

HEALTH IMPROVEMENT PARTNERSHIP BOARD

OUTCOMES of the meeting held on 7 November at 14:00

Present: Cllr Chewe Munkonge, Oxford City Council
Board members Ansaf Azhar, Director of Public Health
David Munday, Consultant in Public Health, Oxfordshire County Council (Lead Officer)
Dan Leveson, Place Director for Oxfordshire, BOB ICB
Cllr Chewe Munkonge, Oxford City Council
Cllr Rob Pattenden, Cherwell District Council
Cllr Rachel Crouch, West Oxfordshire District Council
Cllr Georgina Heritage, South Oxfordshire District Council

In attendance Bethan McDonald, Public Health, Consultant in Public Health in Data and research. Oxfordshire County Council
Katherine Howell, Healthwatch Oxfordshire
Lydia Avann, Smokefree policy
Stephen Gilroy-Lowe at Response – mental health support and harm reduction
Dr. Suzanne Bartington
Ajit Singh, University of Birmingham
Charlotte Iddon, Health Improvement Practitioner
Derys Pragnell, Public Health Consultant
Cllr Diana Lugova, Vale of White Horse District Council

Officer: Taybe Clarke-Earnscliffe, Business Support Team Leader, Minute taker, Oxfordshire County Council

Apologies: Cllr Nathan Ley, Cllr Helen Pighills, Robert Majilton, Dr Sam Hart

ITEM
1. Welcome
The board noted Cllr Helen Pighills was on annual leave and it was agreed Cllr Georgina Heritage would chair the meeting. Cllr Nathan Ley sent apologies, Cllr Helen Pighills sub Cllr Diana Lugova, Robert Majilton sub Katherine Howell, Dr Sam Hart sent apologies
2. Declarations of Interest
There were no declarations of interest.
3. Petitions and Public Address
There were no petitions and public address.
4. Notice of any other business
6. Minutes of Last Meeting
<p>Actions from Minutes:</p> <ul style="list-style-type: none"> • Performance Report Data - Bethan to provide sub-Oxfordshire level data in the performance report, starting with smoking data in today's report and continuing with other health metrics in future meetings- Complete • All Aged Carers Strategy Insight - Robert Majilton to share insight from people being discharged from the John Radcliffe to assist with the all aged carers strategy. This action has been completed. • Mental Well-being Hubs - Board members to identify and connect social enterprises interested in partnering with Oxford Health to run the front house of mental well-being hubs- A reminder to contact David or Taybe for coordination.
7. Performance Report
Presented by Bethan Mcdonald, Consultant in Public Health in Data, intelligence and research, Oxfordshire County Council
Performance Report Minutes:

Bethan McDonald presented the performance report, focusing on the progress against ambitions within the "Live Well" part of the health and well-being strategy.

- **Sub-Oxfordshire Level Data:** The report now includes sub-Oxfordshire level data, indicated with a star for district level and a cross for MSOA level, with further information within the thematic reports later on the agenda

- **Key Messages and Outcomes:**
 - **Smoking Prevalence:**
 - Slight decline in adult smoking prevalence from 11.2% to 10.3%, similar to the national average.
 - Focus on population groups with the highest prevalence, including routine and manual occupations and pregnant women.
 - Smoking prevalence in routine and manual occupations declined from 26% to 15%, though the sample size is small and the estimate is uncertain.
 - Smoking in pregnancy has risen slightly in the last quarter, with ongoing interventions to support pregnant women.

 - **Alcohol-Related Indicators:**
 - Successful treatment completion and not requiring treatment again within six months is at 57% and 77%, respectively, both above the target.

 - **Physical Activity Programs:**
 - Move Together program engaged 2024 participants with long-term conditions, more than double the target.
 - 52% of young people engaged in the You Move program reported an increase in physical activity.
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Questions about the Performance Report:

1. Smoking Data:

- Councillor Pattenden asked if there is any data on vaping or if the report only includes traditional smoking data. Bethan clarified that the current metrics focus on smoking and tobacco products, but vaping data is available separately.
- Councillor Pattenden also inquired about the 5% smoking prevalence among pregnant women, which Bethan confirmed refers to smoking at the time of delivery and the HIB agreed even though it is a national target it is still higher than we'd like to see

2. Treatment Progress:

- Councillor Munkonge questioned whether the target for successful treatment completion should be raised since the current performance is well above the target. David suggested that this could be reviewed with service leads.

3. Smoking Targets:

- Daniel Leveson asked if the target for smoking prevalence should be adjusted to below 5% or remain at 10%. Ansaf explained that the aspiration to achieve below 5% by 2025 was disrupted by COVID-19, but efforts continue to reach this goal as soon as possible and the target tapers down over the next 5 years to be a 5% by 2030

4. Routine and Manual Workers

- Ansaf Azhar highlighted the significant drop in smoking prevalence among routine and manual workers but noted the need to focus on mental health patients to further reduce overall smoking rates.

8. Report from Healthwatch Ambassador

Presented by Katherine Howell, Healthwatch Oxfordshire Ambassador

To receive updates from Healthwatch Oxfordshire on topics relevant to the Board

Katherine Howell presented the Healthwatch Oxfordshire quarterly report, standing in for Robert Majilton.

- **Key Activities and Findings:**

- **Wood Farm Community:** Healthwatch has been engaging with residents of Wood Farm to gather insights on health and well-being, with a report to be submitted to public health next month.
- **Women's Health Services:** Over 600 responses were collected, focusing on menopause, period support, and mental health. This will inform the development of Women's Health hubs in Oxfordshire.
- **Working Men's Health:** Outreach in Didcot and a webinar on designing services with men in mind are part of the "30 chaps in 30 days" initiative for November.
- **Eye Care Services:** Reports on community optometry and the Oxford Eye Hospital highlighted positive experiences and some issues with travel, costs, and referrals.
- **Hospital Experiences:** A summary of feedback on hospitals over the past year was shared with the Oxford University Hospitals (OUH) patient experience team, leading to action points.
- **Leaving Hospital:** Nearly 300 people shared their experiences of leaving hospital and receiving social care support, with a report to be published and presented at the HOSC
- **Enter and View Visits:** Reports were published on the Ambulatory Care Unit at the Churchill Hospital, the Oxford Eye Hospital, and the outpatient department at Wantage Community Hospital.
- **Food Poverty in OX4:** An event was held to share findings and work on solutions for food poverty and access to food in OX4.
- **Outreach Activities:** Healthwatch engaged with various community groups, including the Happy Place social club for older Chinese people

and My Life My Choice, discussing health topics like healthy eating and diabetes.

- Appreciation for the quality of care and professionalism of health and care professionals.
- Challenges in accessing primary care, digital inclusion, and long queues for COVID vaccine clinics.
- Issues with interpreting services, including BSL and different languages.
- Concerns about the impact of the cost of living on accessing health services, including audiology and podiatry.

Questions raised –

Access Issues:

- Councillor Munkonge asked if difficulties in getting appointments were related to Royal Mail issues. Katherine responded that while this hasn't been a major theme, it has come up in the context of hospital discharge letters and secondary care referrals.

COVID Vaccine Queues:

- Cllr Crouch asked for more details on the long queues for COVID vaccines. Katherine mentioned she would look into it and provide more information.

Feedback from Working Men:

- Councillor Pattenden inquired about the difficulty in getting data from working men and the approach of direct conversation in the street. Katherine confirmed that this method has been used successfully in different locations like Witney and Costa, and they plan to continue this approach in other areas

9. Tobacco Control Progress

Presented by Derys Pragnell, Public Health Consultant and Charlotte Iddon, Health Improvement Practitioner

Derys Pragnell introduced the topic of tobacco control progress, highlighting its importance due to the significant health impacts of smoking.

- **National Updates:**

- Proposed smoke-free spaces, including school gates, parks, and hospitals.
- Raising the age of sale for tobacco products.
- Enhanced enforcement of sales and advertising regulations for vapes.
- Ban on disposable vapes starting from mid-2025.

- **Local Initiatives and Funding:**

- Oxfordshire received nearly £800,000 in smoke-free funding.
- Increased capacity in stop smoking services and plans to re-commission the service next year.

- Pilot programs such as the Alan Carr method, targeted lung health checks, and tobacco dependency advisors in A&E.
- **Focus Areas:**
 - Routine manual workers: Efforts to support this group in quitting smoking, with some positive trends noted.
 - People with mental health conditions: Ongoing challenges and the need for more intensive support.
 - Smoking in pregnancy: Continued concern due to its long-term health implications.

Stephen Gilroy-Lowe: Discussed the vaping initiative at Response, targeting residents with mental health needs. The initiative includes providing vapes and support sessions, with promising results so far, albeit at an early stage.

Lydia Avann: Shared Cherwell District Council's new smoke and vape-free policies, which prohibit smoking and vaping on all council-operated sites. The policies aim to create healthier environments for employees and visitors.

Questions About Tobacco Presentations –

Effectiveness of Vaping vs. Traditional Methods:

- There was a discussion about the effectiveness of vaping compared to traditional methods like patches or gum. It was noted that vaping is particularly effective for certain groups, such as routine manual workers, and is a popular choice among those trying to quit smoking.

Workplace Smoking Policies:

- Daniel Leveson raised a question about the smoking rates among employees of anchor organisations like Oxfordshire County Council and NHS trusts. Derys Pragnell mentioned that there is an ongoing effort to support staff in quitting smoking and that a workplace well-being program is being developed.

Challenges with Mental Health Patients:

- Steph Gilroy-Lowe discussed the challenges faced in supporting residents with mental health needs to quit smoking. The vaping initiative at Response has shown mixed results, highlighting the difficulty of changing smoking habits in this group.

Children and Young People:

- Concerns were raised about vaping among children and young people. Derys mentioned that while vaping is an effective quit aid for adults, it is important to prevent its use as a gateway to smoking for young people.

10. Air Quality and healthy place shaping

Presented by Rosie Rowe, Head of Healthy Place Shaping

Rosie Rowe introduced the topic of air quality actions in Oxfordshire, highlighting the importance of addressing both nitrogen dioxide and particulate matter pollution.

- **Positive Developments:**

- Five of the 13 air quality management areas in the county will be removed by 2025 due to meeting government targets for nitrogen dioxide levels. However, it was noted that these targets are higher than WHO recommendations, and particulate matter remains a concern.

Updated Action Plans:

- Several districts have updated their five-year action plans to address air quality, including South and Vale District Councils, West Oxfordshire, and Cherwell.

These plans involve extensive partnership work.

New Initiatives:

- A three-year post for an air quality technical lead and partnerships officer has been funded to enhance capacity and support partnership work. This includes accessing more granular data and modelling tools.

Focus on Children:

- The impact of air quality on children was emphasized, noting their vulnerability due to higher breathing rates and developing lungs. Initiatives like anti-idling campaigns and school streets aim to reduce exposure to pollution.

School Streets Study:

- Dr. Suzanne Bartington presented findings from a study on the impact of school streets on air quality. The study used air quality sensors at pilot and control sites to measure nitrogen dioxide levels.
- Results showed a reduction in nitrogen dioxide levels during road closure periods at intervention sites, with reductions ranging from 10% to 75%.

Questions from Air Quality Discussion:

Impact of School Streets on Air Quality:

- Councillor Munkonge asked about the impact of school streets on air quality, specifically whether there was a reduction in nitrogen dioxide levels during the road closure periods. Dr. Suzanne Bartington confirmed that there were reductions ranging from 10% to 75% at intervention sites.

Comparison of Air Quality During Different Times:

- Councillor Munkonge inquired about air quality measurements between 9:00 AM and 2:00 PM to compare with the road closure periods. Dr. Bartington acknowledged the importance of this comparison and mentioned that it would be explored further.

Traffic Displacement Concerns:

- Councillor Munkonge raised concerns about traffic displacement, noting that parents from Windmill School were parking on Odd Road, potentially affecting air quality there. Rosie Rowe acknowledged the issue and the need to consider travel behaviours and potential displacement effects.

Presented by David Munday, Consultant in Public Health, Oxfordshire County Council

- **Introduction to Marmot Place:** David Munday introduced the Marmot Place initiative, emphasizing its goal to address health inequalities in Oxfordshire by focusing on the building blocks of health. The initiative is named after Professor Michael Marmot, a leading expert in health inequalities.
- **Key Benefits:**
 - **Evidence Review:** Providing high-quality evidence to review current initiatives and identify areas for improvement.
 - **Integration:** Acting as a glue to bring together various activities addressing health inequalities, and leading to new and innovative projects
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 - **Evaluation:** Developing an evaluative framework for ongoing initiatives.
 - **Rural Inequality:** Enhancing understanding of rural health inequalities.
 - **Research Collaboration:** Strengthening partnerships with the University of Oxford and Oxford Brookes University.
- **From the mapping work so far the following likely areas of focus are as follows:**
 - **Give Every Child the Best Start in Life:** Addressing early childhood development, school readiness, quality of maternity services, and parenting programs.
 - **Create Fair Employment and Good Work for All:** Improving access to good jobs, reducing long-term unemployment, and enhancing job quality.
 - **Ensure a Healthy Standard of Living for All:** Focusing on housing quality and affordability, access to food, and healthcare.
- **Next Steps:**
 - **Mapping and Prioritization:** To complete the mapping of current initiatives and identifying key priorities based on local needs and existing partnerships.
 - **Engagement and Workshops:** Hosting a launch event and workshops to further develop and refine the focus areas and actions.

Board members were in agreement that these 3x principles were important to focus upon a

Healthwatch observed that SEND needs often come up in conversation with the public and would support a focus on priority 1.

Cllr Pattenden noted the 3 ward areas of Banbury already have that best start in life and work with schools as a strong focus and supports priority 1. He also noted the factory based and transient nature of work in Banbury but it might not be “good work”.

10. Any other Business

Next meeting 6 February 2025