The Big Consultation

Health and Care Transformation in Oxfordshire
Public Consultation
About this consultation

- First phase runs for three months from 16 January 2017
- We are consulting on:
  - Use of our hospital beds
  - Planned care at the Horton General Hospital
  - Acute stroke services in Oxfordshire
  - Critical care at the Horton General Hospital
  - Maternity services at the Horton General Hospital
- Second phase is planned for later this year
**Why we are consulting**

- The current workforce model cannot meet demand
- Growing demand for services as the population grows and ages
- Financial pressure as funding does not keep pace with demand
- Quality and safety of care can be improved
- Better prevention will improve health & reduce demand
- Estate/infrastructure not suitable to deliver optimal care
- Inequalities exist across Oxfordshire in health outcomes

**Case for change**

THIS DIAGRAM describes the different pressures we are facing and the need for change.
Why are we doing this in 2 parts?

- Large number of services that we intend to consult on.
- Focusing in phase 1 on services that need urgent change:
  - Acute hospital beds as advised by Health Overview and Scrutiny Committee
  - Maternity services at the Horton General Hospital
  - Critical care and acute stroke services
- Investing in planned care at the Horton General Hospital.
**Vision for the future**

- Local access to diagnostics and expert advice
- Prevent unnecessary admission to hospital or A&E
- Using technology to support high quality services
- Best bed is your own bed when you no longer need hospital care

10 days in a hospital bed is equivalent to 10 years loss of muscle strength for over 80s
Using Hospital Beds Differently
Using hospital beds differently

See the video at:

https://youtu.be/6ZwcvQr-owA
Our preferred option and why

- Patients spend less time in hospital and more care is delivered closer to home.
- Patients cared for in the right environments.
Planned Care
See the video at:

https://youtu.be/_HAPK7GzRYA
Our preferred option and why

- Many more patients assessed and treated locally - up to 60,000 outpatients and up to 30,000 day case and diagnostic appointments (per year) at the Horton General Hospital.
- Significantly more planned appointments, tests, treatment and surgery at the Horton General Hospital.
- Increase in local provision of modern diagnostics.
- Major investment in facilities.

Up to 60,000 more appointments at the Horton General Hospital means at least 60,000 fewer journeys to Oxford
Stroke Care
See the video at:

https://youtu.be/3LirH2lsp_0
Our preferred option and why

- All stroke patients should be taken to the Hyper Acute Stroke Unit at the John Radcliffe Hospital.
- Short term rehabilitation would be provided at the Horton.
- The Early Supported Discharge Service would be extended to be available for all stroke patients in Oxfordshire.
Critical Care
See the video at:

https://youtu.be/K0suyCduDFU
Our preferred option and why

• The small number of the sickest patients from north Oxfordshire requiring Level 3 critical care would be treated at the highly specialised Intensive Care Units in Oxford.

• The Horton would continue to have a Critical Care Unit for a Level 2.

• This would provide appropriate care for the sickest patients and support better outcomes for all patients requiring critical care.

• Specialist teams of doctors and nurses to bring patients to Oxford.
Maternity
See the video at:

https://youtu.be/4ZiAjLfK9Mc
Our preferred option and why

- Provision of a high quality, safe and sustainable maternity service.
- Choice maintained which would include:
  - Women continue to have a choice of a midwife-led birth in a unit where appropriate or at home.
  - All obstetric care would be provided by the obstetric unit at the John Radcliffe.
  - Patients in north Oxfordshire will also have the option to travel to Northampton or Warwick hospitals.
- The Special Care Baby Unit for Oxfordshire would be provided at the John Radcliffe.
- Some women who need emergency surgery for a gynaecological problem would transfer to the John Radcliffe.
- A single obstetric unit would mean always enough staff available and enough births to maintain skills and run a safe service for all Oxfordshire women.
Find out more and have your say

- All consultation documents available on website: www.oxonhealthcaretransformation.nhs.uk/
- Write to us via the freepost address
- Complete the questionnaire on the website or on paper copy
- Attend a public meeting
Public Meetings

Public meetings are being held across Oxfordshire and one in Northamptonshire:

- Thursday 26 January, 7pm – 9pm in Banbury
- Thursday 2 February, 2pm – 4pm in Chipping Norton
- Tuesday 7 February, 3pm – 5pm in Wantage
- Thursday 9 February, 7pm – 9pm in Oxford
- Monday 13 February, 10am – 12pm in Didcot
- Thursday 16 February, 6pm – 8pm in Witney
- Tuesday 21 February, 3pm – 5pm in Bicester
- Monday 27 February, 10.30am – 12.30pm in Brackley
- Thursday 2 March, 8pm – 10pm in Henley
- Monday 6 March, 8pm – 10pm in Wallingford
- Thursday 16 March, 7pm – 9pm in Banbury
- Thursday 23 March, 6.30pm – 8.30pm in Abingdon
Any questions?