel Corser; Dan Leveson	Update by November 2025

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		and a collaborative system inclusive of the VSO registered stakeholders to tackle suicide.		
05-Nov-24	Adult and Older Adult Mental Health in Oxfordshire	5. That there is collaborative system work to develop KPIs on serious mental health to maximise the impact of the existing resource available across Oxfordshire, with a view to prevention and to increase the support available to people and families in distress. It is recommended that there is engagement with the local authority and Region on KPIs relating to patients residing in long-term inpatient settings away from their families.	Rachel Corser; Dan Leveson	Update by November 2025
26-Nov-24	Medicine Shortages	1. To ensure that policies are in place to recognise and identify patients with cliff-edge conditions, and to ensure that mitigations are in place to reduce the risk of harm to these patients in the event of supply disruptions.	Julie Dandridge; Claire Critchley; David Dean; Nhulesh Vadher	Update by November 2025
26-Nov-24	Medicine Shortages	2. To ensure effective communication, coordination, and transparency within and between the local and national levels to help mitigate risks associated with medicine shortages.	Julie Dandridge; Claire Critchley; David Dean; Nhulesh Vadher	Update by November 2025
26-Nov-24	Medicine Shortages	3. To work on reducing any prospect of additional excessive workloads on both clinical and administrative staff in the event of medicine shortages, and to provide meaningful support for staff as well as additional resource if need be for the purposes of tackling any additional demand/burdens.	Julie Dandridge; Claire Critchley; David Dean; Nhulesh Vadher	Update by November 2025
26-Nov-24	Medicine Shortages	4. To continue to improve sharing of information and transparency, including through a potential digital local database, for helping professionals to easily identify where supply issues exist.	Julie Dandridge; Claire Critchley; David Dean; Nhulesh Vadher	Update by November 2025
26-Nov-24	Medicine Shortages	5. To work on improving communication and coproduction with patients and involving those with cliff-edge or long-term conditions, regarding the pharmacy services and the availability	Julie Dandridge; Claire Critchley;	Update by November 2025

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		of medicines (including through the use of frequently asked questions). It is also recommended that patients are signposted to any support that could be available from pharmacy services and the voluntary sector.	David Dean; Nhulesh Vadher	
16-Dec-24	Epilepsy Services Update	<ol style="list-style-type: none"> 1. For the ICB and Oxford University Hospitals NHSFT to: <ol style="list-style-type: none"> a. Give priority to patient safety for people with epilepsy and their families in Oxfordshire, and to the welfare of the Oxfordshire epilepsy team, and to set out how that priority will be addressed through their governance and management at a board level. The governance and management of these priorities should also be inclusive of people with lived experience and their charity representatives, as well as their concerns regarding tailored and balanced communications and the use of existing empowerment tools. b. To secure further funding and resource for epilepsy services. 	Sarah Fishburn; Dan Leveson; Olivia Clymer	Update by December 2025
16-Dec-24	Epilepsy Services Update	<ol style="list-style-type: none"> 2. For NHSE Region to give support to the ICB and Oxford University Hospitals NHS Foundation Trust to help achieve the above prioritisations. 	Sarah Fishburn; Dan Leveson; Olivia Clymer	Update by December 2025
16-Dec-24	Epilepsy Services Update	<ol style="list-style-type: none"> 3. For OCC Cabinet: For Oxfordshire County Council Cabinet members and senior officers responsible for education and residential care for children and adults with Learning Disabilities and/or autism (who are affected by patient safety concerns), to consider the likely impacts of the valproate policy for the local authority commissioning arrangements and the provision of residential care and out of county placements. 	Sarah Fishburn; Dan Leveson; Olivia Clymer	Update by December 2025