Ref.	Action	Owner	Status	Due	action verified by owners
1. System leaders need to address issues around quality in the independent social care market with a more proactive approach to contract management and oversight					
1.1	Engage all adult social care regulated services as quality improvement partners - Electronic survey to be completed to engage providers across the whole CQC regulated services across the District, providing space for providers to advise on their top risks in keeping with the top issues identified in the House of Lords review.	ECB	open	31/03/19	
1.2	Establish Service Improvement Boards for home care and care homes, and an over-arching quality forum to coproduce a single market position statement which shifts from reactive annual activity towards a population focus defining the size and desired constitution of the future market shape.	ECB	open	30/11/18	
1.3	Undertake fair cost of care modelling exercise with providers drawing on CIPFA (Chartered Institute of Public Finance and Accountancy) Guidance and use to inform re-commissioning of the frameworks for regulated services - enabling a shift from annual fee setting processes to a long term settlement.	ECB	open	30/11/18	
1.4	Share the findings from the Cordis Bright tool market risk analysis with providers and co-produce themes arising from this work to inform a new Quality Framework and peer to peer approach to ensuring good quality person-centred care and support for all.	ECB	open	31/08/18	
1.5	Examine potential to embed principles and meet the cost of implementing the living wage and Unison Ethical Care Charter within reviews of frameworks for care homes, home care and supported living.	ECB	open	31/08/18	
1.6	modelling to be undertaken on the current state and potential future state given changes in micro-commissioning trends	ECB	open	30/09/18	
1.7	Share intelligence coordinated by Public Health to enable modelling to be undertaken of the long term shifts in the profile of people who need care and support	ECB	open	31/08/18	
1.8	Consider proposal of care home home providers to integrate with locality working arrangements through primary care home/ community model, and to establish a joint service improvement team	ECB	open	31/08/18	🟩
1.9	Explore opportunities to introduce a common framework of competences (skills) and competencies (attributes) for integrated working across health and social care across all provider settings.	IWPB/Health and Social Care Academy Leadership Group	open	31/10/18	🟩
2. Building on good relationships that exist between stakeholders such as VCSE organisations and GP alliances, this needs to be extended to the independent care sector					
2.1	Work with independent care sector to review participation in local partnership, governance and programme delivery arrangements. To include (but not limited to): ICB, Health and Care Partnership Boards, Provider Alliances, Out of Hospital programme board	ICB (to coordinate)	open	31/08/18	
2.2	Programme Management Offices/ support for local partnership arrangements to consider how to operate with greater flexibility to enable participation by wider range of stakeholders without relying on meeting attendance	ICB (to coordinate)	open	30/09/18	
2.3	Work with the independent care sector to be actively involved in shaping how as a system we attract, recruit, develop and retain a high quality workforce across the wider health and care system	IWPB/Health and Social Care Academy Leadership Group	open	31/03/19	🟩
3. Leaders need to ensure that outcomes are person centred and caring in line with the vision and strategy					
3.1	Develop an agreed approach to system development to support delivery of strategy and vision	OD Network	open	30/09/18	🟩
3.2	Roll out the agreed common set of values/principles for integrated working across all organisations, to help foster a culture of being part of one system with a common purpose	IWPB	open	31/12/18	🟩
3.3	Develop a system-wide programme of staff engagement, using personal narrative to reflect person centred approaches in various care settings, to ensure that Happy, Healthy at Home is owned by staff at all levels in all parts of the system.	Comms and Engagement Network	open	30/09/18	🟩
3.4	In recognition of the challenges posed by differing national requirements placed on organisations that are trying to work together; develop a common framework for the next level of collaboration, addressing shared decision making and integrated commissioning and delivery.	Health and Care Partnership Boards	open	30/11/18	🟩
3.5	Establish learning and improvement processes through which the system will support providers with common themes and systemic issues emerging from CQC (and other quality) inspections.	ICB (to coordinate)	open	30/09/18	🟩
3.6	CQC consider best practice is the ethos of not moving frail people between wards in the hospital where possible – however they observed occasions where this didn't happen in practice during the review. The system to stress test how embedded this approach is in practice, and develop a method of assurance through which partners hold each other into account to hold true to the principles during periods of stress within the system such as winter peak flow.	A&E Delivery Board	open	30/09/18	
4. NICE guidance recommends that, apart from some exceptions, domiciliary care visits should not be shorter than half an hour. The commissioning of 15 minute domiciliary care visits needs to be reconsidered as concerns had been raised about the provision of care being task focused rather than person centred and leading to an increased risk of medicines errors.					
4.1	review current commissioning policies and move towards outcome based contracting arrangements, rather than time/ task focused commissioning	CBMDC	open	30/09/18	
5. There needs to be clearer signposting systems to help people find the support they need, particularly for people who fund their own care.					
5.1	Review current arrangements with the aim of implementing an integrated/ aligned single point of access, which allows for easy access, smoother customer journey, and enhanced communication between services	Out of Hospital Programme Board	open	31/12/18	
5.2	Review current information available to people and their families to help them make informed decisions on care options (particularly re long term care options)	CBMDC	open	31/12/18	
6. Although good work was in place with the local authority MCA and best interest assessment team, system leaders need to ensure that staff in health services and independent social care provider services have a better understanding of peoples rights and are able to understand the lifestyle choices that people make. System leaders need to address the fact that some peoples experience is not consistently good and person-centred.					
6.1	Continue roll out of Mental Capacity in Practice training to strengthen understanding of how to capture and uphold people's wishes, feelings and beliefs within care and support planning and delivery and refresh the offer in keeping with the new Multi-Agency Safeguarding Adults Procedures implementation programme.	Safeguarding Adults Board	open	31/03/19	
6.2	Safeguarding Adults Board to seek assurance from all local partner organisations on the compliance and effectiveness of their MCA training arrangements	Safeguarding Adults Board	open	31/03/19	
6.3	MCA teams across local partners to review opportunities for whole system collaboration, with the aim of enhancing adherence in all providers (health and care)	MCA teams	open	30/11/18	
7. There is potential to build primary care capacity and to maximise the impact of the primary care home model; the commissioning approach to primary care needs to maximise the outcomes from the two at-scale GP models emerging in Bradford.					
7.1	Develop plans to align approaches to locality working (primary care homes, ward teams etc)	Health and Care Partnership Boards	open	31/10/18	🟩
7.2	Keep looking outwards and bringing more people together.Test how effectively current partnerships are fully inclusive of diverse and differentiated viewpoints and agendas. (e.g. community pharmacy, dentistry, optometry, VCS organisations large and small, faith organisations, housing organisations, tenants and residents associations)	Health and Care Partnership Boards	open	31/03/19	
7.3	Build on strength of community anchor involvement in communities/ locality working, to maximise VCS engagement	Health and Care Partnership Boards	open	31/03/19	🟩
8. Although information sharing and governance was well-developed, system leaders need to consider how to streamline processes when people are discharged from hospital with less reliance on paper based systems.					
8.1	Investigate and eliminate the use of fax machines, with all partners committing to support a consistent approach	Digital 2020	open	30/09/18	
8.2	Subject to feedback from the pilot, roll out the new SystmOne EDSM (Enhanced Data Sharing Module) across the District.	Digital 2020	open	31/12/18	
8.3	Review current data sharing and information governance procedures across the heallth and care system with a view to developing an approach that addresses barriers and supports integration.	Digital 2020	open	31/03/19	
9. Medicines management when people have left hospital needs to be improved to reduce the time people have to wait for their medicines and to ensure that social care providers and people returning to their own homes have a clear understanding of the medicines they have been prescribed					
9.1	CQC observed low levels of self administration on wards – noted that this helps people to retain/ regain independence and should be promoted. Consider how to strengthen this	A&E Delivery Board	open	31/10/18	
9.2	Review medicines supply and usage along pathways including home, hospital and residential/ nursing care settings, applying best practice - including Red Bag scheme; ensuring people and their carers have a clear understanding	A&E Delivery Board	open	31/03/19	