

Questions to the 29 September 2016 OCCG Board

1. Oxfordshire's Transformation Board is apparently ensuring that proposals for change are "tested rigorously" before they go to consultation. What exactly does "testing rigorously" entail?

The proposals are subject to development of a pre-consultation business case (PCBC). This case will need to demonstrate a clear and evidenced Case for Change. Proposals against this Case for Change must be clinically safe and deliverable. Different options of achieving this will be explored. Any options need to be tested in regard to our ability to recruit the workforce. This is a key challenge in Oxfordshire. The finances need to be tested to ensure both the proposal and the overall set of services can be afforded. We need to also look at time lines and implementation. If there are capital requirements or estates charges we need to know all of these can be achieved.

2. Considering that CCGs were created in order to give GPs a greater say in healthcare provision, why is it that OCCG is completely out of step with the majority of local GP opinion on consultant led maternity at the Horton?

The CCG is regularly meeting with the GPs, and discussing the issues. The North Oxfordshire Locality Group (NOLG) report described a recent meeting with GPs and the conclusion reached around the temporary closure (see below). We continue to work with GPs to ensure we do have a full shared understanding of the challenges, the difficult choices we must make and alignment of the best way forward. We do not believe the CCG is 'out of step' as described here and this view was supported at the OCCG Board meeting on 29 September 2016 where the North Deputy Locality Clinical Director referred to this question and stated it was not a true representation of the situation (see the draft minutes of the meeting [here](#)).

Extract from Paper 16/62, Locality Clinical Director Reports, to the 29 September 2016 OCCG Board:

Eleven GPs from seven NOLG practices attended an evening meeting at the Horton on 16 August 2016 with senior clinicians and managers from OUHFT, and agreed then that should OUHFT have been unsuccessful in recruiting enough doctors to maintain obstetric-led care at the Horton in October, it would be better to change the service to a MLU rather than to close it entirely. The decision at an extraordinary meeting of the OUHFT board on 31 August 2016 agreed with the clinical steer given on that occasion.

3. Why does it take so long for answers to questions to be posted to the website. As of yesterday, the answers to questions asked at the may Board meeting were not available.

Our intent is to provide written answers within 20 working days of the Board meeting. To our knowledge we have achieved this except in two specific circumstances:

- Some questions were asked at our Board meeting in May and we answered the majority of these in the meeting. We appear to have mislaid the written copy handed to us and we apologise that this meant we did not follow them up with a written response.
- At our July Board meeting we were asked a large number of questions by Oxfordshire Keep Our NHS Public (OKONP) on aspects of the Sustainability and Transformation Plan. Given the number and range of questions we felt they would be better addressed through discussion and conversation supported as necessary by written communication. As stated at the Board meeting we offered to meet with representatives from OKONP to be able to discuss with them the range of issues they had highlighted which are not always amenable to supplying only a written answer. We offered to follow up this meeting with a written summary of the discussion which we would then have been put on the website. We are disappointed that OKONP did not wish to take up the offer we made and therefore we provided brief written answers.