

Local system reviews

Progress monitoring

Birmingham

Introduction

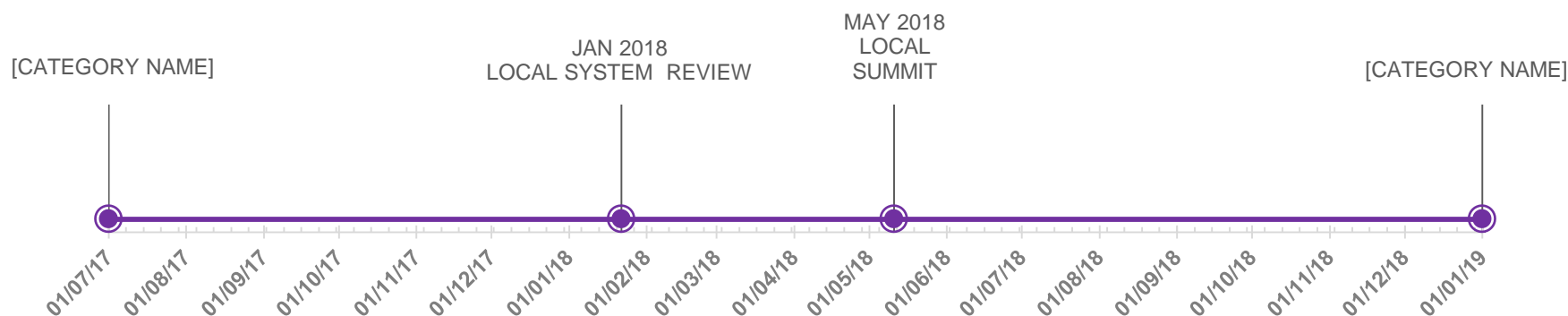


Following CQC's programme of 20 local system reviews, we were asked by the Department of Health and Social Care and Ministry for Housing, Communities and Local Government to provide an update on progress in the first 12 areas that received a local system review.

Birmingham's local system review took place in January 2018 (report [here](#)) and the system produced an action plan in response to the findings. This progress update draws on:

- Birmingham's self-reported progress against their action plan (at 31.10.2018).
- Our trend analysis of performance against the England average for six indicators. With the exception of DToC, the data goes up to end 2017/18. DToC data goes up to July 2018.
- Telephone interviews with four system leaders involved in delivering and overseeing the action plan.

Timeline of activity



Overview progress against indicators



[A&E attendances \(65+\)](#)

Remained consistently above the England average over 2017/18 but little variation compared to their own history

[Emergency admissions \(65+\)](#)

Consistently significantly higher than England average over 2017/18 and in Q4 was significantly higher than their own average performance.

[Emergency admissions from care homes \(65+\)](#)

Remained consistently above the England average over 2017/18 and in Q4 was significantly higher than their own average performance.

[Length of stay \(65+\)](#)

Changed very little, generally staying in line with the England average over 2017/18.

[Delayed transfers of care](#)

Remained consistently higher than England average (significantly so in April 2018), but remained within upper and lower limits of its own average performance

[Emergency readmissions \(65+\)](#)

Remained consistently above the England average, but not varied much compared to their own average.

Overview reported progress against action plan



Leadership and governance	<p>Chair of HWB is now a member of the STP board and STP Lead has a permanent seat on the HWB Board. Clear reporting and assurance from STP to HWB formally outlined in STP governance refresh.</p> <p>Document "Making Birmingham a great place to grow old in" sets out the vision for the integration of health and social care services for OP in Birmingham. Document represents collective voice of the Chair of HWB, Director of Adult Social Care, Leader of STP, and Chief Execs of the CCG and local Health trusts.</p> <p>There is a developing Health and Social Care Integration Framework.</p>
Workforce	<p>A 5 year workforce strategy has been developed but not well communicated or embedded, however LWAB has developed a workforce strategy and priorities for 2018/19 and these were presented to the STP Board in October 2018.</p> <p>Communications around Ageing Well have been developed and briefings are taking place. A single team approach progressed through the Early Intervention work stream pilot, November 2018.</p>
Information sharing	<p>Funding identified to undertake initial work and to build a comprehensive project plan to move to a person centred record. Anticipated that convergence of GP, Maternity and Mental Health records will occur within locally agreed time frame. Mandate from CCG Chief Executive also agreed to proceed with work on a citizen centred record.</p>

Overview reported progress against action plan



<p>Communicating and engaging with people who use services and public</p>	<p>CCG currently reviewing its communications and engagement strategy. Includes improved links use of engagement, patient experience and complaints data, to better identify themes and effectively act on patient feedback to improve services.</p> <p>Engagement activities undertaken to capture views and experiences of local people aged 55+ years that use local services, to:</p> <ul style="list-style-type: none"> • Provide people an opportunity to engage with the LA and NHS in relation to health and social care on what works well, what doesn't and how this can be improved. • Provide information to people and providers of future plans around health and social care, as well as highlighting local services available and other wellbeing activities. <p>Governance framework agreed and delivery groups established for Older Person's Strategy.</p>
<p>Prevention</p>	<p>To ensure a consistent approach is taken to identify high risk population groups and to manage risks to people within the community the council has developed a 'predicting demand' work stream. Initially will model population level demand for residential care based around primary care medical services risk stratification for frailty.</p> <p>Local intelligence is being utilised as part of the planned neighbourhood multi-disciplinary approach.</p> <p>OP subgroup set up and includes various stakeholders to inform direction of the JSNA.</p>

Overview reported progress against action plan



Early intervention	<p>Following prototype testing and evaluation a new intermediate care model is to be rolled out to other parts of the city. Work has commenced on preparation for rollout but the October 2018 target date has been revised to late 2019 as part of the early Intervention project plan.</p> <p>To enable leaders to continue to address performance issues governance arrangements established around OP Strategy linked to STP Board. Progress also feeds into A&E Delivery Board.</p>
Personalised support	<p>CCG has put in place a programme board to strengthen governance across CHC including adults and personal health budgets to manage CHC changes and developments more strategically.</p> <p>Work is ongoing system-wide through cross-system group to make operational improvements, and address issues as they arise.</p> <p>To provide assurance there is capacity of good quality services within the social care market a new care sector framework has been established with a focus on quality not price.</p> <p>New IT system (CareMatch) went live September 2018. Key focus for system is finding best quality care available that meets the needs of people.</p>

Overview reported progress against action plan



Locality working

To rationalise the local health and social care landscape with clear points of access workshops held September 2018 to progress work. Focus was to progress against three mandates: 1) Development of a model of integrated care for the city; 2) Development of a clear vision and set of principles & 3) structuring the city in to 30k - 50k neighbourhoods. Progress:

- Vision for Neighbourhood Teams drafted for sign off November and work continues on developing a workable model for each locality;
- For four localities (North, East, South & Central) there will be a local workshop, November, to agree proposed model for neighbourhood teams. For the West Birmingham locality further discussion with CCG will be held to ensure a fit with primary care networks;
- Development of a clinical operating model for the integrated neighbourhood teams to create a multi-disciplinary approach to improve care for patients has commenced;
- Formal agreement for the neighbourhood team model will be sought via the Birmingham OP Programme Board and Birmingham & Solihull STP Ageing Well Portfolio Board, January 2019;
- Stakeholder workshops (one for each locality) to be held early 2019.

Stakeholder reflections



Overall progress

The system confirmed that the January 2018 LSR findings proved to be constructive, helpful and timely having encouraged people across the system to think differently and pull together collectively to help drive improvement.

To strengthen relationships between the STP Board and the Health and Wellbeing Board (HWB) the Chair of the HWB is now a member of STP board and the STP lead has a permanent seat on the HWB. This approach has ensured that performance oversight covering health and social care activity system wide is now robust and embedded. The HWB is positioned to deliver leadership and challenge, which is helping offer focus, direction, clarification and with an increased voice.

The appointment of new senior leaders across the system has helped offer fresh impetus, drive and ambition. This coupled with the merger of the three previous CCG's is helping ensure approaches and commissioning intentions are consistent and increasingly effective.

A basic refresh of the local JSNA has been undertaken to support local priorities and direction of travel with longer term plans to complete a comprehensive refresh that will be supported by a newly appointed director of Public Health. Improving communications and engagement with partners, providers and local communities are also helping support commissioning intentions and to continually improve existing service delivery.

To improve the quality of local services within the social care market a new care sector framework was recently established with a focus on quality not price. The LA is also working with inadequate care providers to either improve their service or to decommission.

The LA recently launched a tender for home support services and contracts will be awarded in January 2019. A 12 month transition period will be in place to support people to transfer their care to a new provider with an increased emphasis on the use of direct payments.

Direction of travel

Plans are developing at pace to deliver and implement five locally based neighbourhood teams comprising of key integrated health and social care services that will meet the needs of local communities including older people. Using Better Care Funds the system continues to work with Newton Europe and recently implemented a place-based pilot promoting an integrated pathway for intermediate services with a one-team approach that includes:

- MDT with 7 day working;
- Quick response in a crisis;
- Home and bed-based enablement – *with a focus on getting people home.*

The model will be rolled out to other parts of the city and although work has commenced on preparing for rollout the October 2018 target date has been revised to late 2019 as part of the Early Intervention project plan. Local data highlights this approach is helping maintain vulnerable older people in the community and is impacting positively on DToC and hospital admission rates.

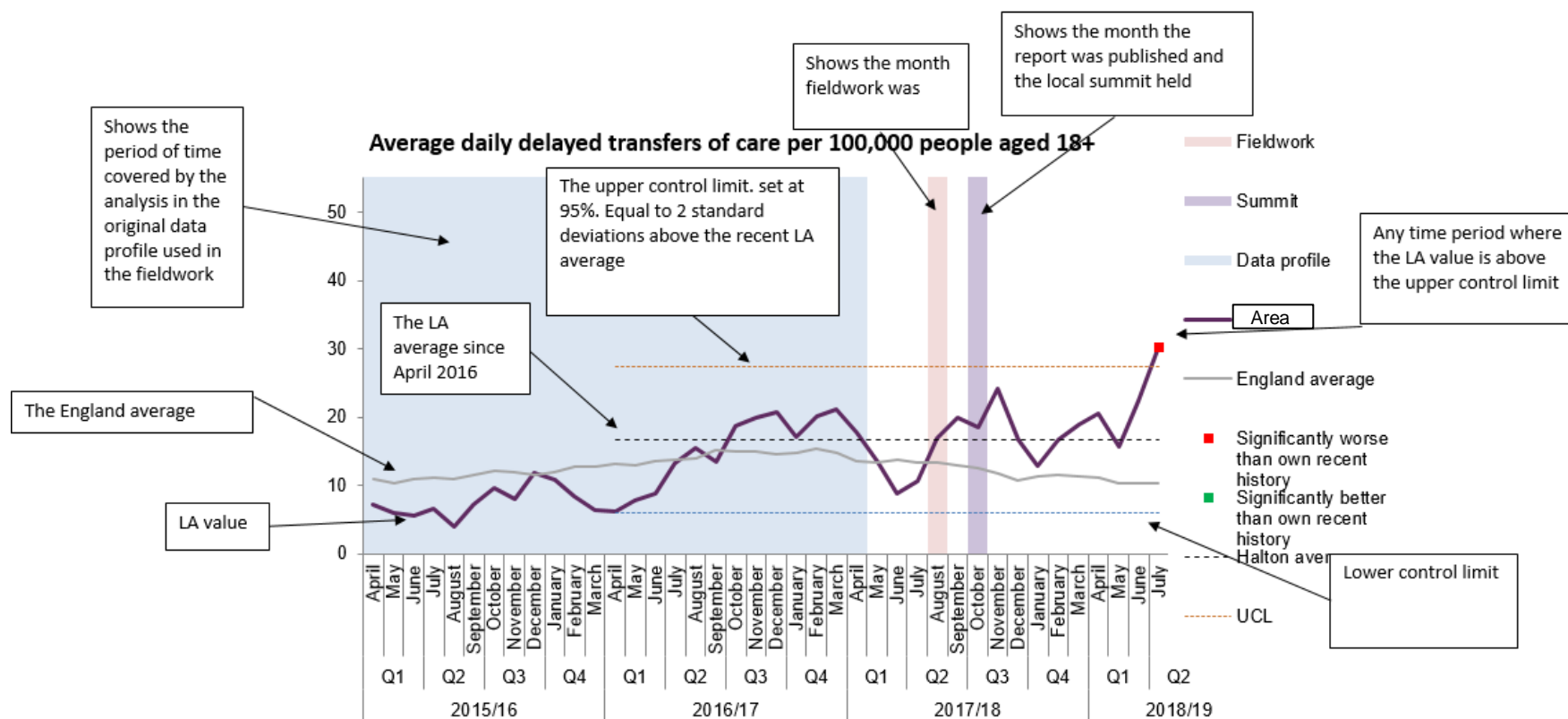
Although work is in progress to move to a person centred record the system acknowledges that further work is required to achieve this ambition, which will help improve information sharing across the health and social care interface and support effective integrated working.

Have undertaken a comprehensive workforce analysis of current and future needs in the context of locality working there is a drive to develop a Birmingham workforce/ careforce strategy. However, delivery remains dependent upon the developing neighbourhood working model.

With the drive and commitment of local leaders there is confidence that the system will deliver its LSR action plan in full.

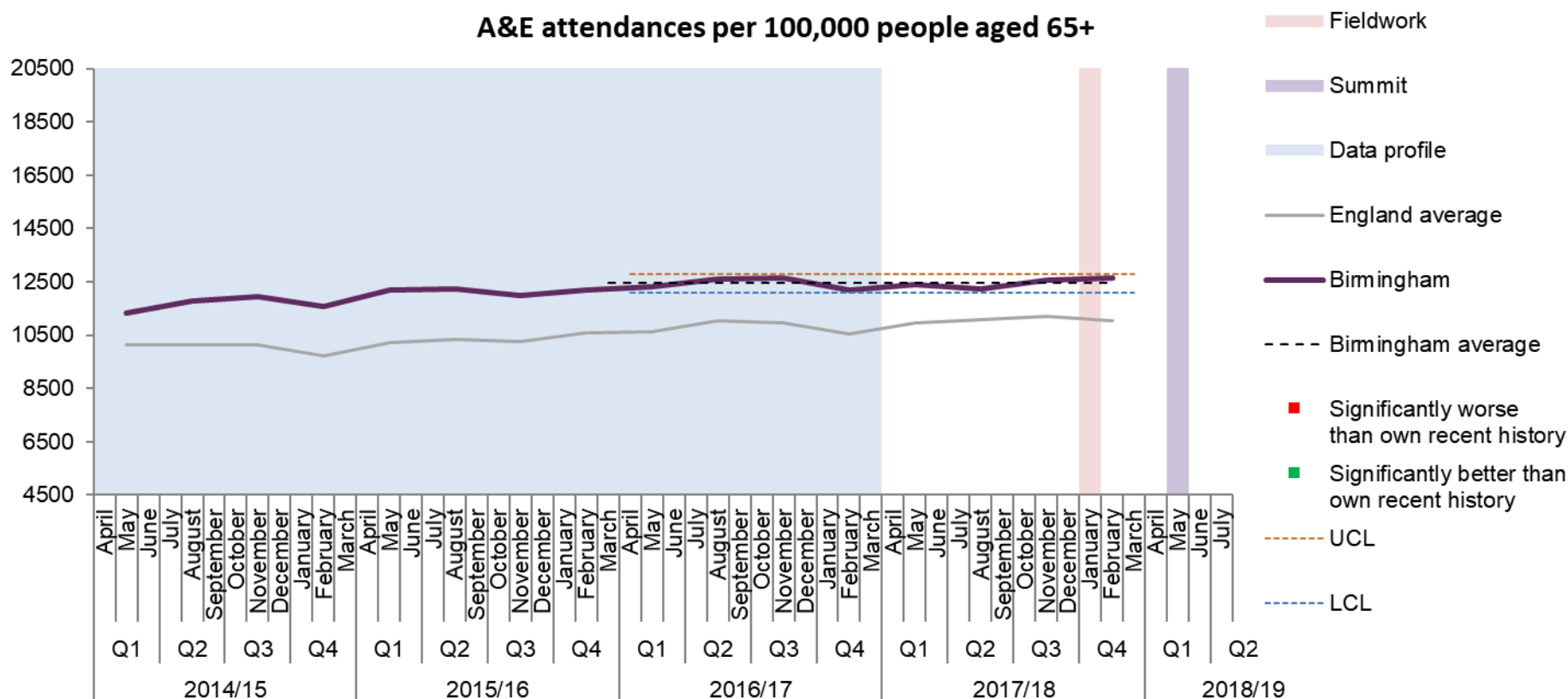
Appendix: Trend analysis introduction

The following slides present a trend analysis for six indicators. The **dummy** diagram below shows how to interpret the graphs. If you have any questions please contact warren.coppin@cqc.org.uk



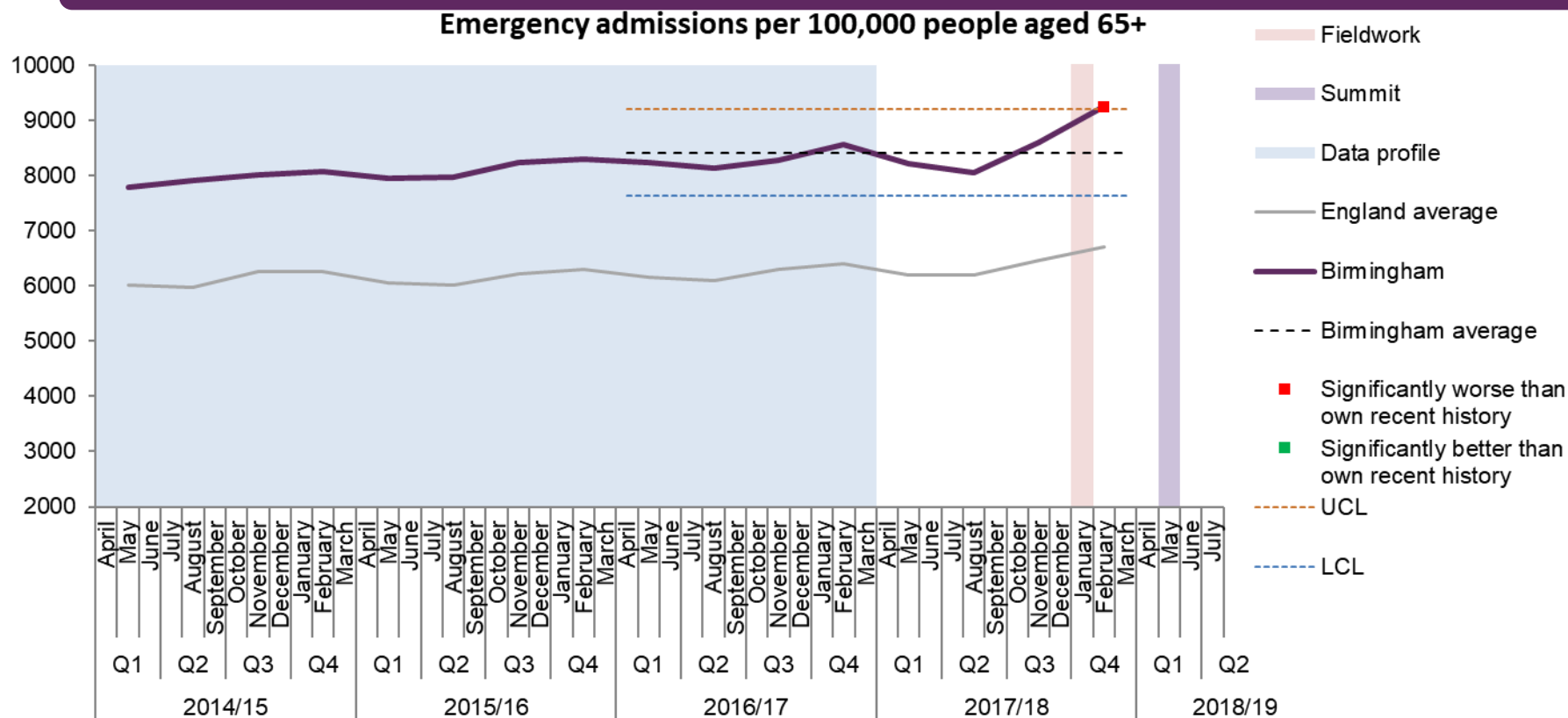
Appendix: A&E attendances

A&E attendances per 100,000 people aged 65+



Since we produced the data profile for the original local system review, Birmingham's performance for A&E attendances (65+) has remained consistently above the England average and has shown little variation – performance has remained within the upper and lower limits of their own average rate over the last 2 years.

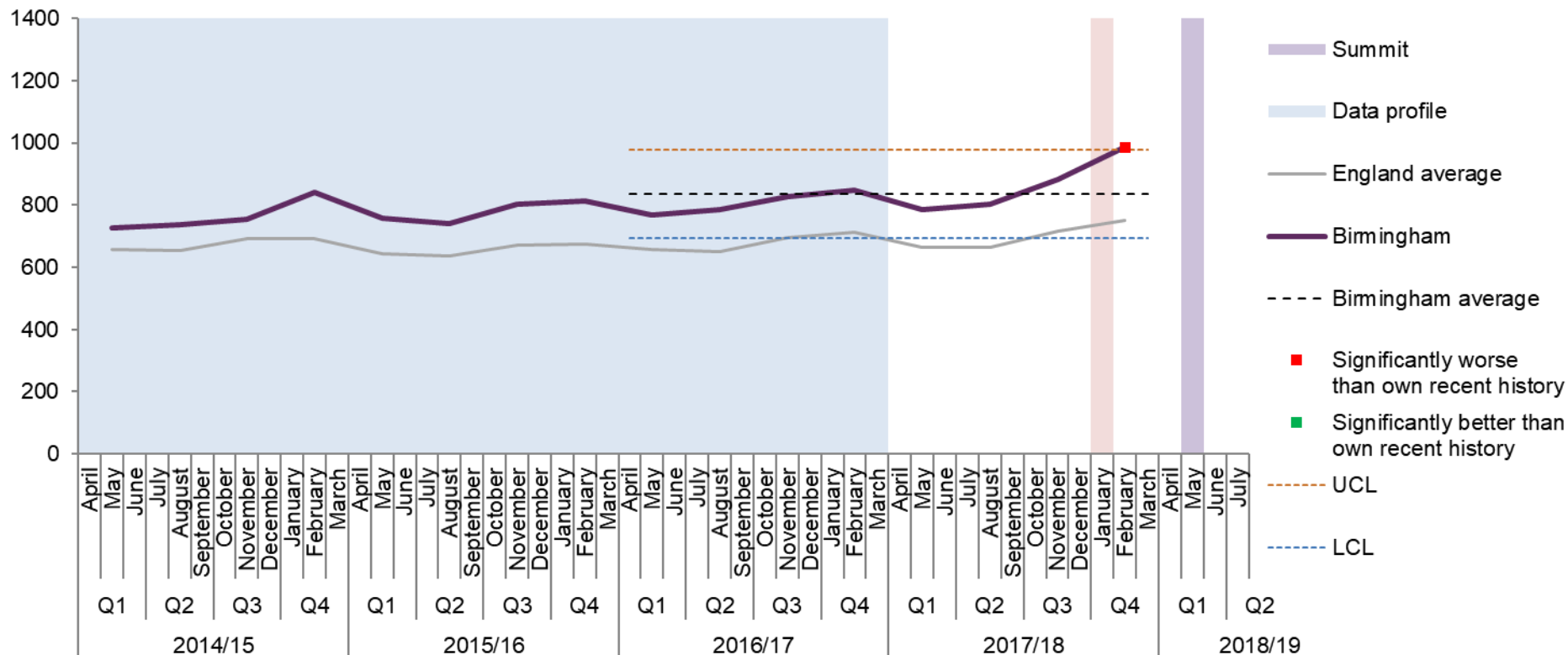
Appendix: Emergency admissions



Since we produced the data profile for the original local system review, Birmingham's performance for emergency admissions (65+) remained consistently significantly higher than the England average over 2017/18 and in the last quarter was significantly higher than their own average performance over the last 2 years.

Appendix: Emergency admissions from care homes

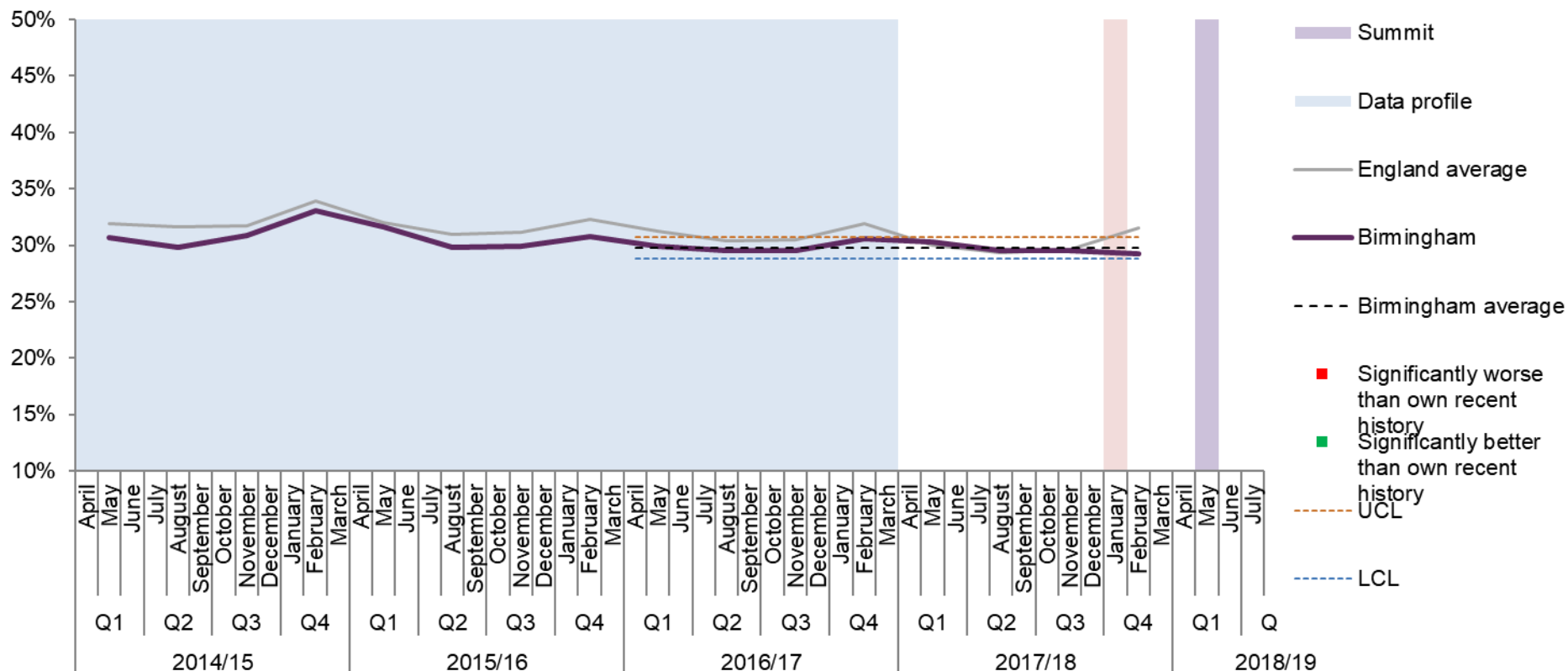
Emergency admissions from care homes per 100,000 people aged 65+



Since we produced the data profile for the original local system review, Birmingham's performance for emergency admissions from care homes (65+) remained consistently above the England average over 2017/18 and in the last quarter was significantly higher than their own average performance over the last 2 years.

Appendix: Lengths of stay over 7 days

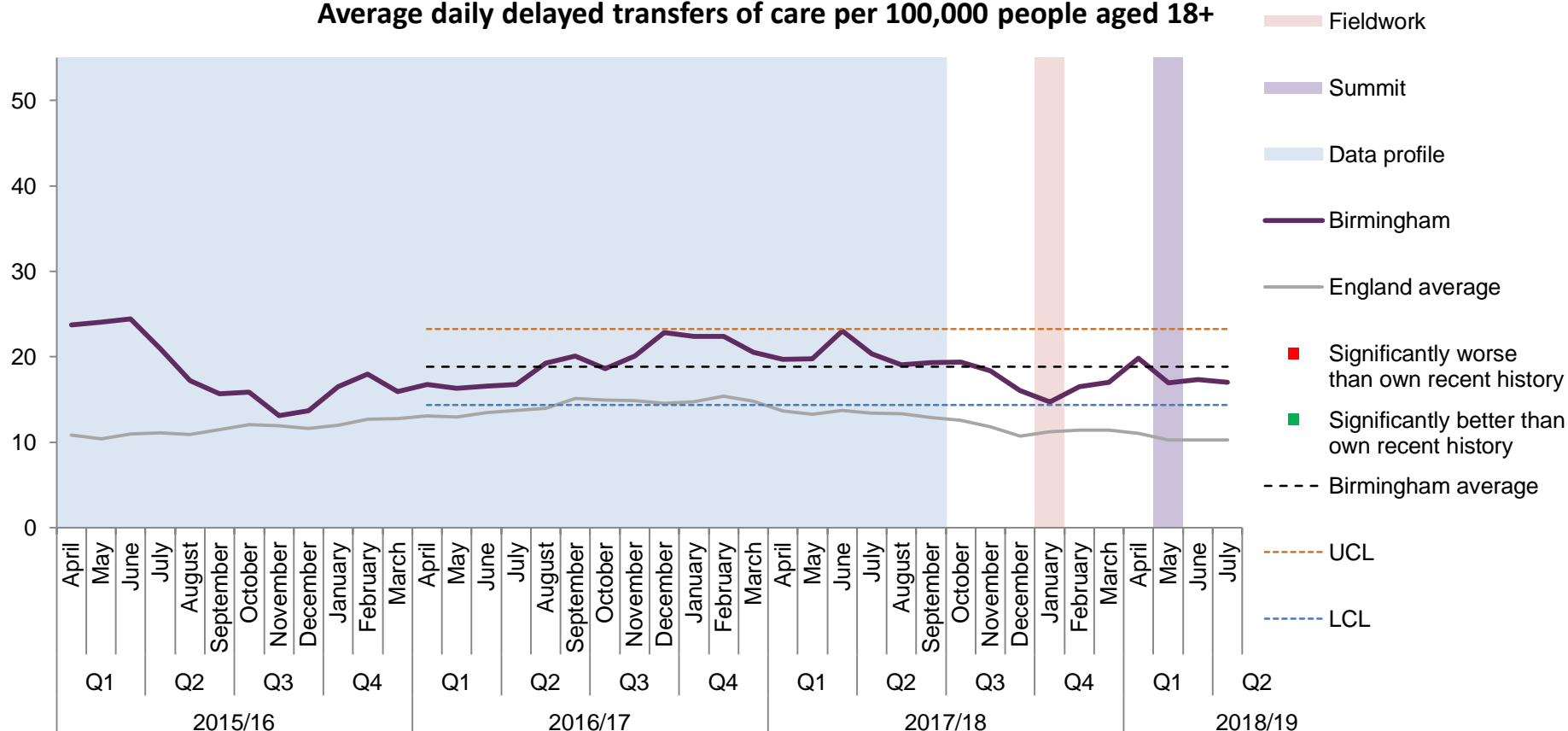
Length of stay over 7 days for emergency admissions people aged 65+



Since we produced the data profile for the original local system review Birmingham's performance for lengths of stay over 7 days (65+) has changed very little, generally staying in line with the England average over 2017/18.

Appendix: Delayed transfers of care

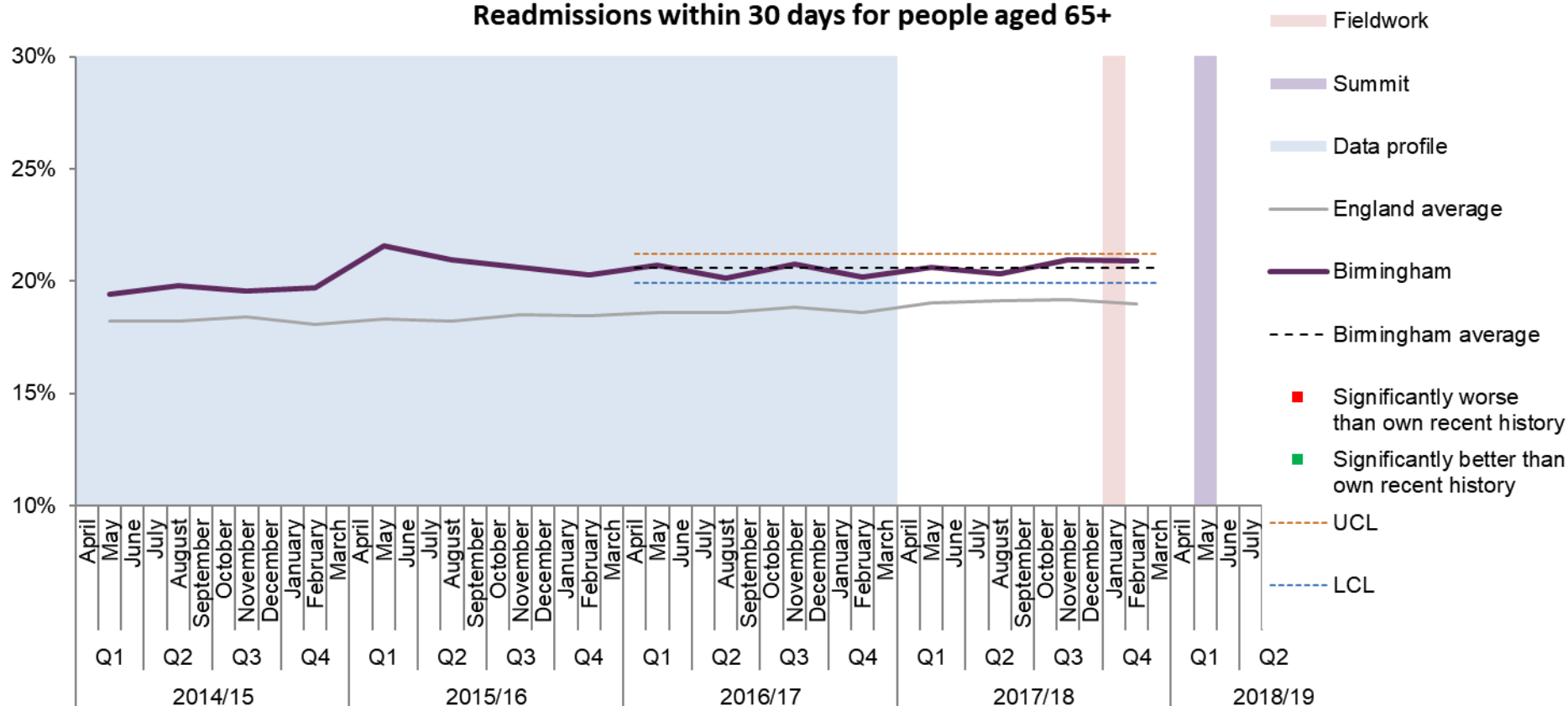
Average daily delayed transfers of care per 100,000 people aged 18+



Since we produced the data profile for the original local system review, Birmingham's DToC performance has remained consistently higher than the England average (significantly so in April 2018), however it has remained within the upper and lower limits of its own average performance.

Appendix: Emergency readmissions

Readmissions within 30 days for people aged 65+



Since we produced the data profile for the original local system review, Birmingham's emergency readmissions (65+) have remained consistently above the England average, but have not varied much compared to their own average.