

To: all registered providers (by email)

16 July 2020

Dear colleague

Provider Collaboration Reviews

I am writing to thank you for the great work you and your teams have done, and to update you on one specific aspect of our work aimed at supporting you over the next few months.

Our engagement with providers, systems, commissioners and the range of health and social care representatives recently has highlighted to us the great work that has been done to ensure people continue to receive the health and care services they need during the COVID-19 pandemic.

We have seen some fantastic examples of personal heroism, providers trying new things, and groups of providers coming together to deliver services in different ways. We recently [published examples](#) of some of this innovative practice adopted by providers during the pandemic.

Our Provider Collaboration Reviews (PCRs) will identify themes and learning that can be used to inform planning for the coming winter and any subsequent spikes of COVID-19. But more than that, they are intended to help providers and leaders of local health and care systems plan and work more effectively together as a matter of course.

Specifically, the aim of the PCRs is to:

- Support providers across systems by sharing learning around the key attributes of partnership efforts, resulting in improved experiences and outcomes for those who have used services during the pandemic.
- Share the learning of approaches underway to support preparation for re-establishing services.
- Share learning locally and nationally in advance of any subsequent spikes and winter 2020/21, to help drive improvement.

The programme is starting with a focus on health and social care services for the over-65 population, because the population group has been particularly impacted by COVID-19. The programme will include looking at their access to and experiences of urgent and emergency care services. Our ambition is to look at provider collaboration in all integrated care system (ICS) and sustainability and transformation partnership (STP) areas. The first phase, between July and August will involve 11 reviews.

There is the potential for future reviews focused on different population groups, to help us to look more closely at how people experience care across providers. This will also help us to explore how we could embed this way of working in future.

We don't intend to return to 'business as usual' and welcome the feedback we've had about the different approach we've taken during the pandemic. We've heard from our conversations with providers and their representative bodies that they want us to be looking at systems, and PCRs link to the work we are carrying out to develop how we regulate in the future. We'll be consulting on our new strategy that describes our thinking on the way ahead over the next few months.

We see the reviews as having clear benefits:

Locally

The learning we gather from across the country will help us identify common factors and approaches which helped some areas respond to the pandemic better than others. By gathering this learning, distilling it and sharing it we can support all sectors to prepare for winter and for potential future spikes of COVID-19.

Regionally

The findings will help local leaders understand the support and incentives that they need to provide to enable local health providers to flourish. It will also help determine how services can be supported to join up care for people using services.

Nationally

The reviews will inform how national organisations can provide the right conditions, support and guidance for local and regional leaders – identifying barriers to collaboration, removing them, and accelerating the adoption of what works well.

CQC

Encouraging improvement is core to CQC's purpose. This work will help us in our quest to improve how we deliver on our purpose and stimulate improvement not just in individual organisations but in the way services come together to provide high-quality care at the right place, at the right time.

Provider collaboration reviews also ensure CQC takes its next steps to review activity within and across systems, alongside our continued regulation of providers.

For people who use services

While our regulation of providers tells people about individual health and care services, most people experience care and treatment across a range of providers locally – from their local doctor, their local hospital and local care services. The findings from these reviews will show what is needed to make sure services work well together in the interests of the people who use them.

Review teams will feedback findings to areas following each review. This will include a meeting with named leaders to provide an overview of our findings, ensuring learning across the whole system and support for planning approaches. For any future reviews, we plan to evolve our approach based on the learning of each of these approaches and offer a quality oversight meeting. If areas involved in the first phase of PCRs would like to hold their own quality oversight meeting, we are supportive of this. Themes from the 11 initial reviews will

be reported in the September edition of CQC's COVID Insight report and in State of Care in October.

In summary, it has been fantastic to see examples of personal heroism, providers trying new things, and groups of providers coming together to deliver services in different ways – we see these reviews as being a constructive and practical contribution to support the momentum for improvement in those working in both health and social care who are ambitious for their patients, and those in their care.

Should you want to talk to us further then please contact providerengagement@cqc.org.uk

Your sincerely,

A handwritten signature in black ink, appearing to read "Ian Trenholm". The signature is written in a cursive style with a long, sweeping tail on the final letter.

Ian Trenholm
Chief Executive, Care Quality Commission