

HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Health and Adult Social Care Select Committee
Date:	8 October 2019
Title:	CQC Local System Review – Hampshire Local Authority Area
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Purpose of this Report

1. The purpose of this report is to provide a final update on the Care Quality Commission (CQC) Local System Review action plan following the local system review which took place in early 2018.

Recommendation

That the Health and Adult Social Care Select Committee:

2. notes this final report on the Care Quality Commission's Local System Review and its Action Plan that was jointly developed by Hampshire's health and care system leaders to respond to the Review's findings.

Executive Summary

3. CQC published its [findings](#) on 21 June 2018, following a summit with health and care system leaders, partners and other stakeholders on 20 June 2018.
4. The Hampshire Health and Care System was required to produce an Action Plan to address the findings of the Review by 20 July 2018. This process was led by the Director of Adults' Health and Care, liaising with system leaders in the NHS to ensure that all actions were jointly agreed, with leads assigned and clear arrangements in place to monitor progress. The Action Plan was signed off by the Chairman of the Hampshire Health and Wellbeing Board and progress on implementing the Action Plan has been overseen by the Health and Wellbeing Board.
5. Significant progress has been made over the course of the last year. Most actions had a three- or six-month delivery timeframe, and progress has been formally reported to both the Hampshire Health and Wellbeing Board and the Health and Adult Social Care Select Committee.

6. To provide evidence for this final report, colleagues from a range of agencies who had been collaborating on the Action Plan met for a workshop on 2 July 2019. The workshop reflected back on the year's progress, and a summary of key achievements and latest developments is provided in this report. This update report aims to conclude the CQC local system review process.
7. Future related work will be taken forward through organisations' own operating plans and transformation programmes, and through mechanisms such as the Improvement and Transformation Board and the Health and Wellbeing Board's Business Plan.

Contextual information

8. In 2017, the Care Quality Commission (CQC) was asked by the Secretaries of State for Health and Social Care and Communities and Local Government to undertake a programme of targeted reviews in 20 local systems. The purpose of the reviews was to look at how well people move through the health and social care system in a particular area, with a focus on the needs of people over 65. CQC looked at the interfaces between social care, general medical practice, acute and community health services, and on delayed transfers of care from acute hospital settings.
9. Hampshire was selected as one of the 20 areas for review. CQC undertook Hampshire's Local System Review between February and March 2018 with an intensive fieldwork visit taking place between 12 and 16 March 2018.

Performance

10. The CQC Review process did not result in a performance rating for the local area reviewed. The report identified many areas of strength across Hampshire's health and social care organisations. Strengths that were identified included:
 - a consistent and shared purpose, vision and strategy across all organisations in support of people;
 - strong performance in a range of outcome measures across health and social care responsibilities;
 - a strong understanding of the health and social care needs of Hampshire's population;
 - good examples of inter-agency work at a strategic and operational level;
 - services and the experiences of residents are high in a number of indicators, when benchmarked against other comparable health and care systems nationally;
 - a commitment to providing opportunities for people receiving services and their representatives and carers to influence service development; and
 - an advanced use of digital tools to provide support to people and to enable staff in different organisations to share information, reducing unnecessary duplication.

11. Recommendations for improvements included:

- streamlining the hospital discharge processes across Hampshire to support people to leave hospital as quickly as possible once they are deemed medically fit to do so;
- improving the recruitment and retention of key groups of staff such as those who deliver home care;
- exploiting opportunities to pool funding and join up services more consistently; and
- improving strategic oversight, specifically through the HWB determining and agreeing its work programme, including how to make the system more coordinated and streamlined, and forming stronger, more coordinated links with the STPs.

Progress has been made on all areas identified for development by CQC and key updates are summarised below.

Strategic Vision, Leadership and Governance

12. The Health and Wellbeing Board has now published its new [Strategy for the Health and Wellbeing of Hampshire 2019–2024](#) and is due to approve its business plan, based on the priorities in the strategy, at its meeting in October 2019. Governance and reporting over the last year have been significantly enhanced by the creation of the Integrated Commissioning Board and the Improvement and Transformation Board. At the 2 July workshop, system leaders reflected that relationships have greatly improved and organisations' approach to working together has significantly shifted, particularly in the last nine months. The joint NHS/Hampshire County Council appointment of a Director of Transformation – Patient Flow and Onward Care has provided strong leadership to deliver improvements in Hampshire's position on delayed transfers of care. Other joint (Southern Health/Hampshire County Council) management appointments are planned to lead the delivery of the new proposed Integrated Intermediate Care service in Hampshire.
13. There is still further work to do to reduce unwarranted variation between different parts of the system and to cross-fertilise good practice. However, the revised governance arrangements in place now will stand the system in good stead to work on this. The developing population health management approach and the intelligent use of data will also assist with this agenda.

Communication and Engagement

14. Efforts to improve communication and engagement across the Hampshire are continuing, with Connect to Support Hampshire playing a major part in ensuring residents and staff have an enhanced understanding of the care system and people can be signposted effectively to appropriate support and community resources. The County Council is investing significantly in the

Connect to Support Hampshire programme, which will link in with new Primary Care Networks and social prescribing activity.

15. The introduction by the Hampshire Sustainability and Transformation Partnership (STP) of a HIOW Citizens Panel (HIOW Voices), which aims to recruit 2,500 residents to share their views on a range of health and care topics, is also underway.
16. The ambition of greater co-production with service users is also reflected as a priority in the new Health and Wellbeing Strategy for development over the coming year.

Access and transfers of care

17. The last year has seen significant and concerted effort to reduce Delayed Transfers of Care (DTC) across Hampshire. Encouragingly, the DTC performance for social care has improved by 45% over the past year and positively there has been a significant improvement in Continuing Healthcare assessments, so that now 91% are being completed outside the Acute setting.
18. In Reach reablement forerunner projects (testing new ways of working ahead of the planned introduction of Integrated Intermediate Care in 2020) are up and running and already showing success in supporting the safe and rapid discharge from hospital to home. Increased use is being made of voluntary sector services, for example, the Red Cross to support hospital discharge. Returns and restarts of care packages are now working in a more efficient and effective way to improve rapid discharge direct from hospital wards. Finally, there is more focus on preventative work to reduce admissions, including a social worker working in South Central Ambulance Service (SCAS) and Frailty Intervention Teams (FIT) operating at the front door.
19. There is, inevitably, more to do across the system going forward. Emergency Department performance in Hampshire's main hospitals is significantly challenged. Significant improvement activity is underway across some of Hampshire's local care partnerships and for individual organisations to move from a CQC 'requires improvement' rating. This is a whole system and partnership challenge. There remain some resistant flow issues that need ongoing attention, such as the numbers of patients medically fit for discharge at Queen Alexandra Hospital, and health and domiciliary care delays. Work also continues to effectively manage the flow of patients into intermediate/reablement care following discharge. It is important to ensure continued improvement in patient flow is stabilised and further improved upon before the Winter period.
20. Adults' Health and Care is continuing to support the ongoing transformation of work with hospitals through increasing its leadership capacity and remodelling social care teams in hospital systems. This work is being led by a new fixed-term post of Head of Service for Hospital Transformation who started in July 2019.

Partnerships

21. Building on the recommendations of the CQC Review, Southern Health NHS Foundation Trust (SHFT) and Hampshire County Council (HCC) have also been working closely together since Spring 2018 to develop a redesigned, jointly led and integrated health and social care crisis response, rehabilitation and reablement service for the whole of Hampshire. It is proposed that the new Integrated Intermediate Care service will be in place in 2020, subject to formal agreement later in this year by both organisations. The Hampshire Together brand has been adopted for this work and is in use across the organisations involved.

Workforce planning

22. Further to the CQC Review recommendation to develop a comprehensive workforce strategy in conjunction with the independent sector, a *Care Workforce Strategy 2019–2024* was presented and approved by Health and Care system commissioners and system leaders at the Integrated Commissioning Board and the Improvement and Transformation Board in July. The Chair of the Workforce Strategy Group, Samir Patel (Chair of the Hampshire Care Association - HCA) is due to provide the Improvement and Transformation Board with a progress update at their November meeting. The Strategy will also be discussed at the Hampshire and Isle of Wight Sustainability and Transformation Partnership (HIOW STP) Local Workforce Action Board in October to ensure alignment with all other parts of the wider health and care system.

Finance

23. Financial pressures on the system continue, through a variety of factors: reduced financial allocations, increasing demand and inflationary pressures. Whilst the Spending Round announcements on 4 September 2019 are welcome, they are for one year only and address existing pressures within the social care system, with no longer-term sustainable plan for the wider health and care economy yet being available.

Consultation and Equalities

24. As an integral element of the Local System Review, CQC Reviewers met with groups of service users, carers, and patients, as well as a number of voluntary and community sector partners.
25. The intention is to continue to involve people who use services, carers and wider stakeholders through the various workstreams that were already in train or were introduced as a result of the CQC review.

Conclusions

26. The CQC Local System Review was an intensive process and thanks are due to the efforts of partners across the Hampshire health and care system for their contributions both during the Review process in 2018 and in supporting delivery of the CQC Action Plan over the past year. As outlined in this report, the Hampshire system has made good progress over the last year, with further ambitious plans for integration and personalised, strengths-based care. The environment in which all partners work remains challenging, but the system has strengthened governance in place to oversee ongoing continuous improvement.

27. That the Committee note the formal closure of the Local System Review action plan subject to agreement and approval of the Health and Wellbeing Board. As detailed in this report actions have either been complete or part of the wider transformation and improvement work taking place which will continue to be progressed in line with achieving the outcomes the Health and Wellbeing Board wishes to see achieved.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	no
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	no
People in Hampshire enjoy being part of strong, inclusive communities:	yes

Other Significant Links

Direct links to specific legislation or Government Directives	
<u>Title</u> The Review was carried out under Section 48 of the Health and Social Care Act 2008.	<u>Date</u> July 2008

Section 100 D - Local Government Act 1972 - background documents	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

There are no equalities impacts linked to this progress report.