

Recommendation Tracker

Oxfordshire Joint Health Overview & Scrutiny Committee

Chair TBC | 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	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	Partially Accepted (See item 7)
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	Partially Accepted (See item 7)
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	Accepted (See item 7)

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Meeting date	Item	Recommendation	Lead	Update/response
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 lose weight by their GP and is considering buying weight loss drugs privately or online without medical supervision.	Derys Pragnell	Rejected (See item 7)
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	Partially Accepted (See item 7)
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	Accepted (See item 7)
30-Jan-25	BOB ICB Operating Model Update	1. For the ICB's Executive Sponsor for Oxfordshire and the Director for Places and Communities to meet with the HOSC chair and Health Scrutiny Officer, as well as to meet with local MPs (as part of the national offer for facilitation), to initiate proper engagement with Oxfordshire Place. It is recommended that clear indicators are developed which demonstrate the levels of engagement being undertaken between the ICB and key stakeholders in Oxfordshire Place.	Matthew Tait; Dan Leveson	Accepted (See item 7)

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Meeting date	Item	Recommendation	Lead	Update/response
30-Jan-25	Health and Wellbeing Strategy Outcomes Framework	1. To support sustainable funding in the Oxfordshire County Council budget for early years readiness for school.	Cllr Leffman; Ansaf Azhar; Kate Holburn; Karen Fuller; Dan Leveson; Matthew Tait	Partially Accepted (See item 7)
30-Jan-25	Health and Wellbeing Strategy Outcomes Framework	2. To ensure that rural geographies in Oxfordshire are also at the heart of implementing the priorities and actions of the Health & Wellbeing Strategy.	Cllr Leffman; Ansaf Azhar; Kate Holburn; Karen Fuller; Dan Leveson; Matthew Tait	Accepted (See item 7)
30-Jan-25	Support for People Leaving Hospital	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; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Partially Accepted (See item 7)
30-Jan-25	Support for People Leaving Hospital	2. To support food banks and 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; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Partially Accepted (See item 7)
30-Jan-25	Support for People Leaving Hospital	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; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Accepted (See item 7)

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Meeting date	Item	Recommendation	Lead	Update/response
30-Jan-25	Support for People Leaving Hospital	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 lose weight by their GP and is considering buying weight loss drugs privately or online without medical supervision.	Derys Pragnell; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Rejected (See item 7)
30-Jan-25	Support for People Leaving Hospital	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; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Partially Accepted (See item 7)
30-Jan-25	Support for People Leaving Hospital	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; Ansaf Azhar; Claire Gray; Angela Jessop; Alicia Siraj	Accepted (See item 7)
30-Jan-25	Oxford Health NHS Foundation Trust People Plan	1. To work toward reducing reliance on agency staff where possible. It is recommended that processes are in place to ensure that the quality of care provided by agency staff is appropriate and up to standard so as to ensure consistency in the quality of care for patients.	Charmaine Desouza; Zoe Moorhouse; Amelie Bages	Accepted (See item 7)
30-Jan-25	Oxford Health NHS Foundation Trust People Plan	2. To create a positive and supportive work environment for staff, and to foster an environment and processes where staff can easily make complaints or express legitimate grievances.	Charmaine Desouza; Zoe Moorhouse; Amelie Bages	Accepted (See item 7)

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Meeting date	Item	Recommendation	Lead	Update/response
30-Jan-25	Oxford Health NHS Foundation Trust People Plan	3. To harness the use of technology to create a better and more efficient working environment for staff. It is also recommended that the Trust takes steps to avert the prospects of future IT outages inasmuch as possible, and to provide evidence of this.	Charmaine Desouza; Zoe Moorhouse; Amelie Bages	Accepted (See item 7)
30-Jan-25	Oxford Health NHS Foundation Trust People Plan	4. To work with system partners to campaign for an Oxford salary weighting.	Charmaine Desouza; Zoe Moorhouse; Amelie Bages	Rejected (See item 7)
06-Mar-25	Director of Public Health Annual Report	1. For the Public Health team to provide details of how system partners will work with schools to improve children's emotional wellbeing and mental health.	Ansaf Azhar; Donna Husband; Frances Burnett	Partially Accepted (See item 7)
06-Mar-25	Director of Public Health Annual Report	2. For clarity to be provided on who will have responsibility for implementing each of the recommendations being made in the DPH annual report.	Ansaf Azhar; Donna Husband; Frances Burnett	Partially Accepted (See item 7)
06-Mar-25	Director of Public Health Annual Report	3. For there to be greater collaboration and sharing of ideas between communities for the purposes of improving health and wellbeing at the local community/neighbourhood level.	Ansaf Azhar; Donna Husband; Frances Burnett	Accepted (See item 7)
06-Mar-25	Musculoskeletal Services in Oxfordshire	1. To address variances around the county, with a view to residents being able to access local MSK services more swiftly.	Matthew Tait; Neil Flint; Tony Collett; Mike Carpenter; Suraj Bafna	With NHS
06-Mar-25	Musculoskeletal Services in Oxfordshire	2. To continue to develop further collaboration with GPs and other services to improve MSK services. It is recommended that efforts are made to reduce the number of steps (and time) required to access MSK services.	Matthew Tait; Neil Flint; Tony Collett; Mike Carpenter; Suraj Bafna	With NHS
06-Mar-25	Musculoskeletal Services in Oxfordshire	3. For efforts to be made to create improvements to pelvic health outcomes. It is recommended that there is engagement with the Pelvic Partnership around support for those who are waiting for support.	Matthew Tait; Neil Flint; Tony Collett; Mike Carpenter; Suraj Bafna	With NHS

KEY	Report Due	With Cabinet / NHS	Complete
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Meeting date	Item	Recommendation	Lead	Update/response
06-Mar-25	Cancer Services in Oxfordshire	1. For further detail to be shared on outcomes across different cancer types, and how that compares nationally and regionally.	Matthew Tait; Felicity Taylor; Andy Peniket	With NHS
06-Mar-25	Cancer Services in Oxfordshire	2. For there to be clear communications with cancer patients who cannot speak in English (or who struggle to communicate in general), and for mechanisms to be in place to help with advocacy for such patients.	Matthew Tait; Felicity Taylor; Andy Peniket	With NHS
06-Mar-25	Cancer Services in Oxfordshire	3. For Oxford University Hospitals NHS Foundation Trust to collaborate with the Oxfordshire County Council's Public Health team on awareness campaigns with communities with low take-ups of cancer screening.	Matthew Tait; Felicity Taylor; Andy Peniket	With NHS
06-Mar-25	Audiology Services in Oxfordshire	1. For further information to be provided around the level of need for audiology services (including amongst children), and on supply at the local and acute levels. It is recommended that further resourcing is sought to tackle waiting lists and prioritisation, particularly around Community Diagnostic Centres.	Matthew Tait; Neil Flint; Phil Gomersall	With NHS
06-Mar-25	Audiology Services in Oxfordshire	2. For improvements to be made around communications with the wider public to increase awareness of available support from audiology services.	Matthew Tait; Neil Flint; Phil Gomersall	With NHS
06-Mar-25	Audiology Services in Oxfordshire	3. That Community Audiology is brought onto the same Electronic Patient Record system as the rest of Oxford University Hospitals NHS Foundation Trust.	Matthew Tait; Neil Flint; Phil Gomersall	With NHS

Action Tracker

Oxfordshire Joint Health Overview & Scrutiny Committee

Chair TBC | 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

Chair TBC | 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
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.	CM Children and Young People	Progress update to be provided
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.	CM Children and Young People	Progress update to be provided
30-Jan-24	Children's Emotional Wellbeing & mental Health Strategy	3. To continue to explore and secure specific and sustainable sources of funding for the Strategy to be effectively delivered in the long run.	CM Children and Young People	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
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.	CM Children and Young People	Progress update to be provided
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.	CM Children and Young People	Progress update to be provided
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 Care Strategy, and for this to be shared with HOSC and key stakeholders.	Julie Dandridge; Dan Leveson	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided
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 people; and that where groups are targeted for help, they can benefit from an effective outreach.	Hugh O'Keefe; Dan Leveson	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
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, and a collaborative system inclusive of the VSO registered stakeholders to tackle suicide.	Rachel Corser; Dan Leveson	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided
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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
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	Progress update to be provided
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 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.	Julie Dandridge; Claire Critchley; David Dean; Nhulesh Vadher	Progress update to be provided
16-Dec-24	Epilepsy Services Update	1. For the ICB and Oxford University Hospitals NHSFT to: <ul 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	Progress update to be provided
16-Dec-24	Epilepsy Services Update	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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
16-Dec-24	Epilepsy Services Update	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	Progress update to be provided
06-Mar-25	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	Progress update to be provided
06-Mar-25	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	Progress update to be provided
06-Mar-25	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	Progress update to be provided
06-Mar-25	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	Progress update to be provided

KEY	Update Pending	Update in Item	Updated
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Response Date (hyperlinked)	Item	Recommendation	Lead	Update
06-Mar-25	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	Progress update to be provided
06-Mar-25	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	Progress update to be provided