

Closer to Home Health & Care Strategy

Bringing care closer to home



North



North East



Oxford City



South East



South West



West

What is the problem?

A challenged health and care system:

- Increasing demand
- Increasing complexity
- Increasing cost
- Workforce under pressure
- Current models of care under pressure
- Slow progress in delivering more anticipatory care and managing local population health

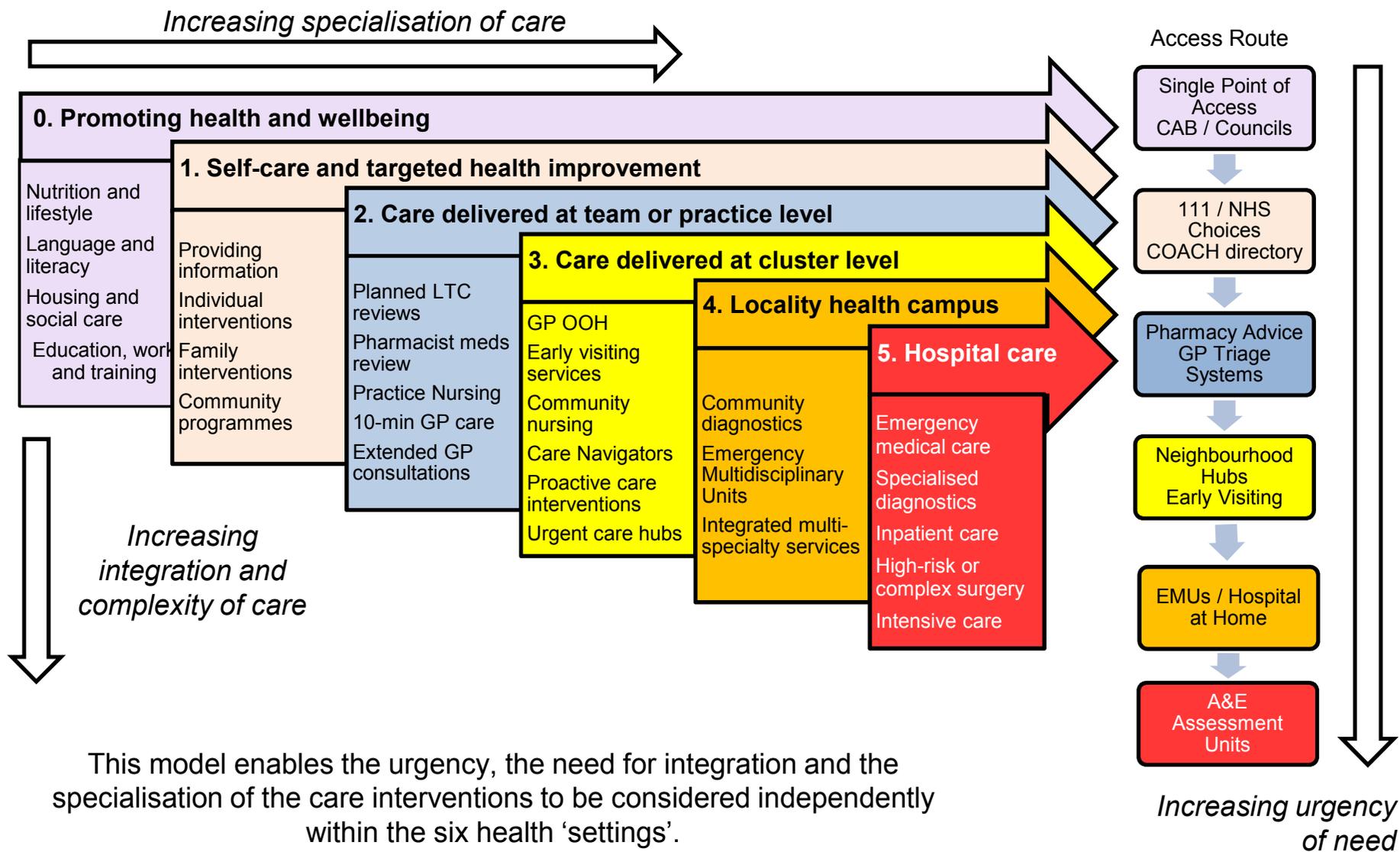
Closer to Home Health & Care Strategy

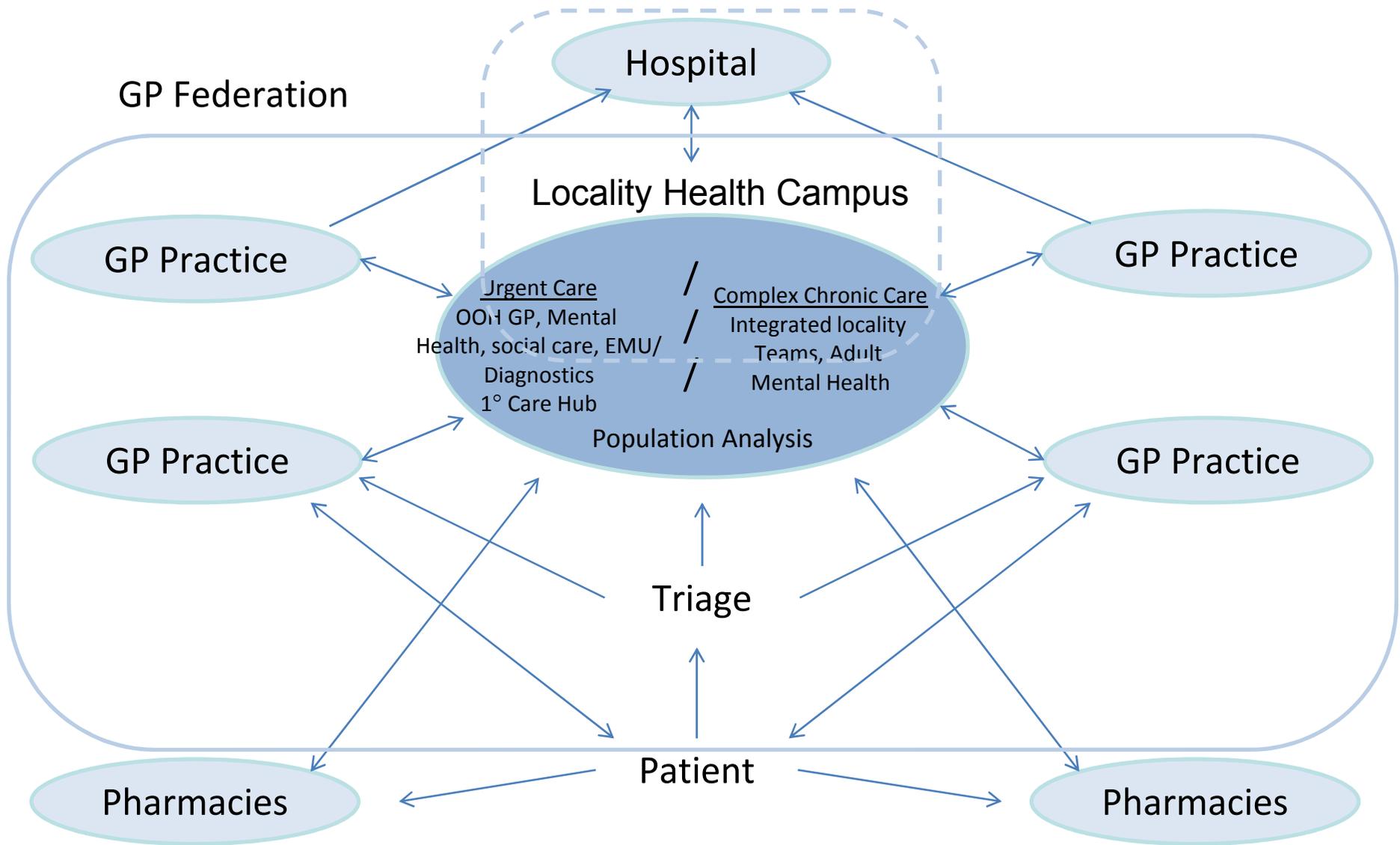
Our Vision:

To enable people in Oxfordshire to access more care at /or closer to home, achieving a step change in developing community services by:

- increasing their ability for self-care
- building on the successful UK General Practice model
- delivering more integrated primary, community, acute and social care
- managing population health to improve outcomes
- increasing the capacity of the out of hospital care workforce to provide more care.
- bringing together organisations to develop a 'whole Oxfordshire' approach
- delivering outcomes based commissioning

Oxfordshire 'Closer-to-Home' Health and Care Model





Development of the Care closer to Home Health & Care Strategy

1. The overall strategic framework has been agreed by the Transformation Board
2. OCCG's locality commissioning groups have been consulted and have broadly agreed the strategy
3. The strategy is being further refined, working with partners in OCC, OUHT and OHFT and GP Federations
4. Further work is needed to agree how we will measure success.
5. Public engagement to develop the strategy is ongoing.

What changes will this mean for 16/17 ?

1. The overarching Care Closer to Home strategy will be implemented across the localities – co-designing and testing new pathways of care with patients and providers
2. The impact of the Prime Ministers Challenge Fund pilots will be evaluated and the findings will feed into the development of new models of care
3. We will increase the use of ambulatory sub acute/acute pathways for when people become acutely unwell.
4. We will increase patient education and support, including the use of technology, to enable increased 'self-care', and enhanced promotion of health and wellbeing
5. OCCG is to set up a Quality and Innovation Support Team to support practices to work more efficiently and to introduce innovations that will increase their sustainability.
6. We need to test new workforce roles, behaviours and competencies that can deliver new care pathways and identify the scale of changes to the workforce required to increase more care in the community.
8. We need to increase inter-operability of IT to support new models of care.

Testing new care pathways in the localities

Each locality is currently identifying its priority areas for implementing the Care Closer to Home strategy:

- North East: developing new care pathways to increase local access to specialist advice for patients with diabetes, those with ear, nose and throat problems and for frail older people
- City: increasing integration between GP practices and community health and social care teams
- South east: developing the RACU (Rapid Access Care Unit)
- South West: planning to meet the population growth around Didcot
- North: remodelling its urgent care pathway
- West: increasing support for frail older people in the community

Engagement and Consultation

December 2015/January 2016/early February 2016

- Testing ideas with primary care, social care, community care
- Developing with colleagues from other providers and the voluntary sector
- Bringing our early thinking to the HOSC
- Talking to the Care Closer to Home Patient Advisory Group
- Discussing ideas in localities

February to June 2016

Feeding this work into the development of and engagement in the Oxfordshire's Sustainability and Transformation Plan

- How can we close the health and wellbeing gap?
- How can we drive transformation to close the care and quality gap?
- How can we close the finance and efficiency gap?

June 2016

- Final STP setting out plans for the next five years, describing the service changes required and areas of public consultation