

Under its Sustainability and Transformation Plan (STP), Nottinghamshire has been successful in becoming one of six 'early adopters' of Integrated Personal Commissioning (IPC) nationally.

The IPC programme is a partnership between NHS England and the Local Government Association (LGA).

David Pearson and Vicky Bailey are the Executive Sponsors for Nottinghamshire





## How does IPC fit within health and care integration?

- Better Care Fund (BCF): Budgetary integration
- New Care Models Programme / Vanguards: Structural and service integration
- IPC and Personal Health Budgets:
  Integration around the individual



## Integrated Personal Commissioning (IPC) and Integrated Personal Commissioning (IPC) and Integrated Personal health budgets (PHBs)

IPC and PHBs are pillars of the NHS Five Year Forward View and key components of the emerging Self Care Programme. They empower people and communities to take an active role in their health and wellbeing with greater choice and control over the care they need.

Integrated Personal Commissioning	Integrated personal Commissioning (IPC) is redesigning the ways the system will work for people with complex needs in England. It includes an integrated approach to personal budgets for people with health and social care needs.	Both are an increasing priority:The NHS Mandate and Planning Guidance:Confirmed 50,000-100,000 people will haveenhanced choice through a PHB by 2020;CCG IAF: PHB metric included in the newassessment framework with quarterly reportingand benchmarking;Transforming Care service model is explicit thatPHBs should be available for people withlearning disabilitiesSustainability and Transformation Plans mustinclude expansion plans for IPC/PHB.
Personal Health Budgets	A personal health budget is an amount of money to support a person's identified health and wellbeing needs, planned and agreed between them, or their representative, and their local Clinical Commissioning Group	

IPC and PHBs are essential counterweights to whole population commissioning models:

- Because PACSs and MCPs will be responsible for all or most of the services in an area in future, there is a risk that individual patients' choices could be curtailed
- To counteract that possibility, PHBs and IPC will be far more important in the NHS by 2020 ensuring greater choice of how outcomes are met for people who need more bespoke care.

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#### Builds on personal health budgets and the success of personal budgets in social care

- Blends funding from health, social care and other services at individual level for people with complex needs, enabling them to direct how the combined resources are used for the first time.
- Requires a different approach to planning and commissioning community, social care and other services to deliver person-centred, coordinated care at scale for target populations..
- Explicitly harnesses community and VCSE sector capacity to support self-management

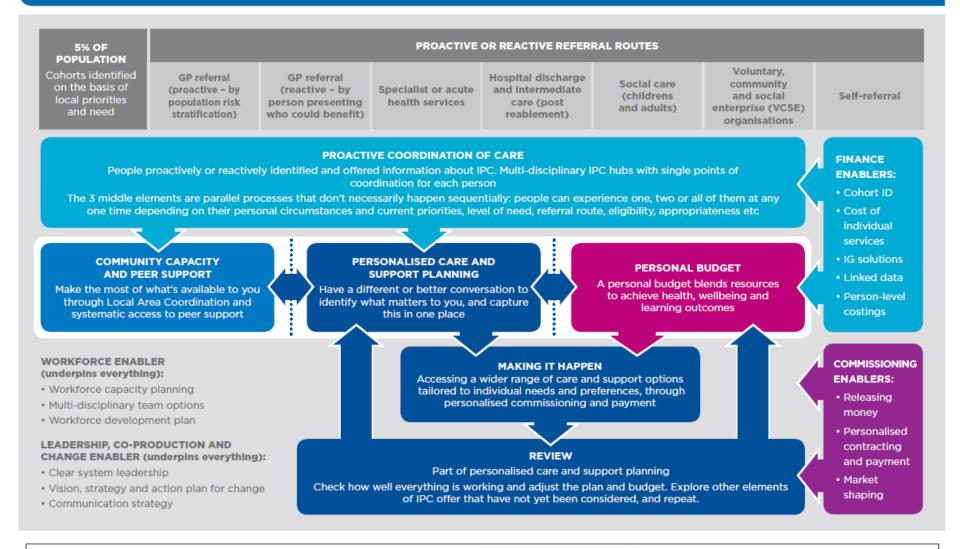
#### **Objectives**

- People with complex needs and their carers have **better quality of life** and can achieve the outcomes that are important to them and their families through greater involvement in their care, with support designed around their needs and circumstances.
- **Prevention of crises** in people's lives that lead to unplanned hospital and institutional care, by keeping them well, and supporting effective self-management
- Better integration and quality of care, including better user and family experience of care.

#### Target groups

- Children and young people with complex needs, including those eligible for education, health and care plans.
- People with multiple long-term conditions, particularly older people with frailty.
- **People with learning disabilities** with high support needs, including those who are in institutional settings (or at risk of being placed in these settings).
- People with significant mental health needs, such as those eligible for the Care Programme Approach or those who use high levels of unplanned care.

#### **Integrated Personal Commissioning Operating Model**



IPC key shifts (colour coded)

Proactive coordination of care Community capacity and peer support Personalised care and support planning

Choice and control

Personalised commissioning and payment

# Individual level experience of IPC

A different conversation with

the people involved in your care focussed on what's

important

to you

A community and peer focus to build your knowledge, confidence, and connections

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A proactive approach to improving your experience of care and preventing crises A shift in control over the resources available to you, your carers and family

> A wider range of care and support options tailored to your needs and preferences

### **Key features of IPC**

The key features describe what people can expect to happen when they are offered IPC.

#### A person should:

- Be able to access information and advice that is clear and timely and meets their individual information needs and preferences
- <u>Experience a coordinated approach that is</u> transparent and empowering
- Have access to a range of peer support options and community based resources to help build knowledge, skills and confidence to manage their health and wellbeing
- Be valued as an active participant in conversations and decisions about their health and well being
- Be central in developing their care plan and agree who is involved
- Be able to agree the health and well-being outcomes they want to achieve, in dialogue with the relevant health, education and social care professionals

#### If this leads to a personal budget, a person should:

- know upfront an indication of how much money they have available for healthcare and support
- the amount of money in the budget must be sufficient to meet the identified health, well-being and education needs and outcomes agreed in the care plan
- have the option to manage the money as a direct payment, a notional budget, a third party budget or a mix of these approaches and
- be able to spend the money to meet their outcomes in ways and at times that make sense to them, as agreed in their plan.