

Oxfordshire Joint Health Overview & Scrutiny Committee

Thursday, 7 February 2019

ADDENDA

3. Minutes

In relation to Minute 61/18 – ‘Clinical Commissioning Group – Update’, Dr Kiren Collison, Clinical Chair of the OCCG have requested that the final 3 lines and the continuation overleaf of page 11/12 be corrected to read as follows:

‘Work has been produced in the locality plans on this subject to find ways of relieving some of this pressure on GPs. When discussing waiting times, it was important to distinguish between routine and urgent appointments. The Chairman reminded all that there would be an agenda item on this subject in the near future. Of note, some routine appointments were now being made available in the evenings and weekends for patient convenience.’

10. Report from Task and Finish Group on MSK Services (Pages 1 - 2)

Attached are some additional comments from the OCCG with regard to this report.

11. Healthwatch Oxfordshire (HWO) (Pages 3 - 4)

Please find attached a copy of the Healthwatch Oxfordshire report.

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7.1 Throughout the process, the CCG reflected upon the lessons learned from the process of service redesign, procurement, mobilisation and transferring MSK services, these are as follows:

- The mobilisation period was too short; OCCG were tied to a target date as OUH were not able to continue with the provision of the Hub. During the transition OUH supported the transition of the old MSK hub service including agreeing to some service extension and the release of staff who were to be TUPE'd to start work part-time with Healthshare.
- There were also delays due to contract challenges in our process and Purdah due to the election.
- The availability of accurate and total picture information relating to waiting list size, referrals outstanding at transfer and staff to TUPE across impacted on the timeliness of transfer, the expected level of resources required and the mobilisation.
- Waiting lists were much longer than planned for making mobilisation more complex and time consuming.
- Estates were difficult to resolve and there is no resource in the CCG to support this function. Estates are run by different organisations and the project manager spent a lot of time trying to engage with the appropriate people.
- IT was involved from the start and took part in the evaluation of the bids. However the system needed more direct support and the provision to be more proactive in getting the IT elements mobilised.
- Diagnostics were engaged in the process early, despite these earlier discussions pathway changes were not resolved and the diagnostic solutions were not available in a timely way. This has been sorted out in December. ICE is still outstanding.
- Diagnostics referral changes from GPs should have been jointly agreed as part of a system programme plan with sign off and senior oversight to ensure a smooth onward clinical pathway.
- The letter to patients whose information needed to transfer to Healthshare was too complex. A final approved letter should have had a system planned date for dispatch with no changes to letters or dates of sending.
- The transfer of notes did not happen in the way that was agreed as part of the mobilisation meetings which included incumbent providers and Healthshare. The process of uploading them onto the Healthshare system therefore took a lot longer than was necessary and caused a delay in them being able to start providing the service. This was delayed further due to the notes being transferred in paper form, in boxes, but not in alphabetical order.
- Contracts completed in time and to specification.
- The planned care project management oversaw and delivered a significant change programme with high degrees of complexity. As described above this

project had multiple levels of mobilisation across incumbent providers and a new provider and the timescales to mobilise were challenging.

- The new provider was very professional and confident they could deliver on time and they chose to start early to ensure they could manage the service once 1st October was reached. This helped the transition enormously.

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healthwatch

Oxfordshire

Activity update, January 2019

Daytime support review

2018/19 focused on a review of daytime support across Oxfordshire, with visits to all eight of the Community Support Service centres and six voluntary sector centres, together with distribution and analysis of the survey.

The report will be launched at the Healthwatch Oxfordshire Board in February and the county council's performance scrutiny committee in March 2019.

Outreach

During September, Healthwatch Oxfordshire focused on listening to seldom-heard communities in the most deprived areas of Banbury. Including Ruscot, Grimsbury and Neithrop.

We visited ESOL groups, spoke to taxi drivers and to the Sunshine Centre.

We will continue to reach seldom-heard communities, recognising that it takes time to build relationships. People are happy to speak to us in a familiar environment—we must continue to go to where people are.

Men's health film grant

Healthwatch Oxfordshire was successful in being awarded an NHS England Community grant to make a film of the Men's Health Project.

The film will depict East Oxford United's project looking at the issues facing men in Oxfordshire in accessing services and information about their health. Healthwatch Oxfordshire will match the £2,500 award from our projects fund.

This follows on from the successful Luther Street PPG film which won a 'Highly Commended Award' when the PPG Chair presented the film at



The Men's Health football tournament featuring teams from diverse groups of men was a key element to the project

the Healthwatch England Annual Conference last year.

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Contact us

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Facebook: www.facebook.com/HealthwatchOxfordshire

Twitter: [@healthwatchOxon](https://twitter.com/healthwatchOxon)

Reports

During the past six months, Healthwatch Oxfordshire has published Enter-and-View reports following visits to three care providers, Penhurst Gardens, Cherwood Care Home and Ramping Cat Care Home.

Three project funded research reports were published - Men's Health, Rose Hill Healthy Eating and Dentistry, and Citizen's Advice Bureau research into vulnerable people accessing healthcare. These reports attracted media interest and continue to inform and influence commissioners and service providers. All are available on our website.

The numbers

June - December 2018

- 1,061 people spoken to
- 39 outreach events
- 191 new reviews on our Feedback Centre
- 11,479 website hits
- 84 requests from the media and items or coverage
- 17 news briefings published

Wantage: what people told us

Residents of Wantage and Grove are worried that local health services are not keeping up with the increasing numbers of new houses in the area, a report by Healthwatch Oxfordshire has revealed.

The independent health and social care watchdog spent three weeks in the town earlier this year, gathering people's experiences of using services in the area. Concern over the impact of the rapid expansion of housing development on access to GP services was a recurring theme when talking to local people.

Healthwatch Oxfordshire has made a number of recommendations, including improved communication between Oxfordshire Clinical

Commissioning Group and the people of Wantage about the expansion of the health centre, an open dialogue between Oxford Health NHS Foundation Trust and the community about the closure of the community hospital and better consideration of services when planning housing development.



Spotlight on MSK services

Following concerns about Healthshare Ltd, the organisation contracted to provide the county's community musculo-skeletal (physiotherapy) services, Healthwatch Oxfordshire reported to the Oxfordshire Health Oversight & Scrutiny Committee (HOSC) Task & Finish Group.

Healthwatch Oxfordshire has now published that report, based on what we have heard from patients using the service. The report included seven recommendations to improve the service.

Healthwatch Oxfordshire has now received responses to this report from both Oxfordshire Clinical Commissioning Group and Healthshare Ltd., both of which are extremely positive. Both organisations have accepted the recommendations made in the report, and are working to implement them.

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