



Integrated Care Pilot

Southwark Scrutiny Committee

Integrated Care and King's Health Partners

The pilot is a significant strategic objective for King's Health Partners and provides exciting opportunities for innovation, improvement and efficiency on a number of fronts.

The development of new approaches to integration reinforces KHP's commitment to the health and health outcomes of its local population in Lambeth and Southwark. At the same time and with sufficient investment KHP will be able to make a leading contribution to the national policy agenda on integrated care.

Good progress has been made though the challenges associated with integration are not to be underestimated. The process of changing well-established cultures, behaviours and ways of working across a system of the complexity of the one within which KHP operates will require ongoing focus and attention.

The Integrated Care Pilot in SE London will address a number of challenges, while aiming to improve outcomes and efficiency

CURRENT CONTEXT

- **Healthcare challenge** – aging population, increased incidence of LTCs
- **Fragmented care, complex pathways, duplication** – poor patient experience and a lack of shared knowledge about patients
- **Incentives** that encourage admission, discourage investment in services outside hospital
- **Financial challenge:** ~ £500m shortfall in SE London within 3-4 years

AIMS

- Better health outcomes
- Prevention, lower numbers of 'crises' requiring admission
- Pathways that are easier to navigate for patients
- Sustainable costs
- **Increased value**

The Pilot aims to improve the integration of care by focusing on clinical change and change to systems or supporting infrastructure

- Primary care (L&S)
- Social care (L&S)
- KHP:
 - Mental health (SLaM)
 - Community services
 - Acute trusts (KCH and GSTT)

Clinical priority:
Frail older people

Clinical priority:
Urgent care

Clinical priority:
Long term
conditions

Funding

Information systems

Governance

Workforce development

What do older people think? (Local interviews & reference group)

The pilot's aims are 'excellent' – but there is scepticism about whether it will happen

People don't want to go to hospital or into a care home

- Older people are concerned and sometimes frightened about being admitted to hospital as they feel vulnerable and are worried about cleanliness, infections and dignity (eg requests for bedpans)

They want better support when they're discharged from hospital

- Want more communication and support after discharge – a single named contact, better GP access, temporary social or nursing care at home

They want better access to specialist health advice and more time to talk

- They find it hard to get an appointment at the GP, and not enough time to talk about eg side-effects or concerns; want 6-monthly check-up on medicines, 6-monthly healthcheck
- Want to have access to an older person's specialist (specialist nurse or geriatrician). They like the older age-specific environments as the staff understand and sort out their problems

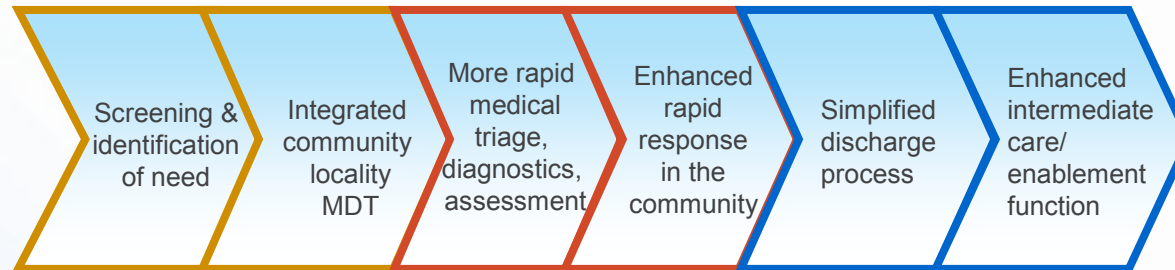
People want support for psychological, not just physical, wellbeing and to be helped to have an active, fulfilling life

They value continuity of care with the same professionals, people who know them (so they don't have to keep repeating themselves), and people they trust

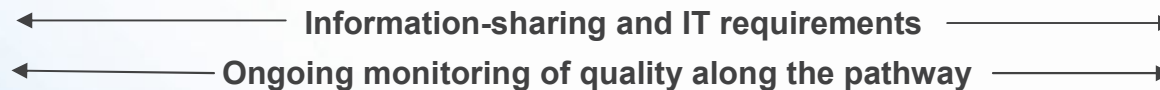
Older carers often don't know their entitlements, and need more support e.g. respite

The whole system design group for older people has prioritised *generic functions*...combined with an across-function focus on certain *conditions*

Generic functions to promote the health and independence of older people:



Supported by:



With a specific focus on preventing and managing:



What will be different for older people?

People will be able to stay in their own homes longer because they are helped to stay healthy and independent

They'll have support for psychological and physical wellbeing, health and social care which feels part of a whole package

They will be less likely to have to go to hospital in a crisis, and should be less likely to need to move to a care home

They will have someone who knows them and their various care needs well, to whom they can turn for support and advice

Professionals who support them will understand their whole needs, because professionals are supported by better IT that shares information across providers – so people won't have to keep repeating themselves

They'll get more support after a spell in hospital