

OXFORDSHIRE HEALTH AND WELLBEING BOARD

13 MARCH 2025

HEALTH AND WELLBENG STRATEGY UPDATE – PRIORITIES 3 AND 4 - Live Well

Report by Director of Public Health and Communities

RECOMMENDATION

The Health and Wellbeing Board is **RECOMMENDED** to:

- a) **Note the progress of the delivery of priorities 3 and 4 under the thematic domain of Live Well within the Health and Wellbeing Strategy along with key challenges.**

Executive Summary

- 2 The Health and Wellbeing Board approved a new strategy in December 2023, with the priorities split between four thematic areas of Start Well, Live Well, Age Well and Building Blocks of Health. Delivery against the ambitions within the strategy is the responsibility of all organisations represented on the Board and is supported by an Outcomes Framework agreed by the Board in March 2024.
- 3 The Board has agreed to receive a rotating update on delivery of 1 of the 4 strategy themes at its quarterly meetings, meaning that over the course of a 12-month period an update on each theme would be presented once. This report is the first annual report of the thematic domain of Live Well covering:

Priority 3 - Healthy People, Healthy Places

- The length and quality of people's lives in Oxfordshire should not be negatively impacted by exposure to tobacco, alcohol, or unhealthy weight.
- People in Oxfordshire should live in healthy environments where they can thrive free from these harms.

Priority 4 - Physical Activity and Active Travel

- Residents of Oxfordshire should be able to be and stay physically active, for example by walking and cycling, especially in our most deprived areas.

As agreed by the HWB, it is the Health Improvement Board that is the key partnership forum that drives forward implementation of the strategy under these two areas.

The implementation progress report in Annex 1 provides an update on key activities, challenges and plans for the year ahead against each theme and Annex 2 presents data for the Key Outcome and Supporting Indicators selected for these two priorities within the Board's Outcomes Framework.

Introduction

- 4 This cover paper highlights some key successes and challenges and should be read in conjunction with the attached report (annex 1) which covers in more detail each of the outcomes in relation to Priorities 3 and 4 of the Health and Wellbeing Strategy.
- 5 It should be noted that several of the priorities including tobacco, healthy weight and physical activity require a whole systems approach to bring about change and the report does not include every piece of work that is happening across the system in each area but highlights key successes along with key challenges. It should also be noted that it may take some time for the interventions put in place to positively affect the outcome trajectory.
- 6 Data annex 2 provides a quantitative report against the Key Outcomes and Supporting Indicators for priorities 3 and 4 as selected by the Health and Wellbeing Board.

Summary of Key Data

- 7 The majority of trajectories are reporting Green (on target). While this is positive we should not remain complacent. It should be noted for example that smoking remains the greatest controllable cause of death and disease with around half of lifelong smokers dying early losing about 10 years of life, contributing to COPD, Coronary Heart Disease and taking up considerable resource in the primary and secondary care system. Around 10% of adults in Oxfordshire smoke, equating to around 60,000 residents. There are significant health inequalities existing with smoking rates remaining higher in people in areas of deprivation, with long term mental health conditions and living with mental ill health.
- 8 For obesity, reception prevalence is green but has increased and for children of all ages there are geographical areas in Oxfordshire where excess weight remains higher than the Oxfordshire and England average and trend is not reversing for these groups. More than half of adults in Oxfordshire are overweight and following smoking obesity is the next biggest controllable risk for early death and disease.

9 The below trajectories are reporting amber

- Year 6 prevalence of overweight (including obesity)
- Achievement of county wide Gold Sustainable Food Award
- Percentage of adults aged 16 and over meeting the '5-a-day' fruit and
- Vegetable consumption recommendations *
- Healthy Start Voucher Uptake
- Percentage of Physically Inactive Adults
- Percentage of adults walking/cycling for travel at least three days per week

10 The below trajectory is reporting red (please see point 13 for further information about steps being taken to address this).

- Percentage of physically inactive children (less than an average of 30 mins a day)

Summary of Key Activities and Challenges Against Theme

A very brief summary against each of the key areas is included below (with expansion in the table report at annex 1):-

- 11 The whole systems approach towards **Healthy Weight** has included a deep dive into data revealing areas of Oxfordshire with significantly higher levels of excess weight amongst children than the Oxfordshire and England average (more than 40% in some areas). This data has been utilised in the planning of key initiatives including healthy start vouchers, targeted work to support schools and the development of a new healthy weight service. Work with young people has highlighted the adverse impact of 'junk food advertising' [here](#). And work is underway to support healthier eating in existing food stores. Challenges including the introduction of Tier 3 and 4 support pathways for people living with healthy weight are being grappled with by the ICB and progression with health environments to support healthier weight, including policies to encourage healthier advertising and restrict new hot food takeaways (as introduced elsewhere in England) is slow.
- 12 Work to support Oxfordshire to become **smokefree** (less than 5% prevalence) continues. A prevention programme has been introduced to schools, healthier environments are encouraged by a community fund and a health needs assessment and national Smokefree monies have informed and enabled the commissioning of a new enhanced specialist stop smoking service with additional capacity. A revised Strategy is planned this year. Challenges include some delay in implementing the full acute and maternity tobacco dependency offer which is now in place and seeing positive outcomes, unfortunately the ring fence has been removed from the NHSE transfer to the ICB which means this service may be at risk.
13. With regards reduced **Alcohol** related harm, extensive work continues to support and engage more people into effective treatment for alcohol dependence which has reduced 'unmet need' to below the England average. For early identification and support, Alcohol Identification and Brief Advice

sessions and alcohol counselling sessions will provide an enhanced offer. Ongoing uncertainty around national grant funding is a challenge.

- 14 There has been considerable expansion to the **physical activity** offer this year with enhancement to the You Move and Move Together programmes, including to include early years. While positive outcomes are being seen from evaluation of these programmes, this impact has not yet been seen on the data points and a deep dive is planned to consider further initiatives to support 'inactivity'. **Active travel** work is stepping up with a myriad of initiatives underway including Community Outreach Active Travel (COAT), initiatives to encourage cycling and infrastructure plans being approved. Challenges include keeping on track with a comprehensive workstream and with recruitment.
- 15 The update on the importance of being active for mental health and wellbeing focusses on **access to nature**. A people and nature manager was employed in 2024 putting in place initiatives including a nature buddies scheme, people and nature network and linking to related policy, research and social prescribing. Key challenges include long term funding, engagement, social prescribing and a related skills gap.

Financial Implications

- 16 There are no financial implications that the Health and Wellbeing Board is asked to note in relation to this report. Existing budgets from across the system are being utilised to deliver against the above priorities.

Comments checked by: Emma Percival, Assistant Finance Business Partner,
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Legal Implications

- 17 This report provides key updates to the Health and Wellbeing Board in relation to the Council's statutory duty under section 12 of the Health and Social Care Act 2012 to take such steps as it considers appropriate for improving the health of the people in its area.

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Annex 1. Live Well Report
Annex 2. Performance Report

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