

## HEALTH IMPROVEMENT PARTNERSHIP BOARD

**OUTCOMES** of the meeting held on commencing at 9<sup>th</sup> September at 14:00

**Present:  
Board  
members** Cllr Louise Upton, Oxford City Council (Chair)  
Cllr Maggie Filipova-River, South Oxfordshire District Council (Vice -  
Chair)  
Cllr Andrew McHugh, Cherwell District Council  
Cllr Mark Lygo – Oxfordshire County Council Cabinet  
Ansaf Azhar, Director of Public Health, Oxfordshire County Council  
Cllr Helen Pighills, Vale of White Horse District Council  
Cllr Marilyn Davies, West Oxfordshire District Council  
Rosie Rowe, Head of Healthy Place Shaping, Public Health,  
Oxfordshire County Council  
Daniella Granito, District Partnership Liaison, Oxford City Council  
Amier Al Agab, Oxfordshire Healthwatch Ambassador

**In attendance** Adam Briggs, Public Health, Oxfordshire County Council  
David Munday, Consultant in Public Health, Oxfordshire County  
Council  
Julie Dandridge, Deputy Director, Head of Primary Care, Oxfordshire  
Clinical Commissioning Group  
Dr Meena Paul, Oxfordshire Clinical Commissioning Group  
Shelley Ghazi, Policy and Partnerships Officer, Oxford City Council  
Derys Pragnell, Consultant in Public Health, Oxfordshire County  
Council  
Kate Arbuthnott, Public Health, Oxfordshire County Council

**Officer:** Julieta Estremadoyro, Oxfordshire County Council

**Apologies:** Diane Hedges, Chief Operating Officer, Oxfordshire Clinical  
Commissioning Group  
Dr David Chapman, Clinical Chair, Oxfordshire Clinical  
Commissioning Group

*Julie Dandridge and Dr Meenu Paul represented OCCG at the  
meeting*

**Absent:** Jonathan Capps, Detective Chief Inspector, Thames Valley Police

**ITEM**

**1. Welcome**

Cllr Upton welcomed to the meeting:

- Cllr Mark Lygo, Cabinet Member for Public Health & Equality, Oxfordshire County Council Cabinet
- Julie Dandridge and Dr Meena Paul representing the Oxfordshire Clinical Commissioning Group

Attending for first time:

David Munday, Consultant in Public Health who is taking the role of lead officer from Rosie Rowe

Derys Pragnell and Kat Arbuthnott from Public Health, Oxfordshire County Council

*Cllr Upton introduced herself and Cllr Filipova-Rivers as the new Chair and Vice-Chair of the HIB, elected by leaders of all the councils.*

*She also reminded members of the remit of the HIB and highlighted the role and focus of the Board on prevention on its three main priorities: Mental Wellbeing, Obesity and Smoking Cessation/Prevention.*

**2. Apologies for Absence and Temporary Appointments**

None received.

**3. Declarations of Interest**

Cllr McHugh is the Chairman of the Tobacco Control Alliance

**4. Petitions and Public Address**

There were none

**5. Notice of Any Other Business**

None

**6. Note of Decisions of Last Meeting**

The notes of the meeting held on 27<sup>th</sup> May 2021 were signed off as a true and accurate record.

Action Update:

*Diane Hedge (OCCG) to provide a report on the application of the HW report, in particular in relation to promoting access to and the role of pharmacies, for the next meeting.*

Julie Dandridge updated that community pharmacies are becoming much more part of the Primary Care Networks (PCNs) and are being embedded in service provision at local level, helping to understand how they fit in the health care system and the services they can offer to people over and above the GP. There is a good progress on this.

Ansaf Azhar updated that Public Health are carrying out a pharmaceutical needs assessment which will report to the Health and Wellbeing Board, broadly considering the needs of community pharmacies.

## **7. Director of Public Health Update on COVID 19**

Ansaf Azhar, Director of Public Health, provided a verbal update.

He announced that the way the update will be presented at future meetings will change. As from the next meeting, the focus will be on the direction of travel rather than providing detailed data. It will focus on the recovery actions regarding the Board priority areas (Mental Wellbeing, Obesity and Smoking Cessation/Prevention).

The situation of COVID 19 cases in the county is reflecting what we are seeing nationally, a gradual increase with variability among districts

(Up to date figures at <https://www.oxfordshire.gov.uk/council/coronavirus-covid-19/controlling-local-coronavirus-outbreaks/latest-figures>)

Last year rates by this time were well below these but we were escalating actions. At present, rates are higher than last year but we are deescalating, e.g., those who are fully vaccinated do not need to self-isolate. This is because of the availability of the vaccine.

Still, we all have responsibilities in our setting and need to follow good habits that we have learnt are effective such as handwashing and mask wearing. COVID-19 cases will rise because everything is open and in winter rates are likely to further increase. The efficacy of the vaccine is not 100% so it is necessary to continue taking precautions.

Key message: We are moving away from government led prevention to each setting and individual taking responsibility.

Those fully vaccinated should continue with asymptomatic testing. The PCR testing will continue, and people are encouraged to take the test regularly to stop the chain of transmission.

The City has come out of enhanced response measures in mid-August as it has been successful in containing the rise of cases. Thanks to all partners for actively and decisively containing the pandemic in the city.

### Comments/Questions:

#### *Hospitalisation and/or serious infections in fully vaccinated people*

At the moment there are 50 hospitalisations for COVID 19 made up of people who received only the first dose and those not vaccinated. Analysing data in that small sample would give inaccurate result. This is replicated at national level.

When most of the population is fully vaccinated, hospital beds would be occupied by the small percentage of fully vaccinated people that did not build enough resistance to the disease (Cllr McHugh/Ansaf Azhar)

Cllr Lygo and Ansaf Azhar thanked all the agencies and people involved in the COVID 19 responses in the county.

## **8. Performance Report – Effect of COVID 19**

Ansaf Azhar referred to the document *Performance Report* (page 11 in the agenda pack)

The performance report covers the overarching priorities in the full life cycle starting from Start Well to Aging Well indicators.

There are six indicators in Living Well that are red; this is quite concerning but the data is reporting Q3 of 2021 during the lock down when services were still halted. There are discussions ongoing happening on how those services will restart and how effective the restart would be to minimise the long impact of Covid.

David Munday added that the intention is to review the performance report so that it focuses more on these priorities with the potential for a deep dive on these three areas (Mental Wellbeing, Obesity and Smoking Cessation/Prevention). The new dashboard will be brought to the Board for discussion.

Comments/questions:

### *Mental Health - CAMHS*

Mental Health is an important community issue and the long waiting times for CAMHS an indicator of the dire need for this service. However, there needs to be more upstream interventions that prevent young people from reaching CAMHS services. Improving CAMHS performance is being discussed at different levels and in other boards (Cllr McHugh/Ansaf Azhar)

### *Single Homelessness Pathway*

There has been progress in moving people into independent tenancies. Having a roof over their heads would significantly improve the physical and mental health of these people (Cllr Upton)

### *Women's Health Indicators*

There are three red indicators affecting women's health issues. We need to be aware of this and consider this in future performance reports (Veronica Barry/Ansaf Azhar)

*David Munday requested members to put forward suggestion regarding the performance report and what would be important to be reflected there.*

## **9. Report from Healthwatch Oxfordshire Ambassador**

Amier Al Agab went through the paper *Healthwatch Oxfordshire Report to Health Improvement Partnership Board* (page 17 in the agenda pack)

Amier highlighted the role of Oxford Community Action is one BAME organisation in Oxford providing valuable feedback that informed the reports that are presented to the Board. He also acknowledged the commitment of all members and partners agencies around the table

that are implementing the suggestions in the work they do and listening to the voice of the communities in the county.

He also highlighted the 28 reports available to read at the Healthwatch Oxfordshire website

Comments/questions:

Cllr Upton congratulated Healthwatch Oxfordshire on their annual report that shows the breadth of the activities undertaken and the concerns that are brought to the Board most of which are heard and followed up.

*GP waiting times*

Members of the Board discussed the possible cause of the significant problem with GP waiting times:

- Problems with staffing - GP and admin staff leaving practices (Cllr Upton)
- Backlog from the lockdown period that is appearing now, putting pressure on practices to deal with people who sat on their problems during the lock down period and are presenting now. (Julie Dandridge/Meena Paul)
- Phone conversations are more now than in normal times, problems that could be resolved through pharmacies are brought to GP practices. There is an educational piece to be done there (Meena Paul)
- OCCG is monitoring the number of appointment available and trying to bring them to a pre-pandemic levels and even higher. GP practices have implemented new ways of working and phone consultations are combined with face-to-face appointments. (Julie Dandridge)
- Healthwatch Oxfordshire is looking at GP websites and looking how to better streamline information and in general to map services so people have more guidelines on which services are more convenient to use, reducing the levels of frustration (Meena Paul)
- There is another piece of work being carried out by Healthwatch looking at the barrier to access GP and NHS services that will be concluded by November. There are people giving up in the NHS because the problems of getting through on the phone, some of them struggling with the English language (Veronica Barry)
- Some BAME people suffering from mental health issues are ashamed to ask for help because of language barriers. Some of these people have been living in UK for a long time and fear being judged on their lack of English language competency. There is work going on with the communities to try to address these issues. (Amier Al Agab)

**10. Tobacco Control plans for 2021/22**

Adam Briggs and Ansaf Azhar commented on the report *Oxfordshire Tobacco Control Alliance Action Plan, 2021/22* (page 55 in the agenda pack).

Ansaf emphasised the importance of this area of work as a key priority area for the Board. The progress on this preventative agenda is based on a partnership approach so it is relevant to everybody in the Board. Smoking remains the single biggest risk of early mortality in the country. Approximately 80,000 people die every year due to smoke related health issues, this is a higher number than people dying from COVID 19.

Adam went through the Action Plan in Appendix 1 (page 57 agenda pack) that is going to be pursued with partners in the following months and represents key opportunities. He mentioned as an example NHS colleagues who are embedding their smoke free ambition within their organisation with their own staff.

Adam spoke about the pillars that were presented in the past report to the Board. This can be found here:

<https://mycouncil.oxfordshire.gov.uk/documents/s55840/Item%2010%20-%2020210512%20HIB%20Paper%20Tobacco%20Control.pdf>

Comments/questions:

Cllr Filipova-River congratulated Adam for the Action Plan that clearly points out what district councils and other stakeholders can do. This is really appreciated as it informs ideas for future implementation and funding.

*Implementation in different settings*

- Districts can look at the opportunity of training for staff based at Leisure Centres and play areas (Cllr Filipova-River/Adrian Briggs)
- Implementation of more banners in school gates with key messages. This is not in the action plan but could be incorporated (Cllr Lygo/Adrian Briggs)
- More work to be done with sporting associations (Cllr Lygo)
- Working with our own staff on smoking cessation, removing spaces for smoking outside premises (Cllr Lygo)

*E-cigarettes, vaping*

Role of e-cigarettes to help quit smoking. How relevant is providing an outdoor space for staff to use e-cigarettes. Vaping is a small part of the strategy to support people to reduce the harm of smoking tobacco (Cllr Davies/Adam Briggs)

E-cigarette high street shops are closing and moving to online trade. How can these be regulated e.g. the amount of nicotine that is allowed to be vaped? There has been work with shops to make them aware of the regulations and there is intention to work with the online regulators too (Cllr Pighills/Adam Briggs)

*Groups with high prevalence of smoking*

There is intervention work to be done and develop in those hard-to-reach groups such as people with mental health problems and manual workers (Ansaf Azhar)

*Adam asked members if they have further questions or suggestions for the strategy please let him know.*

## **11. Mental Health and Mental Wellbeing: Mental Wellbeing Needs Assessment**

Kat Arbutnot referred to the paper *Report on the Mental Wellbeing Needs Assessment* (page 61 agenda pack)

She went through the following presentation:



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The assessment has been carried out mainly through the COVID pandemic and has been influenced and informed by this situation.

#### Comments/Questions

##### *Mental Health problems in adolescents*

There is an epidemic of mental health problems in adolescents because of the lockdown. There are some Covid related funds that can be used to implement some measures. At the moment, all the strategies are developed around schools. (Cllr McHugh)

This is an important item in the agenda of the Health and Wellbeing Board. Implementing actions upstream to reduce demand, preventing children arriving at the point of having to be seen by CAMHS whose waiting list is approximately two years. Key interventions and discussions are happening with the relevant partners (Ansaf Azhar)

##### *Mental Health in rural areas*

Reports on the issues are not considering the difference between urban and rural settings. West Oxfordshire do not have adequate provision in terms of mental health services and it is a real worry particularly in relation to young people. In rural areas problems of lack of social connections and isolation are stronger. Is it possible to develop a similar plan of action as the Tobacco Strategy? (Cllr Davies/Cllr Filipova-River)

##### *Developing a strategy*

It is very important to get community insight in order to develop those recommendations and feed into a Wellbeing/Mental Health strategy (Amier Al Agab/Ansaf Azhar)

How are we tracking the progress in tackling mental health issues? – Very important to develop a way of monitoring the progress and embed it into the performance report (David Munday)

## **12. Domestic Abuse Strategy**

Kate Holburn went through the document *Strategic Update for Domestic Abuse* (page 69 in the agenda pack)

#### Comments/Questions:

Cllr Upton congratulated Kate on the fact that a need assessment is being undertaken - this is great news.

What is the level of funding that is being provided? The Ministry of Housing, Communities & Local Government has provided £1.1 million additional funding this year that we did not have in previous years. (Val Messenger/Kate Holburn)

This money is partly funding a consultant to implement the recent domestic abuse review in the City and also a Domestic Abuse worker embedded in the housing team at the city. It also will fund the training of housing staff in domestic abuse in other districts (Cllr Upton/Cllr Davies)

Important to use the money to close the gap of provision of Domestic Abuse services in rural areas (Cllr Lygo)

Kate informed the meeting that she sits on the Oxford Community Safety Partnerships that has links into the strategic board. Cllr Pighills chairs the community safety partnership in her district.

Ansaf Azhar highlighted the importance of completing a comprehensive needs assessment as an important piece of work to get things rights and develop the right strategy.

**13.AOB**

None was raised