

Health Overview and Scrutiny Committee – 17 November 2016

Chairman's Report

Liaison meetings

The Chairman attended the following meetings with representatives from health and social care organisations between June and September 2016:

- 9 September – Local Councillors, Bicester
A briefing on the progress of the transfer of patients to other surgeries and a discussion about health planning for a growing Bicester and future use of the North Bicester Surgery building.
- 27 September - Oxford University Hospitals Trust
A briefing on the issue of Obstetrics at the Horton Hospital and the acute bed and service reconfiguration proposal scheduled for discussion at HOSC on 30 September.
- 29 September –Healthwatch Oxfordshire
An introductory meeting with Rosalind Pearce, Executive Director of Healthwatch Oxfordshire.
- 12 October –Patient Participation Group, Deer Park Medical Centre
A meeting with the Patient Participation Group to discuss the best way to inform and communicate with patients about transferring to alternative practices before the Centre closes in March 2017. Approximately 3,700 of 4,300 patients registered at the practice are expected to transfer to other Witney surgeries. 8% live outside Witney and will transfer to more local surgeries.
- 2 November – Oxford University Hospitals Trust
A visit with other members of the Committee to the Discharge Liaison Hub at the John Radcliffe Hospital.
- 3 November - Oxfordshire Clinical Commissioning Group
A briefing on emerging issues in primary care services.
- 9 November – Kings Fund Annual Conference 2016
A conference to explore key challenges for the health and care system and share learning on the essential actions needed guarantee that the system can be both sustained and transformed.

Feedback on HOSC visit to the Discharge Liaison Hub

On 2nd November the Chairman and Deputy Chairman visited the Discharge Liaison Hub at the John Radcliffe Hospital to see first-hand how the discharge of patients, many of whom are frail with complex needs, is coordinated and managed by a multi-disciplinary team.

Lily O'Connor, Divisional Head of Nursing and Governance - Medicine, Rehabilitation and Cardiac Nurse Division, Oxford University Hospitals Trust provided an overview of the functions of the Liaison Hub, its multi-disciplinary team and the patients they see:

The Liaison Hub

Oxford University Hospitals Trust employs social workers (who are supervised by Oxfordshire County Council's Adult Social Care), therapists, nurses, discharge coordinators and an administrator to staff the Hub. They are currently managing the needs of 65 patients in Hub beds located in nursing homes across Oxfordshire. This number has increased from 55 beds to manage additional pressure over the Autumn/Winter. Assessments for Continuing Healthcare have also recently started for people in Hub beds, although many patients are not usually eligible for this type of NHS funded care, so the Hub team ensures that assessments for adult social care run alongside this and a package of care can be put in place without delay. Patients can stay in Hub beds for up to 6-8 weeks whilst they are assessed for longer term care.

Many of the patients dealt with through the Hub are stable, but require further assessment to determine their discharge destination. For these patients, a stay in an acute bed can do more harm than good and a Hub bed can facilitate a more accurate assessment, as well as improving the patient's perception of a care home.

The Acute Ambulatory Unit (AAU)

The Chairman and Deputy Chairman were shown around the Acute Ambulatory Unit, situated next to the Hub office – Hub patients are seen here as outpatients if their needs escalate, as evidenced by the few hospital beds and numerous patient chairs and trolleys in the Unit. The focus is on prompt assessment, sending the patient back to their nursing home with 'Acute Hospital at Home' to follow up if required.

Acute Hospital at Home

This service is relatively new and has not yet been trialled to pick up patients in their own home before they are assessed by the hospital. Initial evidence is indicating that patients recover twice as fast with this acute wrap around care compared with a stay in hospital.

Clinical Coordination Centre (CCC)

The Chairman and Deputy Chairman also met staff in the Clinical Coordination Centre, attached to the Acute Ambulatory ward. GPs can call the centre directly and speak to a consultant physician who is a member of the Hub / Acute Ambulatory ward to get advice and support with assessing a patient. Risk is shared between the GP and the consultant so that unnecessary admissions to hospital are avoided. The Centre also monitors patients in departments across the hospital and those arriving with the Ambulance Service to identify prompt discharge routes.

The Chairman is keen to arrange another visit for more HOSC members to attend, sometime next year.

Cllr Yvonne Constance
Chairman of Oxfordshire Joint Health Overview and Scrutiny Committee