

WEST OXFORDSHIRE DISTRICT COUNCIL
ECONOMIC AND SOCIAL OVERVIEW & SCRUTINY COMMITTEE
THURSDAY 19 NOVEMBER 2015
CABINET - WEDNESDAY 9 DECEMBER 2015
FUTURE PROVISION OF INTERMEDIATE CARE BEDS AT CHIPPING NORTON
HOSPITAL
REPORT OF THE HEAD OF LEISURE AND COMMUNITIES
(Contact: Bill Wragge, Tel: (01993) 861558)

(The Overview & Scrutiny decisions on this matter will be recommendations to Cabinet)

1. PURPOSE

To seek committee approval for the recommended response to the current consultation on proposals for future provision of intermediate care beds in Chipping Norton Hospital.

2. RECOMMENDATIONS

That the committee approves the recommendations set out in section 5.4 of this report.

3. BACKGROUND

- 3.1. Chipping Norton Hospital has provided intermediate care for many years and currently provides 14 beds for this purpose. This care is specifically designed to help people, usually older people, who have an illness or injury that doesn't require them to be in an acute bed, for example in the John Radcliffe. Intermediate care also acts as a bridge between more intensive care and a person returning home.
- 3.2. In 2011 the NHS established a temporary contractual arrangement at Chipping Norton Hospital with the Order of St John Care Trust (OSJ) whereby OSJ provided the intermediate care unit and staffed it using NHS personnel seconded to OSJ. This contract came to an end in February 2014.
- 3.3. In March 2014 a further short term contract was put in place, as a result of which nursing staff are now directly managed by Oxford Health NHS Foundation Trust. Under this contract, OSJ continue to provide accommodation and essential domestic and hotel services at the hospital, and are the registered provider.
- 3.4. This current contract ends in March 2016, and the on-going financial viability of this arrangement has been brought into question by Oxfordshire County Council (OCC) and Oxfordshire Clinical Commissioning Group (OCCG).

4. CONSULTATION

- 4.1 OCC is running a public consultation between 5th October and 8th December 2015 to give the public an opportunity to consider two proposed models of care as follows:

Option A:

Retaining the 14 intermediate care beds at Chipping Norton Hospital with **all** staff and facilities managed and operated by OSJ.

Option B:

Providing intermediate care in patients' homes and closing the 14 intermediate care beds.

- 4.2 Both OCC and the NHS have been clear that these two options are the most cost effective models, although no actual costings are available at this time for Option B.
- 4.3 OCC held a public meeting in Chipping Norton on 21st October 2015 where they report that the following issues emerged:
 - Staff are currently leaving the Unit due to concern about proposed changes in clinical management.
 - GP's are concerned about the break-up of established staff teams and question the practicability of Option B in terms of care staffing and clinical cover.
 - Disappointment generally that the present consultation in provision in Chipping Norton is not being included in the forthcoming public consultation organised by OCC on general service and community hospital provision.
 - Concern that the 14 intermediate care beds were originally sub-acute beds for use by patients of all ages with a range of conditions that could be treated locally rather than requiring people to travel to Oxford or Banbury. Furthermore that the change in this provision to intermediate care in 2011 constituted a 'substantial' change or variation in service provision that should have been consulted on at that time.
- 4.4 Chipping Norton Hospital Action Group (HAG) is an organised group of local people with an interest in the provision of health services in the town. They are organising a public consultation meeting in early December. OCC has already confirmed that it will not be represented at this meeting.

5. RECOMMENDATIONS

- 5.1. There is understandably strong opinion within the town about the two options being put forward by OCC and OCCG, both amongst local people and health professionals who are concerned about the quality of provision under either option.
- 5.2. There is also a lack of clarity around the actual cost benefits of the two options given the impact of a potential high turnover of well qualified and experienced nursing staff that will be difficult to replace under either option.
- 5.3. There are also issues to be resolved around the history of the 14 beds at Chipping Norton Hospital being classified as intermediate care, rather than sub-acute care.
- 5.4. It should also be noted that the Director of Public Health's Annual Report 2015 set out predicted increases in the Over 85 age population across Oxfordshire that suggests a 200% increase in the number of people aged over 85 in West Oxfordshire by 2036. The report states:
It can be seen that the percentage growth in the number of over 85s in the more rural parts of the County is higher than in the City. Growth is highest in West Oxfordshire. This means that demographic pressure is not even across the county and plans will need to reflect this. It is not a case of 'one size fits all'.
- 5.5. This supports the on-going and increasing need for sub-acute beds at Chipping Norton Hospital staffed by NHS staff. This provision is at its most scarce in the north of the County and is vital in enabling an increasingly elderly population to be transferred to

local care after treatment at larger hospitals, thus reducing bed blocking. Furthermore, the cost of keeping people in high intensity acute care when it is not necessary is far more expensive than sub-acute provision.

5.6. Given the above, it is recommended that this Council responds to this consultation by stating that while we appreciate that OCC and OCCG are right to review the provision at Chipping Norton Hospital, **we cannot support either of the two options recommended** and support the continuing of the current provision until we can be satisfied that either of the options put forward will:

- provide appropriate high quality care for local residents;
- address staff and GP concerns about the future needs of local residents;
- deliver genuine efficiencies while continuing to deliver the services people need.

5.7 Furthermore, we feel that consultation on the provision at Chipping Norton Hospital should be part of wider consultation that is planned for community hospital provision across the County.

6. ALTERNATIVES AND OPTIONS

Members may wish to wait until the result of the HAG Consultation in early December, however this may come after the end of the current public consultation on 8th December 2015. The final decision of the OCC Cabinet will be at their January meeting and thus it may be possible to make further representations before the January Cabinet meeting.

7. FINANCE/IMPLICATIONS

There are no financial implications directly from this paper.

8. RISKS

The main risk in the recommended response is that by rejecting both options, there is no clear way forward in terms of provision at Chipping Norton Hospital. This can be mitigated by this Council continuing to remain closely involved in the consultation process, even though neither option at present is supported by this Council.

9. REASON

To support the Council's aspiration to maintain and enhance West Oxfordshire as one of the best places to live, work and visit in Great Britain.

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Background Papers:

None