

OX12 Framework and Stakeholder Reference Group - a view from Healthwatch Oxfordshire



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Background

- Healthwatch Oxfordshire attended the OX12 Stakeholder Reference Group (SRG) to observe the process
- Initiated as the Healthwatch Oxfordshire (HWO) Trustees wanted assurance that the process c/would deliver what it promised:
 - Cost to system
 - Capacity of system to deliver and replicate across the county
 - Commitment to involvement from community
 - Co-design outcomes



Observations

- SRG chaired by independent community leader
 - Expectations of Save Wantage Hospital managed in a positive way, without losing sight of the issue
 - Framework Team always represented at SRG and listened to and responded to SRG concerns re communication, information, gaps in community involvement
- Framework Team ‘grew’ into the process as relationships built with SRG
- Building solutions event opened up to more than the SRG - good
- SRG members involved in working groups apart from Clinical and Care Forum - never understood why this is
- Good data collection / sharing event - would have liked to see more SRG members there



Observations

- Takes time and actions to build relationships and trust in the community
- Small actions can destroy trust and relationships this quickly
- ‘Sustainable primary care as a key enabler’ (The Oxfordshire Clinical View) - but one of the biggest challenges to this - the GP building - was not part of this work
- Role of SRG and relationship with Framework Group in whole process needs to be clarified especially in reporting back to HAWB & HOSC
- No tangible change/development after a lot of time, effort, and toil over a 12 month period



Comments

- SRG and Framework Group have learned along the way especially around communication - both internally and externally
 - these lessons must be applied in future activity
- The Framework approach when fully evaluated by external evaluator must include process, outcomes, cost, SRG views
 - Evaluation of the process must start at the beginning
- Replication of this approach must take into account:
 - Capacity, and capability of volunteers, and costs to volunteers
 - Recognise that the approach must be designed to meet the demographics of the community including production of communication materials, levels of community involvement, representation across the community



Sustainability

- Observing the amount of time, staff commitment, and guessing at the cost of associated resources required to deliver the framework it is unlikely that the system has the capacity to deliver more than one project at a time.
- Focussed on a small area mean that where County wide issues/solutions are identified e.g. CAHMS, community hospitals these are not addressed during the Framework process.
- It is not clear where the leadership and resources are for maintaining momentum to ensure that good ideas and embryonic solutions are continued to be developed.

