

Paper for discussion by the Transformation Board 22 April 2015

Proposal.

- That we should engage an organisation (probably one of the major consultancies) or identify individuals now to produce for us a strategy.

The task.

- The first phase would be to have a document that we can use for a discussion with MPs as soon as is practical after the election. We should aim to have had this conversation with the MPs before the summer recess. The aim of this would be to get their private endorsement to the changes we need to make or at the very least that they will not block them.
- The second phase, depending on where we get to with the MPs, would be a more comprehensive strategy that can form the basis of public consultation later in the year.
- Development of these two documents will need to involve a wide range of organisations and individuals and will need resourcing, as will the public consultation process. We will have to do some work with a limited range of stakeholders in the first phase.

Scope.

- We need to decide whether the scope is just our urgent care pathway (whatever we define this to be) or whether it should be more comprehensive e.g. including maternity, paediatrics, elective care, mental health, primary care etc.
- Whilst we don't want to repeat the previous failed attempts at producing strategies, neither do we want to have a strategy which has many holes in it.
- The strategy needs to be across health and social care.

Content.

- We need to bring together some or all of the various strategies that we all have; together with the work on the two OBCs; the PM Challenge fund schemes; the projects that the Transformation Board has on its long-list; QIPP, efficiency savings, redesign programmes; integrated locality teams.
- We will need to address the financial challenges we have to tackle i.e. our share of the £22bn.
- We need a carefully articulated case for change.

Funding.

- The costs of this work could be shared equally across the 4 main Oxfordshire organisations. Alternatively we second individuals from our organisations to work on this and backfill.