

Report to the Oxfordshire Joint Health Overview and Scrutiny Committee: OX12 Health and Care Needs Framework Findings

1. Introduction

In November 2018 the Oxfordshire Health and Wellbeing Board (HWB) adopted the *Health and Care Needs Framework* as an approach to identifying and meeting current and future health needs of a local population.

The first area where this has been applied is in the OX12 postcode area (Wantage, Grove and surrounding villages). The OX12 Summary Report provides an overview of the project and is attached as Appendix 1. The summary report is the culmination of 12 months of work with the OX12 communities.

Through applying the new framework, Oxfordshire Joint Health Overview and Scrutiny Committee (HOSC) asked that Oxfordshire Clinical Commissioning Group (OCCG) and Oxford Health NHS Foundation Trust (OHFT) reach a conclusion on the temporary closure of the community beds at Wantage Hospital.

A HOSC Task and Finish Group has scrutinised the implementation of the Health and Care Framework in OX12. All documentation for the project and the outcome of the Task and Finish Group have been made available on the OCCG [website](#).

The summary report describes how the health needs framework was applied in OX12. It demonstrates a clear commitment to partnership working across the system as well as extensive stakeholder engagement, co-design and co-production with stakeholders and wider members of the public throughout all stages of the health needs framework. The summary report will be presented to the Health and Wellbeing Board on 30 January and a verbal update of the outcome of their discussion will be given.

2. Applying the framework

The first three stages of the framework were delivered concurrently and focussed on gathering data and information in relation to the OX12 postcode area. In summary these information gathering stages of the Project showed that when compared with both Oxfordshire and the rest of England the population of the OX12 area is relatively healthy, relatively affluent and well served in terms of services. That does not mean that OX12 is without its challenges or that the population of OX12 does not experience difficulty accessing services.

The latter stages of the framework concentrated on a review of the evidence from the early stages of the project. The work gave consideration to how current and future population needs could be best met. A solution building workshop with stakeholders was a core part of this work. This event and approach is detailed in the summary report. The workshop generated a range of ideas and opportunities informed by the health and care needs that were identified in the information gathering stages of the project.

3. Findings

Detailed findings of the project are set out in the Project Summary report and are to be presented to the Health and wellbeing Board on 30 January 2020. The summary report shows that the health and care needs of the population of OX12 are broadly met by

current service provision. Local residents experience some challenges in relation to accessing services and there are opportunities to better support the population which the framework has highlighted.

4. Summary of outputs relating to community rehabilitation beds

HOSC asked that OCCG and OHFT reach a conclusion on the temporary closure of the community beds at Wantage Hospital.

During 2018/19 a total of 87 patients from the OX12 postcode area were treated by OHFT in community hospitals across Oxfordshire. Of these:

- 9 were admitted under the specialist stroke rehabilitation pathway to the Abingdon Stroke Recovery Unit;
- 17 patients were admitted under the Emergency Multidisciplinary assessment unit pathway (EMU) in Abingdon hospital;
- The remaining 61 patients required 'generic rehabilitation' prior to their discharge;
- The majority of the 87 patients were admitted to Abingdon wards with others being admitted to Didcot and Wallingford;
- The average length of stay (ALOS) measured from admission to discharge across all community hospitals is consistently 25 days;
- The majority of all patients from OX12 returned to their place of residence following admission.

Current need for inpatient rehabilitation for patients from OX12 equates to six community beds. The reduction in the need for inpatient rehabilitation for OX12 patients reflects a trend across the county that shows that the numbers of patients requiring inpatient rehabilitation is falling. The overall utilisation of community beds is decreasing, nationally and in Oxfordshire. This can be attributed to more care being provided in people's homes or their normal place of residence or on an outpatient basis in one of the county's emergency multidisciplinary units¹.

Following the temporary closure of the beds in the Wantage Community Hospital patients needing general community rehabilitation are having their needs met in community hospitals near to OX12, particularly Abingdon, Didcot and Wallingford although a few are cared for further away.

On the basis of the work undertaken using the health and care needs framework approach in OX12, looking at the population's health and care needs in totality and the reduced need for inpatient rehabilitation there is not a compelling case for reopening the temporarily closed beds. Further work should be undertaken to test this.

5. Further work

¹ The aim of the Emergency Multidisciplinary Units is to provide assessment and treatment for adults with sub-acute care needs as close to patients' homes as possible. Providing medical, nursing and therapist assessments and treatments, the units are designed to offer patients a faster and more convenient alternative to admission to an acute hospital.

OCCG and OHFT acknowledge that a significant period of time has passed since the temporary closure of the beds at Wantage Community Hospital. Both organisations are committed to confirming a way forward with respect to the beds as soon as possible. While the Health and Care Needs Framework has provided a huge wealth of information and insight about the population of OX12 and the current and future health and care needs it is not sufficiently detailed for OCCG to make a decision about the future of the beds.

As such OCCG and OHFT need to undertake more work specifically in relation to the community beds and the service that they provided to the community. No decision has been made about the future of the beds, they remain temporarily closed.

As highlighted to the HOSC in November 2018 the outcomes of the framework could lead to the need for further work, including a formal NHS consultation process. As commissioners of health care services OCCG is responsible for setting out a timetable for the formal process; the culmination of which will be an OCCG Board decision about the future of the beds.

After discussion with NHS England and consideration of the level of work and engagement / consultation required, OCCG aims to make a decision at the OCCG Board meeting scheduled for 24 September 2020.

6. Approach and next steps towards a decision

The OX12 Health and Care Needs Project Team made great efforts to actively engage and involve local residents, providers and community groups in the delivery of the project. OCCG is committed to continuing a high level of engagement and transparency in the formal steps and processes towards a decision.

The first step in this is to share the approach and outline timetable for the work.

In summary the approach will be as follows.

- OCCG will work with OHFT to confirm what further data analysis and insight is required with specific reference to community beds
- OCCG will engage with the local community to draw out additional information and views about the use of the inpatient rehabilitation beds; this is likely to include more experiential engagement
- A business case, informed by further engagement, will be reviewed by the OCCG Board. The business case will be assured by NHS England; it must meet a number of specific requirements which, if it does and is assured, consultation materials will be completed
- There will be a period of consultation on the option(s) in the business case – this will be for a minimum period of six weeks and will include a variety of opportunities for views and feedback to be given
- Following the consultation period, responses will be collated and reviewed by the OCCG Board and HOSC
- Informed by the consultation responses, a business case and recommendation will be prepared for the OCCG Board meeting in September

Key task or deliverable	Outline Timetable (2020)
NHSE Assurance Process: Stage 1	January / February
Public Engagement	February / March
OCCG Board approval of the content of the pre-consultation business case	26 March
NHSE Assurance Process: Stage 2	Beginning of May
Commence 6 week consultation (if Stage 2 assurance agreed)	May
Consultation report to be reviewed by the OCCG Board and HOSC	July
OCCG Board Meeting to review the business case and make a decision about the future of the beds	24 September

7. Recommendation

It is recommended that HOSC notes the content of the paper and the proposed approach to decide on the future of the temporarily closed beds at Wantage Community Hospital.