Item No. 10.	Classification: Open	Date: 22 October 2013	Meeting Name: Health and Wellbeing Board
Report title:		Integration Focus – Priority 3: Improving the experience and outcomes of our most vulnerable residents and enabling them to live more independent lives	
Wards or groups affected:		All wards; over-65 population, those with long term conditions	
From:		Sarah McClinton, Director of Adult Services and Tamsin Hooton, Director of Service Redesign	

RECOMMENDATIONS

- 1. The board is requested to:
 - a) Note the progress to date in taking forward the local integration agenda, as set out in paragraphs 10-14.
 - b) Task the integration working party with creating a shared narrative for integrating services in Southwark as set out in paragraphs 10-14, and to report these back to the next meeting.
 - c) Agree the shared objectives and performance measures which underpin local development for integrating older people services, as set out in paragraphs 15-16.

EXECUTIVE SUMMARY

- 2. At the last Health and Wellbeing Board the Strategic Director for Children's and Adults' Services was asked to lead a working party to develop a shared local position on integration. This item sets out progress since the last board meeting, and proposed next steps to take forward this piece of work.
- 3. This paper looks at services for older people, and will be followed by subsequent papers over coming meetings on people with unhealthy lifestyles or ongoing health problems, and, lastly, vulnerable children, adults and families. These care groups have been chosen as those who will be most affected by any changes resulting from the integration of services, and whose outcomes could be most improved by the board's actions.

BACKGROUND INFORMATION

4. Integrated care is not new to Southwark. Partners can build upon the previous experience of a single management structure for health and social care. As a result, partners have learnt what works, and what needs to be done differently in order to deliver sustainable change for residents. Most importantly, partners understand that the changes must be driven by the experience and outcomes of users, rather than organisational and governance imperatives. It is also

recognised that all partners have significant budget pressures.

- 5. Nationally the integration agenda is being pushed forward, with the announcement of the Integrated Transformation Fund (ITF). This totals £3.8bn in 2015/16, with local areas required to develop joint plans in order to access funding. These plans must be approved by the health and wellbeing board by March 2014 and release of part of these funds will be contingent of performance achieved on a set of national and local indicators.
- 6. The Southwark vision for older people is one of promoting independence, choice and control, with more people staying at home for longer, receiving individualised support and help at home. The local authority and clinical commissioning group have been working with Lambeth counterparts and the three local foundation trusts which comprise Southwark and Lambeth Integrated Care (SLIC) programme. This work has focused initially on frail older people, with long term conditions as the next priority.
- 7. Improvements for older people services include developing GP older people registers, around 2,000 holistic health checks across both boroughs, and the implementation of the admissions avoidance programme. This has included significant activity in establishing a rapid response service, home ward nursing teams, geriatric hot clinics, and community multi-disciplinary teams. Dedicated projects are also planned on the priority areas of falls, infections, nutrition and dementia.
- 8. Southwark has strong local performance around developing personal budgets and preventing delayed discharges. Challenges remain, however, with work in progress to reduce the volume of A&E attendances, hospital admissions and permanent admissions to residential and nursing homes as well as to continue to improve quality of life and independence indicators and shift resources to preventative care through a local transformation programme which has pathway reform at its heart.
- 9. As set out in papers to the board in July, the SLIC sponsor board is embarking on a programme of work until the end of the year to develop a business case for expanding integrated care in line with the Lamb pioneer application's ambitions. This includes a much wider scope for service reconfiguration, covering long term conditions as well as children's specialist services. Although unsuccessful in its Lamb Pioneer expression of interest, SLIC won Department of Health funding to test 'year of care' capitated budget development work.

KEY ISSUES FOR CONSIDERATION

Next steps for local integration – developing a Southwark position

- 10. Southwark has established a working party on integration comprising of senior decision makers in the CCG, local authority and public health. This small executive reports regularly to a joint senior management team chaired by CCG chief officer and Strategic Director of Children's and Adults' Services.
- 11. The working party will be hosting a stakeholder workshop with senior, community and frontline representation from all key Southwark agencies on 6 November. The workshop will create a Southwark vision that will set the framework for local authority and CCG commissioning intentions that will shape integrated care and

inform ITF investment

- 12. The workshop will be tasked with creating a shared narrative for Southwark that:
 - Articulates in detail and with confidence what benefits an integrated health and social care organisation and/or pathway needs to bring to users, services and partner organisations
 - Tests what this means for service configuration or redesign proposals
 - Taking the ambition of 'right care at the right time and in the right place' as the starting point, describes how this could look like in terms of resources, outcomes, data, pathways and user voice
 - Results in shared plans to deliver savings across partner agencies
- 13. In parallel to the working group, the SLIC sponsor board is working towards the expansion of the local programme across Southwark and Lambeth in line with the ambitions expressed in the Lamb Pioneer application. In taking work forward, SLIC has established three working groups across commissioning, finance and developing an academic integrated care organisation.
- 14. The development of the Southwark position on integration across the board's partners will ensure that our engagement with SLIC, including our response to and our shaping of the emerging proposals will be grounded in a local vision. This vision for integration will prioritise measurable improvements in the health and well being of people in the borough.

Integration focus: shared integration objectives for older people

15. As the first focus on the groups most affected by the integration of services, the board is asked to agree shared objectives and performance management around older people's integration as set out below. These objectives are based on what evidence tells us we could do better in terms of outcomes and experience, some of which is summarised in the attached dashboard appendix.

Shared Objectives for integrated services for older people

- a) Fewer older people in Southwark attending A+E: Integrated care developments are prioritising developing an alternative urgent care pathway to avoid older people admissions to A+E. Locally the number of older people attending A+E is rising and some two-thirds of the over-65s admitted to A+E are for a single episode, and a third of elderly admissions last a day or less
- b) Older people in Southwark being able to access the right care, in the right time, in the right place: Services in the community that promote self management, and can be accessed earlier and equitably. This would enable GPs to support reduced levels of unnecessary admissions to specialist and urgent care, as well as to reduce the length of stay in hospital provision
- c) Older people in Southwark living more independent lives: More and more older people are accessing personal budgets and holistic care, and they have told us that they want more control over their daily life and the services they receive
- d) More Southwark residents staying home rather than going into residential and nursing care: Southwark and Lambeth currently hold second and third position in London for highest permanent admissions to residential and nursing care

- e) Commissioning for outcomes and creating a financially sustainable care system: Exploring different contracting arrangements to support integrated pathways, driven by outcomes and experience. In the context of rising demand, higher requirements of care and funding by national government and reduced resources across all partners, particularly significant budget cuts across the CCG and local authority
- 16. In addition, the board is asked to agree a small number of performance indicators which can form the basis for monitoring progress going forward:
 - a) Number of older people in Southwark attending A+E
 - b) Average lengths of stay in hospital
 - c) Number of people benefitting from homeward and Enhanced Rapid Response services, receiving holistic health assessments or care from community multidisciplinary teams
 - d) Proportion of older people feeling they have control over their daily life
 - e) Number of permanent admissions into residential and nursing care

Policy implications

17. The content of this report and the recommendations it proposes are consistent with all partner agencies' strategic planning ambitions, including the Council Plan, CCG operating plan and Joint Health and Wellbeing Strategy. The development of the programmes or work described above would also be consistent with national legislative developments, including the Care Bill, and funding initiatives. Any action stemming from the recommendations will need to consider these local and national requirements and will be brought back to the board as required.

Community and equalities impact statement

- 18. Local older people have told us they want better continuity of care, an opportunity to talk through concerns with someone focused on their whole needs, better coordinated care, and less time in hospital, and that they do not want to go into care homes. The recommendations in this report seek to support the achievement of these ambitions.
- 19. Any service reconfigurations which fall within the scope of the recommendations will undergo an impact assessment to ensure that decisions do not adversely affect any statutory groups with protected characteristics or sections of the community. This work will also build on the joint strategic needs assessment and consultation evidence. The conclusions on any such assessment will be used to challenge and finalise any agreed developments and delivery.

Legal implications

20. There are no legal implications contained within this report. Any actions or decisions flowing from it may have legal implications, and these would be presented to the board for consideration at the appropriate point.

Financial implications

21. There are no specific financial implications contained within this report. Any

actions or decisions flowing from it may have financial implications, and these would be presented to the board for consideration at the appropriate point.

REASONS FOR URGENCY

22. This paper's agreement is essential to supporting the local integration agenda. The ITF incentive (paragraph 5) and pace of developments in SLIC means that delay of item may potentially impact on delivery.

REASONS FOR LATENESS

23. Given the pace of developments in this area, the paper has needed to reflect changes and decisions taken in recent weeks. This has delayed its finalisation and sign off a few days over the committee deadlines.

BACKGROUND PAPERS

Background Papers	Held At	Contact
Health and Wellbeing Board agenda and minutes, July 2013		Everton Roberts 020 7525 7221

APPENDICES

No.	Title
Appendix 1	Dashboard – integration focus – pathway for older people

AUDIT TRAIL

Lead Officer	Sarah McClinton, Director of Adult Social Care, Children's and Adults' Services					
Report Author	Elaine Allegretti, Head of Strategy, Planning and Performance, Children's and Adult's Services					
Version	Final					
Dated	16 October 2013					
Key Decision?	No					
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER						
Officer Title		Comments Sought	Comments Included			
Director of Legal Services		No	No			
Strategic Director of Corporate Services		No	No			
Strategic Director of Adults' Services	of Children's and	Yes	Yes			
Date final report sent to Constitutional Team/Community Council/Scrutiny Team			16 October 2013			