





HEALTH IMPROVEMENT PARTNERSHIP BOARD

OUTCOMES of the meeting held on 10th September commencing at 14:00 and finishing at 16:25

Present: Cllr Andrew McHugh, Cherwell District Council

Board members Cllr Louise Upton, Oxford City Council,

Ansaf Azhar, Director of Public Health, Oxfordshire County

Council

Cllr Lawrie Stratford, Oxfordshire County Council Cllr Helen Pighills, Vale of White Horse District Council Cllr Michele Mead, West Oxfordshire District Council

Kiren Collison, Clinical Chair of Oxfordshire, Oxfordshire Clinical

Commissioning Group

Daniella Granito, District Partnership Liaison, Oxford City Council Diane Hedges, Chief Operating Officer, Oxfordshire Clinical

Commissioning Group

Jonathan Capps, Detective Chief Inspector, Thames Valley

Police

Cllr Maggie Filipova-Rivers, South Oxfordshire District Council Andy McLellan, Healthwatch Oxfordshire Ambassador (Rosalind

Pearce deputising)

In attendance Jaffa Holland, Chair of the Housing Support Advisory Group

Gillian Douglas, Assistant Director, Housing and Social Care

Commissioning, OCC and Cherwell District Council

Kate Holburn, Head of Public Health Programmes, OCC

Rosie Rowe, Healthy Place Shaping lead, Cherwell District

Council

Alan Web, Chair of Trustees, Active Oxfordshire Paul Brivio. Chief Executive, Active Oxfordshire

Alison Vickers, Project Manager, National Energy Foundation

Officer: Julieta Estremadoyro, Oxfordshire County Council

Apologies: Eunan O'Neill, Consultant in Public Health, Oxfordshire County

Council

Val Messenger, Deputy Director of Public Health, Oxfordshire

County Council

ITEM	ACTION
1. Welcome	
Cllr McHugh welcomed Jonathan Capp, new Thames Valley Police representative, replacing	
Claire Knibbs.	
2. Apologies for Absence and Temporary Appointments	
Apologies received as per above.	
3. Declaration of Interest	
Cllr McHugh made everybody knows that he is the Chair of the Oxfordshire Tobacco Control Alliance	
Tobacco Control Alliance	
4. Petitions and Public Address	
There were none	
5. Notice of Any Other Business	
Cllr Stratford made known that he intended to comment on the number of the	
agenda items.	
6 Note of Decisions of Last Meeting	
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The notes of the meeting held on 14^{th} May 2020 were signed off as a true and accurate record.	
Actions from 20th February meeting:	
Item 10 – Preventing Cardiovascular Disease	
Explore having a future agenda item on local Clean Air initiatives –In the Forward	
Plan	
Item 12. Priorities and targets for 2020-21	
A draft proposal for performance monitoring, reflecting these comments, will be	
brought to the next meeting for discussion and approval – For a future meeting.	
Update on the situation of COVID 19 in Oxfordshire by the Director of Public Health, Ansaf Azhar	
4 points were highlighted:	
4) TI (00)/ID 40	
The raising numbers of COVID 19 cases— At national level, we are at critical point. The case out of the lock down.	
At national level, we are at critical point. The ease out of the lock down	
with people mixing together and not following social distancing rules have been the cause of this. This increase is also happening in the rest of	
Europe.	
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Oxfordshire as a county is on 15.2 weekly cases per 100,000 population but Oxford City is at 26.9 and it is in amber. There is a Surveillance Unit monitoring the situation closely.

Up to date information for Oxfordshire can be found here: Cases in Oxfordshire

2) Issues with testing

This is also a national problem due to the high raise in demand for testing. It has affected Oxfordshire in particular. The message to put out is that the test is done when a person is symptomatic. Oxfordshire has recently secured a testing unit located in Oxford Brookes Campus and is for access of all residents. The other site to open soon will be in Banbury. This will enhance the testing capacity.

3) Universities

Significant measures have been implemented to allow a safe come back of students to the City, including online classrooms. There is a big campaign for students to be sensible and respect the rule of six and social distancing. This situation is being monitored closely.

4) New guidance

As with the rest of Europe, socialising has been the biggest cause for the recent increment on COVID 19 cases. Belgium has taken decisive actions to control it and it is stabilising there. In UK, the government new guidance is that not more than six people can interact, and this rule is legally enforceable without exception. It has been a good timing as Universities start receiving students again.

Government guidance on the rule of 6

Comments/questions:

Concerns were expressed about large gathering of people e.g. Eid and the next winter celebrations such as Christmas (Cllr McHugh). It was clarified that in Oxfordshire, Eid has not produced the raise in cases and that there was a good communication with and cooperation from communities that were celebrating Eid (Kiren Collison). One of the risk factors is crowded accommodation, but this could happen in any social group. Regarding Christmas, the testing capacity will be enhanced by them and will be a national campaign if necessary (Ansaf Azhar)

Public confusion about the rule of six - A private party in a pub cannot be larger than six and not more than six people can be seat together in a table in a pub. There are very few exceptions. District councils can help spreading the message clearly. There is work going on with district councils and county councils' officers about communication of the guidance. The DoPH is also waiting to hear clarification regarding places of work that run e.g. yoga classes. (Cllr Pighills/ Cllr Fillipova-River/Ansaf Azhar)

University Students - The population of Oxford grows by 20% with the return of the students to the Universities. Residents are worried. Both universities are trying to mitigate the risks offering testing services. Oxford Brooks with the help

of the NHS offering test to residents too and University of Oxford offering test to staff and students. The rule of six has arrived in good time to stop e.g Fresher's activities or/and students parties. The message is being reinforced. Good liaison with universities (Cllr Upton/Cllr Stratford/Ansaf Azhar)

Enforcements – Information on marshals and wardens with enforcement capacity. These were announced for first time at the Prime Minister briefing and no further details were released. There are environmental officers working in the districts with businesses some of these functions could overlap (Andy McLellan/Ansaf Azhar)

Ansaf Azhar thanked all the teams from the different organisations working collaboratively in the responses to COVID 19.

Cllr McHugh congratulated all in their efforts on behalf of the Board.

7. Performance Report - Effect of COVID 19

Ansaf Azhar referred to the document *Performance Report* (page 13 of the agenda pack)

The impact of COVID 19 has started to be seen in the indicators, particularly on the uptakes of health screenings, flu vaccinations, NHS health checks among others. Part of the recovery plan is to improve preventive services on the back of this. Critical working needs to be done. There are lessons to learn from the responses to COVID 19 that highlight the importance of targeting the 10 most deprived wards.

There are a couple of errors in the report – Section 1.15 children obese – should be amber. 3.18 Breast screening – The District Councils and City numbers are not correct. The overall for the county is correct but there is not a breakdown for the figures.

Comments/questions:

- 1.15 Maintain the levels of children obese in reception class 7.8% Members of the Board expressed their deep concern on the number of seriously overweight children in the county that would be the cause of them having health problem for the rest of their lives. This is only going to get worse if the programme has stopped (Cllr Upton). The word "maintain" should be changed to "reduce" (Cllr McHugh). The family unit should be targeted with intervention programme such the FAST programme (Families Active Sporting Together) (Cllr Stratford). Language that could be regarded as offensive such as the word "fat" should not be used (Cllr Fillipova-River). Children in the 10 most deprived areas should be the focus of actions regarding this (Ansaf Azhar).
- 2.16 Reduce the Percentage of the population aged 16+ who are inactive (less than 30 mins / week moderate intensity activity) target 18.6% (Cherwell 19.6%, Oxford 14.1%, South Oxfordshire 18.9%, Vale of White Horse 14.8%, West

Oxfordshire 23.1%.) – The disparity in the data among districts can be explained when looking at the wards. Socioeconomic factors make difficult for people to adopt healthy lifestyle. Age is also a factor and in West Oxfordshire there is fewer young people (Cllr Fillipova-River/Ansaf Azhar)

Cervical Screening (2.2) This screening has historically been poor and there has been a report card present at a past HIB meeting. This is a priority in the recovery agenda and will be back to the Board. (Cllr Upton/Ansaf Azhar)

Effects of COVID 19, recovery and inequalities – Health screenings have always been a challenge from the OCCG point of view too but made worse by the situation with COVID 19. There is a need for a joint effort from OCC and OCCG to share what it has worked and what can be done better. Some programmes have been suspended (e.g. child obesity) but this is the moment to think what the resources are available and how these can be redeployed. The longer a programme is suspended the longer would take to come back. Obesity in general is a problem that needs to effectively be targeted in the 10 wards mentioned. Is FAST running in the most deprived areas? Because it happens that people who need more the services are the less likely to get them. The drivers of inequalities need to be looked at: the place of residence, the environment, the social circumstances where people find themselves. In this sense the Healthy Place Shaping agenda is massively important with the involvement of Public Health, planning teams and District Council colleagues. The JSNA needs to be considered and translated into tangible actions where everybody plays a part. (Diane Hedge/Ansaf Azhar)

8. Director of Public Health Annual Report

Ansaf Azhar referred to the report available at https://www.oxfordshire.gov.uk/sites/default/files/file/public-health/PublicHealthAnnualReportMay2020.pdf

Ansaf explained that this was his first annual report and that while the county as a whole was doing well on health and wellbeing indicators, when digging deep in the data it was possible to find 10 wards that were among the 20% most deprived in the country with the same indicators showing a completely different picture. For instance, the gap in the life expectancy is as big as 15 years among the county. Ansaf wanted to highlight this in his report.

These inequalities have been put in evidence during the COVID 19 outbreak that has impacted the communities in a very different way. Upstream prevention is needed. There is a tangible progress like the work in CVD led by Kiren Collison trying to tackle high blood pressure among the population in an early stage. Another important action is the Oxfordshire Tobacco Control Alliance that not just considers the health implications but addresses other drivers of inequalities such as the environment and social circumstances. With this approach it is possible to make a real difference.

Cllr McHugh asked the Board members that if they had further question to send it to Julieta Estremadoyro at

Commissioning.ParntershipBoard@Oxfordshire.gov.uk

9. Report from Healthwatch Oxfordshire Ambassador

Andy McLellan referred to the document *Healthwatch Oxfordshire – Brief Note to the Health Improvement Board* (page 17 in the agenda pack)

Healthwatch has experienced as significant reduction of activities due to COVID 19 restrictions. There have not been interim reviews and meeting face to face were suspended. There has also been changes of staff with new members in the organisation that are not still up to speed.

They will have a Board meeting soon to review plans and programme new activities. They did focus on strategy in social care and have some surveys going on.

What they are hearing from communities and individuals is that there is a lot of confusion and frustration regarding the handling of COVID 19. They feel that health and social care services are losing contact with patients, carers and communities.

COVID 19 communications are very confusing. This has impact in the waiting list in the NHS further exacerbated by reorganisations such as the creation of Primary Care Network (PCN), the Integrated Care Networks (ICNs) with the result that people does not know what it is happening. Most Patient Participation Groups (PPGs) are not active because people cannot make them work. Public points of views are not received.

Diane Hedges clarified that there is a clear plan of recovery and the ambition is that people return to practices and to out of patients' appointments but in a different way that respond to the current situation. She proposed to meet with Healthwatch Oxfordshire representatives to discuss how to communicate this better and improve the situation. Andy McLellan will pass the invitation to Rosalind Pearce.

10. Drug and Alcohol Partnership Strategy

Kate Holburn presented the *Drug and Alcohol Partnership Strategy 2020 – 2024* (page 21 in the agenda pack)

Most of the work on the strategy was done towards the end of the last year and the group was going to finalise it when COVID 19 came along and could not be brought to the HIB meeting in May. The current document has added recent COVID 19 related data and further partners feedback. For instance, it has been revealed that less people are using alcohol but those who do are drinking are doing so at greater levels. Consequently, more alcohol has been purchased after COVID 19 particularly in lesser deprived areas.

Kate requested the Board to signing it off the strategy and continue to support this work. She will bring a new report in a year.

Comments/questions:

Members of the Board congratulate Kathy and the partnership for an excellent report.

Partners – Suggestions for new partners are welcome. Regarding veterans' charities, some work has been done with the British Legion. Alcohol services have quite a reach that include working with veterans (Cllr Stratford/Kate Holburn).

Alcohol and gambling links – There is not a specific intervention in gambling, however, substance misuse services manages all addictions intervention, including gambling. (Andy McLellan/Kate Holburn)

Definition of alcoholism – An audit by medical professionals is used with three questions that provide a score in relation to the amount of alcohol consumed. Binge drinking could be included depending on the frequency and the amount of alcohol consumed. (Cllr Pighills/Kate Holburn)

The Board signed off the strategy.

11. Affordable Warmth Network

Alison Vickers referred to the document *Update on Fuel Poverty and poor Housing Conditions for the Health Improvement Board* (page 49 in the agenda pack)

Updates to the report:

- 1) They are trying to help people long term, looking at the underlaying causes of why they are living in a cold home. However, due to COVID 19 with people spending more time in home and their utility bills getting higher, they have been provided short term help providing vouchers to people who were in electricity pre-payment metres, especially those who have had to self-isolate for 14 days. AWN has used their own emergency reserve for this.
- 2) They have submitted a bid with the local authorities for the Green Homes Grant Scheme to provide vouchers for energy efficiency improvements to homes. They are expecting to find out the outcomes of that bid at the end of the month.

The Health Improvement Board were requested to

- Continue to champion the role housing plays in protecting and maintaining the health of the young, the old and the vulnerable and ensure housing has a place in the Health and Wellbeing Strategy.
- Request the AWN to report next year on referrals from health and social care practitioners to the BHBH service.
- Challenge clinical and health and social care partners to explore opportunities to work more closely with the AWN

Comments/Questions

Priority services register – AWN help people to sign for this across the region and they attend events to speak about it (Cllr McHugh/Alison Vickers)

Pre-payment metres vouchers – It is scandalous that poorer people have to pay more for their utilities bill than any other household. It is well known that people who have to use food banks use pre-payment meters, sometimes they do not have enough fuel to heat the food they are given. The argument of the electricity companies is that people in deprived circumstances are unreliable payers (Cllr Upton/Cllr McHugh/Alison Vickers).

Action: Members of the Board to discuss what can be done about high rates for pre-payment meters and how HIB can lobby the electricity companies to change this situation.

Alison received suggestions about possible funding through the Emergency Fund to local authorities or the Community Relief Fund (Clr Fillipova-River/Cllr McHugh)

12. Housing Support Advisory Group Update

Gillian Douglas and Jaffa Holland referred to the document *Report to Health Improvement Board on Covid 19 and Homelessness* (page 53 in the agenda pack)

The Ministry for Housing, Communities and Local Government (MHCLG) directed all housing authorities to accommodate anyone known to be rough sleeping by 27th March 2020, regardless of priority need or immigration status. Over the whole period a total of 452 people were accommodated as described in the report. It has implied a big effort with a great rate of success though there were a few people who chose to stay out, not accepting the offer of accommodation and some people had to be evicted from hotels despite most hotel managers being very supportive of this measure. They were also supported by the police.

MHCLG expects housing authorities to achieve move-on for all rough sleepers accommodated during Covid-19. To support the move-on process, MHCLG invited bids under the Next Steps Accommodation Programme with a deadline of 21st August 2020. All Oxfordshire district councils have submitted bids. They are waiting to hear from this by the end of September.

Oxfordshire is working very much on a county wide approach involving all district councils, City, OCC and OCCG and this is the approach that it is going to be taken when the providers contracts are in place by 2022.

It has been remarkable the amount of services that have been involved in this operation helping to provide accommodation, linking with health, substance misuse services among others. Social housing registered providers have taken

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risks that would not have taken otherwise, and the role of voluntary services have been very important.

There is a concern when the court services open how many families would be at risk of evictions. So far, they have mainly dealt with single homelessness but it is not sure how the situation would look for families. They are planning to have the necessary protection measures in place.

Cllr McHugh highlighted that this was a success story and congratulates all the services involved in the name of the HIB.

The HIB noted the report.

13. Active Oxfordshire Report

Alan Webb and Paul Brivio referred to the report *Fighting Inactivity and Tackling Inequality* (page 57 in the agenda pack)

The impact of COVID 19 and the Active Oxfordshire's response were particularly highlighted (page 59 onward).

It was requested to the HIB to approve the recommendation in point 6 (page 66)

Queries about the report

Members considered the report a very good one and thanked Active Oxfordshire for all the hard work. However, they raised some concerns. Regarding the recommendations, members requested that Active Oxfordshire provide more details that allow for members to evaluate what are the financial implication and the officers' time requested. It was pointed out that with the financial demands on local authorities due to COVID 19, funds are not there to take on more responsibilities. For instance, Recommendation (iii) is talking about "joint funding" this needs to be clarified. Additionally, in point 6.v is mentioned the 10 ambitions but these are not listed in the report. (Cllr McHugh/Cllr Stratford/Diane Hedge/Ansaf Azhar)

Activities that were highlighted:

Cllr Pighills praised Active Oxfordshire work on tackling diabetes in Abingdon as it has been a very successful programme. This has been led in conjunction with the district council officers. The work needs to continue on a no money commitment base. Cllr Upton expressed her interest in Recommendation 6.iv that pointed to the GP Champion and an Oversight Group as this is linked to the social prescribing agenda.

Action: Active Oxfordshire will send more details about the recommendations. A group of members of the Board will come together to look at the recommendations and their implications and report back to the Health Improvement Board and Active Oxfordshire.

AW/PB AM/LU AA/EO DG

14. Changing Streets as an effect of COVID 19

Rosie Rowe referred to the document *COVID Recovery – Active Travel* (page 67 in the agenda pack)

Active Travel is one of the key mechanisms that will promote physical activity. It is well known that incorporating exercise into the daily routine is the most effective way of increase overall levels of physical activity. Active Travel is one of the most important components of the Healthy Place Shaping agenda.

The Emergency Active Travel Fund was launched in June to support local transport authorities with producing cycling and walking facilities. The funding has been in 2 transhes:

tranche 1 supports the installation of temporary projects for the COVID-19 pandemic

tranche 2 the creation of longer-term projects as lock down eases to enable people not using public transport to cycle and walk instead in order to be COVID 19 safe.

The first tranche provided minimum time to apply and the activities needed to be implemented by July. Just half of the money came to OCC because it was deemed the proposals were not ambitious enough. The project for the tranche 2 has been better prepared and has brought more teams together (highways, locality working groups among others) and is targeting the most deprived areas as explained in the document. The Public Health team was decisive in introducing Community Activation measures within the proposals.

There is an additional DfT grant, the School Traffic Demand Management Fund that OCC has secured with two phases set for applying measures to avoid congestion at school gates and promote active travelling.

Rosie will bring a report on the Healthy Place Shaping agenda to the November meeting of the HIB.

15. Forward Plan and AOB

Members pointed out that the agenda had too many items and did not allocate enough time for a more in-depth discussion (Cllr McHugh/Cllr Stratford)

Ansaf Azhar explained:

- 1- There was a backlog of items that were not discussed in the past meeting because of the COVID 19 situation. In normal circumstances, there would have not been as many items in the agenda.
- 2 There is a need to prioritise the agenda items and give a good look at the HIB Forward Plan. Because as it stands, if there is less items in the agenda, the Forward Plan would be massive. The intention is to review the priorities of the

HIB and that the Forward Plan strongly reflect that set of priorities. In this sense, it is very important to focus on inequalities and the COVID 19 situation.

Jaffa Holland would have liked to have time to discuss the indicators of homelessness and statutory homelessness that appears in the Performance Report as well as the update in COVID 19. He would like to hear from the HIB how often HSAG needs to come to report and he is happy to take any proposals back to the HSAG members.

Cllr Fillipova-Rivers would like to continue with online meetings in the future and requested that the meetings are not longer than two hours otherwise there is a risk of becoming tired and losing objectivity.

Action: Cllr McHugh, Cllr Upton, Ansaf Azhar, Eunan O'Neill and Dani Granito to meet to discuss these proposals as part of a wider discussion on the Forward Plan.

AM/LU AA/EO DG

The meeting ended at 16:25