

## DPH Annual Report on 2017-18 recommendations for 2018-19

| Recommendation  | Update   | Updated by:    |
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| <b>Chapter 1: Meeting the Demographic challenge Recommendations</b>   |  |                |
| <p>1. The Health and Wellbeing Board should develop as a priority a Joint Health and Wellbeing Strategy which embraces the philosophy of 'population health management' as well as creating a new strategy for older people and targeting inequalities.</p> | <p>Revised terms of reference and membership of the Health and Wellbeing Board were approved in May 2018 and a Joint Health and Wellbeing Strategy was developed and approved in March 2019. This includes priorities on prevention / healthy place shaping and population health management. The strategy as presented to the Board for approval can be found on the HWB web pages<sup>1</sup></p> <p>In addition the Prevention Framework was approved in September 2019 (see no. 3 below). This document explains and recommends the use of Population Health Management methodology to segment the population and identify risk groups.</p> <p>The Older People Strategy was approved by the HWB and is now being implemented through the work of the Joint Management Group for Older People and a wide range of partners.</p>  | <b>Jackie</b>  |
| <p>2. Joint work between the NHS, County Council and District Councils to get health and wellbeing issues into the planning of places and highways should continue apace.</p>   | <p>Healthy Place Shaping was accepted as a principle of the Growth Agenda at the Growth Board in November 2018. As a result there is considerable influence of the content of relevant new policies of the Growth Deal, including the Joint Strategic Spatial Plan, Local Industrial Strategy and Local Transport Plan.</p> <p>The paper setting out the principles to the Growth Board can be seen here: <a href="http://democratic.southoxon.gov.uk/documents/s15261/Healthy%20place-shaping%20in%20the%20wider%20growth%20agenda.pdf">http://democratic.southoxon.gov.uk/documents/s15261/Healthy%20place-shaping%20in%20the%20wider%20growth%20agenda.pdf</a></p> <p>IN addition to influencing opportunities arising from growth, healthy place shaping principles are also being incorporated in the Council corporate priorities that relate to how are day to day services are being targeted and delivered.</p> | <b>Richard</b> |

<sup>1</sup> <https://www.oxfordshire.gov.uk/sites/default/files/file/constitution/oxfordshirejointhwbstrategy.pdf>

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| <p>3. Work already begun to coordinate preventative services better between all Local Authorities, the NHS and Social Care should continue as a priority.</p>   | <p>The Joint Health and Wellbeing Strategy includes cross cutting priorities on Prevention and Tackling Health Inequalities. A strategic and practical tool to take this work forward has been approved called the Prevention Framework. This sets out the rationale, evidence and priorities for preventing ill health and tackling health inequalities and was approved by the Board in September 2019. It can be found here: <a href="https://www.oxfordshire.gov.uk/sites/default/files/file/plans-performance-policy/OxfordshirePreventionFramework_.pdf">https://www.oxfordshire.gov.uk/sites/default/files/file/plans-performance-policy/OxfordshirePreventionFramework_.pdf</a></p> <p>Prevention is also supported by Population Health Management, and a PHM steering group made up of representatives across the NHS was introduced in 2019 to ensure this approach is embedded in strategies going forward.</p>   | <p><b>Jackie / Kate</b></p>   |
| <p><b>Chapter 2: Creating Healthy Communities Recommendation</b></p>  |   |                               |
| <p>Leaders of all organisations should continue to find ways of keeping the learning from these initiatives alive until the long-term benefits emerge, and they should continue to explore ways to generalise the learning, making it an integral part of the planning system for new developments and for health services.</p> | <p>An event was held for leaders from across the County in April 2018 to share learning from the Healthy New Town programmes.</p> <p>Since then a national publication on learning from the Healthy New Towns have been published, including contributions from both Bicester and Barton. <a href="https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/">https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/</a> Also contributions from Barton to the TCPA Garden City Standards for the 21<sup>st</sup> Century – Edible Cities <a href="https://www.tcpa.org.uk/Handlers/Download.ashx?IDMF=86856eed-1c5e-41bc-9ec4-340ec5a47281">https://www.tcpa.org.uk/Handlers/Download.ashx?IDMF=86856eed-1c5e-41bc-9ec4-340ec5a47281</a></p> <p>A healthy place shaping workshop was delivered to the County Council Senior Managers Forum on 25<sup>th</sup> September 2019.</p> <p>In 2019-20 a series of Masterclasses on Healthy Place Shaping are being held in each district of Oxfordshire. Principles of healthy place shaping are now embedded in policy documents related to planning. Learning from the Healthy New Towns has been published and is being adopted across the county. The first healthy place shaping masterclass focusing on the County Council links with Cherwell DC was held on 29<sup>th</sup> November. There are more masterclasses planned with the next one focussing on West Oxfordshire.</p> | <p><b>Richard, Kate A</b></p> |
| <p><b>Chapter 3: Breaking the Cycle of Disadvantage Recommendations</b></p>   |   |                               |
| <p>1. The Health and Wellbeing Board should ensure that dealing with inequalities features prominently</p>  | <p>The new Joint Health and Wellbeing Strategy includes a cross cutting theme of Tackling Health Inequalities. This was accepted by all partners and evidence based options for implementation are set out in the Prevention Framework and</p>  | <p><b>Jackie</b></p>          |

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| <p>in the new Joint Health and Wellbeing Strategy and that all health and social care and public health strategies plan for such reductions.</p>  | <p>by the Health Inequalities Commission Implementation Group. The latter are now working to embed good practice in commissioning, policy development and work programmes to ensure tackling inequalities is more embedded in “business as usual”.</p> <p>A simple methodology for putting this into practice is being presented to all partner organisations, emphasising the need to identify health inequalities on every topic and address these as a priority.</p>  |                                |
| <p>2. The basket of indicators of inequalities in childhood should be reported in the DPH annual report next year.</p>  | <p>These are updated where possible and reported via the Joint Strategic Needs Assessment if appropriate. They have not been reported in subsequent DPH annual report as the new DPH has a different focus for his first report.</p>   | <p><b>Sue, Philippa</b></p>    |
| <p><b>Chapter 4: Lifestyles and Preventing Disease Before It Starts Recommendations</b></p>   |  |                                |
| <p>1. The Health Improvement Board should continue to coordinate this work and ensure that the Health and Wellbeing Board retains an overview. The current emphasis on prevention within the NHS is very promising.</p> | <p>The Health Improvement Board have agreed a wide-ranging set of priorities to address healthy lifestyles and wider determinants of health to prevent disease. These priorities are embedded in the Joint HWB Strategy and implementation is informed by Prevention Framework. The top priority of preventing Cardiovascular disease is being discussed by partners so that each organisation can formulate its own plan.</p> <p>NHS contributions to this agenda are developing well and are benefitting from monthly meetings between the CCG and Public Health on Prevention. There has also been good influencing of the new OUHFT strategy to show the Trust’s contribution to the whole Prevention agenda.</p> <p>BOB ICS level prevention work continues to influence local NHS plans on prevention, aiming to implement the initiatives set out in the NHS Long Term Plan. This workstream is now chaired by the Oxfordshire DPH.</p> | <p><b>Jackie</b></p>           |
| <p>2. All organisations should work together to generalise the benefits of initiatives such as the Healthy New Towns and find a way to build health issues squarely into the planning process.</p>                      | <p>Healthy Place Shaping has been taken forward, building on the learning from Healthy New Towns and influencing the Growth Agenda (see above). Cherwell DC and the County Council are working together to realise opportunities with the Growth Agenda and participate in roadshows and learning events e.g for planners.</p> <p>A recent example is “K5 Better Together” (Kidlington and the surrounding villages) which aims to roll out the learning from Bicester Healthy New Town.</p>   | <p><b>Richard (Jackie)</b></p> |

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|  | Bids for funding for influencing planning departments and increasing community activation have included successful responses from Sport England. Two separate projects are being delivered - increasing the work with all districts in planning over the next 3 years and increasing the participation in physical activity for families in more deprived communities in Banbury.   |                           |
| ➤ The Health Improvement Board should continue to monitor activities of local stop-smoking services and wider agencies to help people quit smoking and also not to start in the first place.   | <p>The Health Improvement Board receive a regular Performance Report/Dashboard that includes an indicator (2.1) that measures the number of quitters per 100,000 adult population that are registered as smokers.</p> <p>In November 2018, a report on the Oxfordshire Tobacco Control Alliance (OCTA) was presented to the Health Improvement Board and provided the Board with an outline of the OCTA and its purpose, this includes activities to reduce tobacco usage in the County including work to discourage people from starting smoking.</p>  | <b>Eunan</b>              |
| ➤ The Oxfordshire Tobacco Alliance should develop coordinated plans to reduce the use of tobacco in Oxfordshire.   | The Tobacco Control Plan for England recommended that, prior to developing local Plans, the Tobacco Control Alliances participated in a CLeaR assessment ( <b>C</b> hallenge, <b>L</b> eadership and <b>R</b> esults) – a ‘deep dive’ self-assessment tool aimed to provide a stock take on current tobacco control work. The CLeaR assessment was completed in 2018/19 and externally peer reviewed in March 2019. This has identified new actions that has fed into a five year Tobacco Control Strategy is currently being developed by the OCTA. The strategy is planned to be open to consultation with the public in March/April 2020 | <b>Eunan</b>              |
| <p><b>Recommendations for NHS Health Checks</b></p> <p>The first five years of the NHS Health Check programme have been a success locally and is well embedded in the health system. While it is well received by the public, we cannot be complacent. 50.4% of people offered had their free health check which is commendable, but 49.6% of people didn’t. We need to reach out to these people and do more to encourage them to have a free health check. The concerted efforts to raise the profile of this programme with the public and improve on the programme must be maintained. In order to achieve this the public health team should:</p> |   |                           |
| 1. Continue to market the NHS Health Check programme in new and innovative ways which take advantage of emerging technologies.   | The Commissioners of the NHS Health Check Programme, in partnership with the Councils Communications Team have continued to market the NHS Health Check Programme in new and innovative ways. A 2018/19 6-month campaign evaluation provided evidence of which communication channels/techniques had  | <b>Eunan,<br/>Stephen</b> |

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|   | <p>been most effective and was used inform where the greatest return on investment was.</p> <p>At 6 months there was an increase of visits to the NHS Health Check webpage of 167%. There was also a reach of 84,433 on Facebook, 1,600,053 impressions, 20,360 video views and 24,265 engagements and Twitter impressions were 59,789. There was media coverage and editorial in BBC Radio Oxford, This is Oxfordshire, Oxford Mail, Oxford Times, Jack FM, Puritan Radio, Banbury Guardian and Banbury Sound</p>   |                                  |
| <p>2. Continue to work with GPs to improve on the uptake of the offer of a free NHS Health Check.</p>       | <p>In 2018/19, the Commissioners of the NHS Health Check Programme have increased the number of Checks completed up to 31<sup>st</sup> December 2018 by over 800 when compared to the same timeframe in 2017/18.</p> <p>In 2018/19, 100% of GP Service Providers have been visited by Commissioners and have been quality assured against National Programme Standards. This aims to ensure that the local NHS Health Check Programme is delivered safely and to a consistently high quality at every step of the pathway. By assuring compliance, specifically to the Invite and Offer elements, GP Service Providers are able to improve their uptake. Oxfordshire remain national exemplars for this example of best practice.</p>  | <p><b>Eunan,<br/>Stephen</b></p> |
| <p>3. Better identify and engage with high risk groups to take up the offer of a free NHS Health Check.</p> | <p>In 2018/19, building on the outcomes from Healthwatch's Men's Health Report, a Health Equity Audit (HEA) of the NHS Health Check Programme in Oxfordshire for a full five-year cycle (from April 2013 to March 2018) was completed. This was the first known of this type to be completed in England and was able to identify the high-risk groups that were less likely to take up the offer of a free NHS Health Check in the County.</p> <p>Whilst the HEA demonstrated an overall thriving NHS Health Check Programme in Oxfordshire, there is room for improvement. After receiving an NHS Health Check offer, older people, women and White people were more likely to receive an NHS Health Check than younger people and men. Socially deprived individuals are also less likely to receive an NHS Health Check. This is important because men and deprived individuals all experience higher than average rates of cardiovascular disease, and therefore stand to benefit most from NHS Health Checks.</p> | <p><b>Eunan,<br/>Stephen</b></p> |

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|  | A key recommendation from the HEA was for Commissioners to fully understand the reasons why younger men and deprived individuals were less likely to take up the NHS Health Check offer despite their increased risk. In 2018/19, a piece of qualitative research was commissioned. The results from this qualitative work has informed communications and marketing for NHS Health Checks and targeted campaigns have been rolled out.  |                  |
| <b>Recommendations re oral health</b>  |  |                  |
| The Director of Public Health should continue to monitor trends in tooth decay.                                  | Public Health continue to commission dental surveys in line with the PHE Dental Health Intelligence Programme. The continued participation in the national surveys provides oral health data which is comparable to regional and national data.  | <b>Eunan</b>     |
| A new oral health service should be commissioned which aims to train front line workers in oral health promotion | The public health team conducted a tender process in Jan- March 2019 and have awarded a contract for the provision of OHP which includes provision of training of frontline staff in oral health. This contract commences 1 <sup>st</sup> May 2019 and is for four years with an option to extend for a further two years.   | <b>Eunan</b>     |
| <b>Chapter 5: Promoting Mental Wellbeing and Positive Mental Health Recommendations</b>                          |  |                  |
| 1. There is good activity across the County. This now needs to be taken to the next level.                       | <p>There has been good progress made for mental wellbeing.</p> <ul style="list-style-type: none"> <li>• We are co-producing a Suicide and Self-harm prevention strategy for Oxfordshire, through online consultation and focus groups with different groups. The strategy is now out for consultation with the aim to publish the final version in the Spring 2020.</li> <li>• The Children's Trust have made C&amp;YP's social, emotional and mental wellbeing a priority and it forms part of the workstreams for their Action Plan. Prevention of mental health issues has been suggested as the focus for year 3 of the action plan 2020-2021.</li> <li>• Both OSCB and OSAB have received yearly updates on self-harm and suicide prevention providing updates on progress.</li> <li>• The self-harm networks for C&amp;YP are established across Oxfordshire.</li> <li>• There was a conference in May 2018 organised by Public Health on behalf of the Children's Trust for professionals about Self-Harm.</li> <li>• MIND and Oxfordshire Youth delivered a 'Youth in Mind' Conference in March 2019 where Public Health presented alongside Oxford Health, Voluntary Sector, LCSS. A follow-on conference is being organised for March 2020.</li> </ul> | <b>Donna Sal</b> |

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|   | <ul style="list-style-type: none"> <li>• Oxfordshire County Council has delivered Mental Health First Aid training to employees to provide support for mental wellbeing to colleagues.</li> <li>• The work of Cruse of Oxfordshire will be showcased at the National Suicide Prevention Alliance Conference in Sept 2019. This is part of the postvention bereavement support provided to families and Public Health have contributed funding to deliver the pilot.</li> <li>• OCCG were successful in securing an additional money to provide more capacity in CAMHS to implement a 4 week wait pilot and mental health support in schools. Oxfordshire was successful in securing wave 1 (Oxford City) and Wave 2 (Banbury/Bicester) funding. This is a joint project with OCCG, Oxford Health, Schools, Public Health, LCSS, Voluntary Sector. We are hopeful that Wave 3 funding will be announced so we can focus on the south of the county.</li> <li>• Oxfordshire has been successful in attracting new funding (£90K) across Thames Valley for Postvention support for families following suicide, this is in partnership with Thames Valley Police and Cruse</li> <li>• Real time surveillance developed in Oxfordshire continues to be showcased both regionally and nationally. Presentation being delivered in Hertfordshire in January 2020 to share best practice.</li> <li>• Public health have been work with Coroners, Local Media and Samaritans for sensitive reporting of deaths by suicide in the media and have had several stories changed to reduce the risk of upset for the families but also contagion for families, friends, local communities</li> <li>• Development of Perinatal mental health support for new mothers, partnership with Oxford Health and Oxford University Hospitals Trust</li> <li>• Oxfordshire online schools health and wellbeing survey delivered in 2019 – partnership with Foster &amp; Brown Research, University of Oxford and OCC. Plans are underway to complete the survey in 2020 and 2021. Individual results provided to schools and Public Health will share county level information. We are exploring this being available on the JSNA website.</li> </ul> |                         |
| <p>2. The Health Improvement Board should receive a specific Joint Needs Assessment on mental health issues alongside this annual report and should use</p> | <p>The JSNA for Mental Health has been published on the Oxfordshire Insights for all to use. Data was incorporated into the updates provided to HIB on mental wellbeing during 2018/2019. It was also a key driver for the application to sign up for the PHE prevention Concordat and for the mental health support teams in schools pilot.</p>  | <p><b>Donna Sue</b></p> |

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| these to direct planning by the end on 2018/19   | The HIB agreed that mental wellbeing should be one of its priorities.   |  |
| 3. The Health Improvement Board should coordinate this effort and should create a new framework for mental health promotion activity by the statutory sector and beyond. | The HIB and HWB has signed up to the Public Health England Prevention Concordat, with 15 partners including statutory and third sectors. Oxfordshire is the first area in the South East to achieve this. The next stage is to develop Oxfordshire's Mental Wellbeing Framework for action and report to the HIB in Spring 2020. Working group has been established and mapping is underway to identify all initiative in the county. | <b>Donna,<br/>Jannette,<br/>Claire</b> |
| <b>Chapter 6: Fighting Killer Diseases Recommendation</b>  |   |  |
| The Director of Public Health should report on progress of killer diseases in the next annual report and should comment on any developments.                             | The lead for health protection continues to ensure that the Health Protection forum meets regularly to interrogate local activity and discuss any arising issues of concern. Eunan O'Neill presented a report on the health protection forum to the Health Improvement Partnership Board in September 2018. Another paper is scheduled to be presented to the Board in February 2020.   | <b>Eunan, Sue</b>                      |