

Integrated health and social care

Nottinghamshire County Health and Wellbeing Board
7 September 2016



Dr Jeremy Griffiths GP Clinical Lead

Kamaljeet Pentreath Chair Patient Active Group

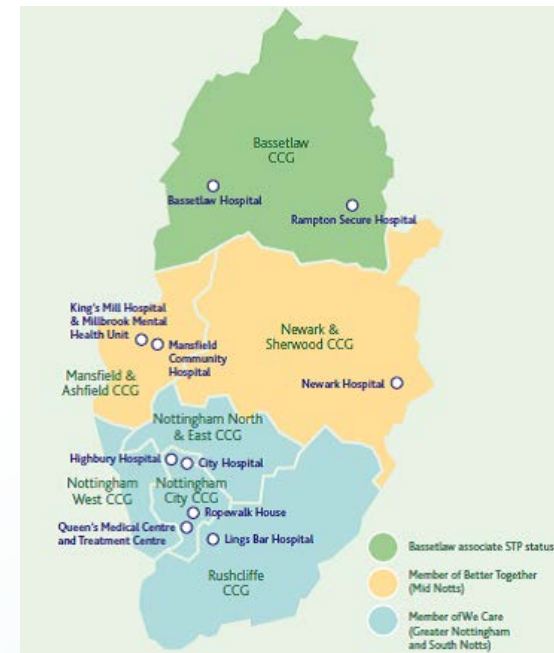
Suzanne Avington – Team Leader, Community rehab

Helen Griffiths, Deputy Chief Officer, NHS Rushcliffe CCG

Framing our context



- STPs designed to accelerate implementation of the *NHS Five Year Forward View*
- Rushcliffe are a Vanguard exemplary for the NHS Five Year Forward – rapid roll out across County
- STPs aim ‘close the gaps’ relating to:
 - health and wellbeing
 - care and quality
 - finance and efficiency



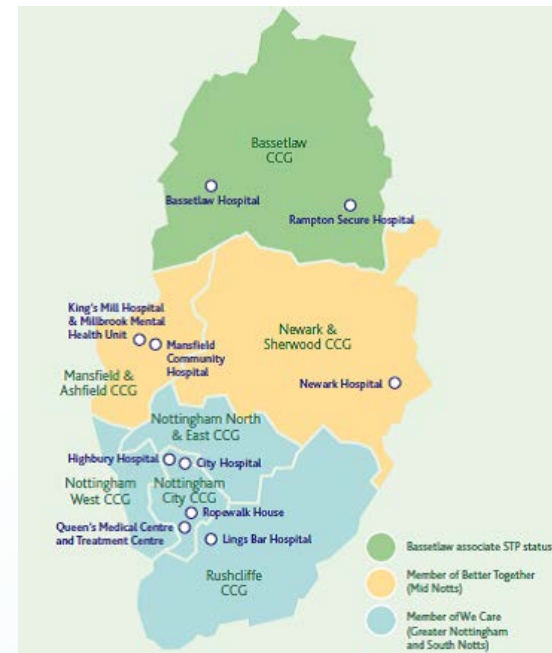




Framing our context

The challenges

- Demographics
- Financial gap
- Staff morale
- Early retirement
- Workforce
- Management of quality



Framing our context

Principia MCP Vanguard in Rushcliffe

- Move care closer to home
- Innovative pathways of care
- Enhanced services - integration of general practice, community services and third sector
- Reduce avoidable hospital admissions and long term placements





MCP Partners

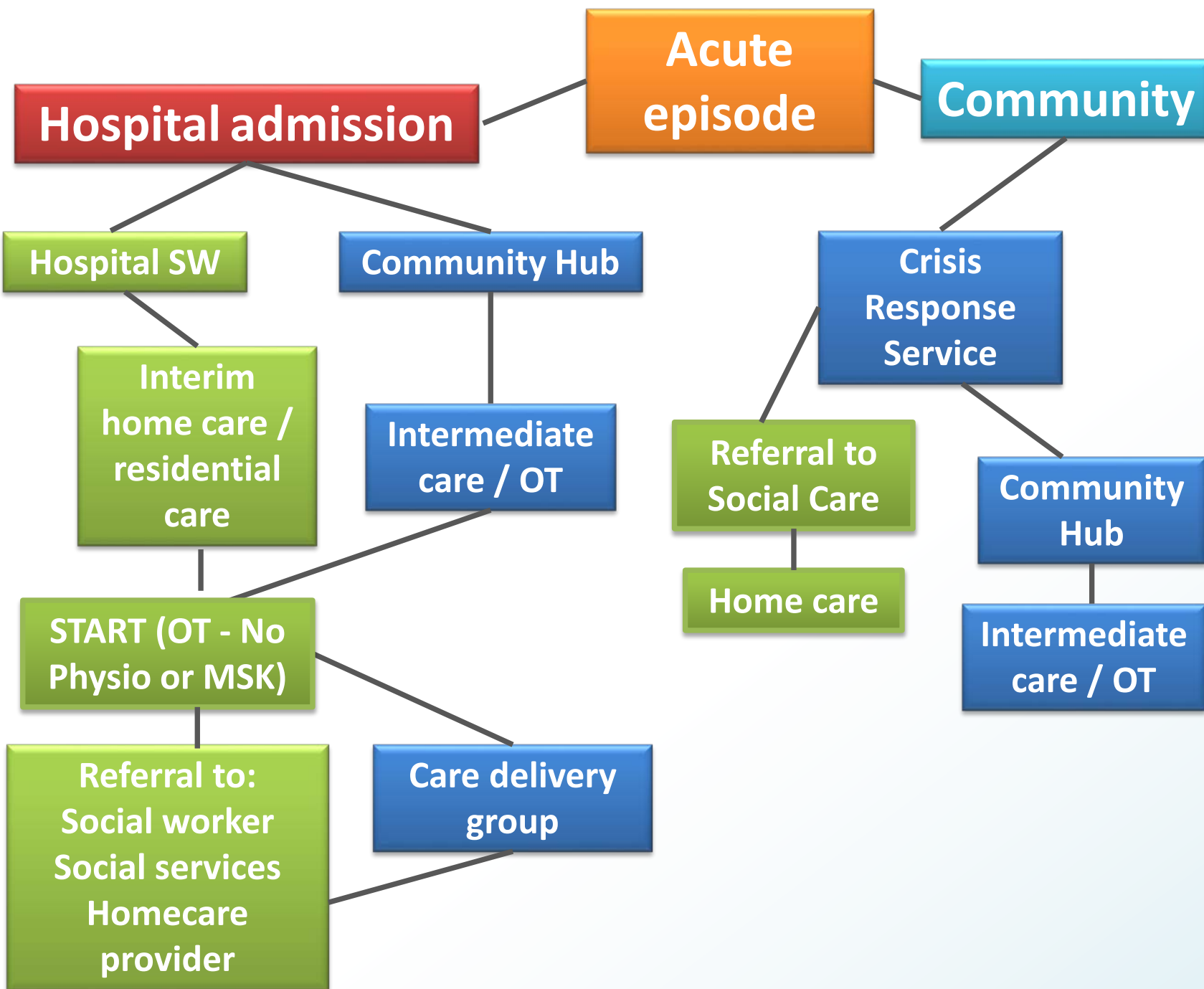
- *Patients and the public* – Residents of Rushcliffe
- *PartnersHealth* – GP Partnership of Partners
- *Nottingham University Hospitals* – Acute Provider
- *Circle Nottingham* – Outpatient / day case services
- *Nottinghamshire Healthcare* – Mental Health & Learning Disabilities Provider (acute and community)
- *Health Partnerships* – County Community Care
- *Nottingham CityCare* – City Community Care
- *Nottingham Emergency Medical Services* – GP Out of Hours
- *East Midlands Ambulance Service (EMAS)* – Ambulance / 999
- *Rushcliffe Borough Council* – Health Promotion
- *Nottinghamshire County Council* - Social Care & Public Health
- *Rushcliffe Community Voluntary Service (CVS), Carers Trust & Age UK* – Voluntary Sector Providers

Jack



- 85 year old, lives alone, no family who live locally
- Recently had increasing contact with GP
- Query if known to social care
- Reaches crisis point.....





What are we trying to improve?



- Services determined by capacity and **NOT** need
- Fragmentation between providers
- Communication and IT
- Monitoring the quality of care
- Protracted care
- Duplication
- Inefficiencies
- Care is **NOT** person centred

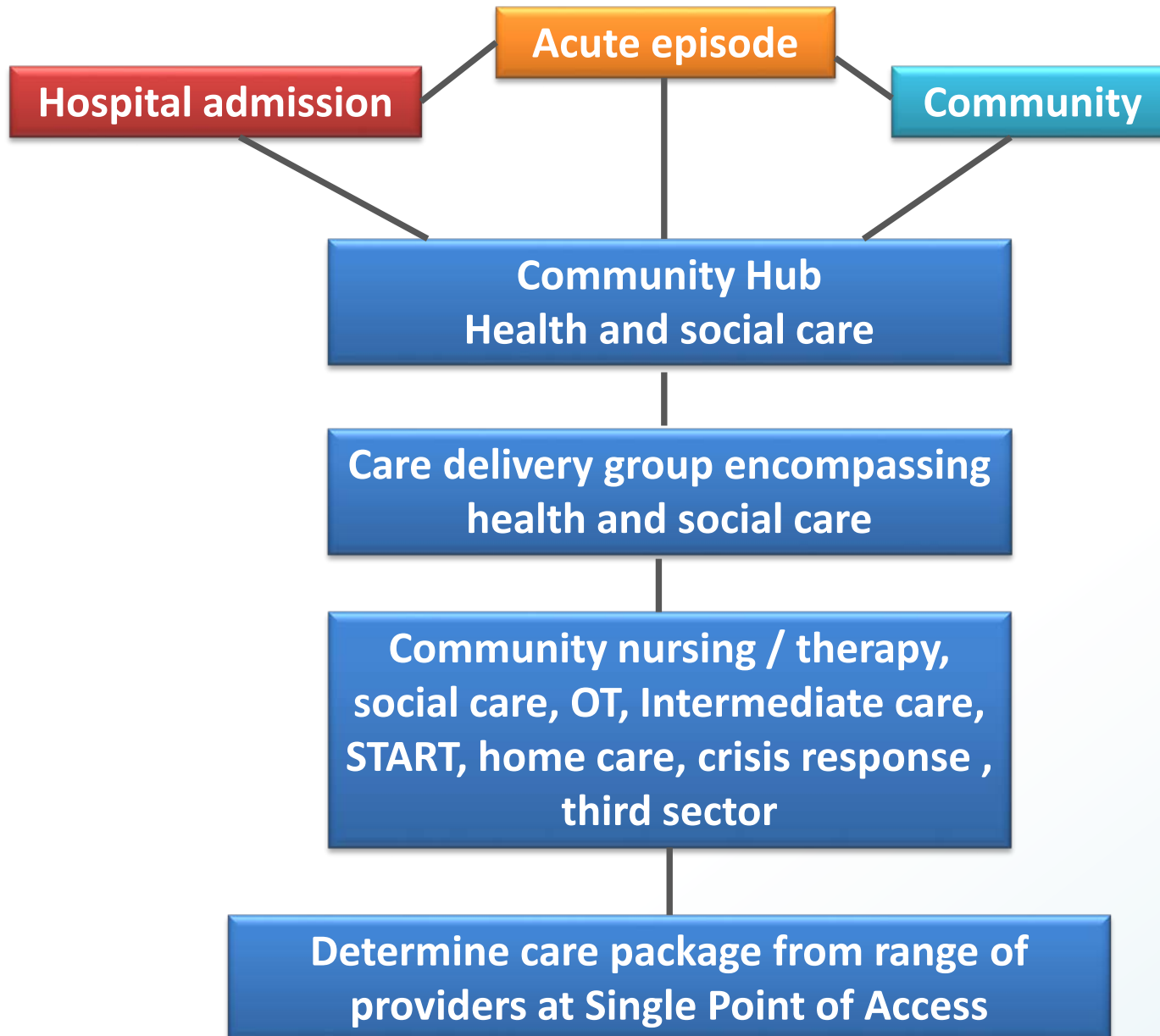


How do we need to deliver care in the future?

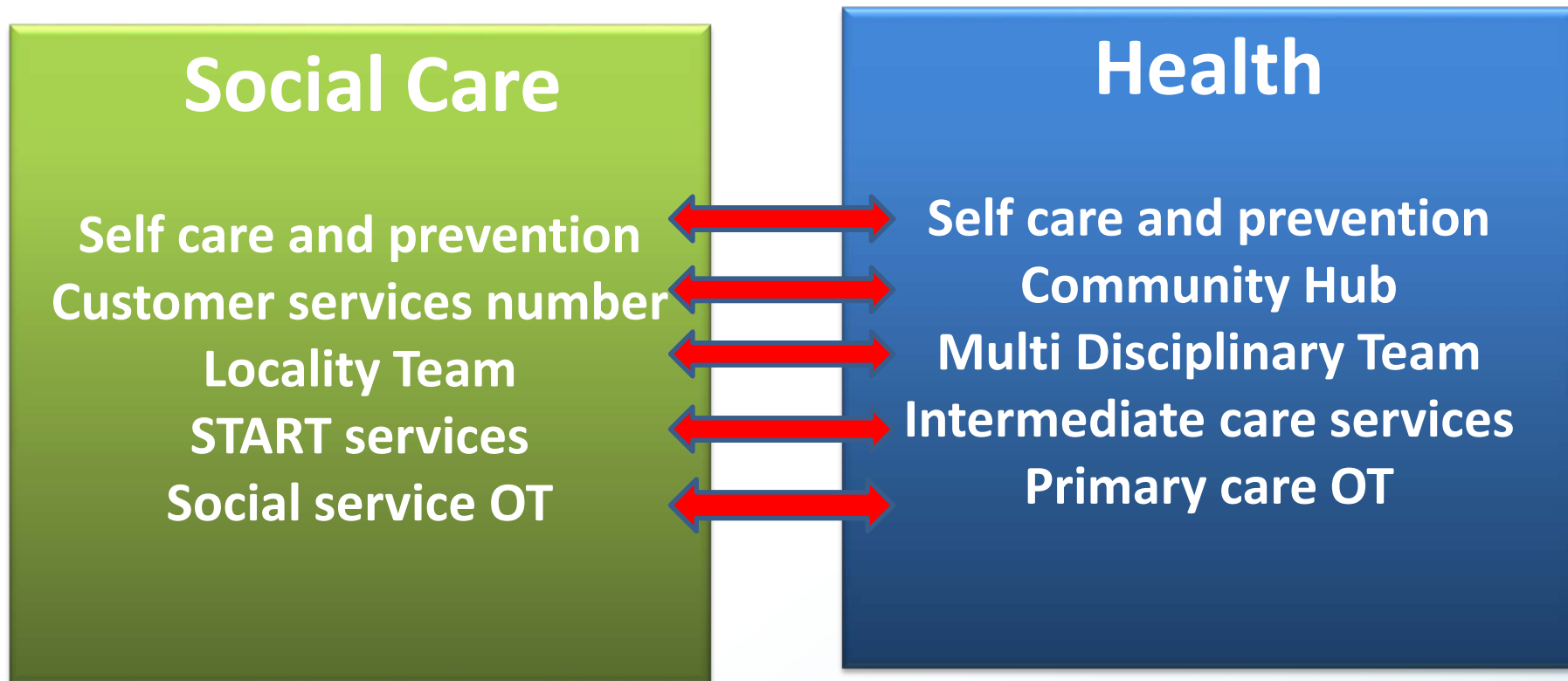


- One single point of access to services for South Notts
- One single assessment
- One pathway of care
- One patient record
- All providers working together for the same patient aims and outcomes





Examples of duplicate interfaces





Ambitiously... the ask...

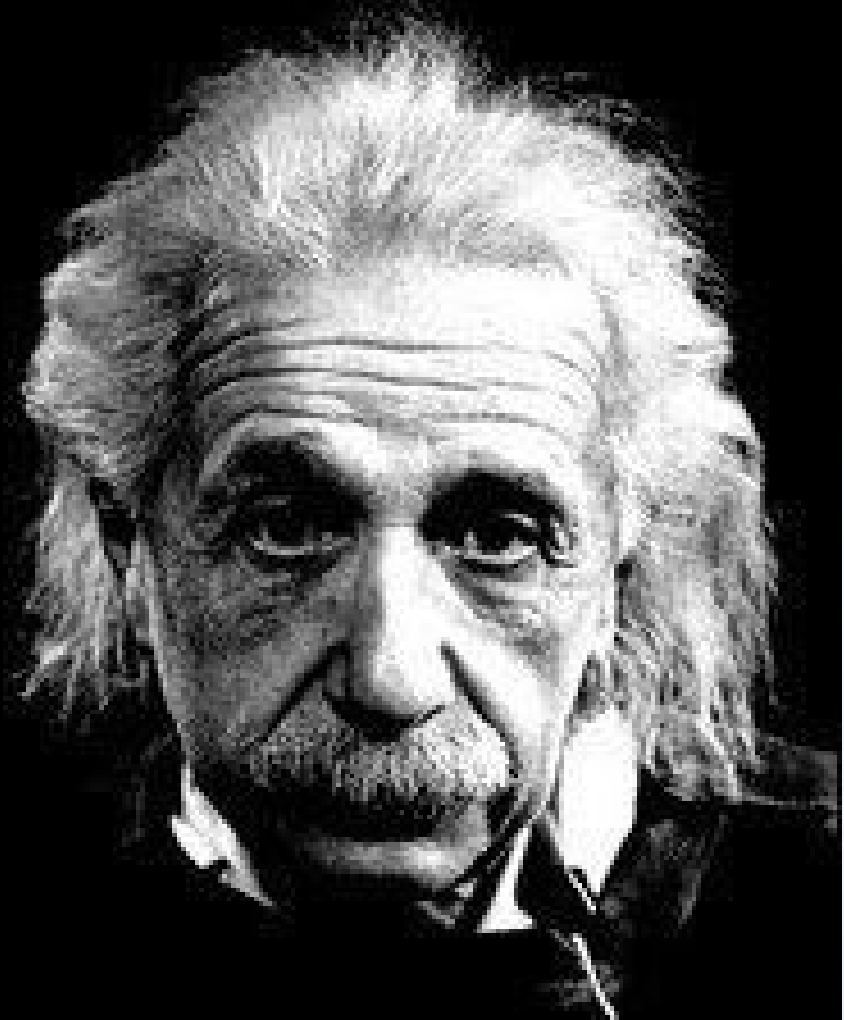


- Scope real opportunities between social care and health. September - December
- Work in shadow form in new model April 2017
- Dedicated support and resource from LA to support work programme from both an officer and councillor





"WE CANNOT
SOLVE OUR
PROBLEMS
WITH THE SAME
THINKING WE
USED WHEN WE
CREATED THEM"





Questions & Discussion

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