

Report

Date: 8 April 2019

To: Coventry Health and Wellbeing Board

From: Pete Fahy – Director of Adult Services

Debbie Dawson – Policy and Partnerships Transformation Officer, Insight

Title: Care Quality Commission (CQC) Local System Review – Improvement Plan Completion

1 Purpose

This report summarises progress against the improvement plan arising from the Care Quality Commission System Review. The improvement plan is owned by the HWBB and, further to routine monitoring reports over the past year, is now presented for approval of completion, with outstanding actions to be taken forward and monitored through other mechanisms.

2 Recommendations

The following recommendations are made to Coventry Health and Wellbeing Board:

- a. That HWBB note the progress made and areas still to be addressed against the actions in the improvement plan arising from the CQC local system review;
- b. That HWBB note the CQC progress monitoring report produced further to their light touch follow up in autumn 2018; and
- c. That HWBB approves the completion of the improvement plan and the outlined arrangements for taking forward outstanding actions.

3 Background

The CQC undertook a system wide review of health and care for people aged 65 and over in Coventry between December 2017 and March 2018. As a result of this review the Coventry HWBB agreed an improvement plan which was closely linked to work already underway across

the system. This plan was approved by the HWBB on 9 April 2018 and submitted to CQC and the Department of Health and Social Care (DHSC) on 10 April 2018.

The improvement plan was intended to give focus and drive to areas of activity and improvement already in progress across the system. As such, the intention was to complete work on the improvement plan by March 2019 and ensure that this focus was embedded in programmes and activities across the system beyond that date.

4. Monitoring and follow up

The improvement plan is owned by the Coventry Health and Wellbeing Board and the Board has maintained oversight of the plan through routine progress reports at its meetings over the past year.

Progress against the plan was expected to be monitored by the DHSC through monthly telephone calls with the Director of Adult Services, Accountable Officer for Coventry and Rugby Clinical Commissioning Group and the Deputy Chief Executive (People) where available. However, many of these calls have been cancelled due to DHSC availability.

CQC carried out a light touch follow up process in autumn 2018 and the outcomes were reported to DHSC in January 2019. Their progress monitoring report is attached at appendix 1. The report highlights the achievements and progress since the review in January 2018 and reflects positively on the direction of travel, whilst acknowledging further work required in particular around clinical pathways and local workforce strategy.

5 Local Health and Social Care System Coventry – Improvement Plan 2018

Progress against each of the actions has been reviewed, and a progress update is provided in the attached plan (appendix 2). Good progress has been made in many areas and some key achievements are highlighted.

Inevitably there are actions that have slipped for reasons of capacity and in order to ensure effective stakeholder engagement. For these actions the progress update indicates how they will be embedded into system improvements in programmes and activities going forward.

A summary of progress and achievements against each theme is given below.

Section 1: Vision and strategy

In Coventry and Warwickshire we are on a journey towards becoming a shadow Integrated Care System (ICS), with roadmaps in place around six key work streams, including development of a single Strategic Commissioning function and Provider Alliance. The endorsed Place Design (high level system model) and revised Coventry and Warwickshire Health and Wellbeing Concordat have brought consistency to vision and strategy across the system and will form the basis of the strategic framework for the emerging ICS in Coventry and Warwickshire. System governance is flexing to reflect the emerging ICS and refresh of the STP.

Progress has also been made on joint strategic planning and delivery, with Primary Care Networks and locality delivery models now established, the out of hospital delivery model being implemented, and work towards a place-based JSNA progressing well – with the data profiling tool to be launched and first JSNA profiles due for publication in April / May. From 1 July 2019 all GP practices will be registered within a Primary Care Network and delivering nationally mandated requirements which support new models of care and the Out of Hospital programme

Section 2: Engagement and involvement

A specific section in the CCG Commissioning Intentions on primary care priorities reflects engagement with members and stakeholders with an interest in primary care. An engagement programme on the 'I statements' for people who use Health and Social Care services has been undertaken with Coventry Older Voices (COV) and Healthwatch Coventry, and they are being presented to the Board for formal endorsement at this meeting.

There is not yet a single risk management framework in place but identified learning and development needs arising from exploration of the approach to risk by the Coventry placed based teams will be addressed as part of the Out of Hospital programme.

Section 3: Performance, pace and drive

Coventry and Warwickshire A&E Delivery Board are using a system-wide urgent care dashboard on flow and capacity to monitor activity and inform action.

Coventry and Warwickshire Place Forum has agreed an outcome framework and performance dashboard to enable oversight of performance against agreed system outcomes. This is expected to evolve further as a Strategic Framework for the ICS is developed and will become a tool to mobilise action by partners to address identified challenges.

Section 4: Flow and use of capacity

Progress continues to be made in measures to reduce unavoidable admissions to hospital and ensure people are discharged promptly with appropriate support. There have been some noteable practical achievements under this theme:

- Care Home Enhanced Service (CHES) commenced in April 2018 to ensure equitable and effective GP and primary care for residential and nursing provision. Providers are now working with one GP practice and a named GP (unless an individual resident or family do not wish to be registered with that Practice), which offers direct contact number within hours, a weekly visit, registration for all new residents and a review of working practices in care homes. The scheme aims to reduce A&E attendances, hospital admissions and improve outcomes for people living in care homes. Current metrics demonstrate that during April Dec 2018 there was a 31% reduction in hospital admissions from care homes for those supported by the CHES scheme. For providers not supported by CHES there appears to have been an 18% reduction in hospital admissions overall. A survey completed with the care homes demonstrates there have been numerous positives working with one GP practice for both the provider and improved outcomes for residents.
- The 'Red Bag' scheme went live on 1 July 2018 and is a joint approach between CRCCG, WMAS and Coventry City Council. The scheme is designed to support care homes, paramedics and hospitals to ensure a seamless transition between inpatient hospital setting and care homes, improve communication and reduce duplication. To date there are 18 providers fully accredited to the Red Bag and actively using the bags and 30 providers are actively engaged in the process and working towards accreditation.

Section 5: Market development

A Market Position Statement was signed off on 11 October and work on a market development plan is underway, with market development and engagement activities in train for care homes, housing with care, Supported Living and Day Opportunities.

Social Prescribing continues to be delivered through a GP Cluster configuration, with the service continuing to develop and evolve and the CCG will be undertaking a review over the coming

months to develop a future model for Social Prescribing within Coventry in line with national government policy.

Some Discharge to Assess pathways have been evaluated, though the timescales for completion have been extended due to capacity; a strategy group for D2A pathways has been established to steer this work.

Section 6: Workforce

NHS organisations have shared their strategies and this will support the development of a system wide workforce strategy which will be aligned to the STP Plan. Current work to identify the 2019/20 workforce development priorities provides an opportunity to consider the scope and breadth of a training programme required to address the issues identified.

Section 7: Information sharing and system navigation

There has been good progress against the actions in the CQC local system review action plan. Aside from this, work is being taken forward by the STP Board to develop a strategy for delivering an integrated health and care record across Coventry and Warwickshire.

7 Conclusion

As the CQC follow up report summarises, the Local System Review in January 2018 offered clarity, focus and reassurance that the areas, acknowledged locally as needing to develop and improve, were the right areas of focus. This enabled the system to move forward with renewed purpose to address those issues that are impacting on people receiving consistently good health and care services.

There is good evidence to support system progress since the local system review was completed, with improvement in delayed transfers of care being a key measureable outcome and many other achievements detailed in this report.

The overall impact of these actions will, in many cases, take longer than the time elapsed to take effect and the key challenge for the health and care system remains turning the progress made into greater, and then sustained, improvement.

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Appendices

Appendix 1: CQC Local System Reviews Progress Monitoring: Coventry

Appendix 2: CQC review, Local Health and Social Care System Coventry Improvement Plan 2018 – Completed Plan March 2019