

**HEALTH AND SOCIAL CARE PEER REVIEW
ACTION PLAN
JANUARY 2019**

Mandate:

- Simplify things: plan, priorities, pathways and governance, so that we can deliver and our staff and patients / service users understand and communicate in a simple accessible way
- Reduce the number of hand offs
- Involve primary care, social care providers, voluntary and community sector organisations in a more explicit way as leaders, not just to the 'after party'
- Keep investing time in building relationships and trust at all levels

	Recommendation	Objective	Accountable Delivery Board(s)	Identified Lead(s)	Deadline	Activity	Outcome / Impact
1	Develop a single vision that is person focused and co-produced with people and stakeholders, with supplementary communications strategy and campaign	Establish multi organisation task/finish group to lead and report regular progress to Joint HWB and HCE	STP / HCE	STP: Roland Sinker VCS: Sandie Smith (Healthwatch)	June 19	The STP plan is in place with high level objectives. However it has been indicated that there will be a requirement in the NHS Long Term plan to do further system wide engagement with all stakeholders before finalising a revised strategic plan for 2019/20.	
2	Ensure strategic partnerships include Primary Care, VCSE and Social Care providers	Undertake review of membership of strategic partnership boards and add additional members / organisations where required	STP	Local Authority: Wendi Ogle-Welbourn STP: Roland Sinker CCG / Primary Care reps: Jan Thomas VCS: Julie Farrow Provider rep: TBA	Completed	HealthWatch are represented on the Care Advisory Group. Primary Care are represented on the HCE and STP Board meetings. GP clinical leads on North/South Alliances + VSCE And IDB for Peterborough. There is wider representation from the Voluntary Sector on the PSB.	
3	Strengthen the system leadership role of HWB's and clarify supporting governance	Arrange a workshop with HWB members focusing on system leadership Produce governance structure for both boards	Cambs & Pboro HWBs	Local Authority: Dr Liz Robin	Mar 19 May 19	System leadership workshop to be scheduled for March 2019. To be reviewed following workshop	
4	Establish Homefirst as a default discharge from hospital position for the whole system and monitor the proportion of complex discharges who go straight home	Produce / update pathway to reflect the default position and arrange briefings for hospital staff and supporting service staff to inform them of changes Add proportion of complete discharges to regular dashboard for Programme Board to monitor	System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Charlotte Black Hospitals: Sandra Myers, Neil Doverty CCG: Jan Thomas CPFT: Tracy Dowling	May 19	Agreed Single point of access to Pathway 1 between LA & NHS. Work continues at a consistent pace on all workstreams, with the go live of the discharge notification process across NWAFT, go live of System wide DTOC coding, implementation of a standard operating procedure across CPFT to improve review and flow of patients through the intermediate beds and go live of the Care Test model and for a Capacity Healthcare standard operating procedure across all sites.	

						There is a clear action plan that is monitored by the Joint Discharge Programme Board which meets on a fortnightly basis/weekly if needed.	
5	Simplify processes and pathways (particularly around discharge) making it easier for staff to do the right thing	Undertake review of all pathway, processes and procedures to simplify where needed Arrange briefings for hospital staff and supporting service staff to inform them of changes	System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Charlotte Black Hospitals: Sandra Myers, Neil Doverty CCG: Jan Thomas CPFT: Tracy Dowling	Summer 19	<p>The Secretary of State for Health and Social Care, Matt Hancock, announced a capital investment of £145 million for health and care facilities in Cambridgeshire and Peterborough.</p> <p>The investment incorporates £25 million for Hinchingbrooke Hospital and £19 million for Addenbrookes Hospital. It also provides up to £100 million of capital to build a pioneering children's hospital for the East of England.</p> <p>CPFT, CCG and LAs are working together on maximising the benefits of the pathway and ensuring consistency across Cambridgeshire and Peterborough with clear criteria and joint working arrangements.</p> <p>A training programme is being developed for all staff involved in hospital discharge which will also develop skills in difficult conversations and support for self funders.</p> <p>The LGA and Better Care Fund Support Team in NHSE have written to CCG and LA offering to work with the 'system' to assist in reducing the level of DTOCs. This is currently at the proposal stage. The next stage will be to develop a scope between partners.</p> <p>Adults Positive Challenge programme has been developed across Peterborough and Cambridgeshire which will focus on early intervention and prevention, with a more localised approach to supporting citizens to feel connected and able to help themselves and each other. Changing the conversation' and carers workshops are being rolled out to relevant, frontline teams and testing is underway on new bite-sized TEC</p>	

						training, starting with 'How TEC can prevent falls'	
6	Build on the recently developed DTOC data report to ensure everyone in the system is working with one version of the truth	Review the different forms of DTOC data reporting across the system and add any additional indicators into DTOC data report	System D2A and DTOC Programme Board Workstream: Performance and reporting (BI)	Local Authority: Tom Barden Hospitals: Sue Graham CCG: Jan Thomas	Completed	A report has now been published by the CCG and this is shared across the system, is published and used to monitor performance.	
Joint Commissioning							
7	Understand the collective Cambridgeshire and Peterborough pound and agree whether resources are in the right place ahead of winter and in the longer term and are joined up	Add to next A&E Delivery Boards agendas	STP and A&E Delivery Boards	Local Authority: Will Patten CCG: Matthew Smith Hospitals: Neil Doverty, Sandra Myers	Completed	The System Finance Directors group (FPPG) meet monthly as a minimum if not fortnightly. This is a meeting all system Finance Directors to discuss and report on system finance. A system Winter resilience plan has been developed and there is a weekly assurance report reporting into the A&E Delivery boards. FPPG) have developed a short-term financial plan to 2019/20, underpinned by the Drivers of the Deficit work which indicates a growing system financial deficit which has been used to frame discussions with our regulators.	
8	Develop and implement a system wide commissioning strategy to deliver the Cambridgeshire and Peterborough vision and work jointly to better understand capacity and demand	Establish multi organisation task/finish group to lead and report regular progress to Joint HWB and HCE (will need to link to the single vision group)	System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Will Patten, Dr Liz Robin (Public Health) CCG: Jan Thomas Primary Care Rep: TBA STP: Roland Sinker	Part complete Summer 19	Joint Market Position Statement for Cambridgeshire and Peterborough has been published. Demand and Capacity workstream, with multi-organisation representation, is meeting regularly and is undertaking a review of current and forecast capacity and demand across the system. The outcomes of this review are expected at the end of January and will inform next steps to shaping the future commissioning approach.	
9	Look creatively at opportunities to shift or invest in community capacity to fully support a home first model	Establish a working group to undertake piece of work to consider investment opportunities and delivery models	Link to Recommendation 4 System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Will Patten CCG: Jan Thomas VCS: Julie Farrow	Apr 19	Senior stakeholder engagement plan led by Stephen Posey highlights opportunities to emphasise need for investment in community for the STP.	
10	Work together with homecare providers to review current arrangements / new ideas / solutions to address both capacity and workforce issues	Improve awareness and engagement with key boards and groups across the system	System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Will Patten	Feb 19	Both LAs are in regular dialogue with providers about this and managing any impact from Brexit. The DTOC Programme Capacity and Demand Workstream was established in November and work is in progress	

						<p>to deliver a gap analysis on current and future market demand.</p> <p>The outcome of this gap analysis should be available by the end of January 2019. This will give us a clear understanding of the gap, issues and will inform the approach to engaging with providers across the system, including key milestones.</p> <p>The Bed State Capacity tracker was implemented in November, which enables a real time view of capacity across the system. We continue to engage with care homes to increase uptake.</p> <p>My Care Select was introduced in December, which offers an online solution for self-funders to source their own care.</p>	
11	Don't compete with each other as commissioners	Create one set of commissioning principles	Linked to Recommendation 8	Local Authority: Will Patten	N/A	N/A	
12	Establish a fully integrated brokerage team	Established joint health and social care brokerage team for Cambridgeshire and Peterborough to offer a consistent approach to work with the 'market'	Delivery Board: System D2A and DTOC Programme Board Workstream: Capacity, demand and brokerage	Local Authority: Will Patten	March 2019	<p>Co-location with the CCG CHC team has been agreed and the team is now located from 4/1/19. This will support closer working practices, clinical supervision and alignment of brokerage processes for CCC. More work to follow to include all staff who cover Peterborough.</p> <p>Further work to refine integrated working will be developed following co-location.</p>	
13	Undertake as a system a significant piece of work needed to put Primary Care centre stage in shaping the whole system community offer	HCE to review opportunities across the system and link to key boards where possible	System wide	Local Authority: Wendi Ogle-Welbourn CCG: Jan Thomas Primary Care Rep: Gary Howsam CPFT: Tracy Dowling	Summer 19	Developing the Integrated Neighbourhood Framework Medical Director of CCG to represent Primary Care at WSDG and LWAB GPN represented at LWAB.	
14	Work with the voluntary and community sector as strategic and operational partners to capitalise on their resource and ideas	WOW to establish a mechanism for regular engagement with the VCS to strengthen the offer	Senior Officers Communities Network	Local Authority: Wendi Ogle-Welbourn, Charlotte Black VCS: Julie Farrow	May 19	The VCS are represented on the Communities Network Group and engaged with development of the demand management programme	There is improved engagement and consultation with the VCS on key development projects across the system and their input is valued.
15	Build on the existing strong relationship with Healthwatch to add more depth and breadth to co-production	Convene a meeting with Healthwatch colleagues to review programmes of work and agree opportunities for co-production	N/A	Local Authority: Charlotte Black Healthwatch: Sandie Smith and Director rep(s)	Nov 19	Healthwatch undertook a review of Cambs and Pboro adult social care partnership boards and submitted a report. The CCG and LAs are exploring a joint approach. LAs to now consider	Improved relationships with Healthwatch and key partners to support the system.

					Apr 19	contents of the report to assist in developing the partnership boards. Review of Day Opportunities has been identified as a priority opportunity for co-production approach and Adults Committee has endorsed. LAs will be working with Healthwatch on this.	
16	Build on the 'no wrong front door' principle across the system to ensure customers experience consistency and minimal handoffs	Link to D2A workstreams Join up with the neighbour place based model	STP	STP: Roland Sinker	Apr 19	Linked to recommendation 17	
17	Ensure there is a collective understanding and consistency of approach to neighbourhood / place based models	Organise a series of briefings at key boards, committees etc for keep leaders and operational staff informed of the delivery model(s)	STP	Local Authority: Charlotte Black STP: Roland Sinker CPFT: Tracy Dowling	Mar 19	HCE to review Integrated Neighbourhood Framework	
Workforce							
18	As a system develop a multi organisational development programme that reflects the whole system vision and supports staff in new ways of working	Review current STP workforce group's work programme and link in with the single vision and commissioning strategy groups to take forward	STP	STP: Tracy Dowling Local Authority: Oliver Hayward HR Directors for system including LAs	Summer 19	There are a number of boards/groups in place to focus on workforce issues across the system although further work is required to develop an integrated approach. There are a range of Leadership and OD opportunities available to all system partners. A local Mary Seacole programme will have c.180 participants, by Spring 2019, building personal skills and local networks of system colleagues, based on attending. Work is underway to consider a 'Frimley 2020' programme based on system need and priorities.	
19	Provide stronger clinical leadership to support new processes and new ways of working across the system	N/A	Link to Recommendation 5	Hospitals: Sandra Myers, Neil Doverty	April 19	Local clinicians are participating in development opportunities hosted by the Kings fund to consider how to best effect population health collectively. Plans for a revised focus and the development of a single clinical community for the system will be discussed at HCE this month.	

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