

CARE QUALITY COMMISSION HALTON LOCAL SYSTEM REVIEW (AUGUST 2017)

ACTION PLAN





North West Boroughs Healthcare NHS Foundation Trust



St Helens and Knowsley Teaching Hospitals NHS Trust

Bridgewater Community Healthcare NHS Foundation Trust

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Background

Following the publication of the Care Quality Commission (CQC) Local Review of Health & Social Care Services in Halton report on 12th October 2017 (link: <u>http://www.cqc.org.uk/sites/default/files/20171012 local system review halton.pdf</u>), this Action Plan has been developed in response to the issues highlighted within the report.

The issues highlighted within the report have been reviewed and themed under the following headings:-

- Strategic Vision and Governance;
- Delayed Transfers of Care (including user experience);
- Key Actions for Winter 17/18
- Workforce;
- Market Capacity and Capability;
- Commissioning; and
- Patient Flow.

This Action Plan has been developed by the CQC Review Working Group, chaired by Sue Wallace-Bonner, the Director of Adult Social Services, Halton Borough Council and with representation from:-

- NHS Halton Clinical Commissioning Group (CCG)
 - Michelle Creed, Chief Nurse
- Halton Borough Council
 - Damian Nolan, Divisional Manager for Intermediate and Urgent Care
- Warrington & Halton Hospitals NHS Foundation Trust;
 - Lucy Cunliffe, Transformation and Delivery Manager
 - Neil Holland, Associate Director of Nursing
 - o Jan Ross, Acting Chief Operating Officer
 - o Jenny Farley, Deputy Director of Operations
- St Helens & Knowsley Teaching Hospitals NHS Trust;
 - Sue Redfern, Director of Nursing, Midwifery and Governance

- Ann Rosbotham-Williams, Assistant Director of Governance
- Northwest Boroughs Healthcare NHS Foundation Trust; and
 - o Lindsey Maloney, Director of Operations
- Bridgewater Community Healthcare NHS Foundation Trust
 - o Jacqui Tudor, Clinical Services Manager
 - Caroline Williams, Interim Director of Operations
 - o Ian Senior, Assistant Director of Operations
 - o Joanne Barnfield, Clinical Manager

The Group has been supported in its development by Hannah Miller, Senior Associate from the Social Care Institute for Excellence.

1. Strategic Vision & Governance

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Action	Action Required	Responsible	By V	Vhen	Progress Made to Date
No.		Officer	Start	Finish	
1.1	One Halton Accountable Care Strategic Vision to be signed off by Halton's Health & Wellbeing Board (HWBB).	Leigh Thompson	Ongoing	Completed	HWBB have received and approved the strategic vision for One Halton.
1.2	Establish Accountable Care System Programme Board.	Leigh Thompson	Completed	Completed	The Programme Board has been established
1.3	Ensure that there is a cohesive interface between and across Halton's Accountable Care System and the Cheshire and Merseyside STP.	David Parr	Completed	Completed	David Parr is the Executive for Halton Accountable Care System (ACS) within the Cheshire and Merseyside STP.
1.4	Establish Alliance LDS Joint Committee.	Dave Sweeney	Completed	Completed	The Committee has been established.
1.5	Review role of Halton's HWBB to ensure that there is enhanced challenge across the Health and Social Care system.	Eileen O'Meara	9.11.17	Completed	Role of the HWBB was reviewed in January 2018.
1.6	CQC Local System Review Action Plan to be monitored, on an ongoing basis, by the HWBB.		17.1.18	Completed	Final update of Action Plan to HWBB 4.7.18. Any on-going actions have been picked up/being managed via already available governance structures.
1.7	Develop Winter Plan for the Halton System.	Damian Nolan	Completed	Completed	Winter Plan for 2017/18 put in place.
	Ensure Winter Plan communicated to Operational Staff.	Damian Nolan	Ongoing	Completed	

2. Delayed Transfers of Care (inc. user experience)



Action	Action Required	Responsible	By	When	Progress Made to Date
No.		Officer	Start	Finish	
2.1	Ongoing improvement to be made in the level of Delayed Transfers of Care (DTOCs).	System leaders and HWBB	Ongoing	Ongoing	Numerous mechanisms in place to monitor DTOCs on an ongoing basis.
2.2	Ensure that the Home of Choice Policy within the Acute Trusts is appropriately applied	Jan Ross/ Amanda Farrell	1.04.17	Completed	Both Trusts have a home of choice policy in place.
2.3	Improve the length of time that patients are waiting for Intermediate Care Beds.	Damian Nolan	30.10.17	Ongoing	Intermediate Care Review to be completed by end of June 2018 – being managed via the Operational Commissioning Committee.
2.4	Improve the length of time patients are waiting for a CHC assessment.	Anna Marie Jones	Ongoing	Completed	At the end of Q4 2017/18, 92% was achieved.
2.5	Implement Trusted Assessors Model in Halton	Helen Moir	Ongoing	Ongoing	Work being progressed via the Care Home Development Group.
2.6	Improve capacity and demand management within Domiciliary Care Provision.	Damian Nolan	1.9.17	Ongoing	Work on Transforming Domiciliary Care (TDC) provision being progressed via the TDC Programme Board.
2.7	Some evidence of delays having a detrimental effect on individuals	Jan Ross/ Diane Stafford	1.6.17	Completed /Ongoing	Identified actions as part of the action plan have been completed. Ongoing work on delays etc. will continue to be undertaken within each Trust.

2.8	Improve the quality of discharge summaries provided, particularly in respect of medication	Jan Ross/ Diane Stafford	1.6.17	Completed /Ongoing	Identified actions as part of the action plan have been completed. Ongoing work on delays etc. will continue to be undertaken within each Trust.
2.9	Improve the information available to patients within the Discharge Lounges of the Acute Trusts	Neil Holland/ Bongi Gbadebo	1.10.17	Completed /ongoing	Identified actions as part of the action plan have been completed. Ongoing work on delays etc. will continue to be undertaken within each Trust.
2.10	Implement Halton's IM&T Strategy to ensure that appropriate agencies are able to access the full range of patient data, as required, in order to expedite discharges from Hospital etc.	Emma Alcock	As per Strategy	Ongoing	Ongoing implementation of the IM&T Strategy will continue to be monitored via NHS Halton CCG's Commissioning Oversight Group.
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3. Key Actions for Winter 2017/18

Action	Action Required	Responsible Officer	By When		Progress to date
No.			Start	Finish	
3.1	To continue to meet the required targets in relation to DTOC	Sue Wallace- Bonner/ Michelle Creed	Ongoing	Ongoing	Numerous mechanisms in place to monitor DTOCs on an ongoing basis.
3.2	Implement additional capacity for this winter	Sue Wallace- Bonner	Completed	Completed	Additional capacity put in place 2017/18.
3.3	Identify opportunities for additional capacity over the winter period while in transition	Sue Wallace- Bonner/ Leigh Thompson	2.11.17	Completed	Opportunities were identified over Winter 2017/18.
3.4	Improve communications across the system	Sue Wallace- Bonner/ Leigh Thompson	1.11.17	Completed	Communications Plan implemented.
3.5	Continue to sustain the current care home capacity	Sue Wallace- Bonner	Ongoing	Completed /Ongoing	Capacity managed during 2017/18. Continued monitoring will take place via the Care Home Development Group.
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4. Workforce

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Action	Action Required	Responsible	Ву	When	Progress Made to Date
No.		Officer	Start	Finish	
4.1	Develop system wide workforce strategy.	Leigh Thompson	Ongoing	Ongoing	Work to be taken forward via the One Halton Board.
4.2	Develop Halton Social Care Workforce Strategy.	Sue Wallace- Bonner	9.11.17	Ongoing	Work to be taken forward by HBC's Adult Senior Management Team
4.4	Organise Dementia Training for staff at the Halton Direct Links and ensure training for staff is provided on an ongoing basis to allow new staff to receive appropriate training, as and when required.	Damian Nolan	9.11.17	Completed	Training completed.
4.5	Additional Safeguarding training to be provided to A&E staff, as necessary and on an ongoing basis.	Rob Cooper – STH&K/ Jan Ross - WHH		Completed /Ongoing	Training completed and will be delivered on an ongoing basis.

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5. Market Capacity & Capability

Action	Action Required	Responsible	By When		Progress Made to Date
No.		Officer	Start	Finish	
5.1	Implement Transforming Domiciliary Care (TDC) Programme which aims to deliver modern and sustainable provision of domiciliary care for Halton's population.	Damian Nolan	Ongoing	Ongoing	Work on Transforming Domiciliary Care (TDC) provision being progressed via the TDC Programme Board.
5.2	Implement Reablement First Approach.	Helen Moir	Ongoing	Ongoing	Implementation to be monitored via HBC's Adult Senior Management Team.
5.3	Produce an updated Halton Market Position Statement (MPS).	Damian Nolan	Ongoing	Ongoing	Work on the production of the updated MPS to be monitored via HBC's Adult Senior Management Team.
5.4	Address issues of Care Home Market Capacity & Sustainability.	Sue Wallace- Bonner	Ongoing	Completed/On going	See 3.5 above.
5.5	Develop plan to address the high level of admission/readmission rates to hospital from care homes.	Sarah Vickers	Completed	Completed	The Enhanced Care Provision to Older People's Care Homes in Halton Service (GP Alignment to Care Homes) was implemented on 1 st September 2017.
5.6	Review system of finding nursing home care placements where patient's discharge needs have substantially changed and therefore individuals cannot return to their original care home.	Damian Nolan	Completed	Completed	Review completed.
5.7	Ensure effective Medication practice in place in Care Homes.	Lucy Reid/ Katherine O'Loughlin	Ongoing	Completed	All actions identified have been completed

6. Commissioning

6. Com	missioning						
Action	Action Required	Responsible	By When		Progress Made to Date		
No.		Officer	Start	Finish			
6.1	Develop Joint Commissioning Strategy for Older People.	Sue Wallace- Bonner	Completed	Completed	Following completion of the Joint Strategic Needs Assessment for Older People, work was completed on a gap analysis, the information from which was used to develop an overarching integrated Older People's Pathway to support Older People living and ageing well in Halton which is based on national good practice.		
6.2	Ensure that the monitoring of Primary Care within Halton is robust and fit for purpose.	Leigh Thompson	Completed	Completed	Processes for monitoring are in place.		
6.3	Ensure that robust mechanisms are in place to monitor the provision in the Halton Intermediate Care Unit (B1).	Damian Nolan	Completed	Completed	Processes for monitoring are in place.		
6.4	Complete system review of Intermediate Care (IC) Provision within Halton.	Damian Nolan	30.10.17	Ongoing	See 2.3 above.		
6.5	Ensure that there are robust mechanisms in place for the sharing of learning across the local system.	Michelle Creed	Completed	Completed	Robust mechanisms are now in place.		
6.6	Complete gap analysis against the current Service Delivery Model for Halton's Urgent Care Centres (UCCs) and the newly published Urgent Treatment Centres (UTCs) Standards and develop recommendations for progressing the	Damian Nolan	Ongoing	Completed	Recommendations for progressing UTC development in Halton are in place.		

	UTC development in Halton				
6.7	Undertake review of the Rapid Clinical Assessment Team (RCAT)	Damian Nolan	Ongoing	Completed	Review completed – RCAT ceased as a service at the end of November 2017.
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7. Patient Flow

Action	Action Required	Responsible	By W	/hen	Progress Made to Date
No.		Officer	Start	Finish	
7.1	Address the length of A&E Waiting Times at both Acute Trusts	Jan Ross/ Rob Cooper	Ongoing	Ongoing	The performance of both Trusts in respect of the A&E standard is monitored through NHSi, NHSE, contract monitoring by the lead commissioners with strategic oversight through the A&E Delivery Board.
7.2	Improve communication channels between the Hospital Discharge Teams and Domiciliary Care Providers	Damian Nolan	Completed	Completed	Communication channels have improved.
7.3	Address longer length of stay for emergency admissions in both acute trusts		1.6.17	Ongoing	Ongoing work on Length of Stay will continue to be undertaken within each Trust.
7.4	Improve managerial oversight of the Halton Intermediate Care Unit (B1).	Damian Nolan	Completed	Completed	See Action 6.3.
7.5	Improve and closely monitor the average length of stay at the Halton Intermediate Care Unit (B1).	Damian Nolan	Completed	Completed	See Action 6.3.
7.6	Improve the Assessment/Discharge Plans in both Acute Trusts	Neil Holland/ Diane Stafford	1.4.17	Completed	Action has been completed within both Trusts.
7.7	Lower % 65+ still at home 91 days after discharge into Reablement versus comparators and decreasing	Sue Wallace- Bonner	30.10.17	Completed	Improvement in figures which brings us more in line with the North West and England averages.

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