

CQC Local System Review Action Plan

Ref	CQC Area for Improvement	What action now needs to be taken?	Deadline	Who is leading?	Progress update	BRAG rating	
1. Governance and Leadership							
1.1	There needs to be stability in the leadership to build on recent improvements and collaborative ways of working.	Implement the agreed governance arrangements for the Ageing Well Programme:		Birmingham Older People's Partnership Board (Graeme Betts and Karen Helliwell – co-chairs).	As of July 2018 all of the meetings and governance arrangements were agreed, including reporting arrangements. Dates for most of the meetings have been agreed for the rest of this calendar year. Terms of reference developed for each of the meetings with identified officers to attend from the respective organisations.		
		1.1.1. BSol Ageing Well and Later Life Portfolio Board	Jun-18				
		1.1.2. BSol End of Life Workstream Board	Jul-18				
		1.1.3. Birmingham Older People's Partnership Group	Jun-18				
		1.1.4. Prevention Workstream Board	Jun-18				
		1.1.5. Early Intervention Workstream Board	Jun-18				
		1.1.6. Ongoing Personalised Support Workstream Board	Jun-18				
		1.1.7. Agree ToR	Jun-18				
		1.1.8. Establish boards	Jun-18				
1.2	The relationship between the STP Board and Health and Wellbeing Board needs to be reviewed and strengthened to ensure there is agreement and clarity around roles and responsibilities.	1.2.1. Mutually agree Terms of Reference for HWBB and STP Board.	Jul-18	Rachel O'Connor for STP. Wayne Harrison for HWB	The draft ToR will be discussed at next STP Board meeting.		
		1.2.2. Establish regular reporting from STP Board to HWBB	Deadline TBC.		Chair of HWB now has ongoing invite to attend STP Board and STP Lead has a permanent seat on the HWB Board. Clear reporting and assurance from STP to HWB was formally outlined in STP governance refresh.		
		1.2.3. Review workplan of HWBB and Overview and Scrutiny in the context of Ageing Well Programme	Deadline TBC.		HWB Board receives monthly updates on the Ageing Well programme. There is also quarterly reporting to Overview and Scrutiny Committee. An STP conference is schedule for November for Members, Councillors, governors and lay assessors.		
				BSol Ageing Well Portfolio Board: Paul Jennings/ Graeme Betts			
		1.3.1. Development of BSol Strategic Statement for Ageing Well and Later Life	Aug-18	Louise Collett	The document "Making Birmingham a great place to grow old in" sets out the vision for the integration of health and social care services for older people in Birmingham. This document represents the collective voice of the Chair of HWB, the Director of Adult Social Care, the Leader of the STP, and the Chief Execs of the CCG and local Health trusts and forms part of a suite of materials being used to disseminate information about the Ageing Well Programme to staff across all of the relevant organisations.		
		1.3.2. Develop Birmingham Ageing Well Strategy – to incorporate the delivery framework and model.	Apr-19	Pip Mayo	The suite of documents listed above constitute the Ageing Well Strategy. The "Making Birmingham a great place to grow old in" document details the aims and priorities of the strategy.		

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1.3	System leaders should develop and drive forward a shared strategic vision for the future with a shared use of language, ensuring it incorporates all parts of the pathway and is a collaborative approach.	1.3.3. Produce a shared short, sharp strategic statement for staff across the system	Aug-18	June Marshall	A slide deck has been created which describes the programme for briefings. This has been shared with Adult Social Care and Health staff via the Corporate Director and with BCC staff as a whole via weekly bulletin from the Chief Executive. The agreed shared approach document, signed by the Chief Exec's of BSoL CCG, Birmingham Community Healthcare Trust, Birmingham & Solihull Mental Health Trust, the STP Lead, and Chair of Health and Wellbeing Board and the Director of Adult Social Care & Health, was circulated as part of these briefings.		
		1.3.4. System leaders to visit front line teams across health and social care to share details of the vision for the system in Birmingham going forward.	Sept/Oct 18	Dawn Baxendale/ Paul Jennings/ Richard Kirby/ Dame Julie Moore (Fiona Alexander coordinating).	This is being progressed via the Early Intervention workstream. The first visible step is ensuring an understanding of the whole programme and a communications strategy is in place for this. Briefings are taking place within organisations with information cascaded accordingly. From November there will be system wide briefing sessions at which senior managers from across the whole system will undertake briefings.		

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2. Prevention							
2.1	A consistent approach to identifying high risk population groups and managing risks to people within the community should be developed across the city.	Develop a multi-agency, system-wide approach to risk stratification:		Ageing Well Prevention Workstream: Graeme Betts – SRO Operational Leads: Wayne Harrison/ Dennis Wilkes/ Mike Walsh/ Simon Doble			
		2.1.1. System wide session to be organised to include wider partners such as housing, fire, police, MH	Sep-18		Workshop has taken place.		
		2.1.2. Review national best practice	Sep-18		The review has been undertaken.		
		2.1.3. Agree scope, purpose and project plan – learning from best practice and current risk stratification tools	Oct 18		A dual approach is being taken: local intelligence is being utilised as part of the planned neighbourhood multi-disciplinary approach and Public Health will work at population level. There is a dependency of the work being carried out by the Ongoing Personalised Support workstream.		
		2.1.4. Implement project plan	From Nov 18		As above.		
2.2	There needs to be a shared understanding of the prevention agenda, ensuring this is based on a robust Joint Strategic Needs Assessment and up to date public health analysis, which reflects the diversity of Birmingham's population. Publication of an annual public health report is a statutory obligation and the system needs to ensure this is fulfilled.	2.2.1. Website restructured.	Jun-18	Ageing Well Prevention Workstream: Graeme Betts – SRO Operational Leads: Becky Pollard/Wayne Harrison	Website restructure complete.		
		2.2.2. Health & Wellbeing Operations Group to identify key individuals from the wider health & social care system to take joint editorial responsibility for specific sections of the JSNA to ensure relevant reports (such as the current work on predicting demand) are identified for inclusion and the content is kept up to date.	Aug-18		Subgroups on Older People and Young People have been set up. These groups include various stakeholders to inform the direction of the JSNA.		
		2.2.3. Annual Report completed and published to website.	Aug-18		DPH Annual Report is on track to be completed and published in November.		

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3. Early Intervention							
3.1	There needs to be a review of the eligibility criteria and assessment process for the Enhanced Assessment Beds to ensure they are being used appropriately to meet people's needs.	3.1.1. Business case to BCC Cabinet for external support for the Early Intervention workstream and planning for locality based enablement pilot.	June 2018	Ageing Well Early Intervention Workstream: Andrew McKirgan - SRO, Operational lead: Mark Lobban/Judith Davis	Business case was approved by Cabinet week commencing 26/6/18.		
		3.1.2. Locality pilot to commence	Sep-18		A preferred partner has been selected and currently working towards awarding the contract.		
		3.1.3. City wide projects to be identified.	Oct-18		Slight delay against original timescales owing to process of awarding contract.		
3.2	System leaders need to continue to address current performance issues and work together to implement the recommendations made following the jointly commissioned Recovery, Rehabilitation and Reablement review.	3.2.1. Business case to BCC Cabinet for external support for the Early Intervention Workstream	Jun-18	Ageing Well Early Intervention Workstream: Andrew McKirgan - SRO, Operational lead: Mark Lobban/Judith Davis	Business case was approved by Cabinet week commencing 26/6/18.		
		3.2.2. Establish Early Intervention Workstream Board	Jun-18		Board established and meeting monthly		
		3.2.3. Delivery of place-based pilot to design an integrated pathway for intermediate services with a one-team approach. To include the following components: a. MDT with 7 day working b. Quick response in a crisis c. Home and bed-based enablement – with a focus on getting people home.	Sept 2018 – March 2019		System preparation has commenced including progressing a data sharing agreement and identifying an operational lead to work alongside the external support.		

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4. Ongoing Personalised Support							
4.1	The personalisation agenda should be developed with more people supported to access personal budgets and direct payments.			Ageing Well Ongoing Personalised Support Workstream: Richard Kirby - SRO			
		4.1.1. The system needs to develop a robust and shared vision of personalisation to underpin transformation (wider than personal budgets/direct payments) as part of Ageing Well Strategy formulation.	End Aug-18	Pip Mayo	A shared vision of personalisation has been approved by the HWB Board, and will be presented to the STP.		
		4.1.2. Undertake analysis of reasons why citizens have declined the offer of direct payments	End Jul-18	Pauline Mugridge	The direct payment project board has reviewed the reasons that a direct payment was not taken up, as recorded on CareFirst. This information has been used to agree actions by the board accordingly.		
		4.1.3. Develop personalisation offer for Health and Social Care in the context of locality working.	End Dec-18	Richard Kirby	Progress against this action is dependent on the overall neighbourhood model being developed by OPS - the deadline is likely to be revised. Personalisation was considered at the 2 neighbourhood working workshops held in September: the vision for neighbourhood working aims services to be person centred; further consideration is needed as to how this translates into practice.		
4.2	The local authority needs to ensure it continues to fulfil its statutory obligation under the Care Act 2014 and provide assurance there is capacity of good quality services within the social care market.	4.2.1. Mobilise new contracts including commencing annual monitoring visits and using quality to prioritise providers used by BCC.	End Jul-18	Ageing Well Ongoing Personalised Support Workstream: Richard Kirby - SRO, Operational lead - Alison Malik	Tender for residential, nursing and supported living was completed and new contracts effective from 01 May 2018. A risk register has been produced for all contracted providers to enable prioritisation for annual quality monitoring visits. The first quality monitoring visits commenced during w/c 23 July 2018.		
		4.2.2. Commence decommissioning of inadequate providers and ensure support provided to effected service users. DMT due to discuss/agree proposals June 2018. Begin with service user dialogue in September.	Sep-18		We continue to work with partners and service users to decommission Inadequate care provision safely and sensitively. In Dec 17 we had 9 Inadequate services and in Aug 18 this has reduced to 3. These are being actively managed and we will continue to work with these providers to either improve their service or to decommission.		
		4.2.3. Retender for home support providers; commence with tender launch in July	01/07/2018 - Deadline revised to Oct 2018		The Council will be tendering for home support services in Oct 2018, with contracts due to commence in Feb 2019. This will reduce the Council's home support market by around 70 providers and the tender will be awarded to the highest quality providers. A 12 month transition period will be in place to support citizens to transfer their care to a new provider/Direct Payment.		

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4.3	There needs to be more proactive scrutiny and contract monitoring to prevent further performance issues, such as those identified in relation to continuing healthcare.	4.3.1. All system workshop on 25 May to agree a refreshed and improved CHC pathway and processes.		Ageing Well Ongoing Personalised Support Workstream: Richard Kirby - SRO, Operational Lead: Carmel O'Brien.	Process mapping event complete		
		4.3.2. CCG in contractual discussions for both short and mid-term fixes and to consider longer term commissioning solutions. New CSU provider to take over contract 1st June.	Jun-18		Complete and in place. Mobilisation group continues to monitor handover. Project lead due to commence mid-July to develop the End to End process for CHC.		
		4.3.3. CCG Project to commence early July to scope an End to End service for CHC.	End Apr-19				
4.4	The system needs to consider how the current online micro-tendering procurement system for social care support impacts on peoples' choice, dignity and person-centred care.	4.4.1. Continue development of new IT solution for implementation 1 Oct 2018.	Oct-18	Ageing Well Ongoing Personalised Support Workstream: Richard Kirby - SRO; Operational Lead: Alison Malik	New IT system - CareMatch - went live on 17th September 2018. Key focus for the system is on finding the best quality care available that meets service user needs.		

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5. Locality working							
5.1	The health and social care landscape needs to be rationalised with clear points of access. However, the system needs to ensure there is a comprehensive evaluation of current services and ways of working throughout the city before wholesale changes are made which could demotivate staff and destabilise good practice.	Design and implement models of locality working across the life-course:		Ageing Well Prevention Workstream: Graeme Betts – SRO (Work has subsequently been handed over to the Ongoing Personalised Support workstream under Richard Kirby)			
		5.1.1. Identify a small number of neighbourhoods/ localities to act as accelerator exemplars	Jul-18		The proposed geographical split of the city has been presented to the working group, which includes CCG and GP reps who are currently considering these proposals. Localities (200-250k) have been agreed by all partners.		
		5.1.2. Agree locality governance model across the life-course including establishing the appropriate geographical level for different offers.	Sep-18		Two workshops were held in September to progress this work. The focus of the workshops was to progress against 3 mandates: development of a model of integrated care that works for Birmingham; development of a clear vision and set of principles; structuring the city in to 30k - 50k neighbourhoods. Attending stakeholders have been tasked with furthering actions and progress will be reported to the Birmingham Older People's Programme Board.		
		5.1.3. Establish neighbourhood/locality exemplar shadow boards	Oct 2018 - likely to be slippage				
		5.1.4. Map and evaluate the offer to citizens within exemplar areas	Dec-18				
		5.1.5. Exemplars develop proposals for locality working in their area	Apr-19				
		5.1.6. Exemplars undertake comprehensive needs analysis across the life course to establish local priorities	Apr-19				
		5.1.7. Mobilize locality exemplars.	2019/20				

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6 a) Enablers - Communications and Engagement							
6.1	Public engagement in shaping the future of the health and social care system in Birmingham needs to be strengthened with a systematic and joined up approach to involving people to ensure that Birmingham's diverse communities are engaged in the planning and delivery of services.	6.1.1. Further development of Comms and Engagement Framework linked to STP to underpin all STP programmes	End Aug-18	Fiona Alexander	Comms strategy has been drafted.		
		6.1.2. Re-commissioning of Healthwatch – review scope of contract and opportunity to embed system-wide feedback. Approach to be agreed by July 2018.	Jul-18	Pip Mayo	Approval has been given for the council to commence a procurement process for the Healthwatch Birmingham service. The service specification has been developed in partnership between the council and health to reflect the joint priorities and focus for the service. The procurement process will commence in October 2018 with a contract award scheduled for December 2018. The successful provider will work to mobilise the new service during January - March 2019 to ensure that there is not a gap in service provision.		
		6.1.3. Co-production of the Ageing Well Strategy for Birmingham	Apr-19	Pip Mayo	The suite of documents listed above constitute the Ageing Well Strategy. The "Making Birmingham a great place to grow old in" document details the aims and priorities of the strategy.		
		6.1.4. Establish Birmingham Ageing Well Communications and Engagement workstream	End Jul-18	June Marshall	Comms and engagement group established and meeting; made up of LHLH, CCG and BCC Corporate Comms and ASCH Comms reps.		
		6.1.5. Develop Birmingham Ageing Well Communications Strategy & Action Plan	End Jul-18	June Marshall	Strategy and Action Plan has been drafted and is due to be signed off by Birmingham Older People's Partnership Board on 11/9/18.		

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6.2	Strategic planning should be co-produced with all stakeholders, including independent care providers and voluntary sector organisations, to ensure the diversity of Birmingham’s population is reflected.	6.2.1. Audit of current engagement activity	End Jul-18	Ageing Well Communications and Engagement Workstream - June Marshall	The way stakeholders are recruited has been reviewed and amended along with website content. Work is being led through EI workstream.		
		6.2.2. Map Ageing Well Stakeholders and agree engagement methods	End Jul-18		Stakeholders have been mapped as part of the Communications Strategy – as 6.1.		
		6.2.3. Establish independent sector and voluntary sector reference arrangements.	End Sep-18		Being developed for EI workstream; further work required around the wider programme.		
6b) Enablers - IT							
6.3	Improving the capacity for information sharing across the health and social care interface should be prioritised, as this is currently a key barrier to integrated working.	6.3.1. Create an STP information sharing protocol	Dec 2018 Deadline amended to March 2019	STP Digital Roadmap Board: Operational Lead: Ciaron Hoye	Source of funding has been identified to undertake the initial tranches of work and to build a comprehensive project plan to move to a person centered record. It is anticipated that convergence of GP, Maternity and Mental Health records will occur within this time frame. A mandate from the Chief Executive of the CCG has also been agreed to proceed with work on a citizen centered record.		
		6.3.2. Review all STP Enabler action plans	Dec 2018 Deadline amended to March 2019				
		6.3.3. Progress work on single health and care record (Phase 1 under way and will be delivering all GP records from the region into acute and urgent care settings by Sep 2018. Phase 2 requirements being quantified in line provisionally with the Dec 2018 information sharing protocol).	Jun-20				
		6.3.4. Design and implement a system-wide single patient consent model for sharing data (pending agreement from the STP/region for a patient based consent model, and clarification of national policy with regards to consent and national infrastructure)	Dec-19				
		6.3.5. Enable citizens to have access to their own data to support self-management and to remain well.	Dec-19				

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6c) Enablers - Workforce							
6.4	Organisational development work needs to be undertaken to break down organisational barriers, strengthen relationships, improve communication and ensure there is a shared understanding among staff of their role in achieving the strategic vision at an operational level.	Develop a shared OD programme across the system to develop a collaborative culture and set of values and behaviours with a common purpose. To include:	Approach to be agreed by September 2018.	BSoL Ageing Well Portfolio Board: Paul Jennings/ Graeme Betts/ Andrew McKirgan	Communications around Ageing Well have been developed and briefings are taking place. A single team approach will be progressed through the Early Intervention workstream pilot at the Norman Power Centre from November 18.		
		6.4.1. Building and sharing stories and success.	Implementation from Sept 2018.				
		6.4.2. Single team approach.					
6.5	System leaders should develop a coherent workforce strategy for Birmingham.	6.5.1. Translate 5 year strategy into year by year action plans – produce Year 1 plan for city-level workforce requirements	Sep-18	STP Local Workforce Action Board: John Short - SRO	A workforce plan for the STP for 2018/19 is due to go to a meeting of the LWAB on 5th September.		
		6.5.2. Undertake comprehensive workforce analysis of current/future needs in context of locality working	TBC		This is dependent upon the neighbourhood working model that is being developed via the Ongoing Personalised Support workstream.		
		6.5.3. Develop Birmingham workforce/careforce strategy in context of locality working	TBC		This is dependent upon the neighbourhood working model that is being developed via the Ongoing Personalised Support workstream.		