

DTOC peer review key lines of enquiry – generic list

Strategy, Vision and Leadership

Is there a clear vision and common purpose, shared by system leaders which is underpinned by a credible strategy with strategic priorities shared across the system? Is there evidence of co-production with people who use services and those that care for them?

- Is there a clear vision and leadership with a strategy that is supported and understood across organisational boundaries and at different levels of the workforce?
 - Are there shared metrics which create a shared picture of performance, showing where improvements are needed? How do system leaders assure themselves that performance issues are being addressed?
 - Is there a shared understanding of the changes needed to achieve the vision/performance improvement? Is there alignment across delivery plans, such as for BCF, Joint Health and Wellbeing Strategy, A&E improvement or ICS/STP?
 - How effectively do leaders collaborate to plan and deliver services so that organisations and staff are encouraged to work together to meet the needs of their population?
 - Is there a culture of collaboration or blame?
 - How do system partners assure themselves that there is effective use of cost and quality information to identify priority areas and focus for improvement across the health and social care interface including delayed transfers of care?

Managing transfers of care

Do system leaders have a comprehensive understanding of how services are working together to support people through care pathways and reduce delayed transfers of care?

- How are system partners working together to minimise delays in discharge?
 - Do services have a comprehensive understanding of patient flow and delayed transfers of care?
 - Are standard operating processes and escalation plans developed and agreed across the local system?
 - Do services have effective processes in place to monitor people in hospital so that delays are minimised?
 - Is a home first philosophy evident throughout the system that promotes independence?
 - How effectively does the workforce collaborate and share information to ensure that people have their needs met by the right person in the right place at the right time?
- Do system partners have a comprehensive understanding of DToC performance?
 - What plans are in place to reduce DToC and improve patient flow?
 - How does the system assess itself against the implementation of the high impact change model for managing transfers of care? What metrics are used?

- Are plans based on evidence and best practice, such as the HICM or Safer Better Faster?
- Where high impact change mechanisms are assessed as being 'established', what plans are in place to reach 'mature' or 'exemplary'?
- How is the system monitoring and evaluating the impact of the high impact changes?
- How are system partners working together to support people in their usual place of residence and preventing people from accessing secondary care services unnecessarily?
 - Are people at risk of admission known to services? What support is in place to ensure they are supported in their usual place of residence and are supported to be as independent as possible?
 - When a person is in crisis what systems and processes are in place to ensure that they are only admitted to hospital or long-term care if this is the best place for their needs to be met?

Capacity to deliver joined up health and care

Is there sufficient capacity in the community to meet people's needs now and in the future?

- Is there a strategic, joined up approach to commissioning and delivery across health and care, informed by the identified needs of local people?
 - Is there a shared understanding of resource needs/gaps across primary, community and social care?
 - What joint commissioning, pooled budgets or new models of care are in planning or operation?
 - How is the continuing healthcare process (CHC) managed?
- How are commissioners engaging and working with the voluntary sector and independent providers to design and deliver services?
 - Is there strategic engagement with providers, including independent and voluntary sector providers to shape the health and care market?
 - Are independent and voluntary sector providers engaged with as system partners as well as providers?
 - Is the voluntary sector actively engaged?
- How are system partners working together to develop a workforce that can meet the needs of the local population now and in the future?
 - Is there a joint commissioning strategy?
 - Are existing workforce resources being used effectively to meet the needs of people who use health and care services so that they are seen by the right person in the right place at the right time?