

Oxfordshire Place-base Partnership: Update June 2023

1.0 Introduction

In March 2023 Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Partnership (BOB ICP¹) published its [Integrated Care System Strategy](#). It is aligned with local Health and Wellbeing Strategies and sets the direction for integrated care over the next 5 years.

There is also an expectation in national policy that systems will work through sub-system geographies called 'Places' and deliver services through Provider Collaboratives.

These Places will lead and deliver much of the operational detail to make integration a reality through Place-based Partnerships. The [integration white paper](#) (February 2022) and the [statutory guidance](#) on arrangements for delegation and joint exercise for statutory functions aim to accelerate the development of Place.

This paper is a brief update about Oxfordshire's place-based partnership (PBP). It provides an update on some of our achievements and an indication of our priorities.

2.0 Oxfordshire Place-based Partnership

Oxfordshire's PBP is building on a firm foundation and history of collaboration. Oxfordshire County Council (OCC) and the former CCG (now the ICB) has had a Section 75 agreement in place since 2013. It consists of two pooled budgets Live Well and Age Well (Better Care Fund) which totals almost £400m. In 2021 the then CCG and OCC developed the health, education and social care (HESC) to improve joint commissioning arrangements.

Furthermore, Oxford Health NHS FT (OHFT) has extensive experience leading collaboratives for adult mental health (with voluntary sector partners) and was one of the first wave specialist mental health collaboratives. More recently it has formed a local collaborative with Oxford University Hospitals Foundation Trust (OUHFT) at place and an ICS mental health collaborative with Berkshire Healthcare Foundation Trust (BHFT).

The PBP is a consultative forum representative of our health and care system. It offers a unique opportunity for executive leaders from health, local authorities and communities to come together, accelerate integration and find new ways to use our collective resources and improve outcomes for the residents we serve. It can make choices about how to leverage resources and prioritise actions and interventions that reduce health inequalities and increase our investment in prevention.

Since the previous update the membership of the place-based partnership has changed. Veronica Barry has replaced Rosalind Pearce as Chief Executive (CEO) of Healthwatch. Caroline Green has replaced Mark Stone to represent City and District Councils. Dr Toby Quartley has replaced Dr Mark Gray to represent General Practice (GPs) in the North of the county. Details of the membership can be found in appendix 1.

The partnership has met monthly since December. We initially focussed on our relationships and ways of working needed to be a thriving partnership working within a complex system. This will be measured over-time by a partnership maturity matrix (appendix 2).

¹ Group of organisations which plan and provide health and care services for nearly two million people who live and work in the local authority areas of Buckinghamshire, Oxfordshire and Berkshire West.

More recently the agenda has focussed on priority areas including urgent and emergency care and prevention and reducing health inequalities. We reviewed and supported new Section 75 agreement between OCC and ICB and have overseen the development of the Better Care Fund. In June we are focussing on the development of the ICS mental health collaborative and Oxfordshire's adult mental health model of care.

3.0 Key Achievements

3.1 OCC and ICB Section 75

At the end of March OCC and ICB signalled its ongoing commitment to joint working by renewing the Section 75 agreement which pools approximately £400m of NHS and local authority funds. It underpins the development of joint commissioning, the better care fund and how we deliver more joined up care for adults and older adults.

3.2 Adult Mental Health

In March 2023, the joint commissioning team agreed to award a two-year contract extension for the Oxfordshire Outcomes-based mental health contract. This is a pioneering collaboration between OCC, ICB, Oxford Health NHS FT (OHFT) and voluntary sector partners.

Stakeholders from across the system are participating in a system leadership programme (delivered in collaboration with NHS England and Health Education England) to develop skills and behaviours needed to work in a complex system. Under the leadership of OHFT, supported by the joint commissioning team, we aim develop a sustainable model of care for mental health. The programme will develop within the context of the emerging ICS Mental Health Collaborative. It will involve people that access mental health services and partners from across Oxfordshire to develop new, high value services.

3.3 Urgent and Emergency Care

Oxfordshire opened two Urgent Care Centres (UCC). The first, run by [Principle Medical Limited](#) at the Horton General Hospital (HGH) opened in February 2022. The second opened on the John Radcliffe site in February 2023 and is run by Oxford City Primary Care Network (PCN). Both UCCs receive on-the-day referrals from Primary Care and redirections from Emergency Departments.

In December 2022 Oxfordshire established a Transfer of Care Hub (TOC). This is a local coordinating centre linking all relevant services across health and social care to aid discharge and recovery and admission avoidance. It has increased the number of people returning to their own home and reduced the number of days people spent away from their places of residence.

Primary care in Oxford City and Bicester have led the development of 2 neighbourhood teams. These are multi-disciplinary teams to support people with complex needs that need continuity of care. They reduce on the day demand for GP practices and reduce the number of frail people attending emergency departments.

South Central Ambulance Services (SCAS) and OHFT's Urgent Community Response (UCR) service have worked together to deliver a 'call before you convey' pathway for people following a fall. It has increased the number of people being treated in their homes and reduced hospital conveyances by 12%.

Oxfordshire's Hospital at Home teams care for approximately 100 people a day in virtual wards in people's own homes. This is a safe and effective alternative to NHS inpatient care and prevents avoidable admissions as well as supporting early discharges.

3.4 Prevention and Health Inequalities

Active Oxfordshire in partnership with Districts, Public Health and multiple sectors (VCS, leisure, education and business) coordinate Move Together and You Move. These are projects aimed at supporting people across the county to be more active.

You Move targets families and children living in deprived areas or classed as 'otherwise vulnerable' (e.g. refugees, children in/on edge of care system) to access low cost and free activities. In its first year over 6,000 people have signed up. Move Together focusses on people with long-term conditions (including mental health) or at high risk of falls and supports them to move more. In total over 1,700 people were referred which is double the number compared to the previous year. A snapshot of the impact of this programme is in appendix 3.

4.0 Next Steps

4.1 Health and Wellbeing Strategy

Key stakeholders are working alongside Public Health to update the joint strategic needs assessment by July 2023. Concurrently, Oxfordshire's Health and Wellbeing strategy is being renewed with an aim to have a final version in December 2023. This will be a central document that sets out priorities to improve the emotional and physical wellbeing for the people of Oxfordshire set within the context of the Buckinghamshire, Oxfordshire and Berkshire West [Integrated Care Strategy](#) (agreed by the Integrated Care Partnership in April 2023).

4.2 Better Care Fund

The Age Well team of HESC have led the development of Oxfordshire Better Care Fund (BCF). The aim is for Oxfordshire Health and Wellbeing Board to support the proposal for submission to NHS England in July 2023. The two-year plan has been developed with stakeholders from across health and social care including NHS providers, independent care providers and voluntary sector. Crucially, it includes our plans for meeting the health and care needs over winter.

4.3 Children and Young People

Partners involved in health and social care are focussed on improving outcomes for 0 to 5-year-olds (school readiness), families affected by special education needs and disability and child and adolescent mental health (including children transitioning to adult mental health services). HESC is supporting place to map the different parts of our system and identify opportunities to integrate services for people and populations that will benefit from more joined-up care.

4.4 Urgent and Emergency Care

Under the Urgent Care Board, chaired by Oxford University Hospitals NHS FT, we will continue to find ways of supporting people to stay well in their communities, avoid unnecessary ED attendances and hospital admissions and increase the time people spend at home.

The programme will focus on the following key areas in preparation for winter:

- Developing our 24/7 urgent primary care offer to deliver seamless same day care for people (without complex needs) via UCCs and out of hours care.
- Spreading neighbourhood teams across Primary Care Networks with access to a range of health and social care expertise to support people with complex needs, people over-75 and frail and people at the end of life.
- Improve the support for children and adults that require urgent mental health support on the same day.
- Build on the success of the Transfer of Care Hub and increase the number of people we support in their own homes.

4.5 Prevention and Health Inequalities

Place Director for Oxfordshire and Director of Public Health are working together to reinvigorate the Health Inequalities Forum. This will be a key part of place governance to oversee the development and delivery of system-wide plans to reduce health inequalities and increase our efforts in prevention. It is broadly focussed on the following areas:

- Healthy Behaviours (e.g. smoking, activity, diet and alcohol).
- Working with Communities (including VCS and city/districts).
- Health protection (e.g. vaccination, immunisation, blood pressure monitoring etc.)
- Anchor Institutes and major employers.

Initially the group has supported the proposed investment of ICB inequalities funding in the following areas:

- Homelessness (approx. £30k) to jointly fund a post to identify opportunities to join-up efforts countywide. This may expand to support the delivery of step-up/step-down services for the remainder of FY2324.
- Well Together – a programme coordinated by OCVA² and CFO to support grassroots organisations in the 10 most deprived wards in Oxfordshire. The programme will support activities that designed in communities to improve emotional and physical wellbeing of the population. It will also support clinical themes to reduce health inequalities and PCNs. By the end of FY2425 we intend to have invested £1m in grassroots organisations in the most deprived wards in Oxfordshire.
- [Move Together](#) is a programme coordinated by [Active Oxfordshire](#). It is a joint programme with Public Health, Local Authorities (city and district councils) and the ICB. It supports people living in with long-term conditions and from inclusion groups to increase activity in a sustainable way. The ICB will contribute £500k over the next 2 years for this programme alongside Public Health and City and District Councils.
- Furthermore, the HI Forum will investment in thorough monitoring and evaluation of our efforts in prevention and reducing health inequalities.

5.0 Conclusion

‘The whole is greater than the sum of its parts’ (Aristotle).

Oxfordshire Place-based Partnership has made a good start. The PBP aims to be a thriving partnership, delivering high value care by working beyond organisational boundaries to make the best use of the collective resources we have in the system. The so-called ‘soft’ skills of building relationships built on trust and transparency are key to our success.

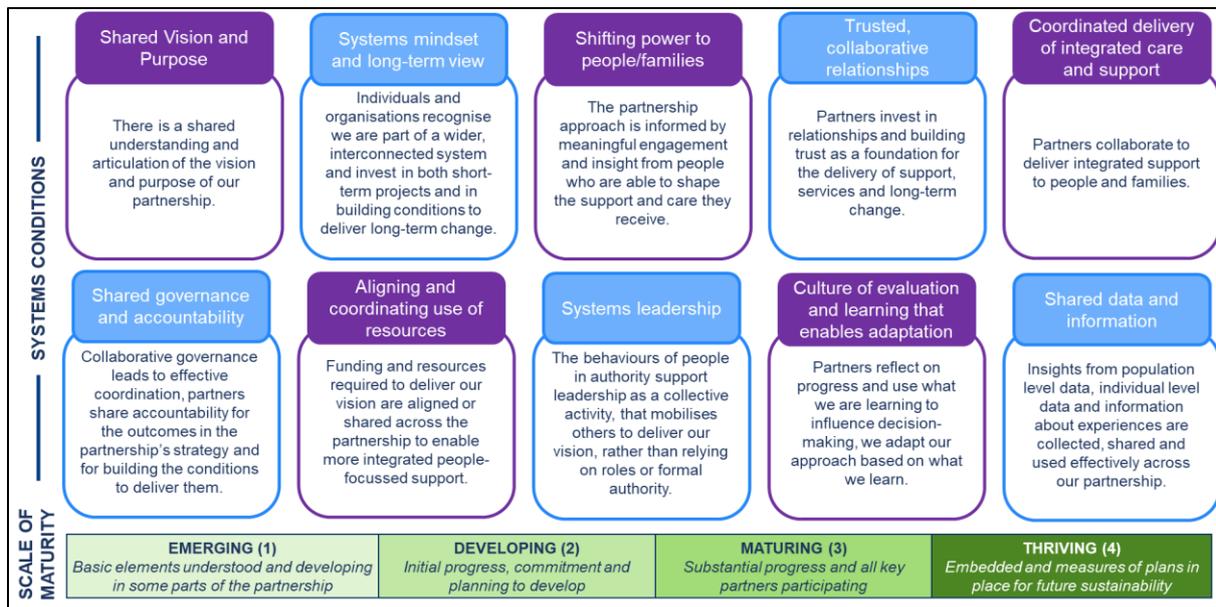
² Oxfordshire Voluntary Care Alliance and Community First Oxfordshire

We are committed to finding ways of investing more in prevention, addressing the building blocks of health (jobs, housing, social activity, education) and reducing health inequalities in Oxfordshire. The legacy system we are emerging from encouraged competition and in some instances increased fragmentation. We have an opportunity to collaborate and create seamless services and improve outcomes and experiences for people in Oxfordshire.

Appendix 1

Name	Job Title	Organisation
Daniel Leveson	Place Director	BOB ICB
Stephen Chandler	Executive Director	Oxfordshire County Council
Caroline Green	Chief Executive	Rep for City and District Councils
Dr Nick Broughton	Chief Executive	Oxford Health NHS FT
Professor Meghana Pandit	Chief Executive	Oxford University Hospitals NHS FT
Ansaf Azhar	Director of Public Health	Oxfordshire County Council
Veronica Barry	Executive Director	Healthwatch
Laura Price	Chief Executive	Oxfordshire Community & Voluntary Action
Dr Toby Quartley	GP Lead	North PCNs
Dr Michelle Brennan	GP Lead	South PCNs
Dr Joe McManners	GP Lead	City PCNs

Appendix 2



Appendix 3



Daniel Leveson
 Oxfordshire Place Director
 June 2023