

Better care –making integrated care work for local people

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Integration and the Better Care Fund

- The Better Care Fund was announced by the Government in June 2013.
- Its purpose is to ensure a transformation in integrated health and social care.
- The Better Care Fund (BCF) is a single pooled budget to support health and social care services to work more closely together in local areas.
- The pooled fund will be used locally to provide integrated health and social care services.
- Joint plans have been developed and agreed by the Hampshire Health and Wellbeing Board and approved by the CCGs and Hampshire County Council.
- Plans must satisfy national conditions and performance measures.

Better Care Fund Aims

- Support and accelerate local integration of health and care services through joint commissioning & partnership working.
- Facilitate the provision of:
 - more joined up care for patients with complex needs through service transformation
 - increased care in the community
- Help address demographic pressures in adult social care.
- Realisation of improvements across health and social care and benefits including reduced demand on health services, improved outcomes for patients, increased efficiencies.

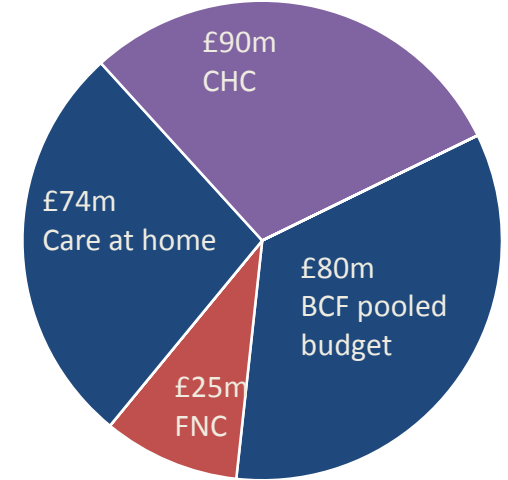
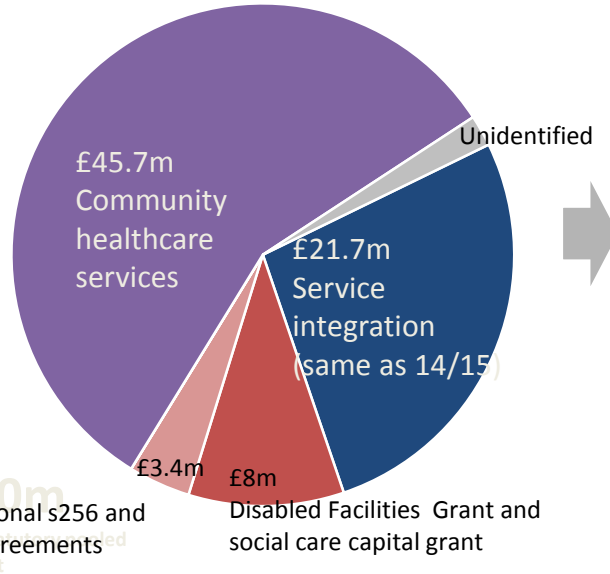
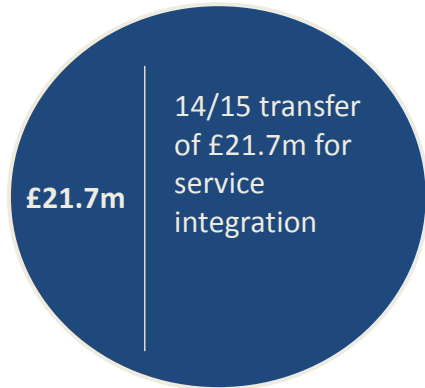
Funding the BCF in Hampshire

Source of funds

14/15 **BCF statutory** transfer of existing s256 -service integration from health to social care for the benefit of health

15/16 **BCF statutory requirement** of pooled budgets totaling £80m to be spent on delivering integrated care to realise efficiency savings

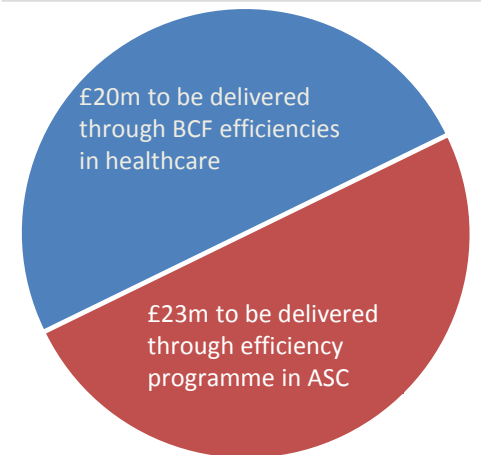
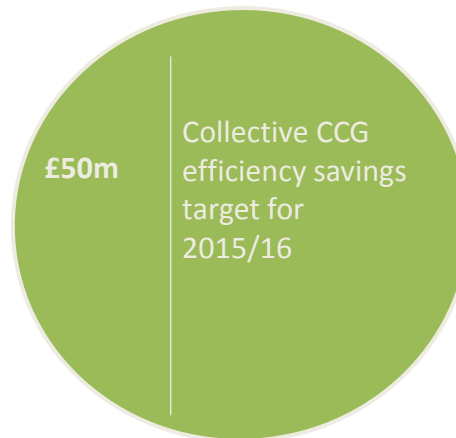
BCF 'Plus'15/16 total funding of c.£280m from ASC and CCGs on activities where health and care interface directly



System wide budgetary pressures & efficiency plans

Additional challenges to be mindful of -CCG QIPP efficiency plans and provider CIP plans

HCC ASC efficiency saving target for 15/16 is £43m



NHS Outcomes Framework

The NHS Outcomes Framework describes the five main categories of better outcomes required:

- Prevent people from dying prematurely, with an increase in life expectancy for all sections of society.
- Ensure that those people with long term conditions including those with mental illness get the best possible quality of life.
- Ensure patients are able to recover quickly and successfully from episodes of ill health or following an injury.
- Ensure patients have a great experience of all their care.
- Ensure that patients in our care are kept safe and protected from all avoidable harm.

Aligning with the Health and Wellbeing Strategy

- **Starting well** : work in partnership with health visitors, children's centres and the voluntary sector to improve breastfeeding support for new mothers in first few weeks.
- **Living well** : ensure people with long term conditions and their carers and care providers have up to date information that helps them manage their condition; relevant, up to date and comprehensive information that supports healthy lifestyle choices is available to all.
- **Ageing well** : integrated care teams are covering natural localities with a core team of health and social care professionals and a wider network of specialist services.
- **Healthier communities** : contribute to and influence the work of the Health and Wellbeing Board to address the wider issues around community health inequalities.

Integration and the wider partnership

- Managing a changing health and social care market including workforce.
- Working together to manage demand and expectations.
- Housing and adaptations.
- The vital role of the voluntary and community sector.
- Keeping people safe, close partnership working with HFRS and Hampshire constabulary.

Disabled Facilities Grant (DFG)

- Agreed in principle to keep current distribution of DFG funding in BCF in place of first year (from April 2015). Beyond that looking at options to ensure matched to need.
- Over 2000 adaptations carried out a year c.70% for shower alone 90% for shower plus something else.
- Objectives agreed so far for adaptations under BCF are:
 - Facilitating hospital discharge
 - Reduction in admission to residential care home
 - Reducing domiciliary care costs
 - General prevention – hospital admissions and improvements in wellbeing
- Working with districts to ensure more efficient use of OT, reduce duplication of work and unnecessary visits – working to establish a joint working protocol.
- Common reporting standards agreed across all districts with aim of focussing on start to finish process for client (i.e. referral to job completed).

What does success look like?

- Improved health, wellbeing and quality of life for people in Hampshire.
- Increased proportion of people with complex and long term health/social care needs receiving planned and co-ordinated care in, or close to, home.
- Right care delivered seamlessly in the right place at the right time.
- Increased proportion of people benefitting from evidence based prevention and early intervention.
- Avoiding unnecessary cost in the system, moving to lower cost solutions.
- Reduction in emergency admissions.
- Maximised effectiveness of service delivery, operating and commissioning model.
- Maximised use of the partners collective bargaining power to achieve financial savings from the market.

What impact will the BCF have on local communities?

Putting the right integrated services in place will mean we will need to change the capacity as there will be:

- A different range of services available in the community.
- Not all the people who currently need to go to hospital for care will need to be admitted.
- People with the most complex medical need will need to go to hospital and some specialised services will be concentrated in centres of excellence.
- Where people do need hospital care, they will have a shorter length of stay.
- Community services that reach into hospital settings to ensure smooth transfers of care.

Our integrated offer to local people

