Health & Wellbeing Board

13 June 2019

CQC Action Plan Highlight Report



Report by Integrated System Delivery Board

Presented by:

Lucy Butler

Director of Adults & Childrens Services,
Oxfordshire County Council

Louise Patten

Chief Executive Officer,
Oxfordshire Clinical Commissioning Group

Introduction

- This highlight report contains:
 - A rating for each workstream in the CQC Action Plan (Red, Amber, Green)
 - Progress notes for each workstream in the plan
 - An updated Evaluation Framework report (as agreed at HWB in November 2018)













Summary – Action plan progress

- A) Vision, Governance
 - & Strategy
- C) Older People's
 - **Strategy**
- D) Learning After
 - **Escalation**
- F) Market Management
- Housing
- L) Self-Funders
- M) Trusted Assessor





- B) Organisational Development
- **E)** Demand Pressures
- **G)** Workforce Strategy
- H) Flow & Pathways
- J) Review of Commissioned Services
- K) Support for Carers
- N) Co-production
- O) VCSE



Green – Workstream proceeding to plan



A) Vision, Governance & Strategy

Majority of tasks completed, remainder are on track

C) Older People's Strategy

 OP Strategy approved — Co-produced implementation plan due to be presented at the Health & Wellbeing Board in September

D) Learning After Escalation

All tasks in the plan have been completed

F) Market Management

All tasks on track.

I) Housing

Majority of tasks completed, remaining two to be completed in August

L) Self-Funders

 The brokerage service for people who fund their own care is due to golive at the end of July

M) Trusted Assessor

All tasks on track or completed

Amber – Development required



B) Organisational Development

 Further planning needed regarding the Area of Future Focus from the follow-up review "Further organisation development work should take place to address the culture of frontline staff, particularly medical staff, to enable a strength-based approach to care planning."

E) Demand Pressures

Updated plans on delivery of the Continuing Health Care project required

G) Workforce Strategy

Tactical actions are either completed or on track

Clarity regarding Oxfordshire systems input to the BOB STP Workforce
 Strategy is required

H) Flow & Pathways

 Further planning needed regarding the Area of Future
 Focus from the follow-up review "The comprehensive review of pathways of care should be undertaken. Discharge to assess processes should be evaluated and streamlined to move away from bed-based assessments where possible. Housing needs, particularly equipment and adaptation needs, should be addressed as part of this review."

Amber – Development required



J) Review of Commissioned Services

 Further evidence required on we are meeting the Area of Future
 Focus from the follow-up review "Commissioning with the independent social care market should be reviewed to move away from a transactional and traditional approach, and providers should be engaged in plans to support the development of the market."

K) Support for Carers

Revised dates for Carers Listening Event and Strategic Forum received

N) Co-production

System approach to co-production not yet approved

O) VCSE

 Further planning needed regarding the Area of Future
 Focus from the follow-up review "The good work to develop relationships and address cultural change should be embedded throughout Oxfordshire's health and social care system. This should include engagement with the VCSE sector and independent providers."



Part 1 – Joint Health & Wellbeing Strategy & Current Priorities		Target	Apr-19	Performance since last report
1a	Reduce the number of avoidable emergency admissions for acute conditions that should not usually require hospital admission	997 or fewer	1,218	(1%)
1b	Number of people waiting a total time of less than 4 hours in A&E	95% or above	87%	(1%)
1c	Reduce the average number of people who are delayed in hospital	83 or fewer	95	(17%)
1d	Proportion of all providers described as outstanding or good by CQC remains above the national average	86% or above	92%	\Rightarrow
1e	Number of older people placed in a care home per week	16.5 or fewer	11.5	(28%)
1f	Increase the number of hours from the hospital discharge and reablement service	8920 or above	8,842	(10%)
1g	Increase the number of hours of reablement	5750 or above	5,944	(13%)
Part 2 - NHS Social Care Interface Dashboard		Target	Apr-19	Performance since last report
2a	Emergency Admissions (65+) per 100,000 of the 65+ population	24550 or fewer	19,667	(19%)
2b	90th percentile of length of stay for emergency admissions (65+)	18 or below	13	(23%)
2c	Total Delayed Days per day per 100,000 of the 18+ population	83 or fewer	95	(17%)
2d	Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	85% or above	73.7%	(3%)
2e	Proportion of older people (65+) who are discharged from hospital who receive reablement / rehabilitation services	3.3% or above	1.7%	(1%)
2f	Proportion of discharges (following emergency admissions) which occur at the weekend	18.86% or above	21.60%	(1%)