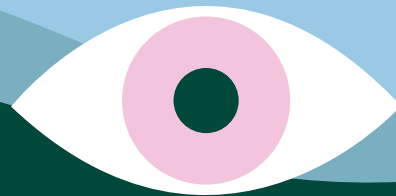
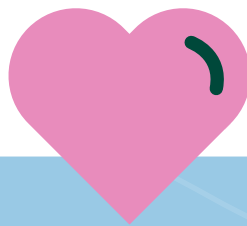


June 2022

# Joint Health Overview Scrutiny Committee (JHOSC)



**Annual Report**

# 2021/22



**OXFORDSHIRE  
COUNTY COUNCIL**

# 1 Chair's introduction

I want to place on record my thanks to all the Committee's Members – I believe we are a great team. Thanks to those who were not reappointed to the Committee for the 2022/23 municipal year (Cllr Jill Bull and Cllr Sandy Dallimore).

**We welcome the Council's Strategic Plan commitment to support an enhanced role for Overview and Scrutiny and we look to build on the successes of this year, into the next, adding even greater impact.**

It has been a transitional year for Overview and Scrutiny across the Council, and more so for the HOSC. We have worked within a system of changes to the way in which the County Council operates Overview and Scrutiny and in preparation for significant changes to our NHS locally which came into force on 1st July.

Despite receiving regular updates there remains a great deal of uncertainty in the Committee about how the new integrated health and social care reforms will work and, critically, how it will improve outcomes for Oxfordshire's population.

“A dramatically changing landscape of decision-making has been against a backdrop of - unprecedented challenges to health and care systems with rising demand and waiting lists.”

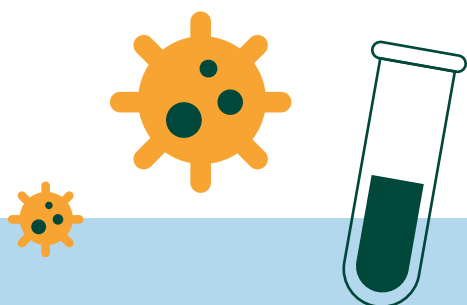
Over the course of the year, the Committee has seen positive plans and pilots from all partners in relation to building up community-based integrated services for children and adults. We are delighted to see such an approach and the system working together to meet demand at the most appropriate point. This includes developing services that reduce risks in the community.

What has been clear is that the work of officers and the County Councillor membership of HOSC has increased, and will continue to increase into 2022/23, because of their membership of the three county-wide Berkshire, Oxfordshire and Buckinghamshire JHOSC (BOB HOSC).

The Committee papers this year have included the Council Motion setting out the Council's position that one of the pre-requisites to successful integration of health and care is a strong Health and Wellbeing Board and strong local scrutiny committees at the Oxfordshire place level. Going into the new municipal year, the Committee and the NHS must come together to understand ways of working in the new integrated care system.

It is fair to say that at times, undertaking HOSC activity has felt very challenging. A dramatically changing landscape of decision-making has been against a backdrop of - unprecedented challenges to health and care systems with:

- rising demand and waiting lists
- shortages of key staff
- COVID waves and new variants





This has meant the Committee has had to be extremely flexible to support the whole system, for example rearranging our planned meeting in February 2022. However, I believe it was a highly useful year to go through as it has created stronger foundations for the HOSC to undertake its work programme in the coming year.

I am grateful to the different officers who have supported the Committee over the year and to the administration in building back health scrutiny officer support mid-budget year from January 2022.

I also wish to name members of the committee who have undertaken specific work this year -

**Dr Alan Cohen**  
(Co-opted member)

**Barbara Shaw**  
(Co-opted member)

**Dr Paul Barrow**  
(Vale of White Horse District Council)

“The Committee has had to be extremely flexible to support the whole system.”

I wish to name a few colleagues here who have supported the Committee’s business but we are acutely aware that there are many people who support them behind the scenes too.

**Stephen Chandler** (Oxfordshire County Council OCC)

**Karen Fuller** (OCC)

**Ansaf Azhar** (OCC)

**Diane Hedges** (Berkshire, Oxfordshire and Buckinghamshire Integrated Care Board (BOB ICB))

**Catherine Mountford** (BOB ICB)

**Sara Randall** Chief Operating Officer (Oxford University Hospitals NHS FT)

**Dr Ben Riley** (Oxford Health NHS FT (OHNHS FT))

**Helen Shute** (OH NHS FT)

**Rosalind Pearce** (Healthwatch)

**Helen Mitchell** Interim Health Scrutiny Officer (OCC)

**Colm O Caomhanaigh** Committee Officer (OCC)

I am also grateful to all the members of the public that have spoken or sent letters to the Committee and to colleagues from the Local Medical Committee, Oxfordshire Mind and the Oxfordshire Parent and Carers Forum who joined us at meetings to provide their account of services. Their input enabled the Committee to have richer conversations.

**Councillor Jane Hanna OBE**

# 2 About the Scrutiny Committee

The Joint Health Overview and Scrutiny Committee is a Joint Committee of Oxfordshire County Council made up of 15 Members (including 3 co-opted, non-voting members). It draws its elected membership from the County Council and all district councils across Oxfordshire (Cherwell, Vale of White Horse, South Oxfordshire, Oxford City and West Oxfordshire). It is the Council's 'main' Health Scrutiny Committee and its principal purpose is to scrutinise any matter relating to the planning, provision and operation of health services in the area of its local authorities.

# 3 Making the case for change



Importantly, for the Committee to be effective, it must produce well-reasoned evidence-based recommendations to the Cabinet and health partners concerning service improvement. The Committee has no power to require that decisions be revised, but a robust argument for change will go a long way in persuading the Cabinet and health partners to review their decisions.

The powers of democratic local health scrutiny are included in primary legislation and health scrutiny regulations elsewhere. The Chair met in March 2022 with other HOSC Chairs and Officers, alongside and the Centre for Governance and Scrutiny (CfGS) and the Department of Health. This was to share

experiences of health scrutiny to support the development of new statutory guidance.

The latest briefing from the CfGS has shared that the local referral powers are to be replaced with a new power of intervention for the Secretary of State. The Committee has corresponded with the CfGS to affirm that we wish to see no removal of powers from HOSCs as this provides a vital form of local accountability to health service providers. The Committee will keep a very close interest in this moving forward and correspond with MPs to alert them to this issue and mobilise them to take action.

# 4 Highlights of Health Scrutiny activity during 2021/22



**Engagement on The Integrated Care System (ICS) – we’ve received a series of reports from Oxfordshire Clinical Commissioning Group and met with the system leadership team over the year in respect of the development of the Integrated Care System.**

As the Health and Care Act comes into force on 1st July 2022 with a new BOB constitution for Oxfordshire, Berkshire and Buckinghamshire, we look forward to understanding how it and the integrated system it operates in will work in practice so the Committee can affect better scrutiny. When the Committee met with BOB leadership for a detailed briefing in December 2021 there was not enough detail provided at that stage to assure Members on the development of new arrangements. The Committee was surprised by the launch of a BOB engagement strategy and liaised with other JHOSCs across the BOB area who were equally surprised and unaware of this work. We welcome BOB ICB committing to meeting with JHOSC for a special meeting to understand lessons learned and what the strategy will ultimately deliver.

## Local MPs

The Chair corresponded with Oxfordshire MPs asking for their support to protect local democratic scrutiny and the development of a national workforce plan as part of the Health and Care Bill. This was against a backdrop of Oxfordshire County Council’s motion on the matter which was approved cross-party. Through all the meetings of the HOSC, it has been highlighted that consistent barriers to the reopening of services have been funding and workforce shortages across health and social care.

## Care Homes

We have been clear as a Committee that all those working in health and care during the pandemic have gone above and beyond for our local population in the most challenging of circumstances.

Scrutiny and learning through those challenging times is viewed by our committee as valuable not only for bereaved families and key workers but for future prevention. Member reports on the First Thirty Days of Covid-19 and a piece on Infection Control in care homes were supported by discussions with the Director of Public Health and the Director of Adult Social Care which led to recommendations that were duly responded to with agreed reports taken to HOSC in November. Site visits at care homes, to see for ourselves infection control measures being implemented, have been wholeheartedly welcomed by the Committee and we will take these up in the new municipal year.

Following a judicial review finding that Government policy was ‘irrational’ in relation to allowing the discharge of infected patients from hospital to care homes, the Committee has recommended that system partners review their current position to wait to commence a local review until a national review commences. As we move into the new municipal year, the Cabinet has in principle received this recommendation positively and we look forward to the Executive response.

## Opening of Closed Services

From our second meeting we shifted the focus of the Committee to understanding the backlog of waiting lists and pressed for timescales for the reopening of services such as ophthalmology and Ear Nose and Throat (ENT). The temporary closure of maternity services at Wantage and Chipping Norton Community Hospitals was considered at two meetings. The Committee has engaged with Oxford University Hospitals NHS Foundation Trust (OUH NHS FT) and shared concerns from members of the public directly and have followed up from our May meeting for information about the reopening of maternity beds.

## Pharmacy

We were alerted to issues in respect of access to pharmacy provision in Oxford City and raised questions of commissioners. We noted that the Pharmaceutical Needs Assessment was delayed due to Covid-19 but were delighted to hear that Health and Wellbeing Board agreed that assessment in March 2022. This included a special note in which to consider applications to open a further pharmacy in Central Oxford.

## Community Services Strategy

We continue to eagerly anticipate a draft strategy. We have been incredibly encouraged to see the Committee's calls for strengthened integration of health and social care being realised through early involvement in this work and its clear convergence with the integrated care programme shared with the Committee on 9 June. The development of evaluated pilots was one of the key recommendations of the [OX12 TaskForce report](#) which was discussed with the Chief Executive of OH NHS FT and designate Chief Executive of BOB ICB in June 2021. We look forward to learning also about the workforce and funding available to enable the implementation of the strategy.

## Children's Wellbeing and Child and Adolescent Mental Health Services (CAMHS)

The Committee invited OH NHS FT, OCC Children's Services, Oxfordshire Clinical Commissioning Group, Oxfordshire MIND and the Oxfordshire Parent Carers Forum to Committee in March. The Committee were also delighted to receive the experiences of a young person via pre-recorded submission.

**I came away with some good thoughts on how we as an organisation can work better across the system**

**Dan Knowles, CEO – Oxfordshire MIND**

The Committee was encouraged by the recognition that the excessive waiting times for access to the CAMHS service meant the service was not working as it should for Oxfordshire's children. We were however encouraged to see good signs of early collaboration between the NHS and Oxfordshire County Council and the voluntary sector. The Committee fed back that reassurance would come when there was the prioritisation of children's services and funding in place by BOB. We look forward to a special meeting on BOB strategy.



In June, the Committee received a further paper on the development of children's services in the community with view to keeping more children well and not requiring access to CAMHS. The process for the short-listing selection from a long-list of priorities chosen following a consultation and some focus groups with children was reviewed by the Committee. The Committee considered the development of training and support for teachers and others working with children, improved support for children and parents more broadly and the urgency for building up these services in our local communities. The Committee received feedback from the Oxfordshire Parent Carers Forum and Members expressed interest in how collaboration with school partners has the potential to reduce the risks for children with broader needs such as children in poverty, with serious physical conditions in care or formerly in care children and young carers. The Committee looks forward to an update in future.

## Primary Care Access

A report from the CCG was received and the Committee heard from the representatives from the Local Medical Committee (LMC). The committee shared the LMC's concerns regarding constraints on the service in respect of workforce shortages and estates issues. Further discussions surfaced the issues associated with planned population growth and the expansion of health services in accordance with growing need. The Committee was pleased to have received an update in the year regarding the go-ahead for the building of new primary care facilities for Wantage and Grove after this was first promised in 2012. It was, however, concerned over ongoing delays elsewhere, such as in Didcot. As a result of this item the Committee has welcomed the offer of a dedicated workshop on primary care working with the CCG and will also request a further primary care update later in the next municipal year. In addition, the Committee has placed work on rural inequalities and capturing population health needs on its work programme.



## Meetings

Over the course of the municipal year, we increased the meetings from 4 to 5. The most substantive items considered are contained below:

- **24 June**
- **23 September**
- **25 November**
- **10 March**
- **10 May**



## Number of Items

The Committee considered 41 substantive items over the course of the municipal year.

## Engagement

The Committee has had regular engagement with public speakers and Members at HOSC mainly in relation to government reforms and the community strategy, but also including end of life care, changes in hearing-loss services. The Committee received and took up questions on behalf of the public in between and at Committee on; changing plans from protection to living with COVID, problems from patient group leaders with using the internet links provided by the CCG to participate in the BOB public engagement strategy and to press for progress on the expansion of GP services in Didcot.

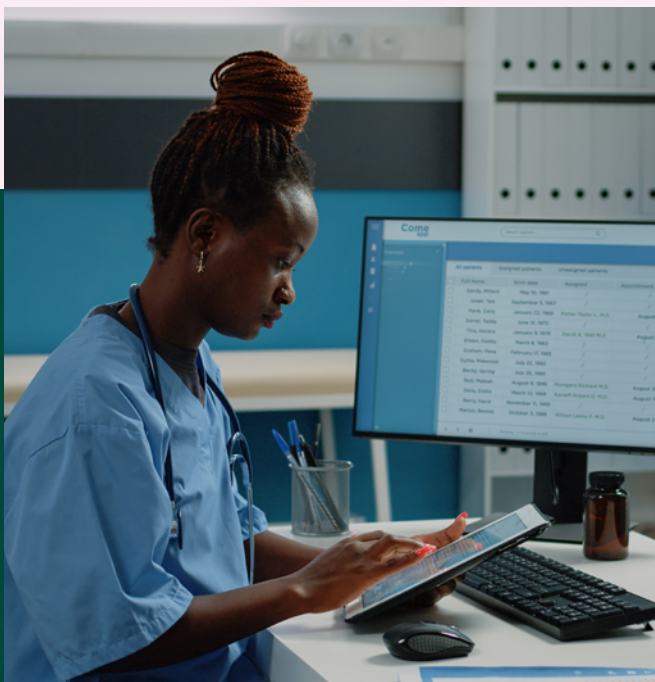
# 5 Forward Look - 22/23

## Understanding the Integrated Care System and Accountabilities Within

It is essential that the Committee, and indeed all Members of Council, understand the new structures of the NHS locally. It is only until we can see and understand how it works that we can really start to scrutinise the planning, provision and operation of the health service.

## Development of BOB HOSC

This provides new opportunities and challenges in mobilising a large Committee over a significant geographical footprint and ensuring that scrutiny stays local to the Oxfordshire population and especially for matters of public concern that impact our residents.



## Our Work Programme for the year ahead

- Community Services Strategy
- Primary Care
- Rural Inequalities
- Serious mental illness
- Dementia
- End of Life Care
- Dentistry
- Public health.



Tackling inequalities and workforce issues underpin all our reviews. The Committee's work programme is reviewed at each meeting against priorities and resource.

## Representation

We are undergoing a review of the representation and diversity of the Committee as we have co-opted member vacancy from August and will likely need to run a further recruitment in the next year.

For further information on the Committee, and its work, see the links and contact details below:

[Committee details - Oxfordshire Joint Health Overview & Scrutiny](#)

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**Contact Officer: Tom Hudson**  
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