

Healthwatch Oxfordshire

1 Introduction

This report summarises the key areas dealt with by Healthwatch Oxfordshire in the first six months of this year. In addition to this report, we would like to update the board verbally about the key findings from our Dignity in Care Report, which is due to be published on November 4th.

2 Improving Discharges from Hospital in Oxfordshire.

Healthwatch published its report into how the hospital discharge process in Oxfordshire could be improved in September. This made 14 recommendations that were based on the feedback received from over 200 patients and nearly 90 professionals, mainly GPs and pharmacists. The report was warmly accepted by Health Overview and Scrutiny Committee (HOSC) and from some other organisations but was initially received with reservations by Oxford University Hospitals Trust (OUHT), Oxford Health Foundation Trust (OHFT), Oxfordshire County Council (OCC) and Oxfordshire Clinical Commissioning Group (OCCG). A meeting took place with these organisations, who have subsequently committed to publishing an action plan setting out how they will respond to our recommendations before Christmas.

3 The Big Plan

Healthwatch raised concerns with OCC during the summer of 2015 about the proposed implementation of the Big Plan to improve learning disability services in Oxfordshire. These focused on the planned speed of transition and the risks associated with that. We have subsequently shared the statement, made by OCC at the September HOSC meeting, which announced a much slower transition of services from Southern Health to Oxford Health with all those who had contacted us to express a concern. The revised plans have been positively received by those who raised their concerns with us.

4 Campsfield House

Healthwatch relayed concerns raised by local volunteers about healthcare in Campsfield House to OCC and NHS England earlier in the year. As a result the procedures for volunteers to raise safeguarding alerts have been clarified, and NHS England announced at the last Thames Valley Quality Surveillance Group meeting that it was bringing forward its plans to do a full day site visit to the facility. This is now scheduled for the first half of 2016, and Healthwatch has been assured that it will include a confidential focus group for inmates, who will be invited to participate on the day so that the managers of the facility cannot influence who takes part. Meanwhile the provider is due to give NHS England a completed Patient Experience Survey at the end of the current financial year, and Healthwatch has been assured that it will receive a copy.

5 Community Hospital Provision

Healthwatch has been actively seeking to help mediate discussions between local communities, commissioners and providers about planned changes to local community hospital and intermediate care provision in Chipping Norton, Henley and Witney. We will continue to try and ensure that future consultations meet the public's expectations in terms of the openness and transparency with which they

are conducted and in the extent to which they provide a clear explanation of the data about need on which decisions are being based.

6 Healthwatch Project Fund reports

In the first half of 2015/16 Healthwatch funded and published the following reports in partnership with local organisations in Oxfordshire:

6.1 Alice's Report - This report, undertaken in partnership with Restore, recommends supporting the creation of a new organisation led by people who use the service to ensure Oxfordshire is delivering best practice in involving mental health service users in service redesign. The OCCG has agreed to work with the partners to the MH Outcomes Based Contract to set up a conference to explore how service user involvement needs to develop in the context of this new contract. OCCG has also pledged to involve the service user who researched and wrote the report in planning that event, and to ensure her proposals are debated as one of the possible ways forward.

6.2 Sustaining Dementia Friendly Communities - This report, published in partnership with Oxfordshire Rural Community Council recommended three main actions to OCCG and OCC required to sustain dementia friendly communities. These were:

- To provide some ongoing professional community development support, training, and funding for volunteer recruitment and incidental costs to organisations that have undertaken dementia awareness training and are committed to providing support to dementia patients and their families.
- To support these groups to make their services known to local GPs.
- To encourage GP practices to have a named dementia lead, who drives the adoption in the practice of social prescribing to these local groups as part of the care prescribed to dementia patients and their carers.

6.3 Carers in Oxfordshire - This report, researched and written by Guideposts Trust, set out to identify gaps in services for carers of people with learning disabilities, people with mental health issues and young carers. The main gaps it identified were:

- Insufficient access to holidays for the carer and the cared for.
- Insufficient provision of social activities for the cared for, which provide a break for the carer.
- Insufficient access to care provided by others, outside the home, on a regular basis.
- Demand for access to professional care at home, during the day and overnight, is highly valued and people would like more of it - particularly for people with dementia.
- Access to information for carers of people with mental health issues is still not meeting their needs.

The report has been passed on to the lead commissioners for carers in OCCG and OCC, and we will seek feedback on the action they have taken as a result when we compile our annual "We Said, they Did (or Didn't)" Report.

6.4 Families' experiences of ante and post natal community services - This report, researched and written by Homestart, recommended to OCCG, OHFT and OCC that:

- GP practices consider parents of very young children a priority when offering appointments.
- Midwives and Health Visitors be required to incorporate basic parenting and baby care as part of their routine support to all new parents.
- Service providers prioritise continuity of care between individual staff and families, so that parents can develop productive and trusting relationships with those providing them with support.

The report has been passed on to relevant commissioning leads and service managers and we will seek feedback on the action they have taken as a result when we compile our annual “We Said, they Did (or Didn’t)” Report.

- 6.5 SEAP (Support, Empowerment, Advocacy, Promotion) is currently undertaking research into the gypsy and traveller communities experiences of accessing services, and OxPIP (The Oxford Parent Infant Project) is looking at the extent to which the needs of families from the point of conception until their children are two years old are being met locally by health and social care providers. Further grants will have been awarded by the time the Board meets.

7 Outreach Programme

Our staff are now running at least one event somewhere in the county every week, with 27 events held between the end of May and the end of September, and a further 17 planned before Christmas. This programme enables us to canvas people in regard to their experience of health and social care services. Our first report on the information gathered through this programme during the first two quarters of this year has been shared with trusts and commissioners through our regular meeting with Quality and Patient Experience leads.

8 Listening events

- 8.1 Healthwatch held a series of Hearsay! listening events for users of adult social care in the early summer. Four main areas of concern were raised:

- The need for a joined up health and social care system that offers appropriate and adequate information, advice and communication, to offer a much more coordinated and integrated experience of health and social care.
- The need for a personalised, holistic approach to care with an emphasis on maintaining a person’s quality of life.
- There are gaps in age appropriate services for younger people and working age adults.
- There is not enough support for family members who are carers.

OCC has published an action plan setting out how it will address these concerns, and a follow up event is scheduled for January 18th 2016, at which services users will hear directly from Oxfordshire County Council about the progress they have made on delivering this plan for improvement.

- 8.2 On July 8th we held a conference attended by 40 voluntary organisations and charities, as well as key staff from OCC and OCCG. The event was designed:
- To update members of the voluntary sector on Healthwatch Oxfordshire’s role, priorities and work programme.

- To provide information on Healthwatch Oxfordshire's Project Fund and get feedback from the voluntary sector on possible barriers to accessing the fund.
- To enable a discussion on children and young people's health and social care needs with relevant commissioners present.
- To enable a discussion on the Care Act 2014 and its implication on carers in Oxfordshire with the relevant commissioners.
- To provide voluntary sector colleagues with the opportunity to hear about the health and social care commissioning priorities for Oxfordshire from the Director of Adult Social care at Oxfordshire County Council and the Chief Executive of the Oxfordshire Clinical Commissioning Group.

We have passed a full report of the event to OCCG and OCC. This sets out the concerns raised by those present about:

- The vital role played by children's centres and the impact of closure
- Difficulties in transition from children to adult services
- Female genital mutilation
- Access to child and adolescent mental health services
- The barriers facing young people who have to act as interpreters for family members
- The need for better definitions locally of "prevention" and "carer" in the context of the Care Act.
- Getting carers to identify themselves.
- The online carers assessment tool
- Support to carers
- The commissioning of voluntary sector organisations by statutory bodies
- The quality of consultations undertaken in Oxfordshire.

The event report also summarises the actions that will be taken forward by Healthwatch, Carers Oxfordshire and OCC as a result. We will continue to monitor progress on delivery of these actions, and a follow up event is planned for January 28th 2016.

9 OCC budget cuts

Healthwatch has received formal notification that OCC is considering making a cut of £100k to its budget from April 2016. This equates to almost 1/3rd of our income. We will give the Board our initial assessment of the impact that this proposed cut would have on our ability to continue to provide it with sound evidence about the concerns raised by those using health and social services in the county.

10 Conclusion

The Health and Wellbeing Board is asked to note:

- The matters and concerns of those that have been raised by Healthwatch in the first half of 2015/16
- That Healthwatch will bring its annual update on actions taken by the system in response to its recommendations to the March meeting.