

OXFORDSHIRE HEALTH & WELLBEING BOARD

OUTCOMES of the meeting held on Thursday, 29 June 2023 commencing at 2.00 pm and finishing at 4.53 pm

Present:

Board Members:

Dr Sam Hart (Chair)

Councillor Joy Aitman

Ansaf Azhar

Councillor Liz Brighthouse OBE

Sylvia Buckingham

Pippa Corner (for Karen Fuller)

Councillor Maggie Filipova-Rivers

Dan Leveson

Professor Sir Jonathan Montgomery

Councillor Helen Pighills

Dr Ben Riley (for Dr Nick Broughton)

Councillor Louise Upton

Other Members in Attendance:

Councillor Phil Chapman, Anne Coyle, Kerrin Masterman and Councillor Michael O'Connor (all virtually)

Officers:

Whole of meeting

David Munday, Consultant in Public Health; Jonathan Deacon, Interim Democratic Services Officer

Part of meeting

Stephen Chandler, Executive Director (People, Transformation & Performance)

Agenda Item

Officer Attending

6

Rob Bowen

7 & 14

Steven Bow

8

Jamie Slagel

9

Ian Bottomley

11

Kate Austin / Fiona Ruck

These notes indicate the outcomes of this meeting and those responsible for taking the agreed action. For background documentation please refer to the agenda and supporting papers available on the Council's web site (www.oxfordshire.gov.uk.)

If you have a query please contact Democratic Services, Oxfordshire County Council (Email: committees.democraticservices@oxfordshire.gov.uk)

	ACTION
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<p>1 Welcome by Chair (Agenda No. 1)</p>	
<p>The Chair welcomed attendees to the meeting and in particular, Members who had joined the Board since the previous meeting in March. These were Councillor Michael O'Connor, Cabinet Member for Public Health & Inequalities, Oxfordshire County Council; Councillor Phil Chapman, Cherwell District Council and Anne Coyle, Interim Corporate Director of Children's Services, Oxfordshire County Council.</p>	
<p>2 Apologies for Absence and Temporary Appointments (Agenda No. 2)</p>	
<p>Apologies were received from Councillor Liz Leffman, Leader at Oxfordshire County Council and Chair of the Board (Dr Sam Hart chaired the meeting in her absence); Councillor Tim Bearder, Cabinet Member for Adult Social Care, OCC; Dr Nick Broughton, Oxford Health Foundation Trust and Karen Fuller, Corporate Director for Adult Services, OCC.</p> <p>Dr Ben Riley attended for Dr Nick Broughton and Pippa Corner attended for Karen Fuller.</p>	
<p>3 Declarations of Interest - see guidance note opposite (Agenda No. 3)</p>	
<p>There were no declarations of interest.</p>	
<p>4 Petitions and Public Address (Agenda No. 4)</p>	
<p>There were none.</p>	
<p>5 Note of Decisions of Last Meeting (Agenda No. 5)</p>	
<p>It was agreed that the Note of Decisions of the previous meeting would be approved, subject to an amendment to item 12, Report from Healthwatch, correcting the error in the spelling of Dr Veronica Barry's surname.</p> <p>RESOLVED: That the Board APPROVED the notes of the last meeting held on 16 March 2023 and the Chair be authorised to sign them as a correct record, subject to the amendment set out above.</p>	

<p>6 Buckinghamshire, Oxfordshire and Berkshire West Joint Forward Plan (Agenda No. 6)</p>	
<p>Rob Bowen, Acting Director of Strategy and Partnerships, Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board, introduced the report. The Board was being asked to provide an opinion on whether the Joint Forward Plan (JFP) took 'proper account of the joint local health and wellbeing strategy' for Oxfordshire.</p> <p>Mr Bowen clarified that whilst the JFP is a five year Plan, it would be updated annually. As Health and Wellbeing Strategies were published by the different local authorities, the group of NHS organisations had a duty to take account of these publications, maintaining alignment.</p> <p>Mr Munday advised that since the previous Board meeting in March, the draft JFP had been circulated to all the Board members. Responses received from Board members had been collated and the Board's proposed response to the JFP had been drafted and was included in Appendix A of the report.</p> <p>Mr Bowen requested that there was an amendment to the letter in Appendix A to reflect that the JFP the Board was responding to was that of the partner NHS Trusts' in addition to the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board.</p> <p>RESOLVED: That the wording in Appendix A be AGREED by the Board as its formal opinion that the JFP takes 'proper account of the joint local health and wellbeing strategy', subject to the amendment above.</p>	
<p>7 Oxfordshire Joint Strategic Needs Assessment 2023 update (Agenda No. 7)</p>	
<p>Steven Bow, Interim Consultant in Public Health, presented the report. He stated that the Joint Strategic Needs Assessment (JSNA) is a statutory annual report provided to the Health and Wellbeing Board and published in full on the Oxfordshire Insight webpage. Producing the JSNA was the result of a collaborative project with contributions from many analysts and sector specialists from Oxfordshire's Local Authorities, NHS, Thames Valley Police, Healthwatch Oxfordshire and Voluntary Sector organisations. The data from the JSNA would continue to inform the Health and Wellbeing Strategy.</p>	

<p>Mr Bow demonstrated at the meeting the interactive dashboards which accompanied the JSNA report and enabled users to locate data on topics such as population trends in different districts in the county, personal wellbeing or free school meals.</p> <p>The Board welcomed the data provided in the JSNA, including the interactive dashboards and also the collaborative way in which the JSNA was produced. Members also considered that the information needed to be used in planning future services, helping residents who most rely on these services and that it was necessary to align the findings with understanding the upstream causes.</p> <p>RESOLVED: that the Board:</p> <ul style="list-style-type: none"> (a) Noted the content of the Joint Strategic Needs Assessment for 2023 and encourage widespread use of this information in planning, developing and evaluating services across the county; and, (b) Agreed to contribute information and intelligence to the JSNA Steering Group to further the development of the JSNA in future years, and to participate in making information more accessible to everyone. 	
<p>8 Updating the Health and Wellbeing Strategy (Agenda No. 8)</p>	
<p>David Munday, Consultant in Public Health, in addressing the Board spoke about the increased opportunity for evidence based work and joined up partnership working from the Health and Wellbeing Strategy. There was a need to review the Strategy in the light of the impact which Covid, lockdowns and the cost of living crisis had had on health and wellbeing.</p> <p>At the previous meeting of the Board in March it had been agreed that a revised version of the Strategy would be developed over the course of the year with the final version being published in December. It would be the principal strategy document for Oxfordshire based work. Mr Munday confirmed that the Task and Finish Groups, made up of senior representatives of all the organisations involved with the Board, had met and taken the development of the Strategy forward.</p> <p>A presentation was provided by Mr Munday and Jamie Slagel, Public Health Policy Researcher. Mr Munday spoke about key themes from the Strategy including health inequality in relation to life expectancy. Mr Slagel explained how the involvement of existing resident focus groups, led by community leaders, would be reflected in the Strategy. Healthwatch Oxfordshire would be</p>	

undertaking parallel work, surveying and speaking with residents. It would be necessary to feedback to residents what impact they had had in the development of the Strategy. There would be a public and professional consultation period before the new Strategy was announced in December. It was noted that the communication and engagement with residents would continue after December 2023.

Board Members recommended that local connections, including voluntary groups and elected councillors in rural areas as well as urban, were part of the engagement process. Mr Munday responded that the next meeting of the Task and Finish Group was taking place the following week and the comments on the engagement process would be reflected at that meeting.

The Board was requested to approve the overarching framework for the Strategy. This included the Task and Finish Group proposal that the Strategy adopted the Life Course approach, with 'Start Well', 'Live Well', and 'Age Well' as key themes as reflected in the approach taken by the ICS Strategy. The Board was content with the overarching framework approach but it was agreed that there would be more consideration given to how the Strategy was guided by 'principles', including that of health inequalities, prior to the HWB Workshop which was provisionally scheduled for 7th September. It was agreed that a more detailed discussion on the content of the Strategy would take place at the Workshop. This would be followed by the draft Strategy being agreed for consultation in early October and the public consultation between October and November before the Strategy was published at the end of the calendar year.

RESOLVED: that the Board:

- (a) Noted the formation and activity of the cross-organisational Task and Finish group, with representation from all organisations on the Health and Wellbeing Board;
- (b) Noted ongoing progress towards updating the Health and Wellbeing Strategy;
- (c) Approved plans to communicate and engage with residents;
- (d) Approved the proposed structure for the Health and Wellbeing Strategy;
- (e) Further consider and determine the timeframe for the updated Health and Wellbeing Strategy;
- (f) Further discuss emerging themes, principles, and priorities and offer guidance to officers regarding content of the strategy; and,
- (g) Approved a workshop of the HWB to take place in September (a provisional date of 7th September to

<p>be confirmed) so that board members and officers on the Task and Finish group can work together on further content development.</p>	
<p>9 Better Care Fund Plan 2023-25 (Agenda No. 9)</p>	
<p>Pippa Corner, Deputy Director, HESC, OCC, introduced the item, supported by Ian Bottomley, Lead Commissioner Age Well, in answering questions from the Board. Approval was sought for the Oxfordshire Better Care Fund (BCF) Plan Priorities for 2023-25, the trajectories for the BCF Metrics and the BCF Income and Expenditure Plan.</p> <p>Ms Corner referred to the two year Plan being an advantage over the previous annual Plan as it was possible to assess what was being effective and review over the life time of the Plan. The Plan's purpose was to fulfil a number of aspirations, including working to tackle inequalities, the prevention agenda, improving people's health outcomes and joining up services in order that they were easier to navigate for the public.</p> <p>The Board was advised that the BCF Plan included the Additional Discharge Funding which had replaced winter funding. There were also new measures relating to admissions to hospital after a fall, length of stay in hospital beds and re-enablement.</p> <p>Ms Corner also stated that the BCF Plan was in keeping with the Oxfordshire Way, supporting people to live as healthy and as long as possible in their own homes and working preventively. This moved away from the reliance on hospital beds.</p> <p>It was clarified in response to questions that the discharge Funding was able to be used for children and young people. Also, the Plan would be in the public domain once approved by NHS England, including the conditions. Finally, it was noted that there was flexibility in terms of what the Additional Discharge Funding would be used for. In the past it had been used for additional hospital beds during the winter but there was some confidence that the Home Care Market could meet the need at home.</p> <p>RESOLVED: that the Board:</p> <ul style="list-style-type: none"> (a) Approved the Oxfordshire Better Care Fund Plan Priorities for 2023-25; (b) Approved the trajectories for the Better Care Fund Metrics; and, (c) Approved the Better Care Fund Income and Expenditure Plan. 	

<p>10 Oxfordshire Combating Drugs Partnership (Agenda No. 10)</p>	
<p>Ansaf Azhar, Director of Public Health & Wellbeing, OCC, presented the report. He explained that the work had originated from the Government’s strategy, ‘From Harm to Hope: A 10 year plan to cut crime and save lives’ which set out an ambitious target to combat illegal drug use, and improve services for people who use drugs.</p> <p>Combating Drugs Partnership guidance was published in June 2022. Mr Azhar stated that one of the requirements was to establish an area based Partnership and it had been decided at a regional level to establish an Oxfordshire wide Partnership. This had been formed in October 2022 with Mr Azhar as the Senior Responsible Officer. The Partners included Thames Valley Police, Oxfordshire and Berkshire West Integrated Care Board, Turning Point and Oxford Health NHS Foundation Trust in addition to OCC.</p> <p>There were three strategic key areas, reducing illegal drug use, reducing drug related crime and reducing drug related deaths. Mr Azhar confirmed that the Action Plan had now been signed off and covered Early Intervention for Children and Young People, Reduce Drug Related Homicides and Violent Crime, Preventing Drug Deaths, Reduce County Lines and Local Organised Crime Groups and Increase Treatment Places and Recovery Support Families at Risk for Substance Use. There were actions against all these themes.</p> <p>Mr Azhar added that there was a strong focus on lived experience with members of the community advising how it has impacted them and people they know and how the Partner organisations should work to reflect the needs of the community.</p> <p>RESOLVED: that the Board NOTED the progress with the Oxfordshire Combating Drugs Partnership.</p>	
<p>11 Community Profiles (Agenda No. 11)</p>	
<p>Kate Austin, Public Health Principal, OCC introduced the item. Ms Austin stated that eight out of ten Community Profiles had now been produced for the wards in Oxfordshire most affected by health inequalities. The Community Profiles were the outcome of the Director of Public Health Annual Report which had 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 update (published</p>	

November 2019) and are most likely to experience inequalities in health. The Community Profiles provided an in depth understanding of the enablers and challengers to the health and wellbeing of communities.

The Board heard from Lisa Stead (Community First Oxfordshire) regarding the findings from the community profiles in three areas in Banbury, Grimsbury and Hightown, Banbury Cross and Neithrop and Ruscote. Amber Giles and Alexa Bailey (Oxford City Council) addressed the Board regarding findings from the Community Profile in Rose Hill, Oxford City and Fiona Ruck, Health Improvement Practitioner, OCC, regarding Barton, Oxford City.

Ms Stead advised that Community First Oxfordshire had undertaken focus groups, one to one interviews and surveys to get the thoughts of the community when putting together the community profiles. It had been found that the three wards shared many similarities, including valued shared assets supporting health and wellbeing such as green and open spaces. Some improvements were requested such as better shop lighting, development of walking areas and better management of litter.

Ms Stead stated that next steps included improvement of the local environment, a community wide communications strategy and running language classes for residents who spoke English as a second language and additional support for young people such as peer to peer group support.

Ms Giles and MS Bailey stated that Rose Hill shared some of the same challenges and great potential as the Banbury areas. It was noted that 6% of adults were receiving unemployment related benefit in Rose Hill which was three times the average in Oxfordshire as a whole. 29% of children were living in poverty in Rose Hill, over double the average for Oxfordshire. 36% of primary and secondary school pupils living in Rose Hill were eligible for free school meals, over double the average for the county as a whole.

Ms Ruck mentioned key themes in Barton, including that the accessibility of hospitals and transport links were highly valued but were also a challenge in some cases, including a lack of a two way bus service within the estate. A recurring theme was around some people not feeling safe, including from people congregating outside shops.

Recommendations from the Rose Hill findings included longer term ones such as improved housing and access to healthcare. Shorter term aims included women's only classes at the local gym and developing the Rose Hill News. It was noted that five

<p>themes covering a range of recommendations emerged in relation to Barton and actions were now being taken forward.</p> <p>The Board agreed that this was helpful insight and there had been great work undertaken for the Community Profiles. The next stage in terms of action planning was that for each of the ward areas there was a newly funded Community Development Officer post. They and the Steering Groups would take forward the recommendations/actions from the Profiles. There was grant funding for each of the communities to fund recommendations. Targeted ICB money was also intended for community engagement in the wards.</p> <p>RESOLVED: that the Board:</p> <ul style="list-style-type: none"> (a) Noted the findings and rich insight contained within the Phase 2 Community Profiles for Barton, Banbury Neithrop and Ruscote, Banbury Grimsbury and Rose Hill; (b) Supported the promotion and sharing of the community profiles with partners and colleagues across the system; and, (c) Supported that the use of the insight from the community profiles inform service delivery plans of partner organisations on the Board. 	
<p>12 Pharmaceutical Needs Assessment Update (Agenda No. 12)</p>	
<p>The report was presented by David Munday and he explained that there was a statutory requirement for the Board to publish a Pharmaceutical Needs Assessment (PNA) every three years. The previous PNA had been published in March 2022. The document mapped the number and location of pharmacy premises in Oxfordshire in relation to where the population are located. The criteria for general access used in the PNA was for all parts of the urban population to be within twenty minutes' walk or public transport time of a pharmacy and all parts of the rural population to be within twenty minutes' drive time or a five mile radius of a pharmacy.</p> <p>Mr Munday referred to Lloyds Pharmacy Ltd withdrawing their services in Sainsbury's supermarkets across the country, affecting six in Oxfordshire. He stated that the PNA Steering Group considered that this would not lead to gaps in services which would result in travel times to pharmacies exceeding those set out for urban or rural residents. It was proposed to issue three supplementary statements to the PNA. Two of these recorded the consolidation of the Lloyds Pharmacy in Sainsbury's store, Bure Place, Bicester, with Lloyds Pharmacy, Old Barn</p>	

Coker Close, Bicester and the closure of the Lloyds Pharmacy in Sainsbury's on 10th June 2023 and also in Sainsbury's store, Witan Way Witney, with Lloyds Pharmacy, Windrush Health Centre, Welch Way, Witney and the closure of the Lloyds Pharmacy in Sainsbury's.

The third recorded the closure of the Lloyds Pharmacy in Sainsbury's store, Heyford Hill, Littlemore, Oxford. The reason for the supplementary statement was that Littlemore was one of the ten wards that experienced the greatest health inequality in the county and whilst there was access to pharmacy provision within the twenty minute rule, some of the public transport access for the community was not ideal and car ownership was lower than average. It was considered to be an area which could potentially benefit from additional provision in the future should the market apply to NHS England to open new pharmacy premises.

There were three closures of Lloyds Pharmacies in Sainsbury's stores where a Supplementary Statement was not deemed to be required. In Banbury, Kidlington and Didcot, the closure was considered to leave good or satisfactory pharmacy cover in the local area.

It was clarified in response to questions from the Board that a consultation process would take place prior to the next PNA document being published in 2025 and was not required as a result of the proposed amendments. It was noted that proposed closures to Boots premises nationally had been announced recently and an assessment would be made as to whether any Supplementary Statements were required in the event Boots provided information of specific pharmacy closures in the county.

RESOLVED: that the Board:

- (a) Noted the intention of Lloyds Pharmacy Ltd to withdraw all 237 Lloyds pharmacies inside Sainsbury's stores nationwide in 2023, affecting 6 pharmacies in Oxfordshire;
- (b) Issued a Supplementary Statement, further to the Oxfordshire Pharmaceutical Needs Assessment 2022, that records the closure of the Lloyds Pharmacy in Sainsbury's store, Heyford Hill, Littlemore, Oxford on 22 April 2023,
- (c) Issued a Supplementary Statement, further to the Oxfordshire Pharmaceutical Needs Assessment 2022, that records the consolidation of the Lloyds Pharmacy in Sainsbury's store, Bure Place, Bicester, with Lloyds Pharmacy, Old Barn Coker Close, Bicester and the closure of the Lloyds

<p>(d) Pharmacy in Sainsbury's on 10th June 2023; Issued a Supplementary Statement, further to the Oxfordshire Pharmaceutical Needs Assessment 2022, that records the consolidation of the Lloyds Pharmacy in Sainsbury's store, Witan Way Witney, with Lloyds Pharmacy, Windrush Health Centre, Welch Way, Witney and the closure of the Lloyds Pharmacy in Sainsbury's on 13 th June 2023; and,</p> <p>(e) Noted that the further three closures of Lloyds Pharmacies in Sainsbury's stores in Banbury, Kidlington and Didcot do not require a Supplementary Statement.</p>	
<p>13 Healthwatch Oxfordshire Report (Agenda No. 13)</p>	
<p>The Board considered a report by Healthwatch Oxfordshire setting out its activities since its last report to the Board. Sylvia Buckingham, Chair Healthwatch Oxfordshire, presented the report.</p> <p>Ms Buckingham specifically referred to the organisation's success in its application to Health Education England/ NHS England South East to act as host to support two community researchers from Oxford Community Action, taking part in the Community Participatory Action Research programme phase 2 across the South East region. Researchers would be developing projects over the coming year focused on impact of cost of living.</p> <p>Ms Buckingham also referred to Healthwatch Oxfordshire producing a 'mystery shopper' report on access to NHS dentistry in Oxfordshire. It had been of concern that few practices had been taking on any new patients, including children.</p> <p>Healthwatch Oxfordshire had appointed a new member of staff to support Patient Participation Groups. There would be a presentation event for the 2022-23 Annual Impact Report held on Zoom on 4th July and all Board members were welcome to attend.</p> <p>Ms Buckingham advised that she had stepped down as Chair of Healthwatch Oxfordshire. She would be officially replaced by Don O'Neal but would still be actively involved with the organisation, including co-chairing some events.</p> <p>The Chair thanked Ms Buckingham for her contribution to the Board. This included the regular meeting updates.</p> <p>The update was NOTED.</p>	
<p>14 Performance Report</p>	

(Agenda No. 14)

Steven Bow, introducing the quarterly Performance Report, highlighted a number of indicators from the total of 39 under the three life course stages “Start Well”, “Live Well” and “Age Well” from the current Health & Wellbeing Strategy.

The key points relating to the performance indicators included:

- “Start Well” – There was a fluctuating picture in relation to the ‘reducing the level of smoking in pregnancy’ indicator. For the most recent quarter it had increased to 6.5%. The amber status of the ‘number of early health assessments’ indicator reflected that the target had been raised from 2,000 to 5,000. The current quarter was at a record high of 3,559 compared to 2,938 the previous year. It indicated there was major progress in response to the stretch target.
- “Live Well” – The number of people with learning disability having annual health checks in primary care had now exceeded the target of 75% of all registered patients at 82%. There was a red rating for the indicator relating to the ‘% of the eligible population aged 40-74 years receiving a NHS Health Check’. This reflected that it was based on a five year cumulative performance, which was impacted significantly by Covid. It was intended to change this to a quarterly indicator.
- “Age Well” – The indicator for the ‘% of people discharged to their normal place of residence’ was below 93% but it was hoped that this would improve as a result of the BCF Action Plan. The level of flu immunisations for the over 65s had reduced from the very high level of the previous quarters but was at a higher level than a year previously.

It was agreed that the Performance Report would be updated and this would be achieved in part with the update to the Health and Wellbeing Strategy. It should then be decided which indicators it would be appropriate to track on a quarterly or on an annual basis. It would also be of value to use the intelligence gained from work such as the Joint Strategic Needs Assessment to inform on data capturing.

The Board **NOTED** the Performance Report.

15 Reports from Partnership Boards

(Agenda No. 14)

Place-base Partnership

Dan Leveson, Oxfordshire Executive Director of Place, ICB, presented the update on the Partnership. He clarified that the Partnership was not a sub-committee of the ICB but a consultative forum representing the leaders of the health and care system.

He highlighted the key achievements of the Partnership which had been obtained in a relatively short period of time. These included, as set out in the report, the County Council and the ICB renewing the Section 75 agreement which underpinned the development of joint commissioning and how the organisations would work with providers. He also referred to how the Partnership was working together on progressing the development of a sustainable model of care for mental health and on prioritising urgent and emergency care and prevention and health inequalities.

Health Improvement Partnership Board

It was noted that Councillor Helen Pighills had replaced Councillor Louise Upton as the Chair of the Health Improvement Partnership Board (HIB) but that Councillor Upton had chaired the most recent meeting on 15 June 2023 in Councillor Pighills' absence.

There had been three major reports at the 15 June meeting. These included a focus on the overarching Domestic Abuse strategy for Oxfordshire, the specific Safer Accommodation strategy that sits within it and the role of the Lived Experienced Advisory Group. There was also an update on the 'Make Every Contact Count' project and Partners from the ICB presented an overview of how social prescribing is organised and funded in Oxfordshire, the types of issues that are supported and the number and nature of residents being referred.

Children's Trust Board

Councillor Liz Brighthouse presented the report of the Children's Trust Board. Matters she highlighted included that Anne Coyle, the recently appointed Interim Corporate Director of Children's Services, had already made a significant impact at OCC and one of the priorities would be to progress the Children & Young People's Plan. She emphasized the importance of all the partners working together in relation to services for children.

The Board **NOTED** the updates.

..... in the Chair

Date of signing