

Public Consultation

The future of provision of Intermediate Care in North Oxfordshire

5th October to 8th December 2015

Introduction

Oxfordshire County Council is running a public consultation between 5th October and 8th December 2015 to give the public an opportunity to consider, influence and give your views on two proposed models for providing Intermediate Care in the north of the county. We hope you will take this opportunity to find out more about our proposals and why this situation has come about.

The bigger financial picture

Like the rest of the council, the adult social care services budget is under considerable financial pressure as there is less money coming from central government as well as increasing numbers of people needing more complex support. The council is currently in the process of making approximately £292 million of savings. Those savings began in 2010 and run until 2018. On top of these savings, additional savings of around £50 million will have to be made over the next four years, as the government continues to reduce funding for councils and demand for services continues to rise. Our calculations are based on the Government's broad savings targets across the public sector for the new parliament.

Although there has been relative protection for the National Health Service, it too faces significant financial challenges. Nationally, although the NHS will benefit from additional investment of £8 billion by 2020, it also has to identify annual savings of £22 billion by then as well. For Oxfordshire, this amounts to £270 million. In other words, one-quarter of total NHS spending will have to be redirected. It is clear that this will require significant changes in the way that services are delivered with more people supported at home rather than through bed-based care.

Help and care

We all want to live our lives as best we can, whatever our difficulties, disabilities, physical or mental health problems and circumstances.

We all need help to do this, possibly just for a short time or maybe much longer term or for the rest of our lives. It might be because of an injury or a fall, becoming ill, struggling to manage a long term condition such as diabetes, or because events in our lives have triggered a period of mental ill health or depression. Sometimes several things happen at once and the situation becomes even more complicated and hard to manage. Some of us have friends and family to help, some of us may be coping alone.

In addition to local support given by voluntary and community groups, organisations involved in health and social care services are working together to fundamentally change the way that they are provided. New teams are being developed bringing together professionals (nurses, social workers, health visitors, and occupational therapists) to provide what people need in their communities. Locally and nationally people say they want services to work together, to see the person - not just their illness or disability.

Most help and support is best provided at home. Again, this is what people say they prefer, whether it is medical treatment, rehabilitation or help with personal care such as washing, dressing and using the toilet. People recover more quickly at home and are often able to stay in touch with friends and family. When they are close to the end of their life, most people tell us they want to die at home.

In short, we need to focus on the person and their family, friends and community, not on the system. Intermediate Care is just one part of the picture. Oxfordshire County Council and the Oxfordshire Clinical Commissioning Group fund and support a wide range of services (see Glossary of services in North Oxfordshire) which people can use to stay safe and be independent at home.

What is Intermediate Care?

Intermediate care services are designed to help people, usually older people, who have an illness or injury to stay at home rather than go into hospital, and to support people to get back home as quickly as possible after a hospital stay.

Intermediate care services can be provided to people in different ways. Although most Intermediate Care in Oxfordshire is currently provided as a bed-based service, it can also be provided as a community service in people's own homes by a team of social care and health staff.

Intermediate Care beds are defined as "short term beds commissioned in care homes that are supported with therapy inputs, aimed at maximising the patient's independence and capacity to undertake activities of daily living". As part of their contractual terms, providers of Intermediate Care beds in Oxfordshire are required to deliver services that:

- Provide nursing supported Intermediate Care bed(s) to meet a range of patient needs, 24 hours per day, 7 days per week
- Actively promotes the health and independence of all those admitted
- Ensure people are cared for in an appropriate setting, with respect to personal privacy, dignity, choice and independence, and are provided with opportunities for rehabilitation and recovery throughout their stay
- Provide a holistic care experience which addresses the physical, psychological, cultural and social needs of patients, their family, friends, and carers
- Facilitate timely discharges from hospital and prompt admissions from the community
- Comprehensively assess the risks associated with the person's needs and care, including any pressure damage and potential to fall, to take action as necessary and develop and document a plan to manage these risks

- Develop and deliver an effective, person-centred, documented care plan(s) that provides enabling care and support to assist patients who are recovering from an acute episode or period of ill health to regain their confidence, motivation and ability to undertake activities of daily living
- Complete and deliver the therapy care plan for the patient, in accordance with its requirements, day and night, on a 7 day per week basis
- Identify a named and suitably qualified key worker(s) to support the patient and act as a point of contact for other members of the Multidisciplinary Team (MDT) and the patient's family and informal carers
- Provide services that are compliant with the Essential Standards of Quality and Safety

The purpose of intermediate care based in the community is to provide a structured programme of therapy-led, supportive and enabling care to service users in order to:

- Assist and enable service users to achieve and maintain an optimum level of health and independence at home or in another community setting
- Reduce inappropriate or avoidable admissions to, and facilitate prompt discharges from hospital (i.e. step up/step down care)
- Enable a full assessment of the service user's needs and future care requirements to be carried out in a non-acute environment where the focus is on promoting independence and a return home

People receiving Intermediate Care are more likely to display some of the following characteristics and as such staff providing this care are trained and equipped to meet these needs:

- General to extreme frailty
- Complex health and social care needs
- Requirement for double-handed care (i.e. care that needs to be provided by two members of staff)
- Dementia
- May require medical review
- Need for recovery and recuperation following an acute inpatient stay
- Sensory impairment
- Communication difficulties including speech impairment
- Cognitive impairment, general confusion or disorientation which may at times give rise to unusual and occasionally challenging behaviour.

Locally, the County Council and the Oxfordshire Clinical Commissioning Group are developing and evaluating new ways to support people in avoiding hospital admissions, to return home more quickly, and to have the care they need at home. This includes developing intermediate care services available to people in their own homes, as well as reablement services. Intermediate care is distinct from reablement services in that it provides more clinical input.

Oxfordshire County Council purchases intermediate care services for the public of Oxfordshire within a set budget. The standard model of Intermediate Care involves a combination of social care and nursing staff, with therapy (such as physiotherapy

or speech therapy) provided by the health service and medical cover provided by GPs. All intermediate care services require this input.

How bed-based Intermediate Care is provided to people in Oxfordshire

The council currently buys the following services in Oxfordshire:

- Henry Cornish Centre in Chipping Norton, delivered by the Orders of St John Care Trust and Oxford Health NHS Foundation Trust (14 beds), it is commissioned jointly with Oxfordshire Clinical Commissioning Group using a pooled budget (section 75 funding)
- Isis Care and Retirement Centre, Oxford, delivered by Orders of St John Care Trust (20 beds)
- Watlington and District Nursing Home, Watlington, delivered by Sanctuary Care (15 beds)

All three incorporate therapy such as Occupational and Physiotherapy and include medical cover from local GP's, aiming to maximise people's independence and support them to live successfully at home if possible.

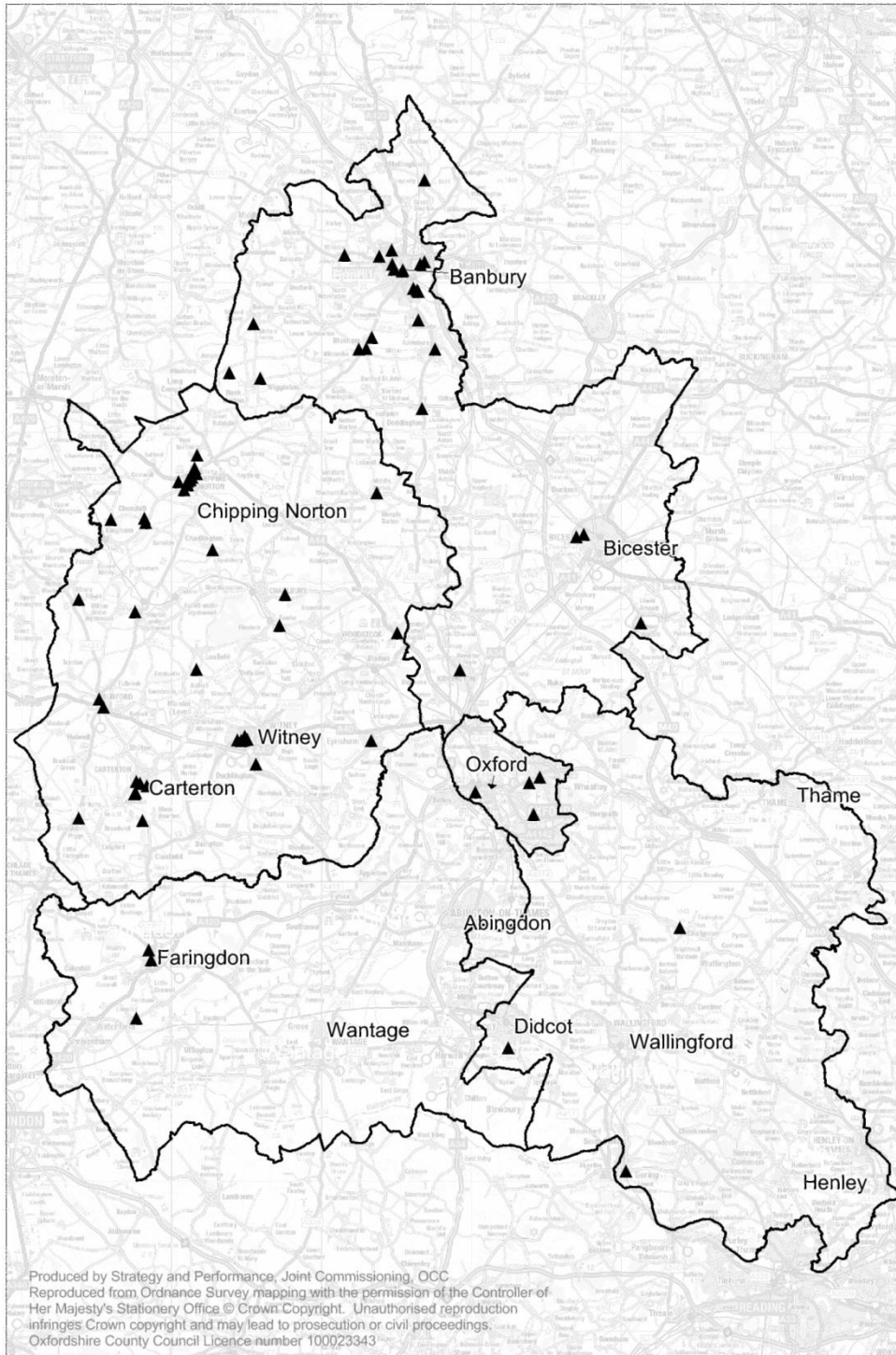
In addition, the Oxfordshire Clinical Commissioning Group has just agreed a new model of care for Henley-on-Thames. This will involve the purchase of Intermediate Care beds in the new Orders of St. John Care Trust care home that is being built.

Future use of services

The County Council has a model for predicting demographic demand for services based on the expected population growth, and has run this model for the last 8 years. Each year the council allocates specific funding to adult social care based on the growth of the population, and these funds are used to purchase additional care to meet this increased demand.

There are 49 Intermediate Care Beds in Oxfordshire; 20 in Oxford; 15 in Watlington in South Oxfordshire and 14 in Chipping Norton. Map 1 shows the home address of people who have used the intermediate care beds in Chipping Norton for six months from the December 2014. Based on a sample, 70% of people using the unit in Henry Cornish Centre are not residents of Chipping Norton and are likely to come from other parts of the county. Other people who were admitted lived in Banbury; Witney; Faringdon; Burford; and Oxford. These beds provide a service not just for Chipping Norton, but for people in a wider area of North Oxfordshire in particular as well as further afield.

Map 1. People who used Intermediate Care in Henry Cornish Centre - sample data Dec 2014 - May 2015

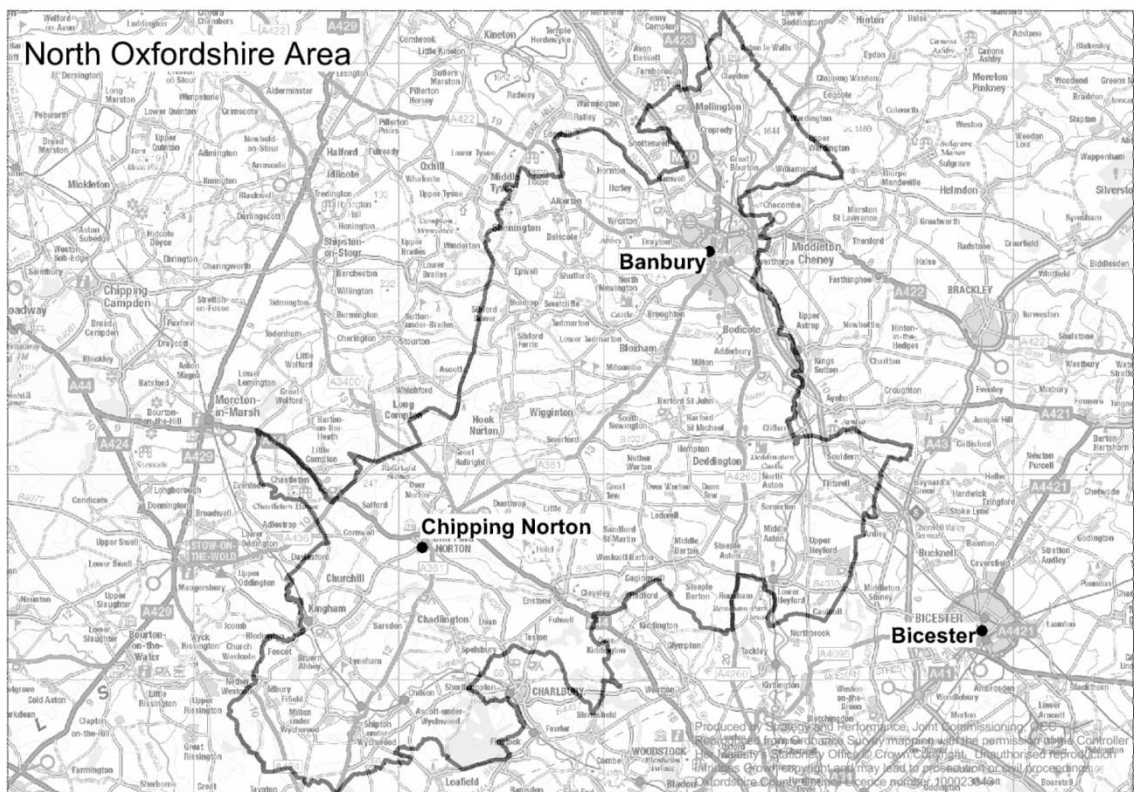


The council continues to support people based on their individual needs. To ensure that it has funds to do this, it allocates money each year based on the changing population (both overall numbers and the specific growth in the older population).

North Oxfordshire¹ has around 15% of Oxfordshire's population but 26% of the people who use social care such as home care and care in care homes, that is paid for by the county council. In part this is because it includes Banbury where we would expect higher levels of people using it, see **Table 1**. In terms of Intermediate Care beds, there are more beds in North Oxfordshire per person than in the rest of the county.

Presently in North Oxfordshire a greater proportion of the population receive both short term or one off services, such as equipment, reablement, Intermediate Care beds and on-going long term support (e.g. home care or permanent care home placement) than in the rest of the county.

Map 2. Showing the area of Oxfordshire Clinical Commissioning Group North Oxon Locality



¹ Defined as the Oxfordshire Clinical Commissioning Group North Oxon Locality

Table 1: North Oxfordshire use of services

	North Oxon	Oxon	North Oxon % of whole
Population	93,763	666,082	14.1%
Population 65+	17,368	112,425	15.4%
People receiving Long Term social care support	1,077	4,148	26.0%
People receiving Long Term social care support in a care home	278	1,559	17.8%
People receiving Long Term social care support at home	799	2,589	30.9%
Intermediate Care beds	14	39	35.9%
People receiving reablement in a year	489	2,743	17.8%
People receiving equipment in a year	1,731	11,066	15.6%

How the Intermediate Care beds currently work in Chipping Norton

The current arrangements for running the bed-based Intermediate Care services at the Henry Cornish Care Centre in Chipping Norton came about through a complex history. A report to the Council's Cabinet in 2007 set out the key elements of the proposed development on the site owned by the County Council as follows:

- A 50 bed care home built by the Orders of St. John Care Trust comprising:
 - 36 residential care beds for the elderly, 20 of which will be purchased by the council, while 16 are offered to self-payers; and
 - 14 self-contained intermediate care beds for older people/other convalescents, all of which will be purchased by the council and the, then, Oxfordshire Primary Care Trust
- A community health facility offering primary and community health care services (typically, occupational therapy, radiology, podiatry, physiotherapy, falls and outpatient clinics) with a maternity unit on the first floor (together referred to as the "Community Health Facility"). This section of the building would be operated and managed at a clinical level by the NHS

New arrangements were put in place from March 2014 in which the nursing staff are managed directly by Oxford Health NHS Foundation Trust. The Orders of St John Care Trust provide the accommodation, property, and essential care, domestic and 'hotel' services and is the registered provider.

One of the key principles by which these arrangements have been governed was related to the costs of the current arrangements

In 2011, following the changes to NHS services in Chipping Norton, the arrangements for running and staffing the Intermediate Care Unit were established on a temporary basis and in a different way to other Intermediate Care services in Oxfordshire. Oxford Health NHS Foundation Trust seconded nursing staff to the Orders of St John Care Trust to staff the Intermediate Care Unit. The Orders of St John Care Trust retained the contract to provide the unit, with associated

responsibility for quality and outcomes, while Oxford Health held clinical responsibility as employer of the nursing staff. This secondment arrangement came to an end in February 2014.

Why the way that Intermediate Care is provided in Chipping Norton has to change

The current model of separating the nursing care from the facilities management cannot continue to be afforded within the available and projected budgets.

Presently the service at the Henry Cornish Intermediate Care unit staffed by NHS nurses currently costs £1,323 per week as opposed to £977 per week for a similar service at the Orders of St John Trust Isis House Care and Retirement Centre in Oxford (and a similar amount for the Intermediate Care beds in Watlington).

The cost of the beds in Henry Cornish is being subsidised from a lump sum of £750,000 which had been made available by the former Oxfordshire Primary Care Trust. This meant that arrangements for running and staffing the Intermediate Care Unit were established on a different basis to other Intermediate Care services in Oxfordshire. This lump sum has effectively been contributing a subsidy of just over £174 per bed, per week, so that the real cost is £1,497 per bed, per week. The lump sum will disappear completely in April 2016. See **Table 2** on page 12 for a cost comparison.

Oxford Health NHS Foundation Trust and Orders of St John Care Trust put forward a business case to the council and the Oxfordshire Clinical Commissioning Group (the commissioners) in which it proposed continuing to run the unit through this joint arrangement in the longer term. This would cost nearly £1,800 a week per bed / per week which is nearly twice the cost of the 20 intermediate care beds at the Isis Care & Retirement Centre in Oxford. The model proposed in this business case was turned down by the commissioners (both the County Council and the Oxfordshire Clinical Commissioning Group) on the basis that it did not represent good value for money when compared to other Intermediate Care provision in Oxfordshire and nationally.

The current situation is not sustainable within the present or the long term financial circumstances. The irregular joint management arrangements and the split responsibility for care quality and clinical responsibility between the two organisations are not considered to be workable longer term.

The consultation

What are we trying to find out from this consultation?

Oxfordshire County Council Adult Social Care Services would like to hear people's views on two proposed models for how Intermediate Care will be provided in North Oxfordshire in the future.

What is not being consulted on and why?

This consultation will not include whether or not the NHS will provide the intermediate care beds. This option is not viable as it is unaffordable and does not provide good value for money compared with other similar services.

This consultation is about provision of intermediate care services, and does not include consideration of the future of community hospitals in the county.

Proposed Models

After careful consideration there are two models we are consulting on, Model A and Model B outlined below.

Model A

The Intermediate Care Unit in Chipping Norton continues and the full 14 bed service is provided by the Orders of St John Care Trust.

The Orders of St John Care Trust have developed a model to take over the provision of the Intermediate Care Unit, including the transfer of nursing staff from Oxford Health NHS Foundation Trust. Changing the provider organisation so that the Orders of St John Care Trust provide the Intermediate Care Beds at the Henry Cornish Care Centre would be considerably less costly in the longer term at approximately £1000 per bed per week (compared to the current cost of £1,497).

The Orders of St. John Care Trust would provide the building and employ the staff, and the support from therapists employed by Oxford Health NHS Foundation Trust would continue, along with medical cover provided by GPs funded by Oxfordshire Clinical Commissioning Group.

Whilst the contract for the provision of Intermediate Care beds does not specify the banding of nurses employed to support the beds, the contract asks the provider to determine the appropriate level of staffing within the home. However, it is the service provider's responsibility to ensure the level of staffing is appropriate to meet the needs of patients, as would be the case for any provider, whether NHS or otherwise.

Any organisation contracted by Oxfordshire County Council and the Oxfordshire Clinical Commissioning Group to provide the Intermediate Care beds is required to provide a team of staff who are skilled, experienced and equipped to care for patients with a range of complex medical care needs. The nursing skills and capabilities required of the provider's staff include the following non-exhaustive list:

- Recognise, record and report any change in patients' conditions in a timely manner and take the correct action to meet changing needs. This may include use of specific equipment such as syringe drivers
- Take appropriate action in response to emergency situations; including choking, cardiac events, seizures and anaphylaxis
- Continence care - including male and female catheterisation and the development of strategies to maintain and improve continence
- Assess patients' potential to fall and to implement preventative actions to prevent falls, including thorough documentation, engaging support from other professionals and monitoring

The council, as commissioners of the Intermediate Care bed service, would continue to ensure that members of staff are properly trained, qualified and supervised, irrespective of the organisation that employs the staff. The service would continue to be inspected by the Care Quality Commission. The County Council carries out six-monthly reviews of intermediate care schemes to check safety and quality standards are upheld, and that the services are working successfully, including aspects such as referrals and discharges. These are multi-disciplinary reviews including therapy staff, Oxfordshire Clinical Commissioning Group, social work staff, the Orders of St John Care Trust and medical input.

This model is better value than the current arrangements. The reason the service is cheaper through Orders of St John Care Trust, is that the economies of scale i.e. managing 50 beds instead of 36 beds would enable the building to be used more flexibly, and more efficient use of staff time. Existing nursing staff will have the option of transferring to the employment of the Orders of St John Care Trust on their existing terms and conditions. The Orders of St John Care Trust will recruit any additional nursing staff required for the unit. Over time those staff employed on NHS terms and conditions will decrease should they decide to leave or retire. It is likely that the majority of staff would transfer from Oxford Health NHS Foundation Trust to Orders of St John Care Trust to continue delivering the service. The costs quoted in **table 2** below are based on the position once no nursing staff remaining on NHS terms and conditions.

Model B

Intermediate Care services based in people's own homes are further developed in North Oxfordshire, including Chipping Norton, and the Intermediate Care Unit at the Henry Cornish Care Centre is closed. The space that this would free up could be used as part of the existing care home already on the site.

There are currently 49 beds offering bed-based intermediate care across Oxfordshire and with people expected to stay 6 weeks on average, there is capacity to see 338 people a year. From the end of July 2015, we asked hospitals to identify people in hospital who were waiting for an Intermediate Care bed. There has been an average of 10 people per week, varying from 5 to 13. This suggests demand is slightly higher than the 49 beds. Because we cannot predict in any week how much care will be needed, a home based service will be more flexible than one that is building-based and therefore limited to the number of beds available.

Intermediate Care services would be brought to people's own homes, responding to their individual circumstances and needs by providing night visits, waking night cover, therapy, nursing and medical review as needed. The aim would be to meet a range of people's needs up to 24 hours a day 7 days a week, clearly this would linked to cover in emergency situations. This service would be free (not means tested) for a maximum of six weeks. GP cover would be provided to existing patients in their own homes. While Intermediate Care at home will continue to be developed across Oxfordshire, under model B services would be developed more intensively to provide a sustainable, appropriate alternative to bed-based care in the North Oxfordshire area.

People anticipated to benefit from this service include those who:

- As a result of an acute event or admission, including exacerbation of chronic illness have experienced a change in their physical function, confidence or motivation that has resulted in a reduced ability to live independently
- Require double-handed care but who have the potential to reduce to single-handed care following a programme of goal-focused rehabilitation (though the fact that this may not be achieved should not disqualify a service user from the opportunity for receipt of this service)
- Have a dementia or cognitive impairment but have the potential to engage in a programme of rehabilitation and whose future care needs are uncertain
- Need time to recover from an acute episode but no longer require hospital care

The aims and objectives for a home-based intermediate care service is:

- To provide a supported home based service to people who have the potential for further rehabilitation following an acute period of care
- To increase the numbers of people able to be supported in their own home
- To assist the individual to achieve and maintain an optimum level of independence and health
- To ensure that people are cared for in an appropriate setting, with respect to personal privacy, dignity, independence and choice and are provided with opportunities for rehabilitation and recovery wherever possible
- To provide a holistic care experience that addresses the physical, psychological, cultural and social needs not only of the service user but their carers, friends and relatives
- To sustain the service users in their own homes or agreed onward placement by organising and utilising all available services
- To reduce the overall numbers of people being readmitted into acute and admitted to long-term care facilities

There will always be some people whose particular conditions and circumstances mean they need bed-based care. If the decision following consultation is to close the Intermediate Care Unit in Chipping Norton, those people would continue to be able to access bed-based intermediate care in other units in Oxfordshire.

We have produced some case studies to help people understand how intermediate care at home might be delivered see Appendix B

Costs comparison

The council assesses good value by looking at the combination of quality and price; focusing on good quality of care enables people to become independent, and to live in their own home and to carry out everyday tasks themselves. The council use 'unit cost' per week as a value for money indicator as it is easy to make comparisons between providers.

Table 2: Comparative costs of current and proposed models

Model of care	Cost per week	Cost per year (based on 14 people at one time)
Service as run currently by Orders of St John Care Trust and Oxford Health NHS Foundation Trust	£1,323 per bed (subsidised through a one-off sum from the former Primary Care Trust which will be used up by April 2016) £1,497 when subsidy ends	£966,482
Sustainable jointly run service, as put forward by Oxford Health and Orders of St John Care Trust	£1,782 per bed	£1,298,000
Model A Bed based	£1000* per bed	£728,600
Model B Home based	£850** average per person	£618,800

*This figure is an estimate based on the cost of providing Intermediate Care beds through Orders of St John Care Trust in other parts of Oxfordshire (e.g. Isis Care Home Intermediate Care Beds cost £977 / bed / week). Additional costs would be incurred initially as a proportion of nurses would be transferred with protection of pay and conditions (TUPE). These costs would reduce year on year through people moving on and TUPE arrangements ending. The National Audit of Intermediate Care provided in residential care homes (2014 Commissioners Report) found the average cost to be £103 per 'bed day'.

**This figure is based on the average cost of providing home based Intermediate Care beds as reported by NHS Benchmarking in the National Audit of Intermediate Care Commissioners Report 2014. The figure quoted is higher than the national average as care costs in Oxfordshire are known to be higher than many areas.

Other viable options or suggestions will be considered for delivering intermediate care in North Oxfordshire

As part of this consultation we are interested in hearing about other models. We would welcome other proposals that are specific, financially viable, safe and affordable and where the outcomes are clearly beneficial to people who use the service.

If options are put forward during the consultation that the Council considers are viable alternatives to the models proposed, these will be considered by County Council Cabinet as part of the final decision-making process.

What other alternatives for the provision of Intermediate Care beds in Chipping Norton have been considered and rejected?

1. The council has rejected commissioning another NHS provider. Another NHS provider would be a like for like swap and therefore the issues would be the same, as would the budget constraints. The 14 beds are not enough for an NHS option to be affordable.

2. Approaching other care homes in the Chipping Norton area has been considered, however there would be issues about the capacity for them to effectively take on 14 new beds within the budget limitations and potential difficulties in accessing the clinical support required to host Intermediate Care beds.

What will the council do in response to this consultation?

A report on the consultation will be written after the public consultation closes on 8th December 2015.

The consultation responses will be an important part of the information used by the council in making its decision about Intermediate Care provision in North Oxfordshire, along with other matters such as affordability and quality.

Oxfordshire County Council will give due consideration to the views expressed and will discuss these outcomes with Oxfordshire Clinical Commissioning Group with a view to agreeing a recommendation that, the Director of Adult Social Services will take to the Cabinet of the County Council which meets on 26th January 2016 and the Cabinet will make the final decision.

Supporting Information

The supporting documents which contain background information are available online and at the Chipping Norton and Banbury libraries.

They are:

- Service and Community Impact Assessment: We have undertaken an assessment of the impact on individuals and groups of these proposed changes
- The consultation questionnaire

Have your say

The public consultation is open from 5th October until 9 am on 8th December 2015.

The views of the community on this issue are important; we want to give people the opportunity to have their say. You are invited to attend the public meeting, and to give your feedback via the questionnaire.

Complete the questionnaire

- Online at www.oxfordshire.gov.uk/intermediatecare
- Download a hard copy of the questionnaire and return it to using the email address below.
- Request a hard copy of the consultation document and questionnaire. See contact details below.

We are strongly encouraging people who are able to, to submit comments online , however we recognise that not everyone has access to the internet or has computer skills and comments can be submitted in writing to:

FREEPOST RTRX-GJUL-HXHY
Engagement Team
Oxfordshire County Council
County Hall
New Road
OX1 1ND

Please contact us if you have any questions about this consultation or need help or support participate.

Public meeting - if you would like to attend the public meeting details are below:

Date: 21 October 2015

Time: 7:00 pm - 9:00 pm - doors open 6:30pm

Where:

St Mary's Church
Church Street,
Chipping Norton, OX7 5NT

<https://www.google.co.uk/maps/search/ox7+5nt/data=!4m2!2m1!4b1>

Disabled parking: A number of spaces can be made available outside the church accessed via Church Road, please **contact us** to book a space. The venue is accessible but if you have a particular disability, diversity, or cultural requirement that you would like us to accommodate please let us know in good time.

Follow the link to car parks: http://en.parkopedia.co.uk/parking/ox7_5nt/

Please let us know if you are coming to enable us to make appropriate preparations.

Questions can be asked at the public meeting or submitted in advance to the postal address below or iccn@oxfordshire.gov.uk.

Contact us: E-mail: iccn@oxfordshire.gov.uk

Phone the Engagement Team on **01865 323624**

Consultation web address: www.oxfordshire.gov.uk/intermediatecare

Engagement Team
4th floor
County hall
Oxfordshire County Council
New Road
Oxford
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Glossary of terms

Commissioned - the council or NHS contract a third party to provide a service to the public

Person-centred care plan – *“It means professionals seeing me as a whole person not simply focussing on a list of conditions to be treated. It means designing my health care and support in partnership with me to help me manage my own health and live the life I want.”*

Clinical Commissioning Groups are the NHS organisation set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England. Groups of General Practices that work together to plan and design local health services in England - they do this by 'commissioning' or buying health and care services including: Planned hospital care; Urgent and emergency care; Rehabilitation care. For almost all of Oxfordshire, these functions are undertaken by the Oxfordshire Clinical Commissioning Group (OCCG).

Orders of St John Care Trust – provide care for older people in extra care (independent living) housing schemes and, predominantly, in care homes specialising in nursing, dementia and residential care, and also offering intermediate, respite and day care.

Oxford Health NHS Foundation Trust - is a community-focused organisation that provides physical and mental health and social care.

Care Quality Commission (CQC) - is an executive non-departmental public body of the Department of Health. It was established in 2009 to regulate and inspect health and social care services in England.

Registered provider - The regulation of primary care is being aligned with other health and social care services under the Health and Social Care Act 2008. This legislation means that providers of health and adult social care have to be registered with the Care Quality Commission (CQC). The aim of regulation is to ensure that patients can expect all health and adult social care services to meet essential standards of quality, to protect their safety and to respect their dignity and rights wherever care is provided.

Facilities management - is the integration of processes within an organisation to maintain and develop the agreed services which support and improve the effectiveness of its primary activities.

TUPE - is an acronym for the Transfer of Undertakings (Protection of Employment) Regulations. The purpose of TUPE is to protect employees if the business in which they are employed changes hands. Its effect is to move employees and any liabilities associated with them from the old employer to the new employer by operation of law.

Glossary of services in North Oxfordshire

Discharge to Assess - a service which can help a person get home from hospital without waiting to have a full assessment first

Good Neighbour Schemes - groups of volunteers, supported by the council, who provide all kinds of informal help for people, such as transport, or visiting for a chat

Community Information Networks - people who can help you find out what is available locally and support you to access it

Assistive technology - for example alarms to call for help in an emergency; talking food labels; GPS (satellite) devices to help find somebody who has got lost

Crisis Response service - gets out to people straight away to help them avoid going into hospital or a care home

Support at home - help with day-to-day tasks such as washing, eating, dressing and using the toilet - now bought by the council through block contracts with agencies so that it is secure

Carers Oxfordshire – provides information, advice and support for people who care for a family member, friend or neighbour

Reablement - a service to help people relearn how to manage independently after an illness or injury

Alternative formats of this publication are available on request.

These include other languages, large print, Easy Read, Braille and electronic formats. **Please ring 01865 323624 or email iccn@oxfordshire.gov.uk**

If English is not your first language and you need help to understand this consultation, please contact the Engagement Team with your phone number and the language you speak.

欲需幫助來理解本次諮詢，請聯絡活動小組並留下您的電話號碼和您使用的語言

यदि इस परामर्श को समझने में आपको मदद की ज़रूरत है, तो कृपया अपने फोन नंबर और आपके द्वारा बोली जाने वाली भाषा के साथ एन्गेज्मन्ट टीम से संपर्क करें।

如果您需要帮助来理解本次咨询，请与活动小组联系并且留下您的电话号码和您使用的语言

Jeżeli potrzebuje Pan/Pani pomocy w zrozumieniu tej konsultacji, należy skontaktować się z Zespołem ds. włączenia (ang. Engagement Team), podać swój numer telefonu i język, którym się Pan/Pani posługuje.

Se necessitar de ajuda para compreender esta consulta, por favor contacte a *Engagement Team* (Equipa de Contacto) indicando o seu número de telefone e a língua que fala.

جے ایس مشاورت نوں سمجھن لئی تہانوں مدد دی لوڑ اے تے مہربانی کر کے اپنے فون نمبر تے جھڑی زبان تسی بولدے او اوس زبان سنے انگیجمنٹ ٹیم نال رابطہ کرو۔

اگر اس مشاورت کو سمجھنے کے لئے آپ کو مدد درکار ہے تو برائے مہربانی اپنے فون نمبر اور جو زبان آپ بولتے ہیں اس کے ساتھ انگیجمنٹ ٹیم سے رابطہ کریں۔