### **Care Quality Commission Review**

# Health and Wellbeing Board 27<sup>th</sup> November 2017



## Background to the Review

- Following the spring budget announcement of additional funding for adult social care, the Department of Health asked CQC to undertake a programme of targeted reviews in local authority areas
- Coventry has been selected as one of the first 12 areas to be reviewed from a total of 20 reviews of Health and Social Care Systems where there are challenges particularly in relation to delayed transfers of care will take
- The 12 systems selected have been identified as 12 of the 'most challenged' areas by national rank according to DoH Local Area Dashboard
- The Local Area Dashboard contains six performance measures which are used to create a weighted average to identify the highest ranked and most challenged local systems in supporting patient flow
- The review is whole system to be co-ordinated by the Local Authority with the Health and Well Being Board taking local ownership for the review



# Local Area Dashboard - performance measures used to select areas for review

- 1. Emergency Admissions (65+) per 100,000 65+ population
- 2. 90th percentile of length of stay for emergency admissions (65+)
- 3. Total Delayed Days per day per 100,000 18+ population
- 4. Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services
- 5. Proportion of older people (65 and over) who are discharged from hospital who receive reablement/ rehabilitation services
- Proportion of discharges (following emergency admissions) which occur at the weekend



# Performance summary for the Coventry system – July 2017 (date of CQC decision)

- 1. 20% more emergency admissions for people 65+ in the city than the West Midlands or England averages
- 2. Once admitted older people stay in hospital in Coventry longer than regional or national averages (10% for more than 24 days)
- 3. Proportionately more delayed days (22.6 days per 100,000 18+ population) than regional (16.9) and national (12.9) averages
- 4. The metrics indicate mixed performance on reablement with 19% of patients being readmitted within 3 months of discharge compared to 21.5% regionally and 16.6% nationally
- 5. However it is suggested that significantly fewer older adults (1.5%) are discharged from hospital into reablement or rehabilitation services
- 6. The Coventry system discharges 21.4% of emergency patients at weekends which compares well to the West Midlands (19.5%) and England (19.7%) averages



# Performance summary for the Coventry system – DToC update

#### **Revised DTOC targets - Coventry BCF - 2017/18**

	Actual	Actual	Actual	Actual	Actual	Trajectory	Target	Target	Target	Target	Target
	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
NHS attributed delayed days	1408.0	1432.0	1019.0	1147.0	937.0	849.6	646.2	669.4	669.4	669.4	669.4
Social Care attributed delayed days	287.0	210.0	182.0	73.0	66.0	226.3	216.0	223.2	223.2	223.2	223.2
Jointly attributed delayed days	216.0	169.0	122.0	114.0	132.0	279.6	282.0	291.4	291.4	291.4	291.4

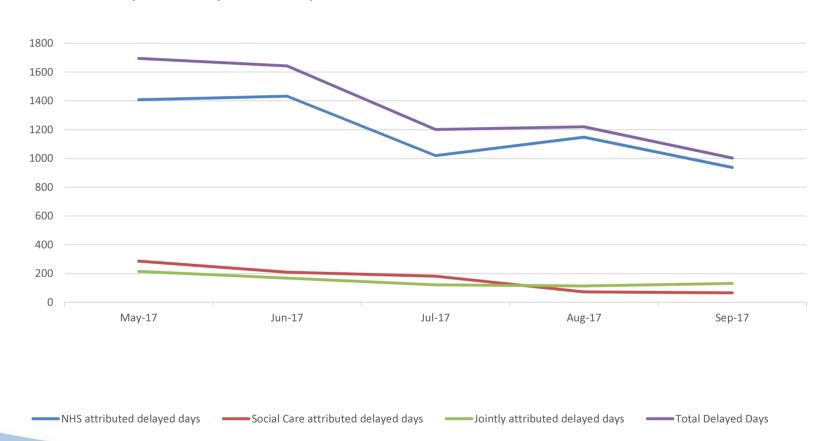
Total Delayed Days					1135.		1144.				
	1911.0	1811.0	1323.0	1334.0	0	1355.5	0	1184.0	1184.0	1064.5	1184.0

Population Projection (SNPP 2014)	277,742 27	77,742 277,74	3   277,743	277,743	277,743	277,743	277,743	281,319	281,319	281,319
-----------------------------------	------------	---------------	----------------	---------	---------	---------	---------	---------	---------	---------



# Performance summary for the Coventry system – DToC update

#### **Coventry DTOC May 2017 to September 2017**





#### Purpose of CQC Reviews

It is the intention that the review findings will highlight:

- What is working well
- Where there are opportunities for improving how the system works
- Enable the sharing of good practice
- Identify where additional support is needed to secure better outcomes for people using services

Although local authority led the review is very much 'whole system' and will engage partners across the whole health and social care economy



### The review approach

#### The reviews will:

- Consider system performance along a number of 'pressure points' on a typical pathway of care
- Focus on older people aged over 65
- Also focus on the interface between social care and general primary care and acute and community health services
- Each of the areas reviewed will be provided with a bespoke letter detailing the findings that will be sent to the Health and Wellbeing Board
- The findings of the reviews will be compiled into a National Report to give overall advice to the Secretaries of State



### The review's "Key Lines of Enquiry (KLOE)"

Question Areas	KLOE
Safe	How are people using services supported to move safely across health and social care to prevent avoidable harm?
Effective	How effective are health and social care services in maintaining and improving health and wellbeing and independence?
Caring	Do people experience a compassionate, high quality and seamless service across the system which leaves them feeling supported and involved in maximising their wellbeing?
Responsive	To what extent are services across the interface between health and social care responsive to people's individual needs?
Well led	Is there a shared clear vision and credible strategy which is understood across the health and social care interface to deliver high quality care and support?
	What impact is the governance of the health and social care interface having on quality care across the system?
	To what extent is the system working together to develop its health and social care workforce to meet the needs of its population?
	Is commissioning of care across the health and social care interface, demonstrating a whole system approach based on the needs of the local population?
Resource Governance	How do system partners assure themselves that resources are being used to achieve sustainable high quality care and promoting people's independence?



#### Focus on system pressure points

#### These include:

- Maintenance of peoples health and well being in their usual place of residence
- Multiple confusing points to navigate in the system
- Varied access to GP/ Urgent Care centres/Community care
- Varied access to alternative hospital admission
- Ambulance interface
- Discharge planning delays and varied access to ongoing health and social care
- Varied access to reablement
- Transfer from reablement



#### **Review Team**

The Review Team will comprise of approx. 10 people including:

- CQC Review Managers
- Health Specialist Professional Adviser
- Local Government Specialist Professional Adviser

Local Government Specialist Advisers will be drawn from LGA Peer Pool volunteers with social care, health and wellbeing and/or health background/experience, including:

- Chief Executive volunteers
- Directors of Adult Social Care volunteers



#### **Outline Review Timetable**

Weeks 1-6: 4th December 2017 to 14 January 2018 (including Christmas break)

 Review commencement, return of key information to CQC, information gathering, stakeholder focus groups and visits

Week 7: 15th January 2018

Off-site analysis and liaison

Week 8: Main review week commencing 22nd January 2018

- On site interviews and focus groups including staff, people who use services and their families and carers and senior leaders
- Commencing with system presentation, concluding with HWBB feedback session

Weeks 9-12: 29th January 2018 to 25th February 2018

Report writing and quality assurance

Weeks 12-14: 26th February 2017 to 16th March 2018

Communication and feedback and Health and Wellbeing Board summit



### **Advance Preparation**

- Initial meeting held with CQC on 8<sup>th</sup> November to give us more detail about the process
- CQC already engaged in information gathering about Coventry
- Care Provider Briefing on 24<sup>th</sup> November
- Staff briefings being planned for w/b 11<sup>th</sup> and 18<sup>th</sup> December
- CQC on site w/c 18<sup>th</sup> December for preparatory meetings/focus groups
- Case identification and tracking We have been asked, as a local system, to identify 6 people who have used services that they will examine during the review week



# Key Dates - December

Date	Time	Activity
Monday 4 <sup>th</sup> December	-	<ul> <li>Official notification from CQC</li> <li>Request for System contact information</li> <li>Request for System Overview Information Request document (SOIR)</li> </ul>
Tuesday 19 <sup>th</sup> December	9.30am – 11.00am	Introductory presentation from CQC to System Leaders including Chair of HWBB / Chair of HOSC / Cabinet Members / Leader
Tuesday 19 <sup>th</sup> December and Wednesday 20 <sup>th</sup> December	Both days – specific timings tbc	CQC to attend focus groups/local events (non-hospital e.g. Earlsdon Retirement Village, D2A facilities, community centres, Housing with Care providing short-term tenancies etc.)  CQC want to see Healthwatch and Chair of ASC and HOSC during those 2 days (plus others)  This will mean approx. 4 – 5 locations to visit plus people to see



# **Key Dates - January**

Date	Time	Activity
Friday 12 <sup>th</sup> January	-	SOIR submission
Monday 22 <sup>nd</sup> January	9.30- 11.00am	Start of main review week when CQC in Coventry Coventry presentation to CQC (scene setting, demographics, what the challenges are, what we think we do well)
Monday 22 <sup>nd</sup> – Friday 26 <sup>th</sup> January	All week	<ul> <li>CQC main review:</li> <li>Focus groups / site visits e.g. provider staff / users of services and carers / commissioning staff / local professionals etc.</li> <li>Pathway interviews relating to customers' journeys</li> <li>Interviews with senior leaders / officers</li> </ul>
Wednesday 24 <sup>th</sup> / Thursday 25 <sup>th</sup> January	tbc	CQC want to interview the Chair of HWBB on 24 <sup>th</sup> or 25 <sup>th</sup> January. The HWBB will take ownership for monitoring and improvements after the review has taken place
Friday 26 <sup>th</sup> January	1.00- 2.00pm	Initial feedback to System Leaders including Chair of HWBB / Chair of HOSC / Cabinet Members / Leader



# Key Dates – Post Review

Date	Time	Activity
29 <sup>th</sup> January to 25 <sup>th</sup> February	-	Report writing and quality assurance
26 <sup>th</sup> February to 16 <sup>th</sup> March	-	Communication and feedback
Incl. Wednesday 14 <sup>th</sup> March		
	9.30am- 12.30pm	'HWBB' Feedback Summit Session
		<ul> <li>1<sup>st</sup> half of session – CQC present their findings and recommendations to us</li> <li>2<sup>nd</sup> half of session – Our response to CQC</li> </ul>
		Session facilitated by SCIE (action planning/workshop format)



## Key summary points for HWBB

- The review is a significant enterprise across organisations
- HWBB members to be invited to key events in January
- Invites will also be extended to SB5 members and key colleagues contributing to the review
- Leadership is an element that CQC are reviewing and will look to HWBB to be the place from where the system is led
- The subsequent action plan following the review is expected to owned by the HWBB
- Learning from the review may be applicable across the STP footprint and sharing with Warwickshire HWBB



### Time for questions...



