



Oxfordshire Joint Health Overview & Scrutiny Committee

Thursday, 24 September 2020

ADDENDA

6. County-wide community services (Pages 1 - 4)

10:20

A statement from Oxford Health NHS FT on its proposals to progress a strategic development and quality improvement plan for its community services across Oxfordshire (including services at Wantage Community Hospital/OX12).

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Public statement by Oxford Health NHS FT to Oxfordshire JHOSC on Thursday 24th September 2020

Dr Nick Broughton, Chief Executive Officer

I would like to thank the Chair and the members of the committee for the opportunity to speak with you today about Oxford Health's plans to develop our community services in Oxfordshire, including our highly-valued community hospitals. I will also make some comments about the services we provide in and around Wantage Community Hospital.

For those of you who may be less familiar with the Trust, we are privileged to provide a wide range of mental health, primary care and community services to residents across Oxfordshire. We serve people of all backgrounds and ages, ranging from the children receiving care from our health visitors, school nurses and therapists; services for all ages provided by our out of hours and minor injuries units, specialist support to our homeless population and other adults with complex care needs; and the many older people receiving care through our community nursing and therapy teams, urgent care units and our community hospitals.

With our everyday experience of providing care in local communities, we understand first-hand why it is important to many people that the bulk of the services they use day-to-day are accessible and close to their homes and families where possible. To be effective, local health services must be based on the needs of the populations they serve and be delivered in ways that ensure people experience them as joined-up, compassionate and adaptable to their individual needs. For the Trust, as a major provider of these services, this means developing a positive and caring culture where our staff have a relentless focus on improving quality and working collaboratively with the full range of partners to meet each person's needs, in the context of their unique circumstances.

For several years, there have been calls to refresh and update a county-wide approach to community-based care, in order to deliver this vision of more integrated care, closer to home, but, due to various circumstances, attempts to progress this work have been repeatedly frustrated. At the same time, locally-focused work intended to respond to healthcare challenges in parts of the county, such as the OX12 project, have also been delayed. These false starts and recurrent delays have resulted in damage to relationships and an understandable loss of trust from the public, which we regret.

As the new Chief Executive of the Trust, I am keen that we restore and refresh these important relationships and accelerate the delivery of services that better meet the needs of our patients and their communities.

Our experience of responding to the COVID-19 pandemic has taught us some useful lessons in how we can improve services in an effective and timely way. Rather than spending a prolonged period on developing another transformation plan that is likely to fail to deliver, we propose to adopt a more rapid approach to service improvement, making small changes with involvement from patients and the public and refining them with ongoing feedback.

To guide this process, and to frame discussions with this committee and other stakeholders, as well as with our staff, system partners, patients and communities, we have set ourselves an ambitious target to have produced a strategic development and quality improvement plan for our community services at the end of this year. This will align with a refreshed strategy for the Trust and act as a framework to progress discussions with the public and make decisions on enhancing and extending the range of services provided by and supported through our community hospitals. As part of this work, we will set out our plans and clarify our principles for working collaboratively with the full range of partners to co-develop new services.

Wantage Community Hospital and the OX12 project

I would like to now say a few words about Wantage Community Hospital and our proposals to progress the wider work to develop services for people living in and around OX12. This will build on the statements made in my and James Kent's letter to the committee in August, in response to the HOSC's OX12 Task and Finish Group's recommendations.

First, on behalf of the Trust, I would like to apologise for the delays in completing the long-overdue work to upgrade the plumbing systems at the Hospital, which was required to deal with the Legionella issues previously identified at the site. These delays were not satisfactory and I am pleased to say that this plumbing work has now been completed. Additional work by our Estates team to meet the COVID-19 infection control requirements and to refurbish the maternity unit has also been done, so that services are able to restart, including maternity care from the midwife-led unit. I met some of the midwives there earlier this week when I visited the hospital, who explained that they were having a busy week supporting local mums with home deliveries and will be re-starting deliveries in the unit from 1st October. We have opened a new, local podiatry clinic at the Hospital and our school nursing team are also working there, busily organising vaccinations for local school children.

I would like to express my regret about the long period of time that it has taken to resolve the unsatisfactory situation with the inpatient ward that has been closed at Wantage since 2016. I am very aware of the deep concern that this ongoing issue has caused local residents, who are understandably worried that it has implications for the future viability of the hospital.

On behalf of the Trust, which owns and manages the site, I would like to reassure residents that Wantage Community Hospital will play an essential role in our future plans for community services in Wantage, Grove and the surrounding villages. We see a developing role for the Hospital as a key resource for supporting a growing range of local services, with the potential to improve the health and care of people in the South West of the county for many years to come.

I am aware that some residents are keen for inpatient beds to return to the Hospital. Since the beds closed in 2016, there has been a significant expansion of new care pathways that enable more care to be provided in the home, which is generally the best option for most older people. This approach has expanded further since the pandemic began, with the accelerated roll-out of the 'Home First' pathway, contributing to a further drop in the need for bed-based care. Having discussed this at length with local clinical commissioners, looking at the output from the application of the health and care needs framework in OX12 and based on the bed occupancy rates in other hospitals, we believe that re-opening the general inpatient ward at Wantage would not be a sustainable plan or the best way to use NHS resources at this time. Instead, we would like to progress new opportunities for developing a wider range of outpatient, community outreach and other daytime services at the Hospital which will be of greater benefit to local residents, such as mental health services for children and younger people and new ways of providing care for those who are older and frail.

I recognise that some members of the public will be disappointed by this view about the inpatient beds. I also recognise the need for the NHS family to follow a formal process involving local people to deliver this type of change, to maximise the benefit to the local population. We will work with the clinical commissioners to undertake this as soon as the current restrictions relating to the COVID-19 pandemic allow.

In terms of the future development of the Hospital and its services, and the wider OX12 project, we commit to working with local residents and other key partners to co-develop and pilot services in and around the Hospital that will provide benefits for the local community and are in line with the latest clinical recommendations and care pathways. Our aim is to see the Hospital thrive once again and enter a new chapter in its long and cherished history.

As we head into winter and a potential second wave of COVID-19, we recognise the need more than ever to work collaboratively with colleagues, to build good relationships and to co-develop creative and effective solutions to the many challenges we face. I hope that the committee has found this a helpful and positive statement of our intent to do this and look forward to working with you to take forward our plans together.

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