



# **Final Report:** Methodology of Adult Inspections Short Life Working Group

# **Background**

On 12 December 2011, the Scottish Government announced its intention to integrate adult health and social care services, with a focus on improving outcomes for people across Scotland. In line with this policy direction, Healthcare Improvement Scotland and the Care Inspectorate developed a model for the joint inspection of health and care services for older people. Two pilot inspections took place in 2012/13, and three joint inspections in 2013/14. A programme of joint inspections was then rolled out, with six joint inspections carried out in 2014/15 and a further six in 2015/16.

During this time, the reform of health and social care services continued, with a move to more integrated models of health and care services. This major reform culminated in the Public Bodies (Joint Working) (Scotland) Act 2014 (the Act).

The Act sets out a framework for integrating adult health and social care services, through the introduction of Integration Authorities. This legislation included a requirement that Healthcare Improvement Scotland and the Care Inspectorate assess progress in establishing joint strategic commissioning and the early impact of integration from April 2017.

Revising the focus of our joint inspection activity across Healthcare Improvement Scotland and the Care Inspectorate presents a number of challenges, not least due to the pace of change in public services across Scotland. But most importantly it also presents opportunities to undertake a more sophisticated assessment of services across public sector organisations, working in partnership across improvement and assurance agencies and to add real value to the developing integrated agenda.

## **Initial integration timescales**

By 1 April 2016, in line with legislation, all Integration Authorities were operational, taking on responsibility for budgets and services. Integration Authorities have developed strategic plans for integrated functions and budgets under their control. The strategic plan is the output of the strategic commissioning process.

When an Integration Authority has implemented their strategic plan for a period of at least a year, it will report on its performance in relation to planning and carrying out the integration functions.





In order to allow time for Integration Authorities to implement their new arrangements and to allow time for development of the new approach to inspection, joint strategic inspections of the new approach will not begin until 1 April 2017 at the earliest.

# Establishing the Methodology of Adult Inspections short life working group

On 24 April 2015, a joint report by Healthcare Improvement Scotland, the Care Inspectorate and Audit Scotland was presented to the Joint Inspection Bodies Strategic Scrutiny Group setting out plans for reviewing and monitoring the implementation of the new arrangements to integrate health and social care services in Scotland.

This resulted in the Board of Healthcare Improvement Scotland and the Care Inspectorate establishing a short life working group to be co-chaired by a Non-Executive Director from each organisation. This was taken forward by John Glennie on behalf of Healthcare Improvement Scotland and David Wiseman on behalf of the Care Inspectorate. The short life working group has acted on behalf of both Boards in overseeing the initial development of the new approach and offering recommendations for next steps.

The purpose of establishing the short life working group was to:

"to consider the scope, effectiveness and impact of the current strategic inspections of adults/older people in the context of this changing scrutiny landscape and how that should be refined and developed over the course of 2016/17 and beyond."

To do this, both Boards asked the group to:

- consider the learning from joint inspections for older adults to date;
- consider the likely development path of the integration of health and social care and implications for future scrutiny;
- from the above consider the future focus, priorities and approach to joint scrutiny, including evaluation of joint strategic plans;
- develop an appropriate methodology and approach to joint scrutiny, including scope; and
- present recommendations for consideration to the boards of Healthcare Improvement Scotland and the Care Inspectorate.

The first meeting of the Short Life Review Group took place in August 2015 and there have been 14 meetings of the group, up to and including September 2016.





The group started by identifying what was working well and areas for improvement in the current joint inspection model, with a view to transferring this learning to the new approach. The review group briefed both Boards on the outcome of this work in December 2015, highlighting a number of areas requiring action or consideration to support the development of the joint work.

# **Progress since December 2015**

Over the last year we have made significant progress towards revising the methodology of the joint strategic inspections. While we will have a revised inspection model in place to commence inspections in April 2017, the focus of these joint inspections is likely to flex and develop over time, because of the changes underway across public services and the move to a more community-based and outcomes focus system. While we will have a clear process and framework for our joint inspection of adult services by April 2017, this will not represent a fixed and inflexible model.

A work plan setting out the key actions of the group since December 2015, current areas of development and future plans, is set out at **Appendix 1**. The main areas of development are summarised below.

To support the development work, it was agreed that the action plan would be coordinated by Carol Crowther (retired Associate Nursing Director, NHS Lothian) on behalf of Healthcare Improvement Scotland, and Lawrie Davidson, then Acting Depute Director of Inspection in the Care Inspectorate now Strategic Lead Scrutiny & Improvement Support.

## **High Level Advisory Group**

In March 2016, a High Level Advisory Group (HLAG) to support the redesign of the methodology met for the first time. The purpose of the group is to provide advice and guidance to Healthcare Improvement Scotland and the Care Inspectorate on the development and implementation of revised inspection methodology for the joint strategic inspections of health and social work services for adults. Members are responsible for sharing information on the development of the new methodology within their organisations and sectors and seeking feedback, to help raise awareness. The Terms of Reference for the Group are attached (Appendix 2). Membership of the group includes representatives from across NHS, Local Government, professional bodies, other scrutiny and improvement organisations and from the voluntary and private sectors.

## **Joint Development Day**





At a joint development day for key managers of both organisations held in Musselburgh on Friday, 13 May 2016 which was co-chaired by Claire Sweeney, Interim Director of Quality Assurance, Healthcare Improvement Scotland and Kevin Mitchell, Director of Scrutiny & Assurance, Care Inspectorate, agreement was reached on core focus areas for a revised model of inspection. We have engaged with stakeholders through the High Level Advisory Group, who endorsed the proposed approach.

The completion of this task represents a significant milestone for both organisations and allows key tasks outlined in the joint action plan to be progressed.

# A new approach

In designing the new approach to strategic inspections of adult services, the team have considered feedback on the current model, drawing together a range of intelligence and considered the key issues facing integrated partnerships. The team have identified 6 core areas which will form the basis of the new joint strategic inspections, with a focus on where we can most add value as the partnerships develop.



# Agenda item 16





Work is well underway to develop the underpinning detail to support this approach. In summary the following provides more detail on the focus of the 6 core areas set out above:





#### 1. Context, background

- •clear messages up front about what we have found, what the evidence tells us and the context in the local area
- Key messages
- Key outcome measures
- Key performance data
- Key strengths, areas for improvement and good practice

#### 2. Leadership and culture

- This will draw out important messages about the quality of local leadership and culture critical for success
- •Vision, values and culture
- Promotion of partnership working
- Joint strategic leadership
- •Capacity to improve
- Governance

#### 3. Strategic planning

- We will set out the scope and influence of the partnership and comment on the progress being made in each of the following areas
- •Strategic Plan
- Needs analysis
- Consultation and involvement
- Strategic commissioning
- Resources including money
- Workforce
- Buildings and assets (including community assets)
- •IT

#### 4. Clinical care and governance

- We will have a separate focus on clinical and care governance, given the challenges and importance of this issue
- Assessment (needs and risks)
- Care planning
- Review

## 5. Getting the right help at the right time

- Because of the difficulties in ensuring that services are sustainable and the impact on the population, we will have a focus on this area, including:
- Early intervention
- Prevention
- •Self-management
- Re-ablement and intermediate care
- Access to information

#### 6. Experience and outcomes

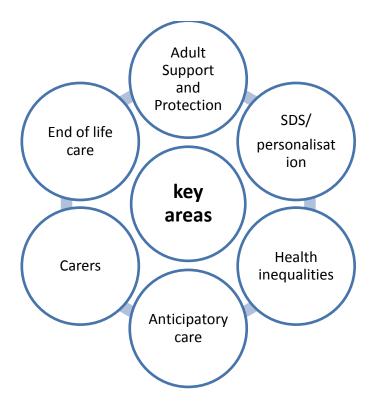
- We propose a key focus on outcomes and the experience of services
- Experiences of staff, communities and people
- •People who use services
- Families
- Carers
- Outcomes





#### **Essential areas**

There are a number of other areas where it is important that the partnership does not lose focus, despite the degree of change within the system. We have identified the following key areas which will be included in future inspections.



## **Next steps**

The short life working group has provided a vital role in steering both organisations to a point of agreement on the core focus areas of a revised model of inspection as set out above. This has helped both organisations to work through the practical implications of designing a methodology to carry out these inspections, in a changing environment across health and care sectors. In summary, in line with the request from each board, the group has:

- considered and addressed the learning from joint inspections for older adults to date:
- considered the likely development path of the integration of health and social care and implications for future scrutiny;
- identified the future focus, priorities and approach to joint scrutiny, including evaluation of joint strategic plans;
- developed an appropriate methodology and approach to joint scrutiny, including scope, including a detailed work plan, risk matrix and strategic focus for the work; and





 presented recommendations for consideration to the boards of Healthcare Improvement Scotland and the Care Inspectorate.

The group has been central to helping establish a clear plan of action that Healthcare Improvement Scotland and the Care Inspectorate can work together to deliver. While there is more work to be done to develop the new approach, this is operational in nature and we are content that arrangements are in place to support the work and that a clear strategic direction has been set out.

The Operational Management Group chaired by Claire Sweeney, Interim Director of Quality Assurance Healthcare Improvement Scotland and Kevin Mitchell, Director of Scrutiny & Assurance, Care Inspectorate is now in a position to deliver against the work plan, now they have a clear picture of the focus of the new inspection and the resources required.

#### Recommendations

We recommend that the Boards of both Healthcare Improvement Scotland and the Care inspectorate:

- 1. Note the content of this report.
- 2. Endorse the direction of travel for the joint strategic inspections.
- 3. Agree that this represents the final output from the Short Life Work Group cochaired by John Glennie and David Wiseman.
- 4. Record their appreciation for the work that has been undertaken by the Short Life Review Group.

Upon agreement by the respective Boards, Claire Sweeney, Interim Director of Quality Assurance Healthcare Improvement Scotland and Kevin Mitchell, Director of Scrutiny & Assurance, Care Inspectorate will be responsible for co-chairing the High Level Advisory Group and jointly progressing this work. Updates on progress will continue to be provided to both Boards through routine performance reporting.

John Glennie
Board Member
Healthcare Improvement Scotland

David Wiseman Board Member Care Inspectorate

15 September 2016