

OXFORDSHIRE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

05 JUNE 2025

Update report on the work of the Oxfordshire Joint Health Overview Scrutiny Committee Oxford Community Health Hubs Working Group

Report by Director of Law and Governance and Monitoring Officer

RECOMMENDATIONS

The Committee is **RECOMMENDED** to

1. **NOTE** the work of the HOSC Oxford Community Health Hubs working group around scrutinising the Community Health Hubs project for Oxford City since the working group's establishment in April 2024.
2. **CONFIRM** its support for the continuation of the working group's existence and its ongoing scrutiny of the project to establish three Integrated Community Health Hubs in Oxford City.
3. **AGREE** to the appointment of a fourth working group member given that former Cllr Michael O'Connor is no longer a member of Oxfordshire County Council.

CONTEXT

1. Since its public meeting on 18 April 2024, a key area of the Committee's scrutiny had been around the Oxford Community Health Hubs Project launched by Oxford Health NHS Foundation Trust. This was brought initially to the attention of the Committee in a briefing delivered on 27 November 2023 by key representatives of the Trust including its Chief Executive.
2. The purpose of this project is to integrate primary, community, and dental care services within Oxford City (comprising 300 staff, 40 teams, and nine existing bases) into three hubs. The Trust believes that the integration of such community-based services into three key hubs will enable a more effective delivery of these services to patients in their communities.
3. The project aims to establish three health hubs, each located in the North, Centre, and the South of the City respectively. During the briefing it received from the Trust on 13 March 2024, the Committee were informed that the establishment of these three hubs will help to achieve the broader aims of the project which are to provide:

- Improvements in health and well-being outcomes for local residents.
 - Sustainability around travel for patients, carers and staff.
 - Direct contributions to the delivery of the Trust's Green Plan.
 - Locations which support the Trust's work to reduce health inequalities.
 - Colocation of teams and services for maximum collaboration.
4. The services within the scope of this project that patients will benefit from include children's services (including therapies and community nursing), community nursing and therapy for adults, podiatry, community specialist services (including dietetics and respiratory services), and dental community services. The hubs will also host quality and directorate management teams.
5. Below is an outline of the three Hubs, their planned locations, and the services/staff they would accommodate:
- **North City Hub:** Murray House, Jordan Hill, is envisioned to have multiple clinical and therapy rooms, 24/7 home visiting services, and integrated teams.
 - **South City Hub:** Blackbird Leys, facing the most health-deprived community, will have a flexible clinic and therapy space.
 - **Central City Hub:** East Oxford Health Centre will provide clinic, team/admin space, and therapy space with good public transport links.
6. As part of the project's development, the Trust embarked on a series of public engagements with patients, carers, families, and the wider public and key stakeholders (including the JHOSC). The focus was on engaging with affected patient groups, informing them, and gaining their involvement in the design and travel planning of the hubs. The engagement themes adopted by the Trust up to September 2024 included the design and layout of the North and South City Hubs, clinic locations, travel plans, and addressing health inequalities.

KEY SUMMARY OF WORKING GROUP ACTIVITY AND POINTS OF OBSERVATION

7. Since the working group was established in April 2024, it held four meetings with representatives from Oxford Health NHS Foundation Trust on 11 July 2024, 11 September 2024, 9 December 2024, and 4 March 2025.
8. A key reason for this project having been shared with the Committee by the Trust was to receive its endorsement and support as a JHOSC for the planned project, which is now in motion. The working group, on behalf of the JHOSC, had and continues to express its support for this project as it could lead to better health and care outcomes for patients in Oxford City who rely on these community-based services.
9. Below is a summary of some key themes/areas of discussion that the working group has had in its interactions with the NHS since January 2024. The below

themes also include some points of observation that the working group has in relation to the ongoing Community Health Hubs project.

Colocation of Health & Care Professionals: The working group understands that the three community health hubs would serve as a space for the colocation of health and care professionals that provide services to local communities throughout the City. The increasingly multidisciplinary nature of community healthcare necessitates greater integration and collaboration between both clinical and managerial/administrative teams, which the working group believes these hubs can help foster through accommodating various professionals and staff in single and larger integrated hubs.

Accessibility for patients and staff: The working group has been urging the Trust to take into account the impacts of integrating the City's community services into larger hubs on both staff as well as on patient accessibility. For staff, whilst there are advantages in fostering integrated multidisciplinary working and a pleasant physical work space, some services are delivered through clinics that will be relocated by a few miles to a new, purpose-built clinical facility better equipped to deliver patient care (e.g. dental, podiatry). These changes could impact some patients and staff who attend these clinics. To help remedy this, the working group facilitated discussions between the Trust and the County Council's Transport Services team to explore avenues to enable easy access for patients and staff to these hubs. The working group also invited the Council's Cabinet Member for Transport, who attended one of the working group meetings with the Trust.

Supporting Oxfordshire's Health and Wellbeing Strategy: The working group believes that this project could significantly support the aims and objectives of Oxfordshire's Health and Wellbeing Strategy. The strategy aims to support the County's residents through the three life stages of Start Well, Live Well, and Age Well; all of which can be bolstered by the nature of the services that will be delivered through the integrated health hubs.

- ***Start Well:*** The project could support this aspect of the strategy through Integrating 0-19 universal children's and young people's services into locality teams; co-locating family and SEND support services with children's therapies services; and providing clinical bases to support children's hospital-at-home.
- ***Live Well:*** The proposed Health Hubs could support this aspect of the strategy through; hosting more sustainable GP out-of-hours and minor injuries care; providing locally accessible services in the most health-deprived areas; improving facilities for specialist community and pediatric dental care; creating more joined up and sustainable health services for people with long-term health conditions.

- *Age Well:* The project could help elderly residents through providing single points of access to support the holistic assessment of need and to coordinate health and care responses across various services. The hubs could also provide a base for 24-hour, seven-day-a-week urgent community visiting services serving Oxford and surrounding areas.

Impact of ICB restructure: The working group (as does the wider Committee) understands that the ICB had recently undergone a restructure of its staffing, with one aspect having been the removal of the post of place director for Oxfordshire. The working group has expressed concern regarding the impact that the Oxfordshire place director removal could have on the delivery of the health hubs project and the immense progress that has been made so far in reaching the current point. It was partly through the presence and contributions of a place director which enabled the stakeholder engagement to be undertaken, and which established a clear channel and avenues of communication between the Trust, the ICB, and other key system partners (including the JHOSC). The working group has therefore urged the ICB and its Chief Delivery Officer (who is the ICB's Executive Sponsor for Oxfordshire) to continue to support the progress and development of such place-based projects. This will be crucial in light of the fact that the ICB has been instructed by the government to make further reductions to its running costs.

Importance of ongoing coproduction: The working group understands that the Trust has engaged with patients, carers, families and the wider public around this project's development. Coproduction should remain at the heart of determining the nature of this project and the services to be delivered at the three proposed health hubs in the City. The working group was informed that the Trust sought to map out seldom heard groups. It is crucial for there to be transparency around which specific patient/population groups were approached and engaged with, and what the format of this engagement was. The working group was also pleased to hear that four key themes were utilised as part of the public engagements which included:

- Design and layout of North and South City Hubs.
- Locations of the clinics and the opportunities around the changes.
- Informing travel plans for each hub.
- Addressing health inequalities, particularly around increasing patient awareness of and making services accessible.

The working group has also continually stressed the need for the Trust to continue to engage in coproduction with local residents in the City so as to not only determine the locations and services of the proposed hubs, but also in the event of any potential future barriers that arise that could result in complications or delays to the project's delivery.

LEGAL IMPLICATIONS

There are no direct financial implications arising from this report.

Kim Sawyer, Interim Head of Legal and Governance.

FINANCE IMPLICATIONS

There are no direct financial implications arising from this report.

Drew Hodgson, Strategic Finance Business Partner.

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