

Oxfordshire Joint Health and Overview Scrutiny Committee

Date of Meeting: 6 February 2020

Title of Paper: Oxfordshire Clinical Commissioning Group: Key & Current Issues

Purpose: The following paper aims to provide the Oxfordshire Joint Health and Overview Scrutiny Committee with an update on:

1. Sue Ryder Joyce Grove Hospice
3. Winter Plan
4. Horsefair Surgery

Senior Responsible Officer: Louise Patten, Chief Executive, Oxfordshire Clinical Commissioning Group.

Oxfordshire Clinical Commissioning Group: Key & Current Issues

1. Sue Ryder Joyce Grove Hospice

The Sue Ryder South Oxfordshire Palliative Care Hub has recently announced it will close its hospice inpatient unit at Nettlebed at the end of March 2020, while continuing its specialist palliative hospice at home service in the South Oxfordshire community.

Sue Ryder has entered a process of formal consultation with affected staff over the proposal to close its inpatient unit after a thorough assessment of a number of factors, including changing service requests and numbers of patients cared for and costs.

The South Oxfordshire Palliative Care Hub's Hospice at Home service, now in its second year, has so far supported 539 patients. In a recent survey of the general public, more than 70 per cent of respondents said that they would prefer to die at home and Sue Ryder continues to see demand increase for its Hospice at Home service in South Oxfordshire.

As members of the local community increasingly choose to be cared for at home, there has been a steady decline in the number of patients being referred to the inpatient unit, which led to the charity halving the number of inpatient beds it operates in April 2019.

The numbers of people coming into the inpatient unit has continued to decrease since April 2019, with an average of four people being cared for at any one time – normally an equal mix of patients from South Oxfordshire and Buckinghamshire. After careful investigation with referral partners, the charity feels assured that the decline in patient numbers is due to a decrease in hospice based demand.

The charity's intention to close the Nettlebed site has been well documented for some time – it is important to note that over the past year, Oxford Health FT and Oxfordshire CCG have worked hard to develop alternative options for Sue Ryder, however it has not been possible to progress these further. During the charity's search for an alternative location for its inpatient unit, some clear patient trends for a home service model became apparent.

Sue Ryder knows that inpatient care in a hospice setting remains the right choice for some patients and to ensure that need is met for the local community; the charity will continue to work closely with other local providers who are already delivering inpatient care.

Should a need arise for inpatient beds that cannot be supported within the county, Sue Ryder will look to offer beds at the Sue Ryder Duchess of Kent Hospice in Reading.

Sue Ryder remains reliant on the generous fundraising support and from the local

South Oxfordshire community and the charity looks forward to continuing to work in partnership with Oxfordshire CCG to ensure the delivery of excellent palliative care in South Oxfordshire.

2. Update on Progress and Actions for Winter

A number of initiatives are underway to support the delivery of the Oxfordshire Winter plan.

2.1. System HomeFirst programme:

This programme aims to improve the process for discharging patients and reduce avoidable hospital admissions. This would mean fewer patients experience delays in getting home from hospital with assessments being conducted in the home environment. Simplifying the pathways out of hospital for staff, patients and families will also help ensure patients get the support and care they need more quickly and avoid a crisis that could result in a hospital admission. Some highlights for this programme are shared below:

- 'Discharge to Assess' is expanding with 514 patients being seen since implementation but the full impact for winter is not yet being felt.
- As we approached the end of 2019 there was a continued improvement in the number of delayed transfers of care across Oxfordshire with the number falling to 98 in December. The total number of delays (at 16 January 2020) involving Oxfordshire residents is now 88.
- Short-term Beds are now available in 10 care homes with 120 beds available in December, rising to 136 beds available at the end of January 2020.
- The Trusted Assessor Scheme is reducing the need for several different assessments for one patient. The scheme launched in early December and has been successfully supporting patient assessments and developing relationships with health and care providers.
- Voluntary/community/charity organisations (referred to as third sector) are supporting hospital flow across Oxfordshire. Discharge teams are in place at the JR and Horton General Hospital with Age UK. In the first four weeks of December, 42 patients received an Age UK supported discharge which exceeding the target of 24 per week by 57%. Connections Support project with enhanced housing workers and step-down beds is underway, focused on our homeless population. The number of patients affected is small but the impact on length of stay in hospital is significant.
- Additional support for people who fund their own care became operational in November. A brokerage officer is now based in the JR to assist people with decision making and onward care arrangements.
- Our system approach to tackling challenges in the reablement pathway is continuing. We are seeking peer learning from other areas and an additional 10 workers were recruited and started in the service in December.
- The Accelerated Improvement Programme launched in November in north Oxfordshire. It is an extension and expansion of the HomeFirst methodology and principles. It is a multi-disciplinary approach to discharge planning and optimising opportunities for coordinating care around patients to support timely discharge.

2.2. Horton/North Oxfordshire

A number of initiatives have been established in north Oxfordshire to support patients who would use the Horton General Hospital. Some highlights below:

- Mental health support has been improved with a multi-practice mental health practitioner working across the Banbury Primary Care Network. Patients can receive the help they need in a primary care setting and avoid onward referral (including A&E attendance).
- There is now dedicated referral into primary care from A&E. This includes the facility for direct booking or appointments. Over the winter, approximately 480 appointments will be made available for direct referral into primary care by A&E staff. This pilot is being closely monitored and if successful, there is the ability to scale up the capacity and to expand.
- A 'virtual ward' is in development across the ambulatory unit at the Horton General Hospital which is a partnership between the Primary Care Federation, the Primary Care Networks and Oxford Health Foundation Trust.

2.3. Update to OPEL Framework and Improved Response to Escalation

The framework for managing escalation across the health and care system during times of pressure is called the OPEL system. A review of the day to day management of escalation during the last winter (2018/19) and so far this year, including reviewing effectiveness of individual triggers and actions, has led to revisions to the framework. The review intends to ensure actions are clearly understood; that partners are accountable for delivery; and that mechanisms are in place to coordinate an effective response to system pressures.

Good engagement across the health and care system was achieved in the development of the new OPEL escalation criteria. The revised Oxfordshire triggers and action cards were developed and agreed before testing. The System Urgent Care Delivery Group is monitoring the new system.

3. Horsefair Surgery

The Banbury Guardian has published a story about Horsefair Surgery in Banbury, raising concerns about patient care at the practice.

The pressures on primary care in Banbury and the difficulties at Horsefair Surgery have been well documented over the past few years. The Care Quality Commission has been inspecting the practice regularly as efforts have been made to improve services.

The latest assessment by CQC was published in January 2019 when it rated the practice overall as 'good' with some improvements needed.

In August 2019 Principal Medical Ltd (PML) took over the management of Horsefair Surgery from the previous contract holder and has continued to improve services. A significant improvement programme has been in place and a lot of work has been done by practice staff, supported by OCCG, to improve care and patient experience at Horsefair.

Since bringing Horsefair Surgery under PML management they have been implementing a robust action plan to drive improvements in patient experience. As an organisation run by local GPs and a longstanding provider of healthcare services

within Banbury, patient care is at the centre of everything they do and they will continue to work closely with patient groups and OCCG to make further improvements within their services.

The recent change in management at Horsefair Surgery is a really positive step. OCCG is confident that PML's detailed action plan is improving patient care and experience. The performance of the practice is monitored closely and the expertise of the PML clinicians and managers is making a real difference, including sharing good practice so patients benefit from the wide range of clinical skills available.