Question for OCCG Board 30 November 2017

Could the Board please confirm their strategy for moving all GP's off the N3 connectivity infrastructure and on to the new HSCN infrastructure in order that they can take advantage of the reduced charges?

The Oxfordshire GP's will be joining the 'One Oxfordshire' Collaborative incorporating the Oxfordshire University Hospitals NHS Trust, Oxford Health NHS Trust, Oxfordshire Clinical Commissioning Group and Royal Berkshire Hospitals NHS Trust. The 'One Oxfordshire' Collaborative will be following NHS Digital guidelines on procurement and will be using the new Crown Commercial Services RM 3825 (specifically for HSCN) to procure new services for the 'One Oxfordshire' Collaborative partners. We anticipate being ready to go onto RM3825 January 2018 with contract award hopefully March/April 2018.

At last Thursday's (22 November 2017) meeting in Oxford to discuss changes to GP services and primary care, we were given several assurances from OCCG that there would be a public consultation following publication of the plans on changes which David Chapman described as major. In addition, at a HOSC meeting when this issue was discussed you too gave the committee and the public an assurance that there would be a public consultation on these changes, which are considerable.

In view of this information, it was surprising then to read in a paper on *Primary Care Locality Place Based Plans* to be presented at tomorrow's Board meeting that the 'draft implementation timeline of plans' and a previous slide on public engagement contain no reference to a public consultation. Indeed, it appears that implementation across many of the plans will begin as early as Q1 2018.

http://www.oxfordshireccg.nhs.uk/documents/meetings/board/2017/11/2017-11-30-Paper-17-78-Primary-Care-Locality-Place-Based-Plans.pdf

I appreciate it is your last Board meeting, but I'd be grateful if you could raise this contradictory position at the Board meeting tomorrow and ask OCCG for an unambiguous explanation.

We are sorry for any confusion that we have caused and think this may be because we sometimes use the words involvement/engagement and consultation as if they are interchangeable. We are undertaking engagement on the draft/developing plans and the feedback that we get will be used to inform version 1 of the plans that we will publish in January. However as we expect these to continue to develop we are also considering how we have ongoing engagement with patients and the public.

The plans include a great number and variety of projects many of which are about increasing currently available services or implementing additional services. Given the pressures in primary care and the fact we have some uncommitted funding for primary care we are keen to use this to invest in expansion/development of services to support patients and we will be getting on with this in line with the implementation timescales.

We will not consult on the whole of the locality plans. If any individual proposals classify as "significant service change" then we would undertake consultation on these – these may occur in very different timeframes; for example early in 2018 we will be consulting on changes to the services provided by Banbury Health Centre.