Annual Report Summary
2019 / 2020

NHS
Oxfordshire
Clinical Commissioning Group

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Welcome and introduction

During the year we have made real progress in the way healthcare is delivered in the county.

However, during the time of writing this report we continue to face the unprecedented challenge of the COVID-19 pandemic. The position relating to COVID-19 has been dynamic to say the least. Oxfordshire Clinical Commissioning Group (OCCG) together with other NHS organisations and the Local Authorities in Oxfordshire have been working closely to ensure our response to COVID-19 has been effective and coordinated, and continues to be so as we moved into 2020/21.

I am very grateful to everyone involved in this public health crisis: staff on the frontline, staff in our NHS and local authority organisations as well Oxfordshire's voluntary, third sector partners and local groups whose efforts to support their colleagues and the community have been vital.

However, this annual report is about the past year April 2019 to March 2020. Despite the challenges with COVID-19, we must recognise the progress across health and social care in the past year and the positive changes to patient care.

This work includes the development of more sustainable general practice; advances in supporting older people with chronic respiratory conditions in the community; better outcomes for people with diabetes; better cancer detection and treatment; improved access for children and young people to mental health support through schools and the introduction of social prescribing to help people with a holistic approach to their health and wellbeing.

We must continue to work together across health and social care, something which has progressed significantly throughout the past few months. We need to do this across Oxfordshire and our wider integrated care system across Buckinghamshire, Oxfordshire and Berkshire West. We must build on changes we have made in the past year and embrace the beneficial changes in the way some services have been provided during the COVID-19 pandemic. If we do this, we will make better use of our resources and continue to improve the health and wellbeing and experiences of our patients and the wider public.

Dr Kiren Collison
Clinical Chair

Who we are

OCCG is the NHS organisation in Oxfordshire that plans, buys and oversees health services for everyone living in the county.

We work with local people, local GPs, hospital clinicians and other partners including local government and voluntary sector. All GP practices in Oxfordshire are members of OCCG. The views of the health professionals who work in these surgeries and who have first-hand experience of treating our patients, inform the work we do.

GP practices: **67**

Number of patients: **720,000**

How OCCG spent its money

In 2019/20 we spent £958.7 million which was within our total budget of £958.7million.

Here is a breakdown of how it was spent:

- Acute (hospital care): **£465,504m**

- Community healthcare: **£74,666m**

- Primary care and delegated co-commissioning: **£205,722m**

- Mental health and learning disabilities: **£89,083m**

- Continuing healthcare: **£82,000m**

- Other programmes: **£18,663m**

- Running costs: **£13,392m**

Key achievements

More personalised primary care

In 2019 the NHS Long Term Plan (LTP) set out an ambitious programme of change for primary care and community services. Primary Care Networks (PCNs) are based around a GP registered list of approximately 30,000 – 50,000 patients, including GP practices and other partners in community and social care. In Oxfordshire there are 20 PCNs which offer services on a scale which is small enough for patients to get the continuous and personalised care they value, but large enough to offer a wider range of services in partnership with others in the local health and care system.

The PCNs will work with the Patient Participation Groups (PPGs) of their member GP practices and local communities in making plans, identifying priorities and seeking feedback on how services are delivered in their local community.

OCCG has asked Healthwatch Oxfordshire (the patient watchdog organisation) to develop and support PPGs working in alliance with their PCN to reflect more accurately the voice of patients and the wider public in each area.

Action on health and wellbeing

As part of delivering the Oxfordshire Health and Wellbeing Strategy, the county's health and care partners agreed a new approach to planning services using 'population health management', which features in the NHS Long Term Plan.

A framework was developed to review and plan for future care needs in the county and is intended to be delivered by working with local residents, communities and stakeholders, including local councils.

The first area where this has been carried out is in the OX12 postcode area (Wantage, Grove and surrounding villages). Over the course of 12 months health and care partners worked together with some representatives of the local community. The new approach demonstrated a clear commitment to partnership working in Oxfordshire as well as extensive stakeholder engagement and co-design with stakeholders and wider members of the public at all stages.

The project showed that when compared with both Oxfordshire and the rest of England, the population of the OX12 area is relatively healthy, relatively affluent and well served in terms of services.

However, that does not mean that OX12 is without its challenges or that the communities in OX12 do not experience difficulty accessing services. Work on the project had to be paused during the height of the COVID-19 pandemic.

Key achievements

Supporting people with respiratory conditions in the community

In November 2018 OCCG launched an Integrated Respiratory Team (IRT) pilot project in North Oxfordshire and Oxford city to support people with long term respiratory conditions such as Chronic Obstructive Pulmonary Disorder (COPD) and asthma. The project enhances existing community, hospital-based and primary care services by providing a consultant to work in the community alongside additional respiratory nurses and physiotherapists working with respiratory GPs, a dedicated psychologist, a pharmacist, dedicated smoke-free advisor and a specialist in palliative care support.

The project, which is also being supported by pharmaceutical company Boeringher Ingelheim, is staffed by NHS clinicians and other professionals from Oxford University Hospitals NHS Foundation Trust (OUH) Oxford Health NHS Foundation Trust (OHFT) and local GPs.

At the end of October 2019, 31 community respiratory clinics for adults had been held in the pilot areas, with 322 attended appointments. The average wait time for a first appointment in the community clinic is less than seven weeks compared with just over 11 weeks for a first COPD hospital outpatient appointment at OUH.

The community clinic also has fewer patients not turning up for appointments and has received positive feedback from patients. People with long-term respiratory conditions who are admitted to hospital remain under review by a 'virtual ward' for 30 days after they are discharged. So far 263 patients have been reviewed under the virtual ward: 26 per cent of them have been re-admitted and 74 per cent have not.

Key achievements

Suspected CANcer (SCAN) Pathway

The SCAN service continues to help patients who present with 'vague' symptoms such as weight loss and tiredness. Before the launch of the SCAN pathway three years ago, GPs did not have a way to get rapid investigations for patients with 'non-specific' symptoms, with people going back and forth between their GP and the hospital many times until a diagnosis was made. The SCAN pathway aims to help those patients with 'non-specific' symptoms. It involves rapid access to Computerised Tomography (CT) and laboratory tests (blood and faeces tests), with possible further tests if needed.

The aim is to reach a diagnosis and begin treatment faster than previously happened. Since its launch, 145 patients who underwent a CT scan were found to have cancer (9.4% of patients who met the criteria for investigation) and were then able to start appropriate treatment quickly. In addition to CT scans, the team uses laboratory tests to detect cancer and other illnesses, which have included heart conditions, Addison's disease and hernias.

The SCAN Pathway Team were recognised for their hard work in detecting cancer and other serious illnesses in patients in Oxfordshire last year when they won the Improvement and Innovation category at this year's Oxford University Hospitals 'Staff Recognition Awards' in December.

OCCG continues to work with OUH to develop and implement a plan to improve cancer waiting times over the next year.

Improving diabetes care and prevention

It is estimated that around 56,000 people in Oxfordshire are currently at risk of developing Type 2 diabetes which can lead to other serious conditions including stroke, heart disease, limb amputation and early death. However, in most cases it is preventable and also reversible if caught early.

The NHS National Diabetes Prevention Programme offers a local service to people who are at risk of Type 2 diabetes. The programme is designed to stop or delay the onset of the disease through education on lifestyle choices, advice on weight loss through healthier eating and physical activity. Between June 2017 (when the programme was launched in Oxfordshire) and the end of January 2020, 5,358 people had been referred into the programme.

The average weight loss between an initial assessment and six months into the programme is between 2.5kg and 3.5kg.

Oxfordshire also has around 30,000 people who have Type 1 diabetes and extra investment has been put into a number of initiatives to support them, including structured education.

Structured education is recommended for all diabetes patients to improve their understanding of their condition and provide them with the knowledge, skills and confidence to be able to manage it effectively.

In Oxfordshire the number of people with Type-1 diabetes attending courses within 12 months of diagnosis was 12.5 per cent in 2017 (which is the latest information available) up from five per cent in 2016 and better than the England figure of 7.2 per cent.

Key achievements

Improving mental health services for children and young people

In 2018 OCCG secured NHS England funding to pilot four new mental health support teams in Oxfordshire schools. Each team covers 8,000 students. The first phase of the pilot is well underway with two teams established in Oxford City covering all primary and secondary schools. Plans for two additional teams were launched in October 2019 with primary and secondary schools in the Banbury and Bicester area.

Mental health support teams are made up of specially trained staff linked to groups of schools. They offer individual and group help to young people with mild to moderate mental health issues, including anxiety, low mood and behavioural difficulties. The new teams also carry out targeted group sessions and whole school assembly work and, where appropriate, can offer group parenting classes to help with children's social and emotional health issues. The teams are the link between the NHS and schools as they work closely with the designated school mental health lead.

The teams are part of the Single Point of Access to Child and Adolescent Mental Health Services, meaning that where a child needs referral to more intensive services they will be referred directly. Schools will find it much easier to contact and work with mental health services. The teams are also supporting whole school working and a pastoral approach to mental health and wellbeing.

Key achievements

Improving access to urgent care

Health and social care professionals from across the Oxfordshire system and the voluntary sector again came together over the winter months to deliver responsive and joined-up services throughout the season. Winter is a high-pressure time of year for health and social care services, with the colder temperatures and harsher weather conditions leading to increased demands on GPs and Emergency Departments.

The priority was to ensure that people who needed medical treatment were able to get it and when people no longer need hospital treatment, to make sure they are looked after in the most appropriate place, whether at home or in the community. The work was supported by Oxfordshire-wide communications which urged people to have a 'winter plan' for themselves and their family to stay as well as possible; what to do if they become unwell; and how they could look after their elderly neighbours who may not be able to look after themselves.

It also raised awareness of alternative services to A&E, use of pharmacies and encouraged people to get their free flu jab, if they were eligible. As part of the work, South Central Ambulance Service NHS Foundation Trust developed a range of new urgent care pathways with colleagues from across Oxfordshire's health and social care providers.

Ambulance staff on the road have direct access to specialists and clinical support, some of which is available 24/7. By working together more efficiently with partners, admissions to hospital can be avoided for some patients, as well as bypassing Emergency Departments for some patients who go directly to the specialist consultant or service they need.

Work also continued to expand the Emergency Department (ED) at the John Radcliffe Hospital site to make better use of space, provide more diagnostic equipment and improved dignity and privacy for patients as well as improved turnaround times for ambulances.

The expansion was completed in early summer 2020.

Key achievements

Social prescribing
Social prescribing has gained momentum over recent years nationally and locally in Oxfordshire. It enables GPs and other healthcare professionals to refer patients to a link worker who can help them to find non-medical solutions to improve their health and wellbeing, often through voluntary and community services.

In Oxfordshire, the Mind charity, part of the Oxfordshire Mental Health Partnership, is working with GP practices to encourage and enable patients to link with existing support services in their local community, to increase their ability to manage their own wellbeing.

Tackling health inequalities
OCCG continues to support the Health Inequalities Commission implementation group, which includes NHS, local council and voluntary sector partners.

Work is complete to address the 60 recommendations made by the Commission in December 2016; but work continues to tackle health inequalities.

The group has been focusing on a 'health in all policies' approach during the past year. One of the recommendations was for an innovation fund to allow volunteer organisations to tackle health inequalities. Funding has come from OCCG and all local councils in Oxfordshire.

The group partnered with Oxfordshire Community Foundation and £24,000 was awarded to various community projects:

- Aspire Oxfordshire for the Gym Bus; Ark-T for HerSpace workshops and self-care retreats
- Home Start Oxford for support to families
- Sound Resource - a singing project in Banbury, and Bookfeast for a reading project
- My Life My Choice for a Gig Buddies project.

Further details can be found at www.oxfordshire.org/grants

The NHS and local authority partners are working together to develop a local place-based approach to tackling inequalities and related variation in health outcomes. The 2020 Joint Strategic Needs Assessment focuses on the 10 most deprived wards in Oxfordshire. We are developing targeted approaches and projects specific to those 10 wards and for the most vulnerable groups across Oxfordshire. Examples of work underway include:

- A holistic health and local authority approach to cardiovascular disease in deprived wards, often with large BAME communities
- The restart of NHS health checks in these wards with deeper community engagement
- A focus on hypertension, atrial fibrillation and high cholesterol, integrating new projects with existing programmes, including making every contact count and home monitoring.

Engaging people and communities

OCCG believes that communicating and engaging with its local population is key to achieving its vision. We are committed to putting the patient first and applying the principle of 'No decision about me without me' in our commissioning approach.

The population of Oxfordshire is diverse and each community has different needs. It is important for us to understand this diversity to ensure health services are planned properly and provide equity in terms of access, experience and outcomes for everyone. We tailor our engagement materials and activity to enable people with different needs to participate in the work of OCCG.

For example, the contract for the provision of Luther Street Medical Centre, an NHS GP surgery in Oxford which provides specialist services to people who are homeless or vulnerably housed, was up for renewal.

The medical centre also provides a range of other services including mental health services, advice on benefits and drugs and alcohol services. The primary care service in the centre is commissioned by OCCG and provided by Oxford Health.

We gathered feedback and comments from patients and service users at Luther Street Medical Centre to plan and shape the services for the future, as well as those voluntary and charitable organisations that work with people who are homeless.

There was high satisfaction with the service among patients who stated that the service they received at Luther Street Medical practice was very good; doctors were responsive and 'knew their stuff' and the location was convenient.

We undertook a formal procurement process and the contract was awarded to Oxford Health, the incumbent provider.

Work has also been undertaken providing information sessions about NHS cancer screening programmes for some black and minority ethnic community members. They talked about cervical and breast cancer screening and signs and symptoms. Health advice has also been provided with signposting support to Syrian families re-settling in Cherwell. With an interpreter, families were advised about registering with a GP and NHS dentist; other services to help with health issues; NHS screening programmes and information on how to stay healthy.

We also worked with Oxford City Council to develop a new leaflet for people who live on boats in the city to help them access health care services. Feedback from boat dwellers in suggested there were issues in accessing GP services locally due to having no fixed address.

The new leaflet was distributed to the boating community in Oxford and GP practices to ensure appropriate support for this community.

For more information about our patient and public involvement approach and activities go to: www.oxfordshireccg.nhs.uk/get-involved

Oxfordshire's response to COVID-19

The devastating impact of COVID-19 has presented a challenge to our communities and across our services on a scale which we have never seen in our lifetime.

Staff, volunteers and communities across Oxfordshire have risen to that challenge with remarkable dedication and flexibility, going the extra mile on a daily basis to support and protect the most vulnerable people in our society.

But what the crisis has shown with particular clarity is our collective strength when we work in partnership across the Oxfordshire system. It has highlighted the value we add when we work flexibly across health, local government and the voluntary and community sector.

During March and April the NHS refocused to ensure patients with COVID-19 could be cared for safely; we worked with our social care and voluntary sector partners to support discharge from hospital of all medically fit patients; we increased critical care capacity; established separate wards for COVID-19 and non COVID-19 care; developed a primary and community service response to set up dedicated COVID-19 clinics and a home visiting service and established a 24/7 mental health helpline.

In addition, all parts of the NHS quickly brought in remote consultations via phone or video wherever possible; this is now widespread in primary care, and hospital outpatient services; mental health and learning disability services.

We commissioned extra beds in care homes and hospices, which fortunately, were not needed.

As the pandemic has progressed and passed its peak, OUH and OHFT have been working hard to re-open services for routine referrals. In doing this, patient safety is at the forefront of plans and each service area is reviewing the practicalities of reopening in view of the need to social distance, availability of workforce, and PPE requirements.

Work continues to reassure people that all hospitals and GP surgeries have measures in place to keep them safe as services resume. People with COVID-19, be it in hospital or in GP surgeries, are treated in separate, dedicated areas, so the right infection control measures are in place to protect them, other patients and staff.

Part of this programme also looks at the learning from our experiences so far during the pandemic; looking at what services were introduced that can continue to benefit patient care in future; the further development of IT to support health and care services and to ensure we can respond to demand at short notice depending on how the pandemic progresses.

These new ways of providing care – including video, online and telephone appointments - have been well received by most people and OCCG will be seeking detailed feedback from patients in the months ahead to gauge how these new ways of working can best be carried forward into the future.

During the pandemic, GP practices across Oxfordshire have positively encouraged people to continue contacting their local surgery for medical advice and care if they have any non-COVID related concerns about their health.

Oxfordshire's response to COVID-19

The increase in the numbers of appointments over the last couple of months is the result of increasing confidence among patients that they can access 'routine' services safely.

But of course we have to ensure that all patients continue to get the health services they need, especially people who do not have access to technology, for whatever reason, or who are unable to leave their homes.

GPs and other clinical professionals continue to see patients face-to-face in their surgeries where appropriate, using all the necessary safety procedures.

As the COVID-19 pandemic continues, Oxfordshire health and local authorities continue to work together to plan for outbreaks and increased cases. This includes a communications campaign – #stopthespread – to encourage our residents to take measures to stop the spread of the virus and protect themselves and others. The campaign includes digital, social media and outdoor advertising, leaflets distributed to households, posters distributed across pubs, messages sent by GP practices to their patients, and media. The new NHS COVID-19 app will also launch in England and Wales on 24 September. This is part of the NHS Test and Trace service to be used alongside traditional contact tracing to help trace people who may have come into contact with a confirmed case of COVID-19. The app allows people to check into venues by scanning a QR code. It also provides them with an alert if they have been in close contact with someone who has tested positive, and helps them check if they have symptoms and book a test. You can find out more about the app here.

Involving you

To help develop the best possible health services across the county, OCCG needs help from local people in Oxfordshire.
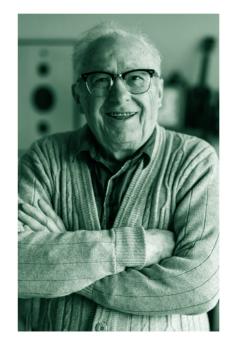
It is clear that the best service improvements are those where patients, the wider public and key stakeholders (including local councils, the voluntary sector and social care partners) work together to design services based on local health and care needs.

We are committed to open and continuous communication with patients, the public, OCCG members, staff and key stakeholders. Our work programmes are based on input from some or all of these:

- Stakeholder analysis (in partnership with our health inequalities team)
- Communications and engagement plans
- Patient advisory groups
- Patients on clinical advisory groups
- Public meetings – subject to COVID-19 safety restrictions
- Workshops – subject to COVID-19 safety restrictions
- Surveys and focus groups - subject to COVID-19 safety restrictions
- Formal consultation
- Equality impact assessment.

There is detailed information about the many ways to get involved with shaping local health and care services on the Oxfordshire Clinical Commissioning Group website:

www.oxfordshireccg.nhs.uk/get-involved

GET IN TOUCH

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