

# OXFORDSHIRE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

29 JANUARY 2026

## Update Report from the Oxfordshire Joint Health Overview Scrutiny Committee (JHOSC) Substantial Change Working Group

### Report by Director of Law and Governance and Monitoring Officer

#### RECOMMENDATIONS

The Committee is **RECOMMENDED** to:

1. **NOTE** the work of the JHOSC substantial change working group around scrutinising the project to redevelop Wantage Community Hospital since the previous update provided to the Committee on 30 January 2025.
2. **CONFIRM** its support for the working group continuing for a further 12 months and its ongoing scrutiny of the project to redevelop the Hospital.
3. **AGREE** the appointment of three new permanent members for the working group to replace those members who are no longer on the committee: Councillors Champken-Woods, Haywood and Barrow.

In agreeing to the appointment of three new members to the working group, the Committee is exercising its powers pursuant to Part 6.1B of Oxfordshire County Council's Constitution which states that:

*'The Committee may appoint such Working Groups of their members as they may determine to undertake and report back to the Committee on specified investigations or reviews as set out in the work programme. Appointments to such Working Groups will be made by the Committee, ensuring political balance as far as possible. Such panels will exist for a fixed period, on the expiry of which they shall cease to exist.'*

#### HISTORICAL EVENTS AND CONTEXT

1. This report provides a comprehensive update on the activities of the substantial change working group since January 2025 and sets out the group's current position on the redevelopment of Wantage Community Hospital. The Joint Health Overview and Scrutiny Committee (JHOSC) has a statutory responsibility to scrutinise substantial changes to health services. The redevelopment of Wantage Community Hospital is one of the most significant local health projects in recent years, and its progress is of considerable public interest.
2. The working group's role is to ensure transparency, accountability, and that the project delivers on the plan.

3. Since the closure of the inpatient beds at the hospital in 2016, several temporary pilot hospital services have been launched and reported to the Committee by Oxford Health NHS Foundation Trust (NHSFT). Nick Broughton, the Chief Executive Officer of the Trust at the time, provided strong personal assurance in 2021 that there would be a solution to determine and agree the future of the hospital if the local community in Wantage placed their trust in working with the NHS again. These assurances were also echoed by the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board's (BOB ICB) Director of Place for Oxfordshire.
4. A fuller history of the events surrounding the closure of the inpatient beds at Wantage Community Hospital was included in the agenda papers for the Committee's 30 June 2023 meeting: [Wantage Community Hospital Timeline.pdf \(oxfordshire.gov.uk\)](https://www.oxfordshire.gov.uk/Wantage%20Community%20Hospital%20Timeline.pdf).
5. The ICB and Oxford Health NHSFT launched a public engagement exercise in late 2023 with the local community and Wantage Town Council, which was also subjected to oversight and scrutiny from the JHOSC. Considerations were also being given as to whether the JHOSC should exercise its power to refer this matter to the Secretary of State for Health and Social Care.
6. The JHOSC supported the re-engagement of local stakeholders with the NHS with a view to put co-production at the heart of these engagements. The redevelopment plan co-produced with Wantage Town Council following the public engagements with the community in late 2023 promised a major infrastructure improvement of the hospital estate to modernise facilities. The purpose of the redevelopment plan was to bring `hospital services to the community`, improve accessibility to hospital services and reduce thousands of resident journeys into Oxford hospitals.
7. Upon the completion of the public engagement exercise in late 2023, the substantial change working group made the following recommendation to the wider Committee in its public meeting on 16 January 2024:

*“That the matter of the closure of inpatient beds at Wantage Community Hospital is **NOT** referred to the Secretary of State for Health and Social Care.”*

8. In agreeing to this recommendation, the Committee took into account the report which was submitted by the NHS and outlined the NHS's offer, and the assurances given by local organisations and letters of support from all partners. Annex 1 of this report below specifies the NHS's coproduced report recommendations as to the future of Wantage Community Hospital developed subsequent to the 2023 public engagement exercise.
9. In addition, the aforementioned recommendations (found in Annex 1 of this report) also received support from Wantage Town Council, which published a motion to this effect in January 2024. Key reasons for supporting the coproduced recommendations included the population figures and projected population increase for Wantage, the expressed local preferences from the engagement and consultation exercise, and a detailed understanding by the community of the

financial levers available to the NHS to improve services.. The Town Council supported the permanent retention of the outpatient pilot clinics and additional outpatient services, with a view to the hospital having a sustainable future. Further details of the motion can be found here:

<https://wantagetowncouncil.gov.uk/wp-content/uploads/2024/01/Health-Committee-motion-from-Wantage-Town-Council-corrected-15Jan2024-1.pdf>.

10. The Committee, for its part, issued the following recommendations to Oxford Health NHS Foundation Trust and the BOB Integrated Care Board in its public meeting on 16 January 2024:

1. *That there is no undue delay in securing the CIL funding available in full for the purposes of providing the additional proposed clinical services on the ground floor of Wantage Community Hospital given the removal of the in-patient beds since 2016. It is recommended that there is a maximisation of the ground floor of the hospital for the purposes of expanding these specialist services.*
2. *That the Project Delivery Plan for the future of the hospital's ground floor services is delivered on schedule as much as possible, and that there is ongoing scrutiny over the process of delivering the plan and its outcomes for the local population.*
3. *For a meeting to be convened as early as possible between identified leads within BOB ICB, Wantage PCN, Oxford University Hospitals, Oxford Health, Oxfordshire County Council, Wantage Town Council, and HOSC; with a view to plan for continued momentum on co-production and agreed scrutiny moving forward.*

11. These JHOSC recommendations were agreed by Oxford Health NHS Foundation Trust and the BOB Integrated Care Board, with both organisations expressing a clear commitment to take them on board.

12. The rationale behind recommendation 3 was to establish mechanisms through which the project delivery plan for hospital-like services at Wantage Community Hospital could be subjected to continuous oversight and scrutiny. It was in this context that the JHOSC substantial change working group initiated its oversight and scrutiny of the project.

## **KEY SUMMARY OF WORKING GROUP ACTIVITY AND POINTS OF OBSERVATION**

13. Since the working group last reported to the Committee in January 2025, it has held 2 meetings with representatives of Oxford Health NHS Foundation Trust and the ICB on 10 June 2025 and 8 December 2025. Set out 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 2025.

### **(a) Meeting 1: 10 June 2025:**

The June meeting was pivotal in clarifying the procurement process and its implications for the project timeline. Oxford Health NHSFT confirmed that a re-procurement exercise was required, introducing a short delay. While such delays are not uncommon in such projects, the working group emphasised the reputational risk of uncertainty and the need for proactive communication.

Key analytical points raised by the working group included:

- *Funding resilience:* The group sought assurance that the availability of the Community Infrastructure Levy (CIL) allocation would not be jeopardised by the delay. Vale of White Horse District Council confirmed that timing would not affect eligibility and may also allow replenishment of the funding pot.
- *Service ambition versus operational reality:* The group pressed for clarity on which services Oxford University Hospitals NHSFT would commit to delivering at Wantage. While infusions and respiratory clinics were confirmed other services such as cardiac, neurology and epilepsy services remained contingent on recruitment.
- *Governance and co-production:* Members reiterated that local voices must shape both design and service planning. It was reiterated that co-production remained critical to ensuring utilisation and patient confidence. The working group were assured that the co-production partners were meeting once every two weeks and that this was helping with solutions being found for operational challenges.

### **(b) Meeting 2: 8 December 2025 – Online Check-in**

By December, the project had moved into a more operational phase. Oxford Health NHSFT reported that Phase 1 of the refurbishment was scheduled to complete by late January 2026, with Phase 2 commencing immediately afterwards. Full completion was targeted for May 2026, subject to contractor progress and site conditions.

Key analytical points raised by the working group included:

- *Program discipline:* The group welcomed the structured timeline but noted that hazardous materials (lead paint) posed a risk to schedule integrity. The need for clarity on the impact of this, including financial and contingency planning, was highlighted.
- *Service continuity:* Temporary relocation of ophthalmology and audiology clinics to Wantage Health Centre was seen as a pragmatic solution, but members stressed the importance of clear communication to avoid patient confusion about future local availability of these services. It was agreed between the working group and Oxford Health NHSFT that there should be a communication to the Wantage Town Council Health Committee regarding this.
- *Future service mix:* Dependent on recruitment and coordination with Oxford University Hospitals NHSFT new services were confirmed which were to

include sexual health, red cell infusions, and respiratory clinics. Tentative additions included cardiology, vagus nerve stimulation (epilepsy), and paediatric allergy. The working group observed that the uncertainties could undermine the delivery of the plan and that clarification on these services be provided as soon as possible. The group also requested projections on the reduced number of journeys to Oxford as a result of the availability of all confirmed clinics (including pilots) against the original ambitions of the 2023 plan.

- *Community engagement:* Plans for improved transport links, including the purchase by the Town Council of two buses and recruitment plans for volunteers were welcomed. The League of Friends offered support for design and wayfinding improvements, reinforcing the strength of local partnerships.
- *Recruitment challenges:* The group noted concerns about recent recruitment controls and agreed to seek clarification from Oxford University Hospitals NHSFT on whether these would affect specialist posts at the hospital.

## **CURRENT EVENTS AND KEY OBSERVATIONS FROM THE WORKING GROUP:**

14. Despite procurement delays earlier in the year, the project is now on track. Contractors have been appointed, surveys completed, and the Phase 1 works are underway. The service model is taking shape, with evidence of some confirmed new outpatient provision to reduce the need for patients to travel to Oxford. The working group recognises that the work to date is evidence of meaningful and strong co-production which has resulted in a more positive relationship with Wantage town and its community.
15. Nonetheless, the group remains alert to risks around recruitment, hazardous materials, and funding dependencies.
16. Below is a summary of some of the key observations the working group has in relation to current events/developments surrounding the project to redevelop the hospital.
  - *Program discipline is critical:* The May 2026 completion date must be monitored closely, and contingency plans need to be in place for unforeseen issues such as hazardous materials.
  - *Service ambition is welcome but fragile:* While the proposed range of clinics is key to delivery of the plan, recruitment challenges could undermine delivery. The engagement of Oxford University Hospitals NHSFT (OUH) with the project is essential to confirm commitments to specific services that will be delivered at the hospital. The acute Trust gave commitment to the original plan and has worked positively with the co-production. '*Hospital to Community*' is part of the OUH strategy and the Trust has confirmed a few clinics. However, without further clear commitments from the acute Trust, full reassurances cannot be provided to the working group and the wider community in Wantage about the delivery of the plan and therefore the overall service ambition remains fragile.

- *End of life care:* The focus has been on the major refurbishment and expansion of planned care services (Plan point 2). Wider commitments by the ICB were made under the plan to keep the OX12 area in mind for an offer relating to end of life care as well as a frailty service (Plan points 1 and 3). The working group notes the recent extension of end of life care in Newbury, South Oxfordshire and Reading, and will seek clarification on what consideration has been given to the commitment made to the Wantage population.
- *Community partnership is a strength:* The involvement of Wantage Town Council Health Committee members and the League of Friends demonstrates genuine co-production, which should be maintained throughout the course of this project. The working group continues to insist on the NHS's involvement of the local Town Council given its localised roots and connections to the community. The core group of system partners which meets regularly with the NHS and includes two local members who sit on the Towns health committee is critical and the arrangements should continue.
- *Communication must remain proactive:* Public messaging should balance optimism with realism, particularly around timelines and any temporary service arrangements that are put into place. It is vital that any obstacles or delays to the project are communicated as early and transparently as possible to maintain trust and confidence among the community.
- *Transport and accessibility need continued attention:* The volunteer-led transport initiatives are promising. The purchase of two buses by the Town Council is a big step forward, but volunteers will be needed alongside coordination and clear information for patients. The increased temporary parking as well as the County Council's planned consultation on traffic enforcement in the area are positive steps but require continued attention.

## **NEXT STEPS:**

17. The working group is seeking the wider Committee's support to continue to engage in scrutiny of the ongoing delivery of the project to redevelop Wantage Community Hospital for a further 12 months. The appointment of three new members must abide by the rules of political balance outlined in Part 6.1B of Oxfordshire County Council's Constitution.
18. The project to redevelop Wantage Community Hospital was initially outlined to the Committee in January 2024. The working group will continue to hold regular check-ins with key representatives of Oxford Health NHS Foundation Trust, Oxford University Hospitals NHS Foundation Trust, the BOB Integrated Care Board and Wantage Town Council (with a view to scheduling more of these from March 2026 onwards).
19. The working group will also report back to the Committee in 12 months, and will report any other key milestones or developments relating to the project to the wider Committee as required.

## **LEGAL IMPLICATIONS**

20. The appointment of three new members to the working group must be undertaken pursuant to the constitution with regards to working group membership and political balance as set out in Part 6.1B of Oxfordshire County Council's Constitution which states that:

*'The Committee may appoint such Working Groups of their members as they may determine to undertake and report back to the Committee on specified investigations or reviews as set out in the work programme. Appointments to such Working Groups will be made by the Committee, ensuring political balance as far as possible. Such panels will exist for a fixed period, on the expiry of which they shall cease to exist.'*

21. There are no other direct legal implications arising from this report relating to the ongoing project to redevelop Wantage Community Hospital.

Comments checked by: Jay Akbar (Head of Legal & Governance Services and Deputy Monitoring Officer)

## **FINANCE IMPLICATIONS**

22. There are no direct financial implications arising from this report on the basis that appointment of new members to the working group are from within the existing budget structure.

Comments checked by: Drew Hodgson (Strategic Finance Business Partner – Resources, FRCS and TDCE).

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## **ANNEX 1:**

Below is the full list of recommendations as to the future of Wantage Community Hospital that the NHS's coproduced report outlined (these recommendations emerged subsequent to the public engagement exercise which took place in 2023):

**1. *In relation to inpatient beds and the alternatives:***

- *Based on coproduction and considering evidence and findings from engagement we recommend the community inpatient beds at Wantage Community Hospital are permanently closed.*
- *In line with wider work the BOB ICB is taking forward work to improve the local end of life care pathway, to see how we can strengthen the local offer for patients requiring palliative care.*

**2. *In relation to planned care services:***

- *ICB, OHFT and OUHFT work to confirm the outpatient services currently being delivered in Wantage Community Hospital.*
- *ICB to work with providers (including OHFT, OUHFT and other service providers) to identify sustainable community clinic-based services from Wantage Community Hospital. There is a commitment if this option is chosen to work in a co-productive way to develop the services to be provided at the hospital.*

**3. *In relation to urgent care:***

- *Due to the high capital cost of providing a large x-ray within the hospital against the significant demands and constraints of the limited available capital funding in the system alongside the concerns over the workforce implications, it is not recommended to take forward a walk-in service at the community hospital at this time. However, consideration should be given to what diagnostic services could be included as part of the same day services and this should be kept under consideration in the future.*
- *Based on the noted increased complexity of needs within the local population, it is recommended to focus on developing a specialist local response service for those with long term conditions. There is a commitment if this option is chosen to work in a co-productive way to develop the services to be provided at the hospital.*