System CQC Review in Calderdale

Update to Scrutiny

November 2018

Why did we carry out these reviews?

- **Secretaries of State asked CQC to undertake a programme of targeted reviews in local authority areas**

- **Reviews sat outside CQC's usual legal powers (under Section 48 of the Health and Social Care Act)**

Where have we been and what have we delivered?

CareQuality Commission

20 site visits

Interim report
December 2017

20 local
system
reports

Beyond Barriers report –
July 2018

Cumbria · Hartlepool · Bradford · York · Manchester · Trafford · Sheffield · Liverpool · Stockport · Halton · Northamptonshire · Stoke-on-Trent · Birmingham · Oxfordshire · Coventry · Bracknell Forest · Wiltshire · Plymouth · Hampshire · East Sussex
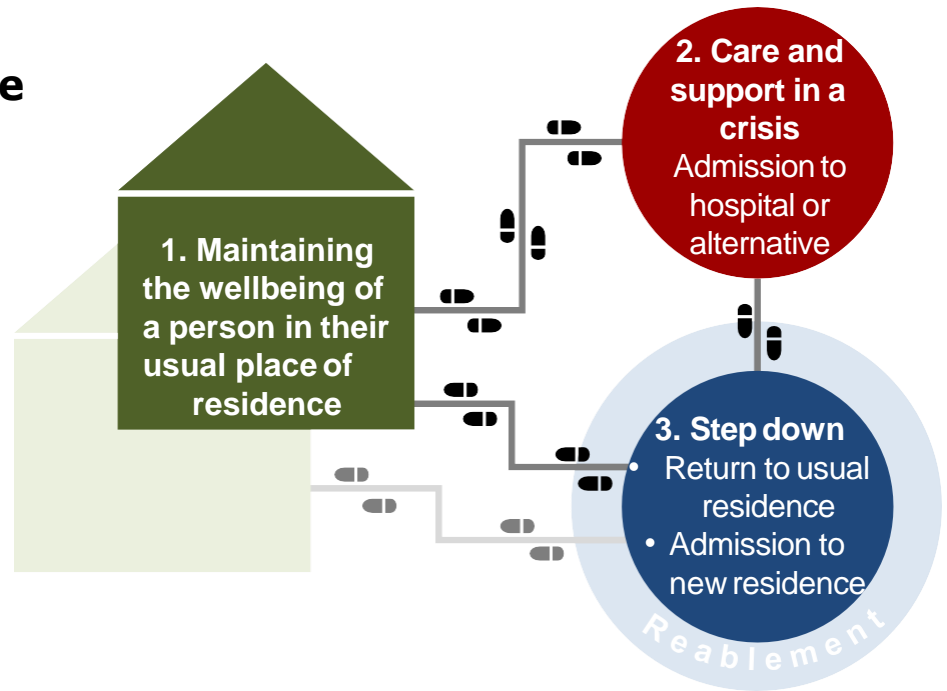
Local collaboration and joined-up care

Golden thread connecting vision to delivery

- Meeting the needs of local populations is only achievable through local collaboration

- Putting people first

- Shared vision and strong leadership

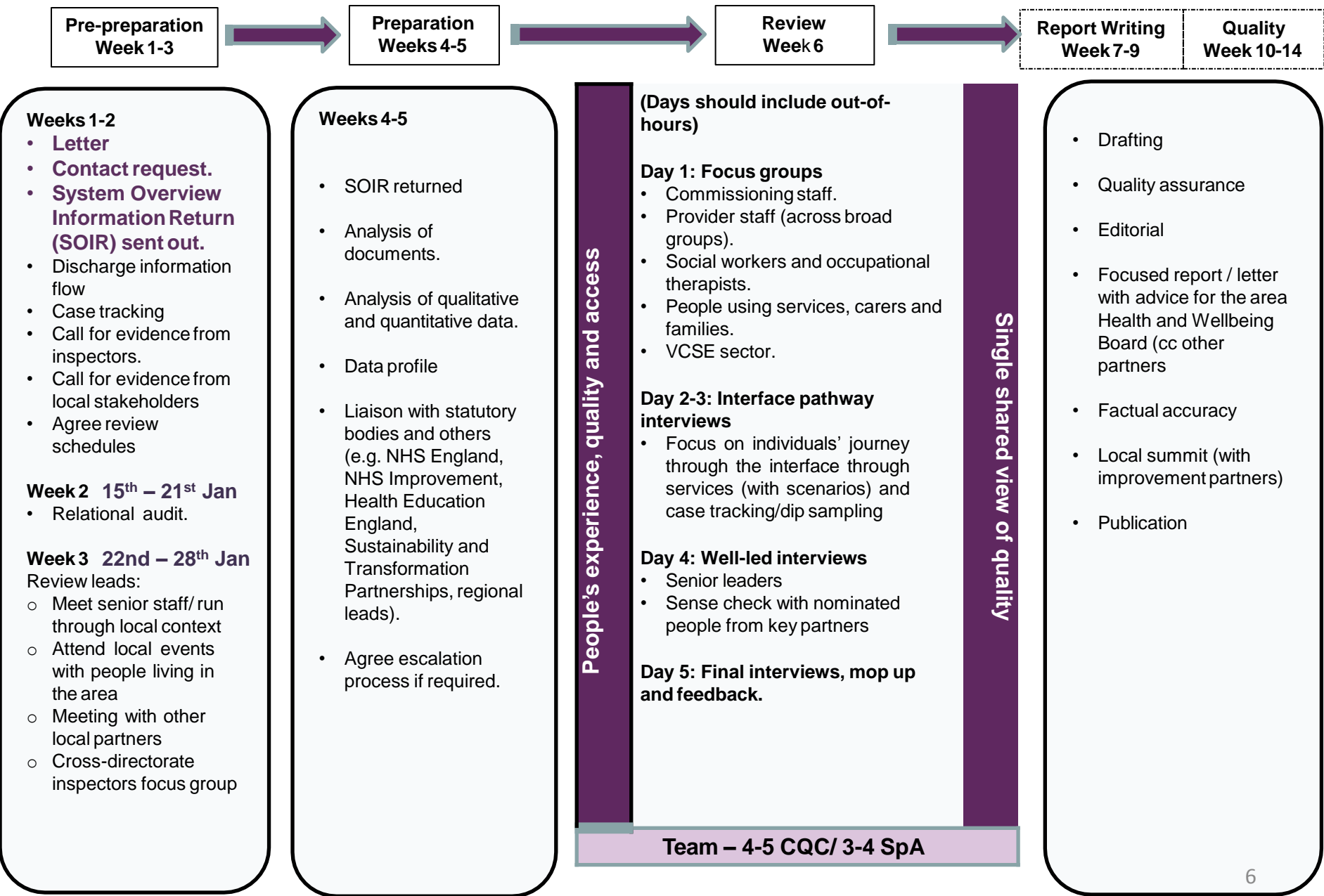- All staff to share that vision and deliver to action

Approach to reviews

- Focused on the interfaces between **social care, general primary care, acute health services and community health services and on older people aged over 65**

- Consider **system performance** along a number of '**pressure points'** on a typical pathway of care

- Each area will have a **local report** and the findings of the reviews will also be used to inform a **national report** to give overall advice to the Secretaries of State

- Reports will not include ratings and the reviews will not affect existing ratings

1. Maintaining the wellbeing of a person in their usual place of residence

2. Care and support in a crisis
Admission to hospital or alternative

3. Step down
- Return to usual residence
- Admission to new residence

Reablement

The Review Process (may be subject to change)

| Pre-preparation Week 1-3 | → | Preparation Weeks 4-5 | → | Review Week 6 | → | Report Writing Week 7-9 | Quality Week 10-14 |

Weeks 1-2
- **Letter**
- **Contact request.**
- **System Overview Information Return (SOIR) sent out.**
- Discharge information flow
- Case tracking
- Call for evidence from inspectors.
- Call for evidence from local stakeholders
- Agree review schedules

Week 2   15th – 21st Jan
- Relational audit.

Week 3   22nd – 28th Jan
Review leads:
- Meet senior staff / run through local context
- Attend local events with people living in the area
- Meeting with other local partners
- Cross-directorate inspectors focus group

Weeks 4-5

- SOIR returned
- Analysis of documents.
- Analysis of qualitative and quantitative data.
- Data profile
- Liaison with statutory bodies and others (e.g. NHS England, NHS Improvement, Health Education England, Sustainability and Transformation Partnerships, regional leads).
- Agree escalation process if required.

People's experience, quality and access

(Days should include out-of-hours)

Day 1: Focus groups
- Commissioning staff.
- Provider staff (across broad groups).
- Social workers and occupational therapists.
- People using services, carers and families.
- VCSE sector.

Day 2-3: Interface pathway interviews
- Focus on individuals' journey through the interface through services (with scenarios) and case tracking/dip sampling

Day 4: Well-led interviews
- Senior leaders
- Sense check with nominated people from key partners

Day 5: Final interviews, mop up and feedback.

Single shared view of quality

- Drafting
- Quality assurance
- Editorial
- Focused report / letter with advice for the area Health and Wellbeing Board (cc other partners
- Factual accuracy
- Local summit (with improvement partners)
- Publication

Team – 4-5 CQC/ 3-4 SpA

Local Preparation

- Multi agency group; CMBC, CCG, CHFT, CMBC, GPs. SWYPFT invited
- Planning for an early 2019 review
- Focus:
  - Learning from elsewhere
  - Extracting KLOE from the Calderdale data set
    - Setting up local process to update data monthly
    - Working with Kirklees – desktop exercise
  - Preparing narrative
  - Case tracking (6 patients) – testing process and doing it for real
  - Working with Healthwatch – accessing voices
  - Building a picture of digitisation
  - Learning from CQC inspections in the system

Questions