Oxford Health NHS
NHS Foundation Trust

Oxfordshire Health Overview and Scrutiny Committee, 5 July 2012

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1. Context

This briefing outlines key issues relating to the Oxford Health NHS Foundation Trust's (FT) progress with integration since the merger with Community Health Oxfordshire (CHO) in April 2011.

This paper does not represent a full review of the merger but is intended to highlight to members areas of progress, performance since the merger and next steps and challenges.

2. Introduction

The importance of better integrating services around the needs of patients has been identified both nationally and locally. Nationally the 2012/13 Operating Framework identifies integration as key to sustainable improvement, while locally the Appropriate Care for Everyone (ACE) programme board has determined that the integration of services is essential in ensuring improvement in the delayed transfers of care issue.

Within Oxford Health NHS FT integration has been prioritised through the creation of the Oxford Health NHS FT Integrated Care Programme Board. The Oxford Health Integrated Care Programme Board is chaired by Dr Clive Meux (Medical Director and Director of Strategy) and provides trust wide (and beyond) strategic coordination and engagement to drive the integration agenda.

The vision for the Oxford Health Integrated Care Programme Board is:

"To ensure that holistic and coordinated care is provided across clear pathways for all of our patients."

The integrated care project board oversees all integrated care initiatives that Oxford Health NHS FT is delivering. This involves integration between:

- Community services and primary care
- Community services and social care
- Physical health and mental health
- Community services and the acute sector
- Internal integration within Oxford Health NHS FT divisions

3. Key Messages

- **Integration of Community Services.** Established community localities (physical health, mental health and social care services) co-terminous with the six CCG sub localities.
    - Closer working in place with social care teams.
    - Integration action plans developed in each locality.
    - Clinical workshop planned with CCG, OUH, OCC and Oxford Health NHS FT on 26th July to agree vision for fully integrated community localities.

- **Move on Team** established. A multi-agency (Oxford Health, OUH, OCC and Primary Care) clinical decision making group for enabling discharges from acute care (operational since 12th December 2011).

- **Single Point of Access** into Oxford Health NHS FT Community Health Services. A patient bureau type service, with the key objective being to ensure the seamless and safe management and referral of patients who would benefit from community service intervention, either to prevent an admission or to support early discharge (operational since 30th April 2012).
    - Oxfordshire County Council to join the single point of access in summer 2012
    - The Single Point of Access to be extended to integrate with Older People's Mental Health services by Autumn 2012

- **111 service.** The community services division has been at the heart of the ongoing plans to develop the 111 service for Oxfordshire in partnership with South Central Ambulance Service. The national 111 number will come into effect by April 2013 and Oxfordshire will be an early adopter. The 111 number will be an easy to use access point for the public for all their urgent care needs.

- **Hospital at Home.** The Urgent Care team has taken on the management of the new Hospital at Home service in the south and west of the county is instrumental in working with Principal Medical Limited to run a similar service in the north of Oxfordshire. The team's remit is admission avoidance to acute care, and it has worked successfully, particularly with primary care colleagues, to see an increasing number of people diverted away from a hospital admission in order to be cared for closer to home/at home.

- **Integration with Mental Health**
    - **Grass roots integration:** Joint ward meetings established between community hospitals and older adult mental health wards; buddy system established and therapies providing some cross ward support for annual leave, sick cover etc.
    - **Pathway design**: Opportunities for greater use of community services for mental health discharge becoming evident. Projects in progress include: falls, care home support services and end of life
    - **Reviewing Dementia pathway across Trust:** Audit of dementia care across both community and mental health hospitals in progress.
    - **Developing Skills and Knowledge:** Joint training now offered (e.g. Dementia training). Scope of work completed to assess skills gap across community and mental health wards and community teams.

- **Personal Health Budgets.** During 2011/12 county wide services have seen the successful implementation of Personal Health Budgets into NHS continuing healthcare processes as part of national pilot. Every new person entering NHS continuing healthcare is now offered a personal budget, 12 months ahead of the national deadline.

- **Care Home Support Service.** The Care Home Support Service is a two year pilot that has seen a specialist nursing and therapy team supporting all the care homes in Oxfordshire for the over 65s. It is helping stop inappropriate admissions to hospital, shorten lengths of stay in hospital and improve the quality of care within the care homes.

- **Long Term Conditions.** Oxford Health NHS FT has **s**ecured Department of Health funding for two joint projects with the 'Improving Access to Psychological Therapies' services. The projects will test a new approach to delivering integrated physical and psychological care to patients with long term conditions, many of whom suffer from depression and anxiety.

- **District Nursing Review.** A review of district nursing across the county took place in the autumn of 2011 led by the service itself. The service undertook some peer review as part of the process. The terms of reference were to identify where and how the service needs to modernise, including opportunities for integration, managing greater demand and complexity of care needed in patients' own homes, and improving clinical standards.

- **End of Life Care. E**stablishment of a new service, with 4 community matrons supporting people in the last year of their life. The matrons use a case management approach in their work and are part of a wider strategy around end of life care in the county.

- **Diabetes and Depression.** Oxford Health NHS FT is running innovative projects with Oxford University. Research nurses have been integrated into the community diabetes and community COPD teams in order to conduct research on diabetes and depression and the use of technology with patients who have COPD.

Childrens and Families Services

- **Locality working**. All children's community services have now been moved to a locality model co-terminous with local authority children's services and children and young people's mental health services

- **Mental Health**. PCAMHS and CAMHS have been brought under single management in order to close gaps in the mental health care pathway and ensure that young people are able to access to the right service first time.

- **Infant Parent Perinatal Service** – collaboration of mental health, health visiting, midwifery and GPs to address mild to moderate ante and post natal depression. Training programme across county working into children's centres.

- **Universal children's health service** delivering into health promotion services for young people into children's hubs

- **Health Visiting**. Early Implementer site for the national health visitor programme. One of the outcomes this year is ensuring that all children have a quality 2 year check to ensure robust foundation for good health and well-being for life and that children are able to start school ready to learn.

- **Urgent Care** – development of integrated care pathway across community children's nursing and acute care to prevent inappropriate admission and support early discharge of young people with complex health needs.

- **Integrated Children's Community Therapies Service (ICCTS)**. (Physio, OT, Speech, Language and Communication). Single point of access in place. One point of contact for parents
    - **ICCTS Integration within Oxford Health**
        - Therapists input into training for universal services in order to support awareness, early identification and appropriate referrals.
        - Therapists are working with universal services around the development of 2 year checks.
        - OT worked with OTs in neuropsychiatry, CAMHS and LD CAMHS to develop clinical pathways to ensure services and parents are clear about who to refer to and what services have available.
        - Health Action Plans: training for therapists and clinical nurse specialists within special schools to standardise practice
    - **ICCTS Integration with other NHS providers**
        - Physiotherapy has joint pathways with the OUH/NOC physiotherapy department for all childhood orthopaedic conditions ensuring that children and families receive the same advice and treatment wherever they enter the system. Shared information leaflets for all these conditions have been produced.
        - Shared protocols with the OUH/NOC orthotics department support appropriate referral and smarter practice, e.g. phoning through repeat orders rather than requiring an appointment.
        - Joint orthotic clinics in special schools to save these children having to be taken out of school to go to appointments.
        - ICCTS led the development of an integrated pathway across the whole system for management of children at risk of fractures due to Low Bone Mineral Density. This collaboration involved paediatric and orthopaedic surgeons and dieticians as well as community therapies.
        - The pathway with the wheelchair service aims to improve communication between services and ensure effective clinics for children with mobility support needs in special schools

    - **ICCTS Integration with local authority/partner agencies**
    - Working with the Oxfordshire SEN officers to identify issues early and develop joint solutions, including an information pack for therapists developed by therapists, SEN Officers and LA Solicitor.
    - Working with children's centres in developing Payment by Results outcomes re communication and "school readiness".
    - Transition work continues to develop a process for transition from Children's Therapies to Adult services. In the first phase we are rolling out a localised version of

'Health Action Planning 'to support young people transitioning from Oxfordshire special schools to adult services.

- Housing and adaptations work is integrated with OCC and District Councils in order to access the Disabled Facilities Grant and maintain liaison with surveyors, architects and builders from the county council and housing associations

Specialised Division

- **Offender Health teams Integration.** Full Integration of the offender health teams into the Specialised Services Division.

- **Prison Health Service**. Single management structure running all prison health services within Oxford Health across six prisons.

- **Integrated Forensic Mental Health Pathway**. Integration of primary, secondary and forensic mental health into single pathway nearing completion.

- **Faster access to services**. Patient access to services faster and increased quality of care resulting from better and faster information flow between all health teams

4. **Performance since the merger**

The services previously managed by CHO have integrated into three of the Oxford Health NHS FT Clinical Divisions (the majority of former CHO services for adults are managed within the Community Services Division).

This makes direct comparisons of performance at a high level difficult with only comparisons at service line level demonstrating accurately 'like for like' comparative data.

However, the table below compares at a high level some of the key indicators of performance between the former Community Health Oxfordshire services and services managed by the Community Services Division of the Oxford Health NHS FT.

High Level Performance – CHO 2010/11 and Community Services Division 2011/12

	CHO 2010/11	**Community Services Division 2011/12**
Year End KPI Performance	90% achieved or exceeded	93% achieved or exceeded
Patient Satisfaction (average score)	88	86.2
Staff Satisfaction (trust score – higher the better national average)	3.56	3.65
Clostridium difficile infection	16	15
Incidents (year end)	3403	3061
Serious Incidents Requiring Investigations (year end)	122	37