

Appendix 1: Health Overview & Scrutiny Recommendation Response Pro Forma

Where a joint health overview and scrutiny committee makes a report or recommendation to a responsible person (a relevant NHS body or a relevant health service provider[this can include the County Council]), the Health and Social Care Act 2012 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provide that the committee may require a response from the responsible person to whom it has made the report or recommendation and that person must respond in writing within 28 days of the request.

This template provides a structure which respondents are encouraged to use. However, respondents are welcome to depart from the suggested structure provided the same information is included in a response. The usual way to publish a response is to include it in the agenda of a meeting of the body to which the report or recommendations were addressed.

Issue: Support for People Leaving Hospital; the Oxfordshire Way

Lead Cabinet Member(s) or Responsible Person:

- Cllr Tim Bearder- Cabinet Member for Adult Social Care.
- Karen Fuller- Corporate Director of Adult Social Care.
- Ian Bottomley, Lead Commissioner – Age Well.
- Pippa Corner- Deputy Director – Joint Commissioning; Health, Education and Social Care.
- Daniel Leveson- BOB ICB Place Director for Oxfordshire.

It is requested that a response is provided on behalf of the system to each of the recommendations outlined below:

Deadline for response: Tuesday 26th March 2024

Response to report:

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Response to recommendations:

Recommendation	Accepted, rejected or partially accepted	Proposed action (including if different to that recommended) and indicative timescale.
<p>1. That a process of learning and evaluation is reviewed and developed. It is recommended that input from Healthwatch Oxfordshire and service users is also enabled inasmuch as possible so as to improve the process of learning and evaluation.</p>		
<p>2. For the establishment of clear KPIs for the purposes of measuring the performance of services delivered under Discharge to Assess and the Oxfordshire Way. It is recommended that there is clear transparency around this, alongside the inclusion of lived experience (including the learnings from the data in the Wantage co-production work) and the evaluation of long-term outcomes.</p>		
<p>3. For communications and regular public engagement to be adopted so as to provide reassurances to the public as to the quality of the services they could expect to receive upon being discharged from hospital; and for any additional</p>		

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<p>feedback from the public or stakeholders to be heard.</p>		
<p>4. For patients to be clearly communicated with in relation to the services they will receive upon being discharged from hospital. It is also recommended that leaflets for patients include an outline of the complaints processes in place.</p>		
<p>5. To ensure that staff who provide support for discharged patients at home receive adequate and ongoing training.</p>		
<p>6. To ensure that integrated neighbourhood teams are sufficiently resourced and geographically spread in as appropriate a way possible so as to meet demand across both rural and urban areas. It is recommended that any available resources are maximised to meet demand for support at home, and that further funding is sought to support vital local transformation and prevention work in local communities.</p>		
<p>7. As agreed during the meeting on 16 January, for site visits to be arranged to provide the Committee with insights into how the Discharge-to-Assess process functioned in practice.</p>		

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