

# Trafford CQC review

October 2017

# What is it?

- The additional Adult Social Care monies announced in 2016, to be allocated from 2017/18 onwards for 3 total years, were associated with an expected improvement nationally in Delayed Transfers of Care, especially the implementation of the High Impact Change Model for delayed transfers of care and the Trusted Assessor model
- The target for DTOC was set nationally as a result at 3.5%
- Trafford's allocation of funding was:

17/18 £4,073,044

18/19 £2,687,568

19/20 £1,335,021

- The funding announcement was accompanied with early warning that the 12 worst performing areas would be subject to a CQC review/inspection . Given Trafford's historic performance it was always likely we would be one of those areas
- It was confirmed in a Ministerial announcement in July that Trafford was going to be subject to an area review which has been set for October 16<sup>th</sup> 2017
- The review is exercised under the Secretary of State's Section 48 powers (Health and Social Care Act 2008, amended by the Care Act 2014) which means that the CQC can take enforcement activity to protect and safeguard if they feel the need to
- The aim of the reviews is described as to support improvement and identify focussed help. The areas expected to see improvement in:

How many people are waiting for discharge from hospital

How long are they waiting for discharge from hospital

Total level of Delayed Transfers of Care - target 3.5% of occupied hospital beds

**Specifically they will focus on:**

How people over the age of 65 move around the health and social care system, including delayed transfers of care

The experiences of people living with dementia as they move through the system but not residents with mental ill-health or learning disability

The 'pain points' across the health and social care system, in other words those areas where people experience hand-offs, delays and multiple processes

An assessment of commissioning across the interface of health and social care and governance and processes that accompany that

Their findings will be reported in a report/letter to the Health and Wellbeing Board and there will be an expectation that an action plan is developed to address recommendations

A national report will be published summarising all of the reviews in the New Year

Pressure or 'Pain' points:

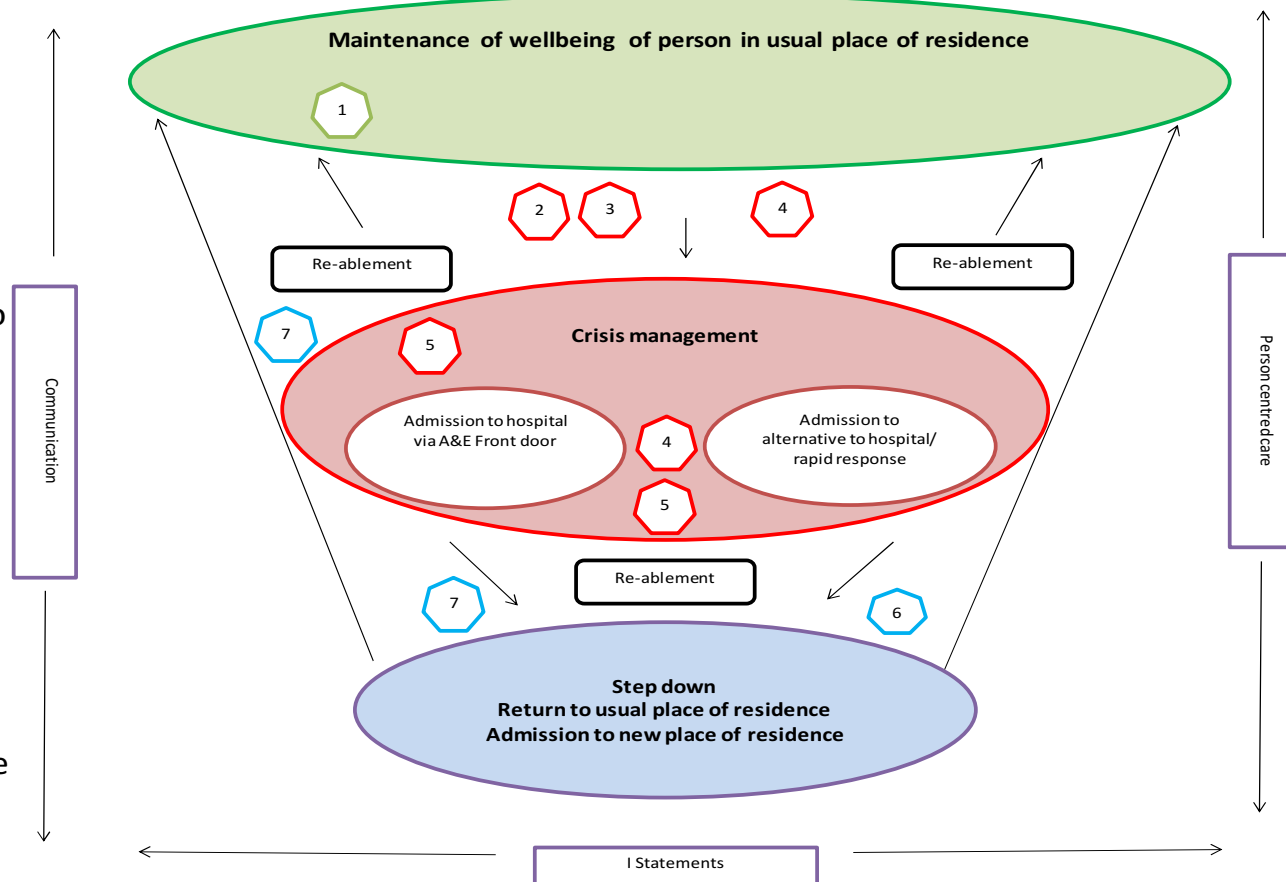
These are the areas the CQC feel are most challenged in the system:

1. Maintenance of peoples health and well being in their usual place of residence (in other words keeping people well at home)
2. Multiple confusing points to navigate in the system
3. Varied access to GP/ Urgent Care centres/ community care/ & social care
4. Varied access to an alternative to hospital admission
5. Ambulance transfers
6. Discharge planning delays and varied access to ongoing health & social care
7. Varied access to re-ablement

# Areas of Focus to underpin KLOEs : Key system pressure points

## Pressure Points:

1. Maintenance of peoples health and well being in their usual place of residence
2. Multiple confusing points to navigate in the system
3. Varied access to GP/ Urgent Care centres/ Community care/ social care
4. Varied access to alternative hospital admission
5. Ambulance transfers
6. Discharge planning delays and varied access to ongoing health & social care
7. Varied access to re-ablement



The 12 systems in the review nationally are:

ID	Authority	Council Type
1	Oxfordshire	County
2	Birmingham	City
3	Bracknell Forest	Borough
4	Coventry	City
5	East Sussex	County
6	Halton	Borough
7	Hartlepool	Borough
8	Manchester	City
9	Plymouth	City
10	Stoke-on-Trent	City
11	Trafford	Metropolitan Borough
12	York	City

## The performance dashboard

ID	Indicators	What this indicates about the system	Full definition
1	Emergency Admissions (65+) per 100,000 65+ population	Can indicate how good collaboration across the health and care system is to support good management of long term conditions	(Emergency admissions for those with identified age (65+) resident in a local authority) divided by; (Local authority population 65+/100,000)
2	90th percentile of length of stay for emergency admissions (65+)	Longer lengths of stay can indicate poor patient flow out of hospital and hence downstream blockages	The 90th percentile length of stay following emergency admission.  e.g. 10% of patients within a local area have a length of stay longer than X days.
3	TOTAL Delayed Days per day per 100,000 18+ population	This indicates how effective the interface is between health and social care and joint working of local partners	Average number of monthly delayed days (ALL) per day Divided by; (Local authority population 18+/100,000)
4	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	This captures the joint work of social services, health staff and services commissioned by joint teams, as well as adult social care reablement. Reablement services lead to improved outcomes and value for money across the health and social care sectors.	The proportion of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting), who are at home or in extra care housing or an adult placement scheme setting 91 days after the date of their discharge from hospital.
5	Proportion of older people (65 and over) who are discharged from hospital who receive reablement/rehabilitation services		The proportion of older people aged 65 and over offered reablement services following discharge from hospital.
6	Proportion of discharges (following emergency admissions) which occur at the weekend	This can indicate successful, joint 24/7 working leading to good flow of people through the system and across the interface between health and social care	Percentage of discharges (following emergency admission) at the weekend

The table below shows the rank of the systems under review compared to their 15 statistically similar nearest neighbours for each of the indicators.

Local Authority	Emergency Admissions (65+) per 100,000 of 65+ population	90th percentile of length of stay for emergency admissions (65+)	Total Delayed Days per 100,000 18+ population	Proportion of older people (65+) who were still at home 91 days after discharge	Proportion of older people (65+) who are discharged from hospital who receive reablement/ rehabilitation services	Proportion of discharges (following emergency admissions) which occur at the weekend
Birmingham	16	5	14	13	5	9
Bracknell Forest	8	13	13	16	9	8
Coventry	16	14	15	10	15	3
East Sussex	4	16	14	1	14	14
Halton	9	16	15	15	6	10
Hartlepool	10	13	14	7	9	13
Manchester	16	10	11	16	6	8
Oxfordshire	9	1	16	9	8	4
Plymouth	3	7	16	8	5	14
Stoke-on-Trent	15	7	16	12	16	9
Trafford	14	15	16	1	10	6
York	12	8	11	15	12	15

## Timeline for the review

- Formal notification 31<sup>st</sup> July 2017 to Theresa Grant
- 6 week in advance we receive confirmation of the date and a formal request to complete the *Local System Overview Information Request (LSOIR)*– expect on the **4<sup>th</sup> September**
- We will also get a *System Contact form* request to tell CQC who are key partners are so that they can contact them in advance. This will need to be submitted earlier than the LSOIR
- Deadline to submit data and the LSOIR - **25<sup>th</sup> Sept**
- There may be a set up meeting with them the week commencing the 25<sup>th</sup> September - TBC
- Review week on site **16<sup>th</sup> October**
- Feedback on 5<sup>th</sup> day ( 20<sup>th</sup> October )
- Full report to Health and well being board –**17<sup>th</sup> November**

## ***Key lines of enquiry***

Whilst on site the CQC will use their 5 domains to assess our performance and effectiveness:

- 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 health and social care interface to deliver high quality care and support?

Evidence needs to be gathered against those 5 domains

CQC outline on-site timetable to develop

- **Day 1: Focus groups**
- Commissioning staff
- Provider staff (across broad groups)
- Social workers and OTs
- People using services, carers and families
- Third 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**

## Provisional outline for the on-site activity

Day 1	AM	Lunch	PM	PM+
Monday 16 <sup>th</sup> October 2017	9am – 9.30am Arrive 10-11.00am <b>Focus Group 1</b> 11-11.15am Break 11.15am – 12.15pm <b>Focus Group 2</b>	Venue Time 12.30pm – 1pm	1pm – 2pm <b>Focus Group 3</b> 2pm – 2.15pm <b>Focus Group 4</b> 2.15pm – 2.30pm Break 2.30pm – 3.30pm <b>Focus Group 5</b>	

## Focus Group composition

- 1: Commissioning from LA & CCG
- 2: Operations -
- 3:
- 4:
- 5:

Day 2	AM	Lunch	PM	PM+
Tuesday October 2017		Venue Time 12.30pm – 1pm		Out of hours?

- Ascot?
- UHSM
- TGH

Day 3	AM	Lunch	PM	PM+
Wednesday 18 <sup>th</sup> October 2017		Venue Time 12.30pm – 1pm		Out of hours?

Sale Waterside – case file audit  
3 conversations?

Day 4	AM	Lunch	PM	PM+
Thursday 19 <sup>th</sup> October 2017	Well led interviews	Venue Time 12.30pm – 1pm	Well led interviews	

System leaders:

Theresa Grant

Sean Anstee

Stephen Anstee

John Lamb – chair of H&WB

Jill Colbert

Cameron Ward

Richard Spearing

PCFT?

Ian Williamson/Carolyn Kus

Salford - ?

Eleanor Roaf

Karen Ahmed

Healthwatch

Age UK?

Housing?

GMFRS

Darren Banks/Silas Nichols

Day 5	AM	Lunch	PM	PM+
Friday 20 <sup>th</sup> October 2017	Further final interviews – all to be available	Venue Time 12.30pm – 1pm	N/A	