

**Consolidated Action and Recommendation Tracker – Health Overview and Scrutiny Committee 21 September 2023.**

	<b>Item</b>	<b>Action/Recommendation</b>	<b>Lead</b>	<b>Progress update</b>
1	Minutes of 23 September 2022	Health partners to be invited to the next OCC scrutiny training	Tom Hudson / Omid Nouri	To be actioned in the new municipal year for 23/24. <b>In progress</b> <i>Update – OCC scrutiny are working up a training proposal with CfGS.</i>
	<b>24 November 2022 Meeting</b>			
2	Primary Care	Recommendation:  Specified roles are filled within the ICB with the primary responsibility to work with District Councils at Place Level to coordinate use of CIL funds held by the ICB and from executed Section 106 funds for Primary Care.	Julie Dandridge/ Daniel Leveson	<b>Progress/update response:</b>  The ICB have managed to recruit a Primary Care estates manager who will have a key role in working with Districts in terms of planning for new housing developments. The successful candidate starts in December 2023. Unfortunately, recruitment was delayed due to lack of suitable candidates.

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3	Cllr Barrow's infection control report	OCC carries out a regular review of current infection control procedures in care homes and the support provided.	Karen Fuller, OCC	<p>This is built into our routine procedures in relation to infection control and monitoring outbreaks. OCC works in partnership with Oxford Health care home support service, CQC and UKHSA.</p> <p><b>UPDATE – Subsequent Care Home Visits to be arranged in conjunction with the Director for Adult Social Care.</b></p>
	<b>10 March 2022 Meeting</b>			
4	Access and Waiting Times	Information is supplied on the new elective care access offer across the BOB footprint (the provider collaborative)	Omid Nouri/Titus Burwell	<p>BOB ICS Elective Recovery plan &amp; provider collaborative would need to be presented by BOB ICS colleagues -</p> <p><b>In progress</b></p> <p><b>Update – A scope is being drawn up for Titus Burwell, Chair of BOB Elective Recovery Backlog Group, to brief the Covid-19 Elective Recovery Backlog group on the subject with a particular focus on Symptomatic breast cancer 2WW and in respect of Urological Cancer referrals.</b></p>

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5	Access and Waiting Times	That Members meet separately with James Scott to explore workforce challenges across Oxfordshire/the NHS	BOB HOSC, BOB ICS	<i>Eddie and OCC BOB HOSC Members to ask for the item to be placed on the BOB HOSC Work Programme.</i>  <b>In progress</b>  <i>Update – To be considered as part of future discussions amongst the BOB HOSC</i>
6	Chairs Update	That Members of the Committee come forward in which to develop a glossary of NHS acronyms.	Omid Nouri/ Cllr Nigel Champken- Woods	<i>Cllr Champken – Woods came forward at the last meeting to start an early draft. It was identified that Wokingham’s HOSC glossary as a good model to follow.</i>  <b>In progress</b> <i>This is currently being collated with Cllr Champken-Woods and will be appended at the back of HOSC agendas once finished.</i>
<b>14 July Meeting 2022</b>				
7	Integrated Improvement Programme	Establish a sub group on the Integrated Improvement Programme to provide NHS / OCC colleagues the opportunity to engage with HOSC outside of formal Committee meetings (as well as in addition to). It should cover all aspects of comms and engagement and any issues relating to services at Wantage.	Cllrs Hanna, Edosomwan, Barrow and Barbara Shaw  Omid Nouri	<b>In progress –</b> <b>UPDATE- The Integrated Improvement Programme met as a Member-only forum on 20 September 2022 and agreed to meet with a ICB representative in respect of the ICB’s involvement in the IIP. The Group also agreed that a group would engage with representatives at OH in respect of the maternity closures and maternity closures across Oxfordshire.</b>  <b>Terms of Reference for the Group will be drawn up for engagement in respect of the consultation and delivery plan relating to the IIP.</b>
<b>22 September 2022 Meeting</b>				

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8	Action and Recommendation Tracker	NHS England Health and Justice to fill out the Committee's substantial change toolkit in relation to the SARC in Bicester; this is to then be reviewed by Members via email, with a view to meeting the Commissioner in person.	Lisa Briggs	<b>In Progress -</b> The Substantial Change Toolkit form has been received and was considered by Cllrs Champken-Woods, Hanna and Heywood. It was considered that there was no substantial change. However further information in respect of the service has been requested and waiting a response.
9	Chair's Update and Committee Sub-Group Updates	Further information is sought by the IIP Sub-Group as to how the Integrated Improvement Programme fitted in with the ICB's overall vision.	Omid Nouri/ Dan Leveson	<b>In Progress-</b> The Health Scrutiny Officer is to ask to write to the ICB Place Based Director to ask for his attendance at the next meeting of the sub group; to better understand the ICB Role's in the Integrated Improvement Programme, and clarity as to the leadership and timelines as to the Programme.
10	Chair's Update and Committee Sub-Group Updates	Following an initial meeting with the new provider, a HOSC member is appointed to Connect Health's service-user board	Danielle Chulan	<b>In Progress-</b> The provider is to get in contact when the board is set up.
	<b>24 November 2022 Meeting</b>			
11	<b>Primary Care</b>	The Committee is informed as to how much Community Infrastructure Levy funding has been received by the Oxfordshire CCG and subsequently the BOB ICB (from Oxfordshire), the amounts received from the 5 individual District Councils, how much of those CIL funds have been spent, which health related CIL funded projects have been commissioned; and what projects have been completed or are in progress using executed Section 106 funds.	Julie Dandridge	<b>In progress –</b> The ICB has been reminded of these questions and will feedback to the Committee outside the formal Committee process.  <b>UPDATE – Julie Dandridge to provide an update on a list in respect of where the funds currently sat, time restrictions and other obligations.</b>

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12	<b>Serious Adult Mental Health</b>	A workshop on serious adult mental health is co-produced to allow further Committee exploration of the area.	Omid Nouri, OH, Karen  Stephen Chandler	<b>In progress –</b> <b>To be scoped after the 9<sup>th</sup> of February 2023 HOSC Meeting.</b>
	<b>9 February 2023 Meeting</b>			
13	<b>SCAS Improvement Programme Update</b>	SCAS' performance data be regularly reviewed by the Committee's Covid-19 Elective Recovery Sub-Group.	Omid Nouri/ Tom Stevenson	<b>In progress-</b> <b>The Committee is to be advised when the wait-time performance data can be broken down into (Middle Layer Super Output Areas) MSOA level. Likely to be Autumn 2023</b>
14	<b>Committee Work Programming</b>	A Work Programming Meeting be arranged with all Committee Members	Omid Nouri/ Tom Hudson	<b>In progress – a partial work plan has been suggested, but in light of the appointment of a new Scrutiny Officer the completion of the new work plan is to take place once they are in post and are better placed to help the committee deliver it.</b>
	<b>11 May 2023 Meeting</b>			
15	<b>Dentistry Provision in Oxfordshire</b>	To collaborate with the Place Based Partnership, Public Health, and providers with a view to creating a base line dentistry data set that will mean local improvements to poor dental health of residents can be achieved and clearly communicated.	Hugh O' Keefe NHSE/Daniel Leveson BOB ICB	<b>Response:</b> <b>The Oxfordshire Joint Strategic Needs Assessment (2023) contains information about the oral health of 5 year olds in the county. This information is derived from national epidemiological surveys. The ICB will work with Public Health colleagues to review and update this information.</b>

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				<p>The ICB is developing a Primary Care strategy including dental services. This will include a review current data and the development of datasets to inform future commissioning plans. There is a strong link between socio-economic factors and health. The aim is to develop a strategy outlining how primary care via service delivery and partnership working with other agencies will improve the health of the population with oral health to be a key element of the strategy.</p>
16	<p><b>Dentistry Provision in Oxfordshire</b></p>	<p>To resolve any remaining uncertainty regarding the local flexibilities available to the ICB, and to consider investment of the underspend in Oxfordshire in targeted action to improve access to health and better serve Oxfordshire’s children and residents with the greatest need.</p>	<p>Hugh O’ Keefe NHSE/Daniel Leveson BOB ICB</p>	<p><b>Response:</b></p> <p>The BOB ICB Flexible Commissioning pilot commenced on 1<sup>st</sup> June 2023. The pilot scheme will run to 31<sup>st</sup> March 2024 and is designed to support access to NHS dental care for patients who have struggled to access NHS dental care. The scheme supports access for patients who have not attended a local dental practice for 2 years; who have relocated to the area; Looked After Children, families of armed forces personnel, asylum seekers and Refugees. Practices can also see ‘other’ patients of they believe it to be clinically appropriate. It allows practices to convert up to 10% of their contractual capacity from the delivery of activity targets to access sessions, where more time can be set aside for patients likely to have higher treatment needs. 30 practices in BOB are</p>

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				<p>taking part in the scheme (18 from Oxfordshire) with plans to provide nearly 3,000 Flexible Commissioning access sessions in the period July 2023 to March 2024. In the first 4 months about 900 sessions were provided with 3,000 patients attending (3,500 attendances). About 70% of patients attending to date have not attended a dental practice for 2 years; 14% have relocated to the area; 12% 'other' (includes patients who have been unable to access care, urgent patients, maternity, patients with an on-going clinical need that requires dental intervention, vulnerable patients, children's emergency trauma and cancer patients needing dental treatment as part of their care). 4% of attendances have been from Looked After Children, families of armed forces personnel and asylum seekers and refugees.</p> <p>The service is subject to on-going review and development.</p> <p>National guidance in respect of Flexible Commissioning was issued in October 2023.</p> <p>Whilst access to NHS dental services is continuing to improve, some capacity has been lost following decisions by some practices to leave the NHS or reduce their NHS commitment. The ICB is working with local practices on a re-commissioning</p>

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				plan to replace this capacity from 2023-24 onwards.
	<b>21 September 2023 Meeting</b>			
17	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>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.</p>	Derys Pragnell	<p><b>Recommendation Accepted:</b></p> <p><b>Initial Response (additional progress update response to be provided in April 2024):</b></p> <p>We currently commission two healthy weight services at Local Authority level, one that works with adults and another working with children. We also link closely with partners (NHS) who offer services at tiers above and below our own with a view to offering a seamless pathway. We identified some gaps in service as part of the recent Health Needs Assessment (HNA) on Healthy Weight. The current contract is coming to an end and we are planning to commission an 'all age service' with some additional elements to meet the gaps identified in the HNA. We are also planning a review and refresh of opportunities to raise awareness of support that is available.</p>
18	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>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.</p>	Derys Pragnell	<p><b>Recommendation Accepted:</b></p> <p><b>Initial Response (additional progress update response to be provided in April 2024):</b></p> <p>The current healthy weight service has specific programmes for ethnic groups</p>



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				who are more likely to develop excess weight. This includes innovation pilots working in mosques, women only sessions, and tailoring content to be specific (e.g. on food types) The new service will build on this learning/modelling and is likely to have community development as a delivery component within key priority areas and populations, including ethnically diverse.
19	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>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.</p>	Derys Pragnell	<p>Recommendation Accepted, HOSC will receive future progress update in April 2024.</p>
20	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>To explore avenues of support for residents who may struggle to afford healthy diets in the context of the cost-of-living crisis.</p>	Derys Pragnell	<p>Comment on Recommendation: This should be an action/link for Food Strategy work across Oxfordshire, which is led by Laura, Rushen, Senior Policy Officer at OCC– each District Council has been commissioned to undertake work for their District.</p>
21	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>To ensure that consideration of the ill-effects of being underweight is also built into the language adopted, and the services being commissioned, as part of promoting Healthy Weight overall within the County.</p>	Derys Pragnell	<p>Response and Rejection of Recommendation.</p> <p>This wasn’t part of the discussion at the meeting which was focussing on excess weight. Whilst this is a very important issue we need to remain focussed on tackling excess weight. There are significant differences between the causes, behaviours and actions that can</p>

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				be taken associated with underweight as opposed excess weight and none of the preventative, environmental actions or services commissioned have synergy. To set context while over 30% of children in year 6 and 60% of adults in Oxfordshire are living with excess weight around 1% of children experience underweight.
22	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>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.</p>		A separate response to this recommendation will be sought from BOB ICB.
23	<b>Oxfordshire Healthy Weight</b>	<p>Recommendation:</p> <p>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.</p>	Derys Pragnell/ Omid Nouri	Health Scrutiny Officer (Omid Nouri) to liaise with relevant officers to facilitate this meeting in the near future.
24	<b>Health and Wellbeing Strategy</b>	<p>Recommendation:</p> <p>To ensure careful, effective, and coordinated efforts amongst system partners to develop an explicit criteria for monitoring the deliverability of the strategy; and to explore the prospect of</p>	David Munday	<p>Recommendation Accepted:</p> <p>Initial Response (additional progress update response to be provided in April 2024):</p>

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		enabling input/feedback from disadvantaged groups as part of this process.		The Health and Wellbeing board has committed to the development of a delivery plan and outcomes framework for this new HWB strategy. This is to ensure the strategy is delivered by the partnership. We expect that an initial version of this will be presented to the HWB in March 24 and it will build on the strong public engagement that has already occurred in the strategy formation to date.
	<b>Local Area Partnership SEND</b>	<p>Recommendation:</p> <p>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.</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>Partnership leadership, assurance, and oversight of SEND provision is by the Oxfordshire SEND Improvement Board (SIB). The Board provides transparent visibility of progress, constructive and robust challenge, as well as celebrating what is working well and improving. The progress of improvements will be routinely scrutinised by appropriate scrutiny arrangements (People Scrutiny, HOSC and ICB Quality Group).</p> <p>Operational delivery of the Priority Action Plan (PAP) is via the Partnership Delivery Group (PDG), supported by time-limited Task and Finish groups. SIB, PDG, and Task and Finish groups all include Parent/Carer representation. Continued improved communication with families and stakeholders is a key focus of our SEND action planning. It underpins our</p>

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				governance arrangements, is a key priority within the PAP, and is a focus area of our Working Together Task and Finish group.
	<b>Local Area Partnership SEND</b>	<p>Recommendation:</p> <p>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.</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>The Priority Action Plan includes development of an Integrated Local Area Partnership SEND dashboard, based on partnership KPIs, with performance overseen by the SIB. As above, ongoing PAP action planning is operationally overseen by PDG and Task and Finish Groups. PDG reports monthly to the SIB.</p>
	<b>Local Area Partnership SEND</b>	<p>Recommendation:</p> <p>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.</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>Restorative Approaches are well-established within Children’s Services. Co-production with children and families is at the heart of PAP and wider action planning. As noted, they are represented within all leadership &amp; delivery bodies for SEND improvement.</p>

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	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>SIB responsibilities include ensuring that co-production is embedded in the culture of SEND services. Our Multi Agency Quality Assurance (MAQA) forum has the purpose of setting out consistent, service specific processes for the quality assurance of Education, Health, and Care Plans, ensuring that good practice and learning is shared, informs training and professional development for all professionals involved in the process, underpinning our vision for shared responsibility for improving outcomes, on the improvements achieved and next steps.</p> <p>Partnership training, and impact measures, are included in the PAP. All PAP actions are time-specified, ranging from December 2023 to post-July 2025, dependent on prioritisation and practicability.</p>
	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>There are existing arrangements to enable the sharing of information across partners. The effectiveness of these will be considered as part of the improvement journey.</p>

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	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>Priority actions within the PAP include co-production of both refreshed Local Offer and development of local area partnership early help and early intervention strategy. Together with improved EHCP assessment process, and Team Around the Family, this will enable the delivery of needs-led provision and the progression of outcome led plans with families. As noted above (Paragraph 8), continued improved communication with stakeholders and families is a key priority.</p>
	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>Timeliness and quality of EHCPs, along with improved parental access to the digital portal, are addressed within PAP item 3. Actions include ensuring accurate, timely, and effective assessment, and effectively meeting needs, particularly at points of transition. Assessment timeliness is improving, despite increasing demand. Timeliness of completion within 20 weeks has improved from 40% in June 2023 to 50% in the last month.</p>

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	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>PAP priority actions include a focus on improved commissioning and strong relationships with commissioned providers, to improve capacity, meet demand, and meet the needs of children, young people, and their families. The PAP is also focused on ensuring commissioning arrangements support timely decision making and transition arrangements, and that there is a multi-agency approach to meeting the needs of children with emotional and mental health difficulties. The Leadership and Partnership Task and Finish group has responsibility for integrated commissioning of SEND services.</p> <p>The Oxfordshire Joint Commissioning Executive, which plays a key role in the delivery of many Priority Action Plan actions, reports into the Partnership Delivery Group.</p>
	<p><b>Local Area Partnership SEND</b></p>	<p>Recommendation:</p> <p>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.</p>	<p>Stephen Chandler/Anne Coyle/Rachel Corser</p>	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>A local area pathway is being developed for children and young people with emotional wellbeing and mental health concerns. The i-THRIVE framework (an integrated, person-centred, and needs-led approach to delivering mental health</p>

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				services for children, young people, and their parents/carers) will be linked to the Early Help Strategy and Team Around the Family.
	<b>Local Area Partnership SEND</b>	<p>Recommendation:</p> <p>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.</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>Our response to the SEND inspection, including development of PAP and KPI dashboard, has been informed by learning from other local authorities. Children's Services senior leadership bring a wealth of experience in delivering transformation and service improvement within other local authorities. This includes both the recently appointed independent chair of the SIB, Steve Crocker (Former President of Association of Director of Children's Services) and new SEND/ Children's Services Improvement. We have invested in an additional Assistant Director for Early Help &amp; Prevention, and Strategic Lead for Specialist Projects. Deputy Directors for Children's Social Care/ Education are likewise experienced.</p>
	<b>Local Area Partnership SEND</b>	<p>Recommendation:</p> <p>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</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>As noted above, partnership training is embedded within the PAP. The Working Together Task &amp; Finish group leads on Workforce Development.</p>



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		the processes for referring such children for any relevant mental or physical health services that they might require.		
	<b>Local Area Partnership</b>	<p>Recommendation:</p> <p>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.</p>	Stephen Chandler/Anne Coyle/Rachel Corser	<p>Initial Response (additional progress update response to be provided in April 2024):</p> <p>There are clear governance and reporting structures, as outlined above. We can provide updates as required.</p>
	<b>Winter Planning</b>	<p>Recommendation:</p> <p>To ensure that there are adequate support measures and processes in place to support staff throughout the winter months, given the anticipated increase in demand for healthcare services.</p>	Karen Fuller/Dan Leveson/ Lilly Oconnor	<p>Recommendation Accepted:</p> <p>Response: All system partners have their own organisational support mechanisms for staff which does include, support helplines, operational huddles and if necessary more in depth support via HR.</p>
	<b>Winter Planning</b>	<p>Recommendation:</p> <p>To ensure that emergency departments are adequately resourced and staffed to cope with the prospects of increased attendances, as this could also have a knock-on effect on reducing waiting times as well as pressures on staff.</p>	Karen Fuller/Dan Leveson/ Lilly Oconnor	<p>Recommendation Accepted:</p> <p>Response: Emergency department nurse staffing levels undergo bi-daily assessments, with adjustments made during heightened activity in our Emergency Departments. In such instances, nurses may be redeployed from</p>

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				<p>other clinical areas, or NHSP/Trust pool staff may be utilised to ensure patient and staff safety, as well as the smooth functioning of the department.</p> <p>Daily reviews of medical staffing levels are conducted, and doctors are dynamically assigned to areas with the greatest need on an hourly basis.</p> <p>Additional resources are allocated as needed to facilitate ambulance off-loading, with fluctuations in deployment based on demand.</p> <p>Staffing considerations are deliberated during trust-wide safe staffing meetings and regularly communicated during operational flow meetings throughout both day and night periods. These measures aim to uphold a standard of safety for patients and staff while optimising departmental efficiency.</p>
	<p><b>Winter Planning</b></p>	<p>Recommendation:</p> <p>To seek and dedicate adequate resources for Flu and COVID-19 vaccination programmes, and to also work towards tackling vaccine-hesitancy.</p>	<p>Karen Fuller/ Dan Leveson/ Lilly Oconnor</p>	<p><b>Recommendation Accepted:</b></p> <p>Response: BOB ICB will share national and locally produced materials, supporting tailored messaging that reach specific communities: i.e. cohorts identified by UKHSA and at high risk/ of low uptake in previous seasonal vaccine campaigns. We will use the most appropriate and proven communication channels at a system level.</p>

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				<p>Place partners will also use their existing channels and contacts to reach target groups.</p> <p>Engagement and communications activities will take a flexible approach driven by regularly updated data, dealing with localised communication challenges as they arise, and sharing best practice across the region.</p> <p>Additional detailed response provided specifically from BOB ICB:</p> <p><i>“The ICB currently have numerous Access &amp; Inequality projects running throughout Oxfordshire for this Autumn/Winter campaign targeting COVID-19 vaccine hesitancy &amp; uptake through understanding barriers and dispelling myths across different populations, particularly those from ethnic minority/low uptake areas. This includes a Community Champions Project in Oxford City, where Champions are engaging with communities/populations where hesitancy is high. BOB ICB are working with the Oxford City Council to run this (through community insight) as part of a wider health promotion/protection approach to health and well-being. Cohorts being targeted as part of this include BAME populations; pregnant women; LD/SMI; homeless and asylum seekers/refugees as well as areas of high deprivation.</i>”</p>

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				<p>The ICB have supported a Maternity Champion's project running in partnership with Oxford University Hospitals (OUH) targeting hesitancy in pregnant women and aims to raise vaccine uptake within this cohort. As well as running a project with the Community Hepatology Team from OUH. They have a van that they take around the Thames Valley testing for and treating HCV, HBV, syphilis etc. They see a wide range of patients who don't otherwise engage in primary and secondary care and who wouldn't normally have access to COVID-19 vaccination. This project will allow the team to provide education regarding vaccines to these patients, addressing hesitancy and then administering them to those who want it, increasing uptake across an underserved community.</p> <p>Further projects are focused on targeting an asylum seeker hotel in Oxfordshire, where our provider will run a clinic administering vaccinations to eligible asylum seekers, who would not have had access to a vaccine prior to this clinic's development. We are also running a couple of pop-up clinics in Oxfordshire to target gaps and help increase uptake in areas where people may have difficulty accessing a vaccination.</p> <p>The ICB has worked with a provider running to support an outreach project in the Banbury area aiming to ensure all their</p>

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				<p>patients, especially those from disadvantaged backgrounds, get access to COVID-19 vaccination. These groups include BAME, learning disability, significant mental illness, asylum seekers, elderly patients with significant comorbidities and those who have poor access to IT/internet facilities and/or need English language support. As part of this the team will address any vaccine cultural barriers and hesitations with certain cohorts of patient groups (as mentioned above)."</p>
	<p><b>Winter Planning</b></p>	<p>Recommendation:  To develop robust structures and processes to support homeless individuals, particularly rough sleepers, who may be more susceptible to illness during the winter period.</p>	<p>Karen Fuller/ Dan Leveson/ Lily OConnor</p>	<p><b>Recommendation Accepted:</b>  Response: Oxfordshire has a robust approach to strategic planning and operational delivery in respect of Homelessness. The Homeless Alliance Directors Group is chaired by the Deputy Director for Housing in the County Council. This group has developed a strategic plan to address homelessness and ensuring oversight of developments and delivery at Director level. To support the Homeless pathway and to reduce the risks to those who are rough sleepers in Oxfordshire, the Out of Hospital multi-disciplinary team provide intensive support to a total of 34 step-up and step-down beds for those leaving hospital or who are at imminent risk of admission. The team has had</p>

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				<p>additional staff assigned this year including a Dual Diagnosis worker. Staff work across acute sites, the community and mental health settings providing, intensive case management. Whilst the team work all year round, priority is given to those at highest risk of harm particularly during the winter months.</p> <p>During the winter periods where temperatures drop Oxford City Council initiate the Severe Weather Emergency Protocol (SWEP) which offers additional beds to people who would otherwise be rough sleeping during the coldest nights of the year.</p>