

Oxfordshire Joint Health and Overview Scrutiny Committee

Date of Meeting: 23 September 2021

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. ICS development
- 2. Changes to the OCCG Governing Body during transition
- 3. OCCG Annual Public Meeting and Annual Reports
- 4. Improving Community Health and Care Services
- 5. Wantage Community Hospital
- 6. Wantage Health Centre extension funding approval
- 7. Palliative Care changes in the south
- 8. Partnership initiative to reduce waiting times for children with spinal scoliosis



Oxfordshire Clinical Commissioning Group: Key & Current Issues

1. ICS development

In July the NHS Health and Care Bill had its first two readings in the House of Commons and has now reached the committee stage. The Public Bill Committee is inviting those with relevant expertise or interest to submit written evidence which will be considered when the committee begins to review the Bill on September 7.

The Bill will allow for the establishment of Integrated Care Boards and Integrated Care Partnerships across England. This will be done at the same time as abolishing Clinical Commissioning Groups (CCGs). Guidance to support implementation of these changes has been published by NHS England and is available here

This guidance does confirm some terminology changes which are useful to highlight:

- The statutory organisation will be the Integrated Care Board (ICB) this was previously referred to as the ICS NHS body
- The Integrated Care Partnership (ICP) which is the partnership committee across the ICS and was previously referred to as the Health and Care Partnership
- Place based partnerships which have locally been referred to as integrated care partnership
- Provider Collaboratives which are partnership arrangements involving at least two trusts working at scale across multiple places

The ICB will take on the NHS commissioning functions of CCGs as well as some of NHS England's commissioning functions. It will also be accountable for NHS spend and performance within the system. Staff currently employed by CCGs will transfer to ICBs, and NHS England has made an employment commitment to staff to provide stability and minimise uncertainty.

The Board of the ICB will, as a minimum, include a chair, the Chief Executive Officer and representatives from NHS providers, general practice, and local authorities. NHS England will agree ICBs' constitutions and will hold them to account for delivery.

The Bill also enables the transition of commissioning responsibilities for primary care services and some specialised services to ICBs. Currently, this sits with NHS England, but primary medical care services have been successfully delegated to CCGs for some time.

Each ICS will also have an Integrated Care Partnership (ICP), a joint committee which brings together the ICB and their partner local authorities, and other locally determined representatives. The ICP will be tasked with developing a strategy to address the health, social care, and public health needs of their system, and being a

forum to support partnership working. The ICB and local authorities will need to pay regard to ICP strategies when making decisions. For more information see here:

The integrated care system will only succeed if we develop both a strong system and strong places and the BOB ICB will need to outline how places are central to the operating model to support integration and improved outcomes. Good progress has been made on different elements of place working and integration over the last few years and any models developed by the ICB will need to recognise and reflect these.

2. Changes to the OCCG Governing Body during transition

As previously reported, some members of Oxfordshire CCG Governing Body have changed. Following Dr Kiren Collison's departure, Dr David Chapman has now been confirmed as the new Clinical Chair of OCCG.

In addition to the appointment of Wendy Bower as the Lay Member lead and Governing Body member for patient and public involvement for all three CCGs in BOB, Robert Parkes, Lay Member lead for Governance, Buckinghamshire CCG has agreed to cover this role for Oxfordshire. Robert has therefore been appointed as a member of the Oxfordshire CCG Governing Body and Audit, Remuneration and Finance Committees.

Other appointments include Dr Meenu Paul will provide additional clinical leadership to mental health, learning disability and autism portfolio. In this role she will also be a member of the OCCG Governing Body.

3. Annual Public Meeting and Annual Reports

The three CCG Governing Body meetings and Annual Public Meetings took place at the same time as 'meetings in common' on Thursday 9 September. This meeting was open to the public but took place virtually with a link to attend being available on the OCCG website, along with all relevant papers.

The <u>Annual Report and Annual Accounts for OCCG</u> were presented at the meeting and are available on the OCCG website. A summary Annual Report and an Annual Report on Patient and Public Involvement will also be published and paper copies are available from OCCG.

4. Improving Community Health and Care Services

This project is progressing; Oxford Health has been working closely with patients, carers and local organisations to seek their views and inform the development of the strategy for community services.

In July the Trust ran a workshop with those who have experience of using their community services to explore the areas which need to be considered within the strategy. This was followed up with a questionnaire and 1:1 discussions with those who couldn't attend the workshop. Key themes raised included the importance of accessibility when developing services and ensuring that where changes are proposed consideration is given to how this may impact differently on individuals based on their needs.

More workshops have been arranged for September to look at the services delivered through community hospitals and how to make best use of these to provide the greatest benefit for residents. These workshops are being promoted through posters in Oxford Health buildings, on social media and directly to public and patient members of the Trust in Oxfordshire.

Oxford Health has also completed workshops with Trust Governors (elected representatives of service users and staff) and service teams to understand the areas which need to be included within the strategy and to explore any questions they may have around the approach and how to develop the strategy. Feedback from these sessions highlighted the importance of considering the impact any proposals within the strategy will have on staff, and ensuring appropriate support is put in place to manage any changes.

To make sure the strategy reflects the engagement completed to date, the feedback received so far has been built into draft principles which have been developed to shape the community services strategy. This next phase of the engagement with the general public was launched earlier in September with a focus on engaging people in agreeing the principles that will guide this work.

A section on the OCCG website will hold all relevant information for the project and will help direct people to how to get involved. A document setting out the approach to the project and inviting people to get involved has been published. This includes reference to what has been heard from previous projects and poses some questions for people to respond to.

A <u>summary</u> of this document has also been published with the key information that people will want to know. For this piece of work, responses are invited by 10 October 2021. More information is available here.

5. Wantage Community Hospital

A range of new health services for adults and children will be piloted at Wantage Community Hospital from this October, bringing more localised care and greater clinical expertise to the community.

Oxford Health NHS Foundation Trust and Oxford University Hospitals NHS Foundation Trust (OUH) are both piloting new services.

At Oxford Health it is anticipated new services for child, adult and older adult mental health services could see a potential 300 people a month receive assessments, follow up appointments and therapies. This is in addition to existing OHFT services.

New pilot services include an early intervention service, an eating disorders clinic, perinatal mental health, and a neuro-development clinic that will provide assessments of young people to diagnose ADHD and autism and develop appropriate support. Also included in this mental health care provision is the award-winning Talking Space Plus therapies service.

It will provide a cognitive behavioural therapy and counselling service at Wantage to people with moderate anxiety and depression. This is also an important step in the service being enabled to see people in person, having switched to online during the pandemic

These new Oxford Health pilot services complement existing services which consist of speech and language therapy for children and adults, podiatry and school health nurses. These additional outpatient services build on the work being done to improve services within the Wantage area including the two-hour crisis community response initiative to reduce the time which individuals have to wait to be seen within the community.

This pioneering initiative, piloted in the OX12 areas, has increased the capacity to treat more people in their own homes and in the community, contributing to a reduction in the need for bed-based hospital care. It is now being expanded to the whole county.

OUH will be providing ophthalmology and ear, nose and throat (ENT) clinics as well as continuing existing maternity services and a birthing unit. Musculoskeletal services are provided by Healthshare.

Ten rooms at the hospital have been renovated and are dedicated to new pilot services ensuring greater use is made of the available accommodation.

It is important to note that these new pilot services do not represent a long-term decision on the future operation of the inpatient beds at the hospital, which will be determined through the public engagement and consultation processes previously discussed at HOSC. Estate changes made to accommodate these additional services are reversible.

6. Wantage Health Centre extension funding approved

Staff and patients at Wantage Health Centre have welcomed OCCG's approval for funding of an extension and partial refurbishment of the building.

The health centre, in Mably Way, Wantage, is shared by the Newbury Street and Church Street GP practices and accommodates an optician and pharmacy. OCCG has approved funding for an extra nine consulting and treatment rooms for each practice, a larger shared waiting and reception area and new patient facilities. New units for the optician and pharmacy will also be provided, with their own entrances.

The project, expected to cost c. £5.5m, is subject to planning permission from Vale District Council, but work could begin in early 2022.

It is important to note that plans for services at the health centre and Wantage Community Hospital will be strategically aligned and coordinated, to get the most benefit for local residents and services.

7. Palliative care beds changes in the south

An item was included in the CCG's update to HOSC at the last meeting describing the plans to strengthen palliative care inpatient support in the south of the County. OCCG proposed to transfer funds tied up in beds which are not being used by the Rapid Access Care Unit (RACU) at Townlands Memorial Hospital in Henley to

commission two supported palliative care beds at Wallingford Community Hospital from Oxford Health. These would be delivered in close collaboration with the expertise of the Sue Ryder Hospice at Home service, whose Oxfordshire hub is located at nearby Preston Crowmarsh.

Since the meeting the CCG and Oxford Health NHS Foundation Trust have met with the local community and have completed the HOSC toolkit. The outcomes of the meeting and the toolkit were sent for information to the HOSC administration. Our work concluded this was not a substantial change The CCG and Oxford Health have commenced work on implementing the changes, we expect to be offering enhanced end of life care in Wallingford Hospital inpatient beds within this calendar year.

8. Partnership initiative to reduce waiting times for children with spinal scoliosis

To deliver additional capacity and reduce waiting times for children with spinal scoliosis, OUH have entered into partnership with the Portland Hospital in London to provide treatment for nine children. This arrangement will be in place between 23 September and 21 December 2021 and may be extended through until March 2022. Surgeons from OUH will undertake the surgery at the Portland Hospital to ensure continuity of care for our young patients. The parents of the children will be provided with accommodation for the duration of their child's stay in hospital in London.