Integration of health and social care in Nottinghamshire

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The Current Picture

Better Care Fund, Integration Pioneers, Integrated Personal Commissioning, Vanguards

- Evolutionary approach
- Incentivising change
- Greatest focus on keeping older people out of hospital
- Money to integrate and to support social care
- Political and policy debate often seen through the NHS lens

Future Thinking

- From political parties
 - Common call for further integration
 - Increasing integration of budgets
 - Some local determination of the focus, organisational form
 - A hope that it will save money
- Debate about the right models quickly moves to organisational form

What does successful integration look like?



- Coalesce around a vision for the benefit of local people
- Be clear about outcomes and for whom
- Align funding, structures and levers
- Geography matters
- Co-producing change with local people
- National role to be clear about national performance, outcomes and incentives
- How do we ensure a balanced local offer in an integrated environment?
 - Advice and information
 - Supportive relationships and resilient communities
 - Prevention
 - Personalised approaches including personal budgets
- Other Care Act responsibilities

What's happening locally...

7 CCGs, including City CCG as part of the South, 3 major Acute Trusts, Mental Health Trust and 2 community providers

Differences:

- Three Units of planning, potential for 3 different models, each at different point of development
- Different size and scale of integration, and different range of services

Common themes:

- Locally integrated teams, grouped around GP practices
- Targeting people with high level needs who are at risk of hospital admission
- Focus on reducing unplanned hospital admissions, and improving discharge processes



Key issues for consideration

1 Maintaining our statutory responsibilities

- Ensuring we can continue to meet our statutory responsibilities including the new Care Act responsibilities:
 - Provision of information and advice, prevention and early intervention
 - Assessment, care planning, reviews including for carers, and for prisoners
 - Safeguarding, Deprivation of Liberty and Approved Mental Health functions
 - Strategic commissioning and policy-making functions
 - Market shaping and managing provider failure
 - Direct service provision

2 Performance

- Different outcomes frameworks the need to ensure social care outcomes continue to be delivered
- Maintaining the Council's high performance e.g. personalisation



Key issues continued...

3 Leadership

- Social care's role and value in the integrated health and social care model
- Ability to retain professional accountability for staff who may be managed by different organisations including the statutory role of the Director of Adult Social Services
- Overcoming different organisational and professional cultures

4 Workforce

- Determining who employs the staff: TUPE transfers; secondments; co-location; alignment? Each may mean different employer responsibilities
- Staff training, continuous professional development
- Different arrangements across the 3 planning areas

Key issues continued...

5 How the money works

- Ensuring clarity about financial responsibility and flows in joined up budgets
- Pooled budget or aligned?
- Direct Payments
- Redefining Your Council transformation programme and the need to deliver further savings and efficiencies

6 Governance arrangements

- Establishing robust and transparent process of governance
- Agreement on oversight of: types and levels of activity; quality; scrutiny; finances; risk sharing
- Democratic oversight and role of the Health and Wellbeing Board



Summary

- Given the national legislative and policy context there is clear momentum to integration, question is how and to what extent?
- What is important to the Council in any integrated arrangement?
- Which elements of social care would we place in any emerging integration model and how the Council should govern these
- What elements could be subject to different approaches across the county to meet local priorities
- The implications of three different models of integration emerging in the three planning areas