Learning from Local System Reviews
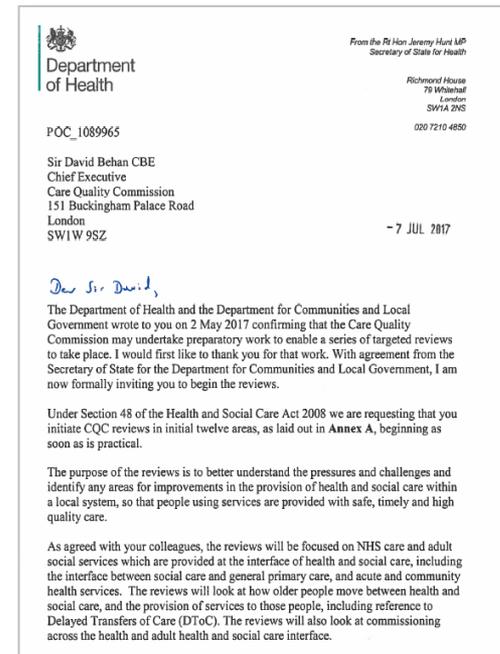
Local System Reviews (LSRs) findings

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Why do we carry out LSRs?

- Secretaries of State asked CQC to undertake a programme of 20 targeted reviews in local authority areas
  - How are providers and commissioners working together to care for people aged 65 and older?

- Reviews sat outside CQC's usual legal powers (under Section 48 of the Health and Social Care Act)

CareQuality Commission

1. Maintaining the wellbeing of a person in their usual place of residence

2. Care and support in a crisis
Admission to hospital or alternative

3. Step down
• Return to usual residence
• Admission to new residence

Reablement

What have we delivered?

Care Quality Commission

Undertook 20 site visits

Published 'Beyond Barriers' in July 2018

Undertook 3 more site visits

Carried out 3 follow-up reviews

Monitoring performance data

Learning to regulate within ICSs
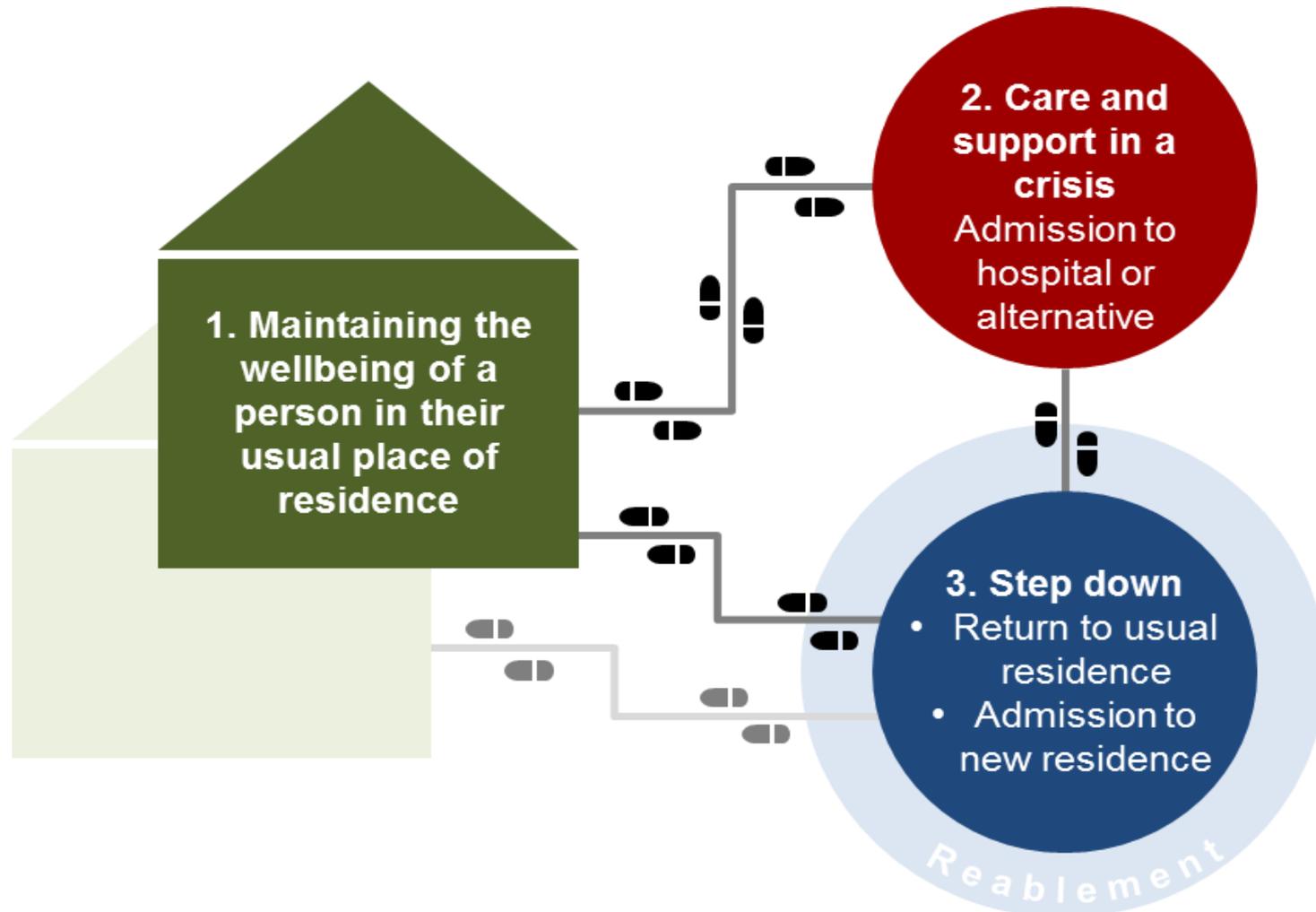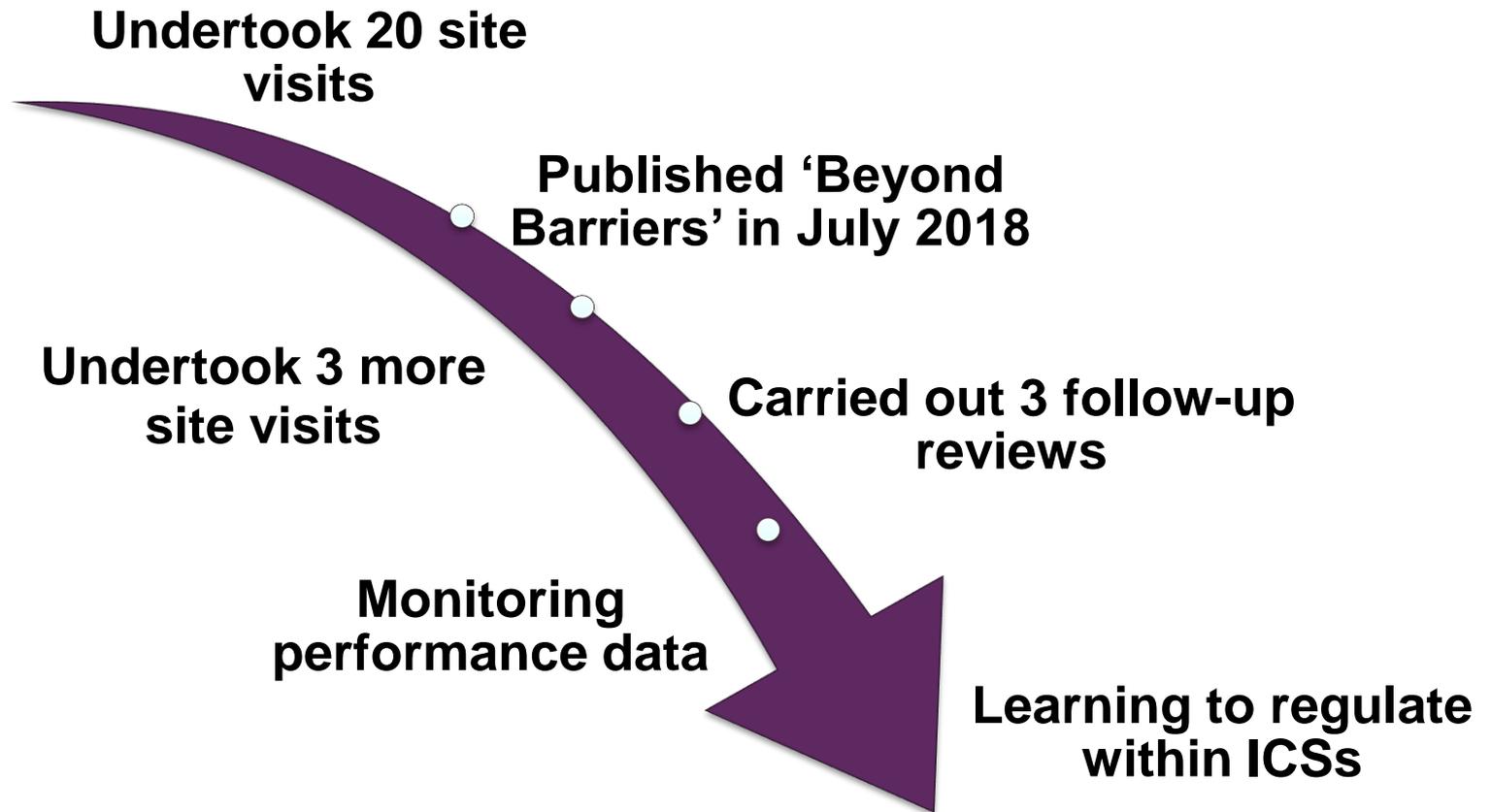
First 20 site visits – findings 1

- People experience the best care when people and organisations work together to overcome a fragmented system

- Dedicated staff regularly going beyond the call of duty

- There were examples of good practice in every local system we looked at

- Where local leaders share a clear vision, it provides a shared purpose for people and organisations across the local health and social care system

- In a fragmented health and social care system there are barriers to collaboration at a local and national level

First 20 site visits – findings 2

Funding: Health and social care organisations are limited in how far they can pool resources and use their budgets flexibly across prevention, social care and healthcare

Managing performance: Organisations are held to account for their own performance, not the performance of the system as a whole

Workforce: Services do not always have the right staff, in the right place, at the right time – the health workforce and social care workforce are seen as separate entities

Oversight: Regulation usually looks at quality of care in individual providers, rather than across a system as a whole; variation in effectiveness of scrutiny and HWBB systems to hold to account for the population

First 20 site visits – findings 3

Sharing information is one of the most significant challenges in providing joined up health and social care for people in all of the systems we visited

A misunderstanding of **information governance** rules sometimes leads to information not being shared between health and social care services when it was permitted to do so

Digital Interoperability presents different challenges in different systems – even those using the same IT systems struggle to share information

Systems were developing digital platforms to better share information between health and care services

System matters

Recommendations

Care Quality Commission

1. An agreed joint plan that sets out how older people are to be supported and helped which in turn, guides joint commissioning decisions over a multi-year period

2. A single framework for measuring the performance of how agencies collectively deliver improved outcomes

3. The development of joint workforce plans with more collaborative approaches to staff recruitment, retention and development

4. New powers to allow CQC to regulate systems and hold them to account for how they work together

Three new reviews - findings

CareQuality Commission

The three further LSRs generally mirrored the findings from the first 20 reviews.

- **Variation in the maturity of systems to provide an integrated approach** to service design and delivery

- **Dedicated staff,** committed to providing high quality of care

- The **need for a greater emphasis on keeping people well at home**, including community-based preventative services and hospital admission avoidance schemes

- A **willingness among organisations to work collaboratively**, with examples of joined up working improving outcomes for people using services

Common concerns:

- **Workforce arrangements,**

- **Market oversight,**

- **Missed opportunities to share learning**.

A system designed in 1948 can no longer effectively meet 2019 needs

- The NHS Five Year Forward View, published in 2014, sets out the vision around new models of care.

- In 2016, NHS organisations and local councils formed 44 sustainability and transformation partnerships (STPs) covering the whole of England.

- In some areas, partnerships are evolving to form an integrated care system (ICS) in which NHS organisations and local authorities take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.

- ICSs will be "central to the delivery" of the NHS Long Term Plan.

  - There is an ambition to have ICSs covering the country by 2021.

Future work

- The NHS Long Term Plan has highlighted that there will be:

  "a greater emphasis by the Care Quality Commission (CQC) on partnership working and system-wide quality in its regulatory activity, so that providers are held to account for what they are doing to improve quality across their local area".

- One of CQC's strategic priorities is to define more clearly our role in system regulation.

- The Secretary of State for Health and Social Care has committed to commissioning further work on Local System Reviews.

Any questions?