

Better Care Fund – Integration Resources Summary

June 2017

A. Understanding Patient Data

More than two thirds of the population feel they do not know how health data is used in the NHS. We want to change that. Understanding Patient Data has been set up to support conversations with the public, patients and healthcare professionals about how health and care data is used, providing resources for people to find out more.

There needs to be a much more extensive dialogue with the public about how their information will be used, and the benefits of data sharing for their own care, for the health and social care system and for research.

For more information please visit <https://understandingpatientdata.org.uk/>

B. Ambulance Services under pressure

Nuffield Trust has published a short series of reports looking at the issues behind the pressure on the NHS in winter months. The latest issue of Winter Insight focuses on the ambulance service.

The report states there are three key issues the service needs to address: staffing, morale and management.

The full report can be found here: <https://www.nuffieldtrust.org.uk/files/2017-04/winter-pressures-ambulances-briefing-web-final.pdf>.

C. Working together with Ambulance Services to improve Public Health And Wellbeing

The Association of Ambulance Chief Executives (AACE) has recently announces the launch of a joint consensus statement. The full ACCE statement and joint statement can be found here: <http://ow.ly/N6ca30bF1uy>

D. New Equality Objectives to target inequality in Health and Social Care

CQC have published ambitious new equality objectives for 2017 - 19. Despite progress on equality, people from some equality groups are still less likely to receive good quality health and social care.

The new objectives for the next two years focus on the CQC's regulatory role in improving equality. Through inspections, it will check that providers make person-centred care work for everyone, from all equality groups – for example for lesbian, gay, bisexual and transgender people using adult social care or mental health inpatient services. It will look at how they are meeting the new Accessible Information Standard, which applies to disabled people who have information and communication needs, for example, deaf people or people with a learning disability. It will also ensure that we communicate with everyone who contacts it in a way that is accessible for them.

For more information please visit <http://ow.ly/cwmS30bF1xn>

E. Six steps to managing demand in Adult Social Care - A Performance Management Approach

A new report from the Institute of Public Care (IPC) at Oxford Brookes University highlights how taking a performance management approach can help Councils deliver outcomes and better manage demand in adult social care.

The paper, co-authored by Visiting Professor John Bolton and IPC Assistant Director Philip Provenzano, provides a model for measuring service delivery and identifies six critical steps for managing demand in social care, a range of strategic objectives as well as suggested performance indicators and targets. It builds on IPC's earlier work looking at how Councils deliver outcomes and manage demand, suggesting that improving performance management can assist in delivering change.

For further information please visit <http://ow.ly/DNMT30bLTfn>

F. Integrating Health and Social Care: Public Accounts Committee Report

For the report of the Committee of Public Accounts into integrating Health and Social Care, please visit <http://ow.ly/jHBW30bF1AQ>

G. Brexit and Health and Social Care - People & Process: Health Committee Report

The Health Committee's Eighth Report of Session 2016–17, Brexit and health and social care - People & Process is available via <http://ow.ly/chm030bF1Df>

H. Does the Primary Care Home make a difference? Understanding its impact

The primary care home (PCH) model was developed by National Association of Primary Care (NAPC) to help improve the delivery of care, health and wellbeing and the sustainability of NHS finances. 15 sites are currently trialling the PCH model and this report summarises progress so far in three of the rapid test sites. The evaluation finds that PCH could support the delivery of STPs and highlights improved staff retention, productivity and satisfaction.

To view the report please visit <http://ow.ly/X8Os30bLTGT>

I. Co-producing Technology: Harnessing Digital Solutions for Social Care

This paper explores ways in which people who use services are contributing to technological design and how the resulting digital solutions are changing the way social care and health and wellbeing services are being delivered. It builds on earlier

work, across the voluntary sector strategic partnership which focuses on how we benefits of technology are levered in a time of austerity.

To view the paper please visit <http://ow.ly/AoF930bF1FS>

J. National Standards, Local Risks: The geography of Local Authority funded Social Care, 2009–10 To 2015–16

This report examines the extent to which the level of LA social care spending per adult varied around England in 2015–16, and the extent to which these spending differences correlated with local demographic and socio-economic characteristics, and assesses local relative spending needs for adult social care as of the last official assessment in 2013–14.

It also considers how social care spending changed between 2009–10 and 2015–16: a six-year period during which LAs saw an average real-terms cut to their overall budget for local services of 20%. Previous work by Institute for Fiscal Studies (IFS) researchers (Luchinskaya, Simpson and Stoye, 2017) has already shown that at a national level, social care spending was relatively protected, falling by 6.4% in real terms (after accounting for financial transfers from the NHS to support social care services). However, big differences in cuts to overall service budgets in different LAs (Amin Smith et al., 2016), and the different choices made by LAs on how to allocate these cuts across service areas, mean that changes in spending on social care also vary significantly across England.

The report again examines the correlation between these changes in spending and local demographic and socio-economic characteristics.

To view the report please visit <https://www.ifs.org.uk/publications/9122>

K. LGC article: Regional variations in care home quality revealed

11 April, 2017

Research highlighting stark variations in the quality of care home provision across the country has revealed the north-west has the highest proportion of poorly performing services. A report by charity Independent Age found the region contained seven of the eight local authority areas in England with the highest share of homes rated inadequate or requires improvement by the Care Quality Commission.

Stockport MBC had the highest proportion at 62.9%, followed by Salford City Council, Tameside MBC, and Manchester City Council. Exactly half of Kensington & Chelsea RBC's homes were rated inadequate or requires improvement. Oldham MBC, Liverpool City Council, and Trafford MBC, followed by Hackney LBC and Bradford City Council made up the rest of the top ten. Overall a third of care homes in the north-west were found to be performing badly, followed by Yorkshire & the Humber (32.2%), the south-east (28.2%), and the north-east (25.6%). The highest proportions of care homes performing well were found in London, the East of England (20.8%) and the South West (21.1%). Three local authority areas – Council of the Isles of Scilly, Islington LBC, and Rutland CC – had no poorly performing care homes in their areas, while Richmond upon Thames LBC, and Thurrock Council had 2.3% and 2.9% respectively.

Independent Age director of policy Simon Bottery said the research showed central government and councils were not giving the problem of poorly performing care homes “the attention it deserves”. He said: “The government has an opportunity to address this in its upcoming green paper on social care but, in the meantime, councils must demonstrate that they understand the reasons for care home failures and are working to resolve them.” Responding to the report Linda Thomas (Lab), vice chair of the Local Government Association’s community wellbeing board, said the findings were a “concern and something councils take very seriously”. She said: “This report looks at all care homes, and although councils commission a significant proportion of places in care homes, nationally more than 40 per cent of places in care homes are purchased by individuals not councils, and not all care homes have contracts with councils.

“The fees councils pay, the contracts they manage and the support offered all contribute to performance levels. But crucially, it is the way in which services are run by providers that is the most critical factor in ensuring a high quality of care.” Cllr Thomas added that the report highlighted the need for an urgent review of social care funding. Margaret Willcox, president elect of the Association of Directors of Adult Social Services, said 71% of social care services were rated as good, but highlighted the [CQC’s warning that the sustainability of the care market was approaching a tipping point](#). She said: “Reductions in funding, increased demand by people living longer and with more complex needs, and the cost of the national living wage, while welcome, are putting significant pressures on councils and providers who are finding it hard to recruit and retain staff, especially in home care in those areas of high employment.”

L. Westminster Health Forum keynote seminar: priorities for older people’s care and managing frailty: funding, standards and integrating services

This seminar takes place on the morning of Friday, 14th July 2017 in Central London.

Areas for discussion include:

- The challenges - latest thinking on policy options for looking after the ageing population;
- Financial considerations - including value for money;
- Service delivery - workforce development, mental health and reducing delayed transfers of care;
- Care homes vanguards - the impact of enhanced health care provision;
- Third and independent sectors - further opportunities for integration;
- Regulatory priorities in older people’s care; and
- Quality - priorities and next steps for improvement.

A regularly updated version of the draft agenda is available to download via <http://ow.ly/tMVG30bF1K0>.

To book places, please use our online booking form at <http://ow.ly/xLOv30bF1WD>

M. Useful Links

How to... understand and measure impact: <http://ow.ly/mG9X30bFaVW>

Integrated care and support Pioneers: Indicators for measuring the quality of integrated care:

<http://www.piru.ac.uk/assets/files/IC%20and%20support%20Pioneers-Indicators.pdf>

Peter F. Drucker: Men, ideas and politics:

<https://www.amazon.co.uk/Men-Ideas-Politics-Drucker-Library/dp/1422131602>

International Consortium for Health Outcome Measurement: <http://www.ichom.org/>

North West London: Whole Systems Integrated Care: <http://ow.ly/Q9V630bFb55>

LGA: How do you know if STPs are making a positive impact?:

<http://ow.ly/EnFM30bFb8j>
