

Oxfordshire Vision – Best care, Best outcomes, Best value for all the people of Oxfordshire

OCCG Vision - By working together we shall have a healthier population, with fewer inequalities, and health services that are high quality, cost effective and sustainable.

OCCG PRIORITIES FOR 2017/18 – 2018/19			
(the WHAT)	Operational delivery	Transforming health and care	Devolution and integration
	<ul style="list-style-type: none"> • Meeting NHS Constitution standards • Meeting the financial must-do's • Improving quality and outcomes <ul style="list-style-type: none"> • Stroke services • CAMHS waiting times • Patients who suffer fractured neck or femur • Acute Kidney Injury • Improving patient safety <ul style="list-style-type: none"> • Reduction in Healthcare acquired infections • Reduction in pressure ulcers • Improving clinical communications • Improving the management of clinical test results • Supporting all our providers achieving a CQC rating of good or above • Achieving parity for mental health • Implementing NHS Right Care • Continuing focus on reduction in Delayed Transfers of Care towards maximum number of 73/3.5% of occupied bed days • Addressing the levels of activity • Implementing changes to pathways, focusing on those that make the biggest difference and which support the Transformation Programme 	<ul style="list-style-type: none"> • Agreeing and beginning to implement the STP and Oxfordshire Transformation Programme to deliver whole system service and financial sustainability • Taking forward the findings of the health inequalities commission; particularly in regard to prevention • Consulting on significant service changes <ul style="list-style-type: none"> • Critical care facilities • Stroke care • Changes to bed numbers in order to move to an ambulatory model of care • Maternity services - principles for configuration of midwife led units (MLUS) and specifically the configuration of MLUs in the North of the county (including Chipping Norton) • Transforming services for people with Learning Disabilities and autism • Beginning to implement the local digital roadmap • Continuing implementation of Child and Adolescent Mental Health transformation plan 	<ul style="list-style-type: none"> • Continuing to support the sustainability and transformation of primary medical care • Developing co-commissioning with NHSE for specialised services • Strengthening our joint commissioning arrangements
Enabling (the how)	<ul style="list-style-type: none"> Empowering patients • Involving them in commissioning decisions • Supporting a focus on prevention/keeping people well • Ensuring they are involved in their own care (through contracts with providers) • Enabling them to be more self-reliant by promoting prevention and self-care where it will make a difference • Increasing access to personal health budgets • Using the findings and recommendations of the Health Inequalities Commission to reduce inequality, e.g. through the rollout of Early Supportive Discharge services throughout Oxfordshire 		
	<ul style="list-style-type: none"> Engaging communities • Involvement in big strategic questions for the County and individual Localities • Undertaking public consultation as part of the Transformation Programme 		
	<ul style="list-style-type: none"> System leadership • Holding the system (providers and other partners) to account for delivery • Continuing development of system wide working • Encouraging co-ordination between providers • Supporting the sustainability of providers • Support ongoing development of GP federations • Working to develop the infrastructure needed to enable Transformation, e.g. workforce 		