
Cabinet

12th June 2018

Name of Cabinet Member:

Cabinet Member for Public Health and Sport – Councillor K Caan
Cabinet Member for Adult Services – Councillor F Abbott

Director Approving Submission of the report:

Deputy Chief Executive (People)

Ward(s) affected:

All

Title:

Care Quality Commission – Outcome of System Review

Is this a key decision?

No – Although this matter affects all wards, it is not considered to be significant

Executive Summary:

Following the 2017 spring budget announcement of additional funding for adult social care, the Secretaries of State for Health and for Communities and Local Government asked the Care Quality Commission (CQC) to undertake a programme of targeted reviews in local authority areas. These reviews were to be exercised under the Secretary of State's Section 48 (Health and Social Care Act 2008) powers.

In July 2017 it was subsequently announced that there would be 20 reviews of Health and Social Care Systems where there are challenges, particularly in relation to delayed transfers of care. Coventry was selected as one of the first 12 areas to be reviewed.

The review was conducted over a period commencing on 4 December 2017 and concluded on 14 March 2018 with a Health and Well-Being Board (HWBB) summit. Subsequent to the review the HWBB was required to submit an action plan to the CQC describing how the local system will take forward the issues identified in the review, this was agreed by the HWBB on 9 April 2018. It is the responsibility of the HWBB to deliver the action plan and there is currently no intention for the CQC to undertake any follow up review.

The focus of the review was the interface between health and social care and the outcomes for older people moving through the system. There was an assessment of the governance in place for the management of resources and of commissioning across the interface.

The review report is attached as an appendix but, in summary, in the course of the review the CQC found that there was a system wide commitment to serving the people of Coventry well and

that Coventry was at the beginning of its journey in ensuring all services worked well in a 'joined up way'. However, the review also highlighted some areas where further work is needed to ensure all those responsible for providing health and care services worked effectively together. These areas are described in the Areas for Improvement section of the CQC report.

Recommendations:

Cabinet is requested to Support the work of the Health and Well Being Board in delivering the agreed action plan to address the areas for improvement identified in the review

List of Appendices included:

Appendix One: Care Quality Commission Review – Local Health and Care System - Coventry Improvement plan, April 2018

Background papers:

None

Other useful documents

Health and Well-Being Board reports:

Care Quality Commission Local System Review – 4 September 2017

Care Quality Commission Local System Review – 27 November 2017

Care Quality Commission Local System Review – 5 February 2018

Coventry Report following CQC system review:

http://www.cqc.org.uk/sites/default/files/20180313_coventry-local-system-review-report.pdf

Has it been or will it be considered by Scrutiny?

No - Although this report has not been through Scrutiny, this matter was considered by the Health and Social Care Scrutiny Board (5) on 26 April 2018

Has it been or will it be considered by any other Council Committee, Advisory Panel or other body?

No

Will this report go to Council?

No

Report title: Care Quality Commission – Outcome of System Review

1. Context (or background)

- 1.1 Following the 2017 spring budget announcement of additional funding for adult social care through the improved Better Care Fund (iBCF), the Department of Health (DH) asked the Care Quality Commission (CQC) to undertake a programme of targeted reviews in local authority areas.
- 1.2 Subsequent to this, in July 2017 it was announced that there would be 20 reviews of Health and Social Care Systems where there are challenges particularly in relation to delayed transfers of care. Coventry was selected as one of the first 12 areas to be reviewed. Following each area review the review report would be published followed by a national report of key findings and recommendations following completion of all 20 reviews.
- 1.3 A set of performance metrics were used to identify the areas subject to review. These metrics are contained within the DH Local Area Dashboard. This dashboard creates a weighted average across 6 measures to identify the highest ranked and most challenged local systems in supporting patient flow. The measures included emergency admissions to hospital, length of stay for emergency admissions, people still at home 91 days following discharge, people receiving rehabilitation/reablement services and delayed transfers of care (both overall and at weekends).
- 1.4 In undertaking the review the CQC sought to answer the following question:

How well do people move through the health and social care system, with a particular focus on the interface between the two, and what improvements could be made?
- 1.5 The review was to consider how safe, effective, caring and responsive local services are. It would consider how well led the system is, evaluating the leadership of the system and the extent to which there is a shared clear vision and credible strategy which is understood across the health and social care interface to deliver high quality care and support.
- 1.6 The review would not provide an overall rating but it would highlight what is working well and where there are opportunities for improving. It is then a matter for the Health and Well-Being Board (HWBB) as the local system leadership forum to decide how the areas for improvement identified in the review are taken forward.
- 1.7 In respect of the co-ordination of the review the CQC requested that the local authority co-ordinates the review and ensures the input of partners. The reason for this is that the local authority is responsible for the HWBB and this is considered to be where the review, its outcomes and resulting action plan, is owned by the system. There is currently no intention for the CQC to undertake any follow up review although monthly telephone calls will take place with the DH in order for them to understand progress and areas of continued challenge following the review.
- 1.8 The Coventry review took place over the period from 4 December 2017 to 14 March 2018 with the main on-site week being week commencing 22 January 2018. As part of the review a 'Local System Overview Information Request' (SOIR) was required to be submitted which provided background information on the local system, who uses it, how services integrate and how effectiveness is monitored. CQC also conducted a 'relational audit' to understand the effectiveness of local relationships.

- 1.9 The review concluded on 14 March 2018 with a HWBB summit where the CQC shared the findings with the HWBB. The Coventry report was published on 15 March 2018.
- 1.10 In summary, in the course of the review the CQC found that there was a system wide commitment to serving the people of Coventry well and that Coventry was at the beginning of its journey in ensuring all services worked effectively in a 'joined up way'. Positively, the review identified that frontline staff were committed to providing high quality, person-centred care and supporting people to be as independent as possible within their own homes. However, the review also highlighted some areas where further work is needed to ensure all those responsible for providing health and care services worked effectively together including effective joint strategic planning and delivery alongside the use of system level performance data to drive improvement. These areas are described in the Areas for Improvement section of the CQC report.
- 1.11 Subsequent to the review the HWBB was required to submit an action plan to the CQC describing how the local system will take forward the issues identified in the review, this was agreed by the HWBB on 9 April 2018 and is included at Appendix One.
- 1.12 The improvement (action) plan contains seven sections which group together the areas for improvement arising from the CQC review with a nominated responsible group for each. These seven sections were agreed at the summit on 14 March 2018 and are as follows:
- Vision and strategy
 - Engagement and involvement
 - Performance, pace and drive
 - Flow and use of capacity
 - Market development
 - Workforce
 - Information sharing and system navigation
- 1.13 The improvement plan (appendix one) describes the work that will be undertaken under each section to address the findings. The plan has been developed in a manner that is intended to give clarity and focus to the existing work groups and programmes in place as opposed to creating a separate and standalone set of activities. For example, work is already underway through the Coventry and Warwickshire Place Based Forum to develop system strategy. Similarly, work on flow and use of capacity was underway through the Coventry Accident and Emergency Delivery Group and the plan specifies this work. Since the review was completed progress has been made on developing a choice policy for use in hospital settings to reduce delays and in implementing the Care Home Enhanced Support (CHES) scheme which seeks to support care homes and reduce hospital attendances from these settings.
- 1.14 Some of the work within the improvement plan is complex, requires input from a range of stakeholders and may also require resources for implementation that will only become clear as the work progresses. Therefore, many of the dates for completion are uncertain and/or indicative at this point.
- 1.15 Once the 20 reviews are completed the CQC will publish a national report of their key findings and recommendations during 2018.

2. Options considered and recommended proposal

- 2.1 Participation in the review process was not optional as it was conducted using the powers available to the Secretary of State. The City Council is a key partner in the both the delivery of health and social care and system leadership to ensure that people in the City are supported in as effective manner as possible within available resources. This leadership role was exercised and demonstrated in the completion of the review.
- 2.2 Cabinet is recommended to support the Coventry HWBB in delivering the agreed action plan to address the areas for improvement identified in the review.

3. Results of consultation undertaken

- 3.1 There was no specific consultation undertaken, however a range of organisations across the statutory and voluntary sector were engaged in the review as were Healthwatch and users of services and carers. Trade unions were also briefed on the review and its outcomes.

4. Timetable for implementing this decision

- 4.1 The improvement plan associated with the review will be monitored through the Health and Well-Being Board with implementation responsibility as identified in the action plan.
- 4.2 Although there is no undertaking for the CQC to conduct any follow up review, monthly telephone calls will take place with the Deputy Director for Social Care Oversight within the DH to give assurance on progress following the review. These telephone calls will be with Director of Adult Services and Accountable Officer for Coventry and Rugby Clinical Commissioning Group (CRCCG) with attendance by the Deputy Chief Executive for People (where possible).

5. Comments from Director of Finance and Corporate Services

5.1 Financial implications

There are no specific financial implications associated with this report. Should it transpire that the delivery of any of the specific actions require, additional resources, these will be managed across the total available system resources, ensuring appropriate organisational governance is in place.

5.2 Legal implications

The Care Act 2014 makes it clear that in performing its functions under the Act,

“The general duty of a local authority, in exercising a function ... in the case of an individual, is to promote that individual’s well-being”.

Subject to certain specific requirements, the local authority has considerable discretion in how it chooses to meet this responsibility so as to be able to flexibly respond to the specific requirements of adults and carers in its area. In addition, the Act and its supporting Statutory Guidance, encourages co-operation between the Local Authority and its relevant partners and the integration of services where possible and appropriate to achieve this objective.

The work taken forward as a result of the review will be undertaken within the scope of this discretion.

6. Other implications

6.1 How will this contribute to the Council Plan

Progressing the areas identified in the review will make a positive contribution to the delivery of the Council's priorities, particularly in relation to: citizens living longer, healthier, independent lives; support improved health and wellbeing and support the City to reduce health inequalities.

6.2 How is risk being managed?

The HWBB is considered to be where the review, its outcomes and resulting improvement plan is owned by the system and is the forum through which any risks associated with delivery will be managed,

6.3 What is the impact on the organisation?

There are no direct implications at this stage.

6.4 Equalities / EIA

Health and Social Care services in Coventry support people with a range of protected characteristics. No specific analysis of equality impacts was completed in the course of the review.

6.5 Implications for (or impact on) the environment

None

6.6 Implications for partner organisations?

Although co-ordinated by the City Council the review included partners across health and social care as well as all member organisations of the Coventry Health and Well Being Board. Progressing the improvements identified will require input and leadership from partners as well as the City Council. Commitment to this has been achieved through the Health and Well Being Board.

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