

## Joint Health Overview and Scrutiny Committee

### Response to Report of the Joint Health Overview and Scrutiny Committee (HOSC): Support for People Leaving Hospital

#### Response to report:

We thank the Committee for their report on Support for People Leaving Hospital. The HOSC meeting on 30 January 2025 was a welcome opportunity to update the committee on the performance of the Home First D2A service and impact on the Oxfordshire system, noting particularly the successful outcomes for Oxfordshire residents following reablement and ongoing joint working across health and social care partners.

As highlighted in the HOSC meeting and supporting papers, reducing non-elective admissions aligns closely with the Oxfordshire Way and ambition to work proactively as a system to support people to live independently at home. Reducing admissions is therefore a key focus for the Better Care Fund plan for 25/26. On 30<sup>th</sup> April we received confirmation from NHS England that our plan has been recommended for approval and we are working to ensure we can deliver it.

As articulated in the report, we have now several Integrated Neighbourhood Teams in Oxfordshire and we have committed Better Care Funding to continue developing these in 25/26. This aligns with both our Oxfordshire ambition to build community and neighbourhood capacity and the national policy ambition to transform health and social care delivery in line with neighbourhood.

#### Response to recommendations

Recommendation	Accepted, rejected or partially accepted	Proposed action (including if different to that recommended) and indicative timescale.
To support data sharing across the whole system to help to understand the causes of non-elective admissions into hospital. It is recommended that there is good relationship building across the system to support this.	Partially accepted	<b>Action</b> – Continue to interrogate and share data relating to non-elective admissions in existing system-wide forums to prevent an increase in emergency admissions activity. This work will continue throughout 25/26, monitored at regular intervals and evaluated fully at year-end.  As a system we recognise the importance of data sharing and we already work collaboratively across organisations to facilitate this. Operationally, we share data across the Oxfordshire system to support management of care pathways and we have data sharing agreements in place between Oxfordshire County Council, Oxford University Hospitals, Oxford Health and Buckinghamshire, Oxfordshire and

Berkshire West ICB, and Age UK Oxfordshire to support this.

In addition, we have developed system-level reports that support analysis of trends and opportunities to avoid emergency admissions. This data is reviewed by operational and system leaders to develop practical insights and solutions and support system planning priorities:

- Oxfordshire Urgent Care Delivery Group (fortnightly)
  - A system-wide meeting to discuss operational issues arising in the UEC landscape, including non-elective admissions
- Urgent & Emergency Care Board (monthly)
  - A senior system-wide strategic oversight meeting where the Oxfordshire system sit-rep (which has recently been further developed by the Information Team meeting group in the below bullet) is presented and discussed at length. This sit-rep has improved visibility of overall system performance. The report includes data from emergency, acute, community, mental health, adult social care and primary care services and has enabled us to identify trends in admissions.
- Oxfordshire System Information Team Meeting (weekly)
  - A meeting with information teams and lead commissioners across all providers including social care. This includes a focus on non-elective admissions, numbers admitted from each GP practice, age groups and diagnostic reasons for admission. The group has also met with some GP practices to review the rate and reasons for admission by age group.
  - The BCF 25/26 is continuing to fund a system Business Intelligence post to continue developing our data analysis capacity
- Oxfordshire systems call (daily)

		<ul style="list-style-type: none"> <li>○ A system-wide meeting focusing on individual cases. Daily analysis of cases over the last few months has enabled identification of trends relating to readmissions.</li> </ul> <p>Oxfordshire's 25/26 BCF plan is to prevent an increase in non-elective admissions. To deliver this we have several schemes which include:</p> <ul style="list-style-type: none"> <li>- Continuing to invest in services that address health inequalities and avoid admissions: <ul style="list-style-type: none"> <li>○ Our analysis has shown that biggest growth in non-elective admissions in Oxfordshire is people aged 50-64, especially in deprived areas. We are therefore focusing on developing community responses in these areas</li> <li>○ Provide support and alternatives to admission for adults and children living with learning disability and/or autism</li> <li>○ Provide step up support through dedicated homelessness pathways</li> </ul> </li> <li>- Continuing to further join up working and focus on community-based care models: <ul style="list-style-type: none"> <li>- Developing our Single Point of Access to coordinate community resources, utilise call before convey, and reduce admissions</li> <li>- Working with our care homes to determine what support is needed to reduce hospital admissions from care homes</li> <li>- Ongoing work with the system Falls group to understand how we can work with ambulance and community responders to prevent falls and, by extension, hospital admissions and enable people to stay safely at home</li> </ul> </li> </ul>
<p>To continue to support sufficient funding and resource for integrated neighbourhood teams. It is recommended that measures are taken to ensure workforce availability to maximise support for discharged</p>	<p>Accepted</p>	<p><b>Action</b> – Continue to develop our existing INTs throughout 25/26 in line with NHSE Neighbourhood Planning Guidance. This will be evaluated within the governance structures for the Better Care Fund 25/26.</p> <p>Funding from the Better Care Fund 25/26 has been used to continue the development of INTs throughout Oxfordshire. These INTs will continue to</p>

<p>patients in both urban and rural areas across Oxfordshire.</p>		<p>focus on support for people to either keep them at home or follow up post-hospital admission.</p> <p>As outlined in the previous section, supporting this patient cohort in the community is a key part of our strategy to reduce non-elective admissions.</p> <p>Aligned with this, our HomeFirst system teams are currently being realigned to ensure an equitable response to the demand in each area. In the current model West and Vale form one team. We hope the creation of a separate Vale team will help to ensure workforce availability within those areas.</p> <p>The Neighbourhood Health Guidelines 25/26 published by NHS England highlight core components associated with effective neighbourhood services. These cover both the emergency preventative response delivered by INT and the wider preventative model that supports system, community and individual resilience. The relationships and opportunities from a neighbourhood approach to care is a key part of the agenda at a system-wide away day scheduled for 15<sup>th</sup> May.</p>
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