North Yorkshire County Councils Scrutiny of Health Committee

Care and Independence and Overview Scrutiny Committee

HEALTH AND SOCIAL CARE INTEGRATION

PROPOSED JOINT TASK GROUP: OUTLINE

Inquiry Topic

A national policy objective over many years has been the integration of health, social care and related services. Whilst there is a general acceptance at a national and local level that the integration of services is a good thing which will lead to improvements in service delivery, many aspects of what integration means remain unclear, often with little detail about what should be integrated and why.

Background

Integration is often categorised in three broad ways:

- 1. Patient level for example joint assessments
- 2. Service level bringing services together in one place single or for single people with one condition eg diabetes
- 3. Organisational level pool budgets, commissioning of services

The primary focus of this review is upon integrating services and enhancing service delivery, rather than integrating structures and organisations.

Objective

The successful integration of health and social care, according to the Kings fund, offers three potential benefits

- 1. better outcomes for people, eg, living independently at home with maximum choice and control
- 2. more efficient use of existing resources by avoiding duplication and ensuring people receive the right care, in the right place, at the right time
- 3. Improved access to, experience of, and satisfaction with, health and social care services.

In this context, the review will seek to:

- Understand what services are being delivered, what is planned, and what the impact of these services has or will be upon patient/service user outcomes.
- Establish whether the potential benefits are being realised in the integrated services are currently delivered.
- Assess whether the current approaches to integrated health and social care services being developed, trailed and implemented are the most appropriate

Methodology

The approach taken is a joint task group involving both the Scrutiny of Health Committee and the Care and Independence Overview and Scrutiny Committee. It will be supported by Ray Busby and Daniel Harry.

The King's Fund (2011) 'Integrating health and social care - where next?' identified a number of factors that are helpful to integration and which my hinder integration, as summarised below:

Helpful factors

Friendly relationships

Leadership

Commitment from the top

Joint strategy
Joint vision
Co-terminosity
Additional funding
Patient and user focus
Frontline staff commitment
Joint commissioning

Central guidance
Joint appointments

History of success.

Hindering factors

Performance regimes Financial pressures

Organisational complexity

Changing leadership Financial complexity

Culture

Commissioning National policies Local history

Data and information technology

Planning Workforce

Some of all of these factors may provide a helpful framework for the scrutiny.

The approach taken to include:

- Desktop research into national guidance, policy and best practice
- Written reports and presentations
- Call for evidence Consultation with stakeholders, carers and patients asked to provide written evidence (see end of paper below)
- A published report on the written evidence received ie Who responded, Response rates, from whom etc Assessment of success of process, What they said, Main themes raised, Concerns, weaknesses, strengths etc, Ways forward, Selection of (key) findings
- A select committee of one session, running from 10am to 3.30pm, during which members will hear evidence and then form conclusions and recommendations.

Output

Members will reach a view and agree any recommendations and publish a report. As a minimum the completed report will have:

- an explanation of the matter reviewed or scrutinised;
- a summary of the evidence considered
- a list of participants involved in the review or scrutiny; and
- recommendations on the matter reviewed or scrutinised
 Set out a process by which those subject to recommendations can respond formally and appropriately

A POSSIBLE call for Evidence

Will include some the above by way of background and explanation but wil be centred on key questions/the basis of the call for evidence)

This review is seeking evidence on the following questions in particular

- What is the level of ambition for the integration of health, mental health and social care services in North Yorkshire?
- What services are likely to be included?
- What are the benefits to services users and patients?
- What are the system wide financial benefits?
- What barriers to integration have been identified and how is it proposed to deal with them
- What are the risks and how will these be mitigated?
- Is there a preferred model for or approach to integration locally?
- · Will there be variations in approaches across services and geographies?
- Is greater collaboration and coordination of service planning and delivery quicker, easier and more flexible?
- How do we know what good looks like, how have we measured progress towards integration achieved thus far, and what conclusions have been drawn from that
- What are the steps we now need to take

Submissions may not need to address all questions - adapted questions to make them relevant to whatever categories of stakeholders are identified. Broadly:

- 1. Questions for service users
- 2. Questions for service providers
- 3. Questions for Commissioners
- 4. Questions for Voluntary and community sector representative groups

How people can submit a response

Call for evidence form to be in various formats eg (Some might need to write a submission (online?), some just a simple online questionnaire). Email.

Oral Evidence

If task group intend to do this at some point, allow people to say whether they are willing to attend for this session