

# Oxfordshire Joint Health Overview and Scrutiny Committee

Date of Meeting: 20 June 2019	

Title of Paper: Wantage planning for population health and care needs update

# **Purpose and Executive Summary:**

Health and Wellbeing Board partners continue to progress work in the Wantage and Grove area to look to the future design and delivery of health and care services.

This paper provides an update on progress. Members of the Joint Health Overview and Scrutiny Committee are invited to note the progress of the Wantage Community engagement using the Health and Wellbeing Board's framework specifically:

- That the project has made good progress with respect to the early phases of the Framework and has a strong understanding and evidence base of the health and care needs of the OX12 population
- The project is not as far advanced as the Project Team first anticipated it
  would be as set out in the project plan; a number of factors have contributed
  to this including the importance of providing sufficient time for stakeholder
  involvement in the approach and delivery of the project
- There is consensus amongst project partners including local stakeholders that the final phases of the framework must be delivered at a time or in a timeframe that will allow good patient, public and stakeholder involvement
- Health and care system partners remain committed to developing future options as soon as possible for the people of OX12, recognising the need to balance this with clear involvement of the Stakeholder Reference Group members in the design of this approach
- This is the first time that Oxfordshire health and care partners have undertaken a project that follows the Population Health and Care Needs Framework. The project is aware that this is truly a pathfinding initiative for our system working

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#### 1. Introduction

- 1.1 This short update report sets out the progress to date in relation to the use of the Population Health and Care Needs Framework in the OX12 postcode area.
- 1.2 A JHOSC Task and Finish Group has been established to provide real time scrutiny to the process. Members of the project team have met regularly with the Task and Finish Group since April.

## 2. Local Progress – organising the project

- 2.1 A project group is advancing the work of the OX12 Project made up of representatives from both strategic and operational partners including:
  - Oxfordshire CGG Head of Strategy and Transformation Chair
  - Oxfordshire CCG wider staff and including Communication and Engagement
  - Vale of White Horse District Council
  - Oxfordshire County Council Commissioning and Public Health
  - Oxford University Hospitals staff Director of Strategy
  - Oxford Health Clinicians and Managers
  - Wantage and Grove GP Practice Clinicians and Managers
- 2.2 The Project Group is responsible for progressing delivery pf the project, assuring good links back into each of the organisations represented and to wider partners. The Project Group works closely with the Stakeholder Reference Group which was set up to bring together patients, carers and the public from the local community with partners of the Health and Wellbeing Board to ensure public views and experiences are taken into account in the implementation of the framework in OX12. The following groups and organisations are represented on the Stakeholder Reference Group<sup>1</sup>:
  - Save Wantage Hospital Group
  - Newbury Street and Church Street GP Practice Patient Participation Group Representatives
  - Sweatbox (teenage youth group)
  - Fitzwaryn Special School
  - Oxfordshire County Council Local Councillor
  - Town Council Local Councillors
  - Parish Council Local Councillor
  - Vale of White Horse District Council Local Councillor
  - Ashbury Neighbourhood Planning
  - Age UK
  - Healthwatch Oxfordshire
  - Oxfordshire County Council Public Health

<sup>&</sup>lt;sup>1</sup> Two 15 year olds are due to join the group to being the views of young people to the stakeholder reference group.

- Oxfordshire CCG Communications and Engagement, Transformation, Localities
- Oxford Health Clinical Director
- Wantage and Grove Campaign Group
- Wantage Mobility User Group
- Wantage Independent Advice Centre
- 2.3 As is often the case with work with local communities there are members of the group who are involved in a number of local groups and organisations this provides greater depth to the membership.
- 2.4 The group has agreed terms of reference that centre around the provision of a patient and stakeholder voice in the project with specific emphasis on the development of public engagement and public facing communications and patient information.
- 2.5 Members of the group champion the involvement of the local community and actively seek the views of those stakeholders they represent and feed this information into the reference group and project. The Stakeholder Reference Group led a recent piece of work designing a local survey to better understand what services local people currently access and where.
- 2.6 Initial engagement in the community has been to see what services people use locally to support their health and wellbeing. Engagement was co-designed with a sub group of the OX12 Stakeholder Reference Group. This included the development of a survey which was launched on 2<sup>nd</sup> April 2019, with the support of members of this group and roadshows. The roadshows aimed to:
  - raise awareness of the OX12 project with the local community
  - raise awareness of the survey and encourage people to respond to it
  - enable people to ask questions / have a conversation with staff about the project
- 2.7 In total 1303 responses were received to the survey, 920 were online and 383 were paper responses. A full report will be available later this month and will be available on the CCG's website.

### 3. Local Progress – delivery of the project

3.1 The project has made good progress through the Health and Population Needs Framework. Members of the Committee will recall that the scope of the project includes wider health and care needs of the population. The work to date has been very much in the evidence and information gathering phases. This work is set out in the three concurrent phases of Population Health and Care Needs, Review of Services and Assets and Innovation and Good Practice.

- 3.2 At an event on 22 May partner organisations gathered together to present the outputs and findings of the work of those three phases to date. The Chair of the Stakeholder Reference Group was invited to attend and participate and members of the JHOSC Task and Finish Group were invited to observe.
- 3.3 The outcomes of that event demonstrate that the project has a strong understanding and evidence base of the health and care needs of the OX12 population. The workshop identified a number of gaps and areas where further detail is required. A key aspect of this relates to the housing growth in the area and the types of homes that will be built and how this will impact on not just the total population but the profile of that population. Work to better understand this and other aspects that were identified as gaps in information is underway.
- 3.4 There is agreement that before the project can enter into the phases of the framework where the focus shifts to how population health and care needs can be best met there needs to be a period of discussion and playback. This will support and enable effective participation in events that consider the future planning of services designed to meet local needs.
- 3.5 There is enough information and a strong enough narrative with respect to the heath and care needs of the OX12 area to plan how this information can be shared more widely. The Project Team, working with members of the Stakeholder Reference group will prepare the information that has been gathered to date and share it publicly so that the wider community can consider and understand the findings.
- 3.6 This work will take place over the coming weeks. No conclusions have been drawn with respect to how the identified health and care needs could be best met.

### 4. Local Progress – timeframe for delivery

- 4.1 No project delivery and implementation is without challenge and projects that include high levels of patient and stakeholder involvement and engagement need to ensure that the timetable in which the work takes place allows for sufficient involvement and engagement.
- 4.2 The project is not as far advanced as the Project Team first anticipated it would be as set out in the project plan; a number of factors have contributed to this including the importance of providing sufficient time for stakeholder involvement in the approach and delivery of the project
- 4.3 After discussion with at the Project Team, the Stakeholder Reference Group and the JHOSC Task and Finish Group there is clear consensus that the final phases of the framework must be delivered at a time or in a timeframe that will allow good patient, public and stakeholder involvement final phases of the framework.

### 5. Next Steps

- 5.1 The period between now and the end of July will be used to raise awareness of the project overall, to playback the findings of the project to date and to plan for the meetings and events that will consider how the identified needs can be met. Two groups made up of members of both the Project Group and the Stakeholder Reference Group will advance this work looking at the information and data and planning the detailed design of the last 2 phases of the framework.
- 5.2 During the school summer holidays in August this work will continue to enable the Meeting Population Needs phase of the Framework to be delivered from the beginning of September. The planning and design group will ensure that there is a good mix of events that have been well publicised and designed to engage the population of the OX12 area.
- 5.3 Health and care system partners remain committed to developing future options as soon as possible for the people of OX12, recognising the need to balance this with clear involvement of the Stakeholder Reference Group members in the design of this approach. And a timeframe in which local patients, public and stakeholders can be enabled to participate from an informed position.
- 5.4 At the time of writing this report the Project Group has not confirmed a revised timetable to reflect the changes that have been suggested following the workshop at the end of May. Members of the JHOSC will receive a copy of the revised timetable as soon as it has been considered.

### 6. Learning from the approach

- 6.1 Members of the Committee will appreciate that many lessons have been learned already in the delivery of this project. The Project Team and the Stakeholder Reference Group have discussed many points relating to the recent public survey in particular. The JHOSC Task and Finish Group has been robust in their challenge that they expect to see more formal evaluation as the project progresses, over and above the discussion of lessons learned.
- 6.2 The Project Group has responded to this challenge and in project evaluation is being strengthened.

# 7. Observations of the Project SRO

- 7.1 This is the first time that Oxfordshire health and care partners have undertaken a project that follows the Population Health and Care Needs Framework. The project is aware that this is truly a pathfinding initiative for our system working.
- 7.2 The project is being delivered with a community that is developing their trust in their local NHS Partners. The Project Team through the work to deliver the project and through the Stakeholder Reference Group in particular is seeking to build trust and good working relationships.

- 7.3 This takes time and confidence and trust can be built between parties as work and relationships progress. There are some ground rules that the terms of reference of the project groups are trying to uphold including transparency and openness, mutual respect and working to create a respectful environment within which all members of the group feel able to contribute equally to discussions and debates.
- 7.4 There are strong voices within the Stakeholder Reference group who consistently bring the focus of meetings to the Community Hospital and the temporary closure of the beds, rather than the services required for the relevant population health and care needs. Whilst this is understandable and at times appropriate it is sometimes delivered in an emotive and disruptive way that serves to create difficult work environments and leads to some aspects of discussion and decision to take longer.
- 7.5 All staff involved in this project are approaching it with open minds as set out in the Framework and the scope of the project. We are seeking to understand the health and care needs of the OX12 population now and in the future so that we can work to consider how best to meet those needs.
- 7.6 There is a dedicated section of the website related to the OX12 project that can be accessed from the front page of the CCG's <u>website</u> that provides project information and meeting notes. Further information will continue to be made available through that page.

Jo Cogswell OX12 Project SRO 7 June 2019