ANNEXE 1

York Health and Wellbeing Board

CQC Local System Review

October - December 2017

Place Based Improvement Plan - July 2019

This version of the plan includes only the residual actions agreed for continuation in the 2019 plan.

Introduction

This document distils the remaining actions from the high level action plan in response to the CQC Local System Review of York (published 22-12-17).

The report made 13 recommendations for improvement in York, supported by the range of findings from their inspection. For the purpose of the original action plan these were re-ordered and grouped by theme.

Current Position

CQC conducted a progress review on the action plan in November 2018. The report was published in January 2019. It is available here: https://www.cqc.org.uk/local-systems-review#reports

This document summarises the residual actions from the autumn update.

Next Steps

Following the publication of the progress review a system plan is being developed. The first step advised by CQC was to fully review the remaining actions from the initial plan. These are captured in the following pages.

Reco	mmendation 1:									Lead Officer:
	is required to develop a wider system is and for specifying accountabilities a								orioritising	Mary Weastell and Phil Mettam
Date	Plan Approved: 31-1-18				Revie	ew Date	e: July 2019			
Ref.	Actions	Lead		Date fo		statu	S	Evid	ence / Additional Information	
1.3	Map the current governance arrangements across the STP / A&E Delivery Board footprints such as the range of sub groups which meet for specific responsibilities, or task and finish activities.	Pippa	Pippa Corner Februa		ry 2018	May 2019 = the map developed in November 2018 is out of date, and the system is changing all the time.		New map required as part of 2019 plan, showing the establishment of Primary Care Networks, Integrated Care Partnerships and the Integrated Care System. Direct lines of accountability and reporting remain complex, with a range of partnerships operating in a matrix arrangement.		
collab	should continue at pace to develop s oration and trust between system lea	ders.	ationships ac	cross the	system to		ss the lack of		Mary Weaste	ell and Phill Mettam
Ref.	Actions				Date for status Completion		status		Evidence / additional information	
2.8	Develop organisational developme programme to focus on working relationships between system lead and partner organisations. Revisit Systems Leadership Training whic delivered across the partnerships i 2016. Build on this for whole system organisational development. Consexternal facilitation for YIB development.	PBIP		March 2018		discussed at system leader level – confirmation required about this intention, and timescale.		further OD pr leadership ro	eement in principle to invest in rogramme once all senior les have been appointed. I in 2019 plan	

Recommendation 3:

The system should build in clear evaluation of systems to demonstrate the impact on people and the system overall.

Lead Officer:

Simon Bell, Sharon Houlden (DASS)

Date Plan Approved: 31-1-18

Review Date: July 2019

Ref.	Actions	Lead	Date for	status	Evidence / additional information
11011	, realistic		Completion		
3.1	Strengthen the existing HWBB performance framework, learning from good practice elsewhere.	Terry Rudden	April 2018	will need to form part of HWBB refresh	this should be carried forward in 2019 plan There is an existing HWBB performance framework on the KPI machine. It has 23 indicators, 6 for each of the four HWBB themes
3.2	Establish a whole system network of performance / data specialists to add value to existing work and minimise duplication	Terry Rudden	February 2018	update June 2019	A network of performance / data specialists exists, with each organisation's lead performance officer able to make contact with their counterparts. Officers work together where joint returns are required, such as BCF. COMPLETED.
3.3	Map our shared metrics and the existing data collection, how it is used and where reported. Include options for agreeing system wide deep dives.	Terry Rudden	April 2018	update June 2019	Where possible we now use the COUNT principle, so that the dashboards for BCF, CDSG and H&CRB are used in other arena. NO FURTHER ACTION
3.4	Develop a dashboard to monitor the effectiveness of this action plan in achieving measurable improvement in performance outcomes plus an action log.	Terry Rudden	June 2018	update June 2019	this should be carried forward in 2019 plan

Recommendation 5: Lead Officer: There needs to be a system-wide response to effectively managing the social care market and domiciliary Sharon Houlden (DASS) care capacity. **Review Date** July 2019 31-1-18 **Date Plan Approved:** Ref Actions Lead Date for status Evidence / additional information Completion A shared approach to this has been set out as Build on the existing approach to the 5.1 Gary Brittain July 2018 work in progress part of Joint commissioning programme and Market Position Statement with should form part of 2019 plan partners. Establish joint health and social care 5.5 Julia Massey May 2018 update July 2019 The proposed 'Rotational Apprenticeship' where (Learning City apprentices undertake their training across both apprenticeships to build capacity Partnership, CYC) Health and Social Care (including private sector) has been piloted by the Humber Coast and Vale Excellence Centre. Exploring York options. Recommendation 6: Lead Officer: Lisa Winward (Chief Constable, A review of IT interconnectivity should be completed to ensure appropriate data sharing and a more joined up approach across health and social care services. NYC) **Review Date:** July 2019 **Date Plan Approved:** 31-10-18 Evidence / additional information **Actions** Lead Date for Ref status Completion Roy Grant / 6.3 Use of NHS Number on all care records to be July 2018 update received Work is already mainstreamed and as standardised. Mike from lan complete as possible: • Updating NHS numbers on record Richardson Cunningham May 2019 complete and ongoing • NHS numbers on forms – complete on key forms · Ongoing challenge to ensure DQ. Develop a protocol relating to moving data and Technical project manager in place. 6.5 Shaun September this action has digital interoperability will form part of the Macey Kevin viewing it as a short term solution, prior to achieving 2018 been superseded

2019 plan.

by the DIG project

Smith

6.6 Work on the business process and information Glynn Shaw June 2018	LCHRE	
weekend discharges.		Technical Project Manager in place. this will form part of the 2019 plan

Recommendation 13:

Continuing healthcare arrangements should be more robust and person centred.

Lead Officer:

Denise Nightingale Michael Melvin (DASS)

Date Plan Approved: 31-1-18

Review Date: January 2019

Ref	Actions	Lead	Date for Completion	Status	Evidence / additional information
13.7	Develop new work force arrangements.	Denise Nightingale Kyra Ayre	June 2018	update July 2019	Transitions social worker appointed. CHC team now includes OTs. S117 team now includes a social worker.
13.8	Explore opportunities for joint social care and NHS roles in terms of reviewing current customers (including assessment of needs against the packages of care)	n terms of reviewing current Kyra Ayre including assessment of needs		update July 2019	Agreed in principle to pilot and fund a joint fact finder role to support information gathering for CHC Assessments across organisations (based on a similar role in neighbouring council). This will enable senior professionals to focus more of their time on carrying out assessments.