

Health and Wellbeing Board

9 November 2017

Development of a new Older Peoples Strategy

Purpose

1. The Health and Wellbeing Board are asked to agree the proposed approach to developing a new Older Peoples Strategy for Oxfordshire.

Background

2. The Older People's Joint Commissioning Strategy 2013-2016 has now expired. This was developed jointly by the County Council and Clinical Commissioning Group and focused on services for older people that were commissioned by either Organisation, or jointly.
3. It was intended that the replacement for this strategy would be developed following the agreement of the Oxfordshire Transformation Programme and the Buckinghamshire, Oxfordshire and West Berkshire Sustainability and Transformation Plan, to allow close alignment.
4. It is now considered that, whilst these plans are not yet finalised, proposals have taken shape sufficiently for work to commence on the new Older People's Strategy for Oxfordshire.
5. The timing will also enable any learning from the upcoming Care Quality Commission (CQC) inspection of the health and social care system in the county to be built into the new strategy, embedding agreed actions into shared plans.

Approach to the new Strategy.

6. It is likely that the new strategy will build on the vision and priorities in the previous strategy, which were:

To enable people to live independent and successful lives

- Priority 1: I can take part in a range of activities and services that help me stay well and be part of a supportive community.
- Priority 2: I get the care and support I need in the most appropriate way and at the right time.
- Priority 3: When I am in hospital or longer term care it is because I need to be there. While I am there, I receive high quality care and am discharged home when I am ready.
- Priority 4: As a carer, I am supported in my caring role.
- Priority 5: Living with dementia, I and my carers, receive good advice and support early on and I get the right help at the right time to live well.
- Priority 6: I see health and social care services working well together.

7. Being a joint commissioning strategy, the emphasis was very much on the delivery of health and social care services for older people in the county.
8. It is proposed that the new Older People's Strategy takes a broader focus, recognising the wide range of possibilities for older people's lives, that do not have to be bound up in service delivery.
9. As such, there will be greater emphasis on the role on non-statutory services, community and voluntary support, and the role of individuals and their families in helping people to live independent and successful lives.
10. The strategy will need to set out how, by working together, we will seek to tackle the major health and social care issues facing the county, particularly around workforce, population growth, increasing demand for services, and the development and use of technology in new and different ways to support people.
11. It will also be important that the strategy reflects the significant changes already underway in the county as part of the Oxfordshire Transformation Programme, including the work towards accountable care systems and better integration and close links between primary care, secondary / tertiary care and social care.
12. We therefore anticipate the Older People's Strategy will be a strategy for the county as a whole, and its development will involve a wide range of partners across the county.
13. It is proposed that the Health and Wellbeing Board has overall responsibility for agreeing and overseeing the implementation of the strategy, given its broad cross-cutting role, responsibility for Better Care Fund, and links to the Health and Wellbeing Strategy for the county.
14. A steering group will be established to oversee and drive the development of the strategy, including representatives from:
 - Oxfordshire County Council
 - Oxfordshire Clinical Commissioning Group
 - District and City Councils
 - NHS providers including Oxford Health NHS Trust and Oxford University Hospitals NHS Trust.
 - Primary care, including GPs and GP federations
 - Relevant Voluntary and Community organisations (eg Age UK)
 - Older people and carers
 - Oxfordshire Healthwatch
 - Other stakeholders as identified through the process including business, university and technology exemplars to help identify new ways to tackle major issues.
15. We want to make sure this is a strategy that can deliver for everyone. It will make demands of a wide variety of service providers – not just the county council and CCG.
16. By bringing a wide range of partners on board, we intend to increase the reach and scope of the strategy; embed the shared principles in the work of a wider range of organisations; improve the opportunities for engagement in its

development and implementation; and overall to ensure older people in Oxfordshire are better able to live independent and successful lives.

Consultation and engagement

17. Engagement will be fundamental in developing the new strategy, building on our commitment to co-production and meaningful involvement of people themselves in determining what an independent and successful life means for them, and what support (if any) they need to achieve it).

18. The first step will be an engagement exercise, to establish:

- what older people want to see in the county,
- what different agencies are currently and could be offering;
- what is currently working well, and should be built on;
- what isn't working well or people are not currently able to access, and why;
- how this connects together with other issues, such as prevention, ambulatory support, supporting frailty pathways, accessibility and transport, housing, employment / workforce, social interaction and so on.

19. We will use the results and analysis of the engagement exercise to build an initial strategy, including proposed actions and measures of success, which will then be subject to consultation prior to final agreement and sign off from the Health and Wellbeing Board.

Timeline

20. It is proposed that the new Older People's Strategy is brought to the July meeting of the Health and Wellbeing Board for agreement. This will align to the refresh of the Joint Health and Wellbeing Strategy, which will also be considered at the same meeting.

21. To achieve this, the high-level timeline will be as follows:

November 2017 – March 2018	Engagement exercise and intelligence gathering to develop evidence base for strategy, linked to ongoing development of other strategic plans, pathways mapping for winter, and CQC inspection outcomes.
March - April 2018	Co-production of draft strategy, including alignment to partners strategies and action plans, and outcomes of JSNA
April – May 2018	Consultation on draft strategy
June - July 2018	Coproduction of final strategy, including specific actions and measures of success
July 2018	Agreement of strategy by Health and Wellbeing Board
July 2018 onwards	Implementation of strategy, with oversight by Health and Wellbeing Board.

Recommendation

22. The Health and Wellbeing Board is asked to:

- Agree the proposed approach to developing the Older People's Strategy, including the broader focus and engagement of wider range of people and partner organisations.

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