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Dear Mr Falkenau,

We write in response to your letter of 5th July to Cllr Hanna requesting additional information about the services at Wantage Community Hospital, as published in the Oxfordshire JHOSC papers.

We were pleased to read that the members of the Health Sub-committee found the visit that we hosted at Wantage Community Hospital on 23rd June 2022 helpful. One of our aims was to share some of the development work we have already done on the great opportunities the hospital provides to support local residents, as part of the plans to deliver improved and more joined-up services for citizens across Oxfordshire.

Since you wrote your letter, the report we submitted to Oxfordshire JHOSC for the meeting on 14th July has been published, including detailed appendices on services at the hospital, entitled 'Optimising Community Hospitals Project' (Appendix 2, page 27 of the published HOSC papers) and a detailed Interim Evaluation Report for the Wantage Community Hospital pilot programme (at Appendix 3, page 34). [Link to JHOSC Papers](#)

We believe that this report addresses many of the questions in your letter and have provided some additional information below.

At the December 2020 meeting between Oxford Health NHS Foundation Trust and Wantage Town Council, the Trust discussed a range of services that could be considered for Wantage Community Hospital. This list was derived from the OX12 work referred to in your letter, including the local residents' survey, and included the provision of more outpatients as well as other possible services.

Following that meeting, we reviewed the feasibility of these options for initial piloting – part of this process included consideration of:

- The opportunities and limitations of the hospital building itself, in the context of the COVID-19 pandemic infection prevention and control restrictions
- The requirement that any changes made to the fabric of the inpatient unit should be reversible and therefore not prejudice the outcome of the wider community services strategy and future public engagement and consultation work
- The likely local need for the service (based on OUH/OCCG data and data previously reported to JHOSC, Ophthalmology, ENT and Mental Health were identified as high needs for large patient cohorts in the local population)
- Workforce availability for the new service, as it is important that services are safe and resilient
- The requirement for upfront investment in specialist, high-cost equipment (e.g. significant investment in x-ray equipment and installation of radiation-proof screening, etc. would be required to pilot a minor injuries unit; we believe this option should be modelled on population health and service data as part of the county-wide programme)
- Agreement of the commissioner and contracted service provider to pilot the service at the Hospital

In the report submitted to JHOSC we have provided an update on the outpatient services that have been piloted to date. These include:

- Ophthalmology (specialist eye) clinics and diagnostic tests
- Ear, Nose and Throat
- Audiology (specialist hearing assessments)
- Adult Mental Health
- Adult Eating Disorders
- Older Adult Mental Health
- Talking Space+
- Psychological Therapy
- Perinatal mental health
- Child and Adolescent Mental Health
- Neuro-development Clinic

We reported that between October 2021 and May 2022, these pilot services had provided care to 1445 patients, of which 87% were local residents from OX12 and the immediately neighbouring postcodes. The feedback collected from service users has been extremely positive, with over 92% reporting they would recommend the service they received to their family or friends.

We have been pleased to be able to deliver care to so many local residents through this work, reducing the costs and time pressures of travelling into Oxford City or beyond.

In addition to the pilot services, the following existing services have continued to be provided at the hospital:

- Adult Speech and Language Therapies
- Children's Therapy (Speech and Language, Occupational Therapy)
- School Nursing and Immunisation Teams
- Physiotherapy / musculoskeletal care
- Podiatry
- Midwife-led Unit (provided by OUHFT - local home births and perinatal care are being supported from the unit, although birthing in the unit is currently closed)

You highlighted a concern that the hospital was being developed as an administration rather than a clinical hub. We can reassure you that this is categorically not the case; all of the areas refurbished for the pilot are being used for clinical care, enabling us to double the amount of clinical space available for patient-facing services. We have based only frontline clinical services at the hospital; management and corporate teams are housed off-site. Our hospital-based clinicians require access to space where they can confidentially undertake phone calls and remote consultations with patients they have seen in clinic, and it may be that this space appeared to be serving an administrative function.

In relation to your query about Physiotherapy services, as reported in the HOSC paper, these services were re-procured by Oxfordshire CCG last year; we understand that a new provider has been appointed and will be responsible for these services from autumn, so the current provider is vacating their room at the hospital. We can confirm that the Wantage Community Hospital team is in discussions with the new provider, in order to identify suitable accommodation at the Hospital for their new MSK service.

In terms of progressing the long-term decisions about the Hospital; as discussed at the meeting on 23rd June, and as more comprehensively outlined in the JHOSC paper for the 14th July meeting, the Integrated Improvement Programme will take a wide-ranging, holistic look at community services across Oxfordshire.

The clinical work on the community inpatient model has progressed well, as summarised in the Appendix of our report to JHOSC. The next stage of work is to develop this clinical model into specific delivery options, which will include an evaluation of the locations and sites at which community inpatient care is optimally provided to the population. Public engagement and robust data modelling will be key inputs to this work, bringing together a range of residents' views, patient experience, census, population health, health, transport, estates, future developments (housing etc.) and other available data sets to enable us to map local people's needs against the services in the programme. This will include actively seeking views from Town Councils and engaging with local residents.

We appreciate that there is concern about the time it is taking to complete this work, given the ongoing and recurrent COVID-19 pandemic surges, which have continued for longer than initially expected. We would like to reassure you that, despite these unprecedented challenges, this remains a top priority for the Oxfordshire system partners and progress has continued. By way of example, we have actively engaged with the NHSEI Assurance team to commence the mandated assurance process for substantive service change, which NHS bodies are required to complete as a precursor to a formal public consultation. To progress the clinical governance aspects, we have held initial meetings with the Head of the Clinical Senate for Oxfordshire and are in the process of agreeing timescales with NHSEI for the Stage One and Two Assurance processes. We are scheduled to attend the Clinical Senate conference later in the year and will be benefitting from a bespoke NHS Assurance Training and Development Programme as part of this work.

Thank you for your letter; we hope this provides useful additional information and reassurance and look forward to further dialogue in the coming months, as we move into the public engagement phase of the programme.

Yours sincerely,



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Executive Managing Director for
Primary, Community and Dental Care
Oxford Health NHS Foundation Trust



Helen Shute
Programme Director Oxfordshire
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cc.

Cllr. Jane Hanna - Chair, Oxfordshire Joint Health Oversight and Scrutiny Committee
Karen Fuller - Interim Corporate Director Adult Social Care, Oxfordshire County Council
Sam Foster - Chief Nurse, Oxford University Hospitals NHS Foundation Trust
Matt Powls - Interim Place Based Director, BOB ICS