

Councillor Jane Hanna Chair Oxfordshire HOSC

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## Dear Councillor Hanna

I am writing to follow up on the discussion at the HOSC meeting in June and the response to the Task and Finish report on OX12.

AS HOSC is aware this project, sponsored by the Oxfordshire Health and Wellbeing Board started in November 2018. Its focus was on using the then recently agreed framework "Planning for future population health and care needs" (available <a href="here">here</a>). The focus of the framework is to look at population need, now and in the future, and then consider what services are required to address these and whether there are gaps. The approach includes involving local community and stakeholders from an early stage; this was clearly demonstrated in the OX12 project through the development of a local Stakeholder Reference Group who supported our wider engagement including a survey and listening events. In addition, local NHS partners worked very closely with the HOSC Task and Finish Group; this included responding to requests for information and updating at meetings. All key documents were published on the CGC website <a href="here">here</a>.

The work concluded with a report to the Health and Wellbeing Board in January 2020; this report is attached as Annexe 1. The Health and Wellbeing Board accepted the report including the proposed next steps for the OX12 project which included:

- Testing the feasibility of taking forward some of the service opportunities identified for Wantage. As you will see from the CCG report to the next HOSC meeting this has now led to a range of additional services are now being piloted in the Community Hospital.
- We understand that access to primary care is a very important issue for the local population and I am pleased to let you know that the CCG has received and approved the business case for the extension of the GP surgeries to ensure there is capacity to meet the needs of the growth in population.
- The work indicated there was not a compelling case for reopening the temporarily closed beds. Residents from the OX12 area who needed inpatient care have

received this in alternative locations. In line with the NHS requirements for significant service change we were then going to undertake the future work required to test this.

The report subsequently went to HOSC in February 2020 alongside a report from the Task and Finish Group. Many of the points made were about the detailed nature of running a project including setting realistic timescales, a clear scope, continuing to develop the approach to engagement and identifying sufficient resource; none of which we would disagree with though can be challenging in the NHS when we have linted resources and multiple competing priorities. In terms of Wantage the Task and Finish Group recommendation requested that "the HOSC recommend to the HWB that it lead the development of a place-based, county-wide strategy on the management of community services. The development of the strategy should include the role of wantage Community Hospital." As you aware all work on this then ceased as the NHS responded to the CCVID-19 pandemic.

We have now been able to restart this work and as we discussed at the June 2021 HOSC meeting, we are committed to developing a Community Service Strategy for Oxfordshire, that looks at services in the round, and includes those at Wantage. As highlighted above HOSC has previously supported this approach and in fact had it as one of their recommendations in February 2020. Building on previous work we launched the engagement on the principles on 9 September and you can access the information here.

HOSC has raised concerns about the short response that the CCG made to the April 2021 Task and Finish Group report, and I think mis-interpreted the level of importance that we place on this issue. The response was short only because we felt most of the points raised had been discussed and answered over the course of the project and in presentation of the findings. The points around approaching any further projects we have noted, and these will inform our work going forward.

As I said at the last meeting, through COVID we have been working collaboratively as a system across health and care. We are committed to drive the current Community Strategy project to a plan we can implement and that will improve health services for residents of Oxfordshire. We acknowledge that this means services are likely to need to change and could involve some hard choices to ensure we use our resources to best effect to maximise outcomes for the population of Oxfordshire.

Best wishes

Dr James Kent Accountable Officer

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