

Health and Social Care Integration

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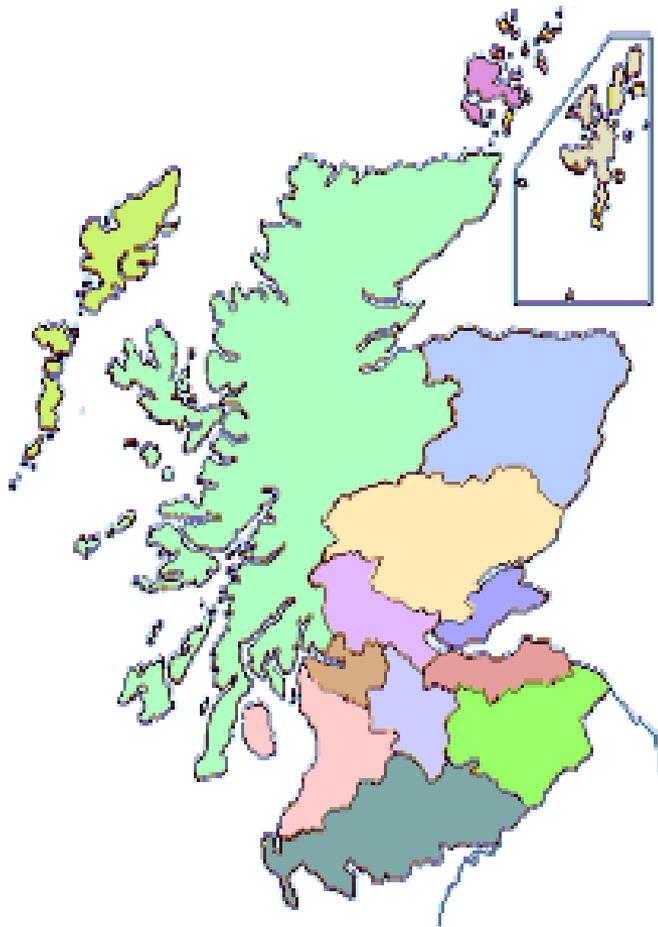
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Vision

- People are supported to live well at home or in the community for as much time as they can
- They have a positive experience of health and social care when they need it

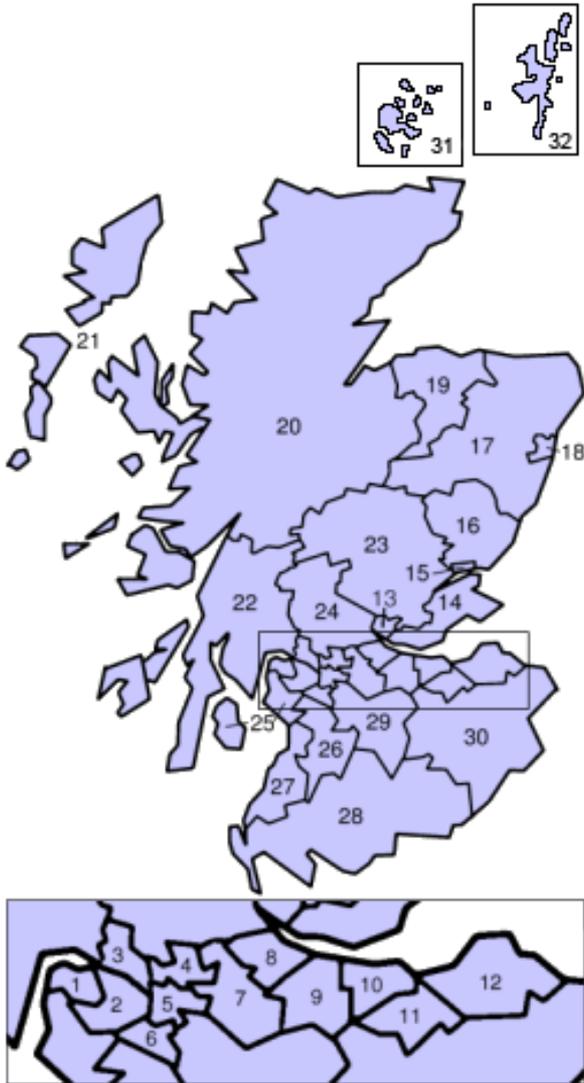


Health Boards - Scotland



- NHS Ayrshire and Arran
- NHS Borders
- NHS Dumfries and Galloway
- NHS Fife
- NHS Forth Valley
- NHS Grampian
- NHS Greater Glasgow and Clyde
- NHS Highland
- NHS Lothian
- NHS Lanarkshire
- NHS Orkney
- NHS Shetland
- NHS Tayside
- NHS Western Isles

Local Authorities - Scotland



- | | |
|------------------------|---------------------------|
| 1. Inverclyde | 17. Aberdeenshire |
| 2. Renfrewshire | 18. Aberdeen |
| 3. West Dunbartonshire | 19. Moray |
| 4. East Dunbartonshire | 20. Highland |
| 5. Glasgow | 21. Western Isles |
| 6. East Renfrewshire | 22. Argyll and Bute |
| 7. North Lanarkshire | 23. Perth and Kinross |
| 8. Falkirk | 24. Stirling |
| 9. West Lothian | 25. North Ayrshire |
| 10. Edinburgh | 26. East Ayrshire |
| 11. Midlothian | 27. South Ayrshire |
| 12. East Lothian | 28. Dumfries and Galloway |
| 13. Clackmannanshire | 29. South Lanarkshire |
| 14. Fife | 30. Scottish Borders |
| 15. Dundee | 31. Orkney |
| 16. Angus | 32. Shetland |



Challenge

Higher public expectations of the health and care system as more people live longer and into very old age, with an increasing prevalence of illness, particularly chronic conditions, supported by new medicines and technologies, which together with inflation make healthcare less financially sustainable each year.

And not just a sustainability challenge, a quality challenge.



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The nature and scale of the challenges facing our NHS - in particular the challenge of an ageing population - mean that additional money alone will not equip it properly for the future.

To be blunt, if all we do is fund our NHS to deliver more of the same, it will not cope with the pressures it faces.

To really protect our NHS, we need to do more than just give it extra money - we need to use that money to deliver fundamental reform and change the way our NHS delivers care.

John Swinney, DFM
Budget Speech, 12/15



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We know the problems and we have solutions

problem = unsustainable, unaffordable model of care, delivering an unsatisfactory quality of care

solution = need more activity in the community, less in hospital

- for unscheduled care that means preventing admissions by managing chronic conditions better in the community
- for elective and specialist it means reworking clinical pathways to improve quality and efficiency
- across the system it means action to reduce demand, including through effective health improvement activity



But having the solution is not enough to produce change

- consensus on the need for change
- financial unsustainability of the current model
- dissatisfaction with quality, particularly access

all = not enough

plans, strategies also = not enough

we need a new approach



Building blocks for integration

1) A guiding principle:

“ . . . effective services must be designed with and for people and communities – not delivered ‘top down’ for administrative convenience”

The Christie Commission Report

Commission on the future delivery of public services, June 2011

2) A single commissioner and budget for health and social care

3) Legislation:

- The Public Bodies (Joint Working) (Scotland) Act 2014



Key ingredients

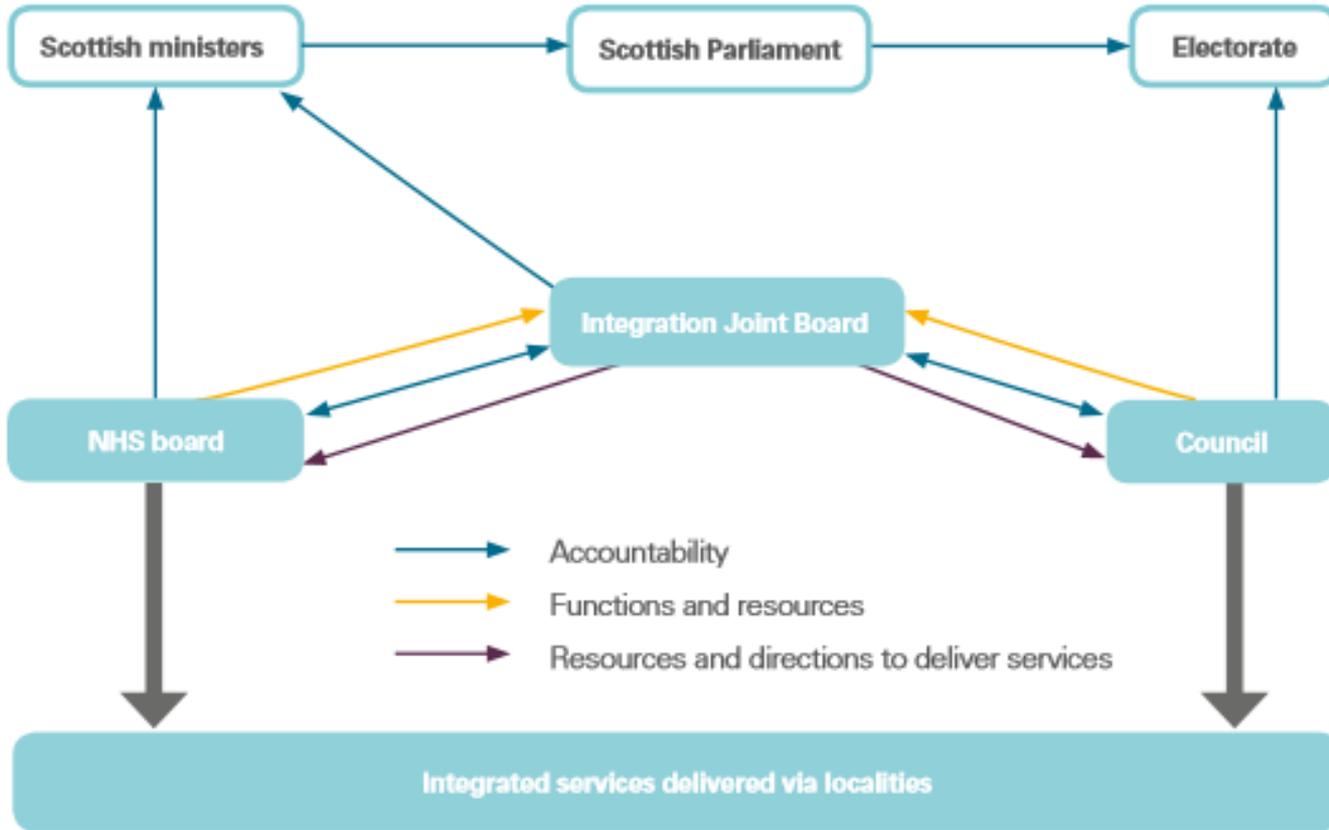
- Nationally agreed outcomes, supported by indicators
- Primary, community and social care together with those aspects of hospital care linked to unplanned admissions
- New accountable boards that plan and commission services, with a focus on localities
- Single budget for health and care
- Operational integration of services

Public Bodies (Joint Working) (Scotland) Act 2014

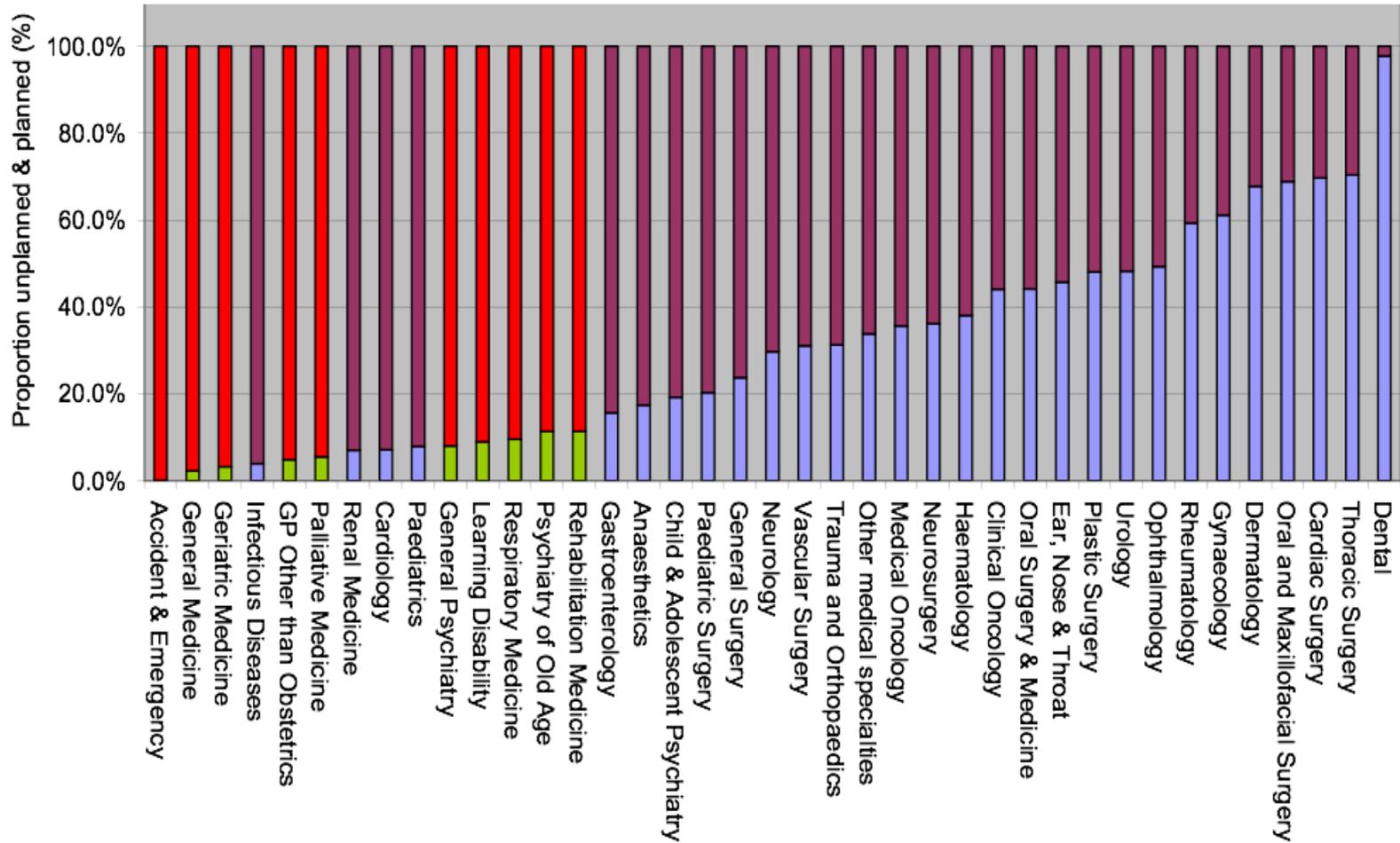


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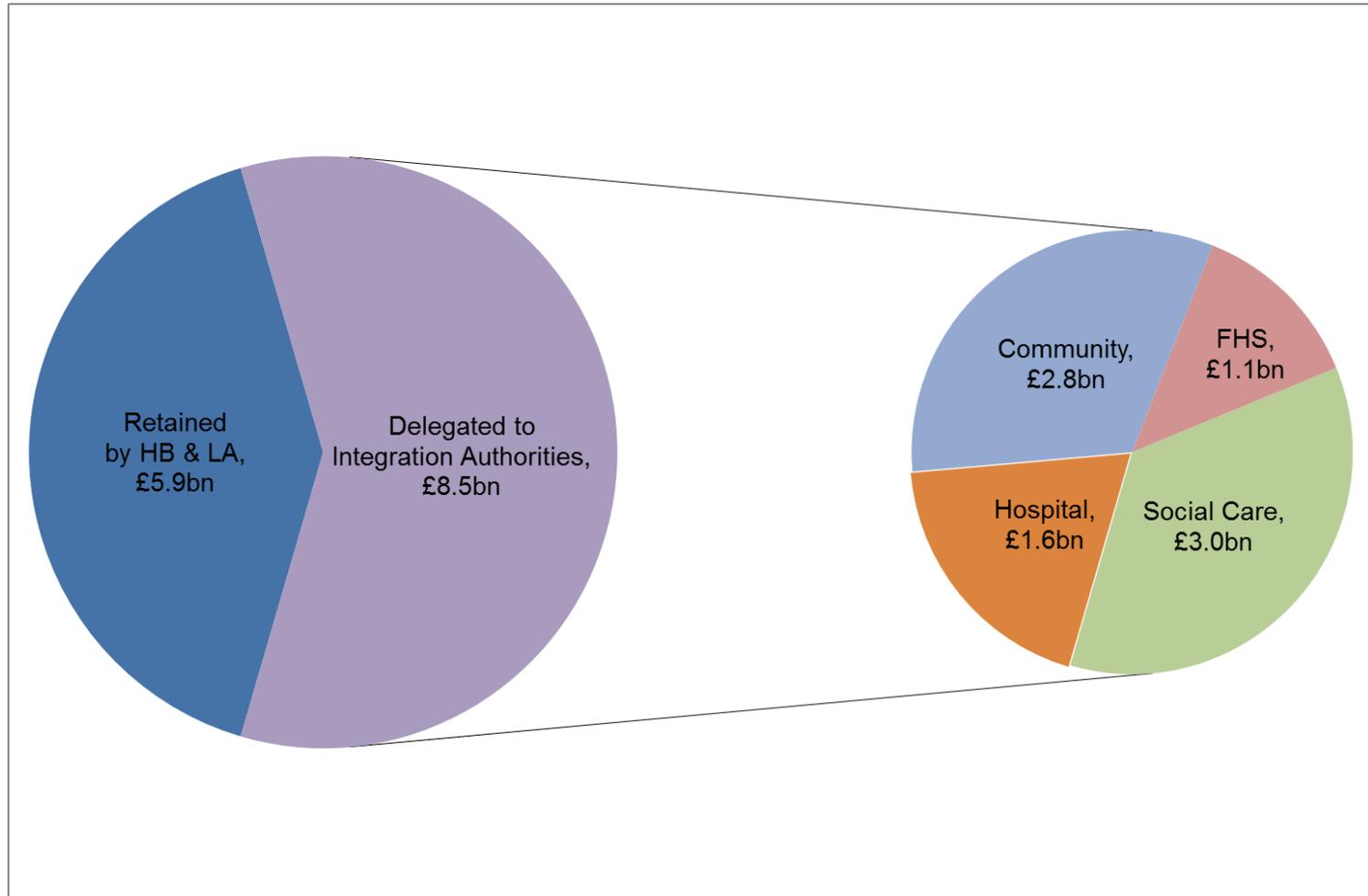
Body corporate or Integration Joint Board model



Unscheduled inpatient specialties



2017/18 Delegated Budgets



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It's about the outcomes, but people often want to talk about the process...

It's about behaviours...

Everyone wants change, but it's easier when other people have to do it...

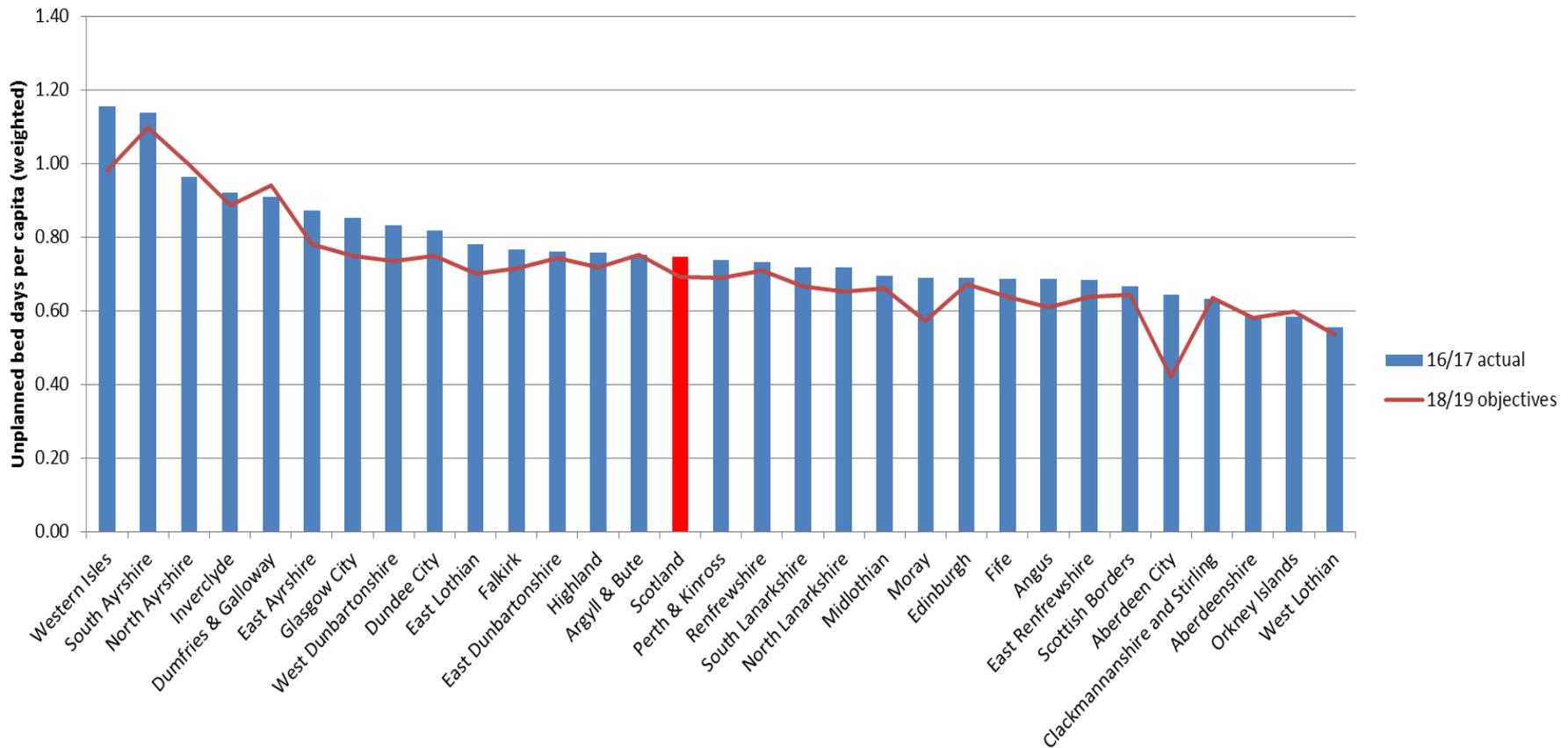
There are some really hard-edged challenges where it has to work quickly, but change takes time...

It's iterative, we are making large and small gains all the time...

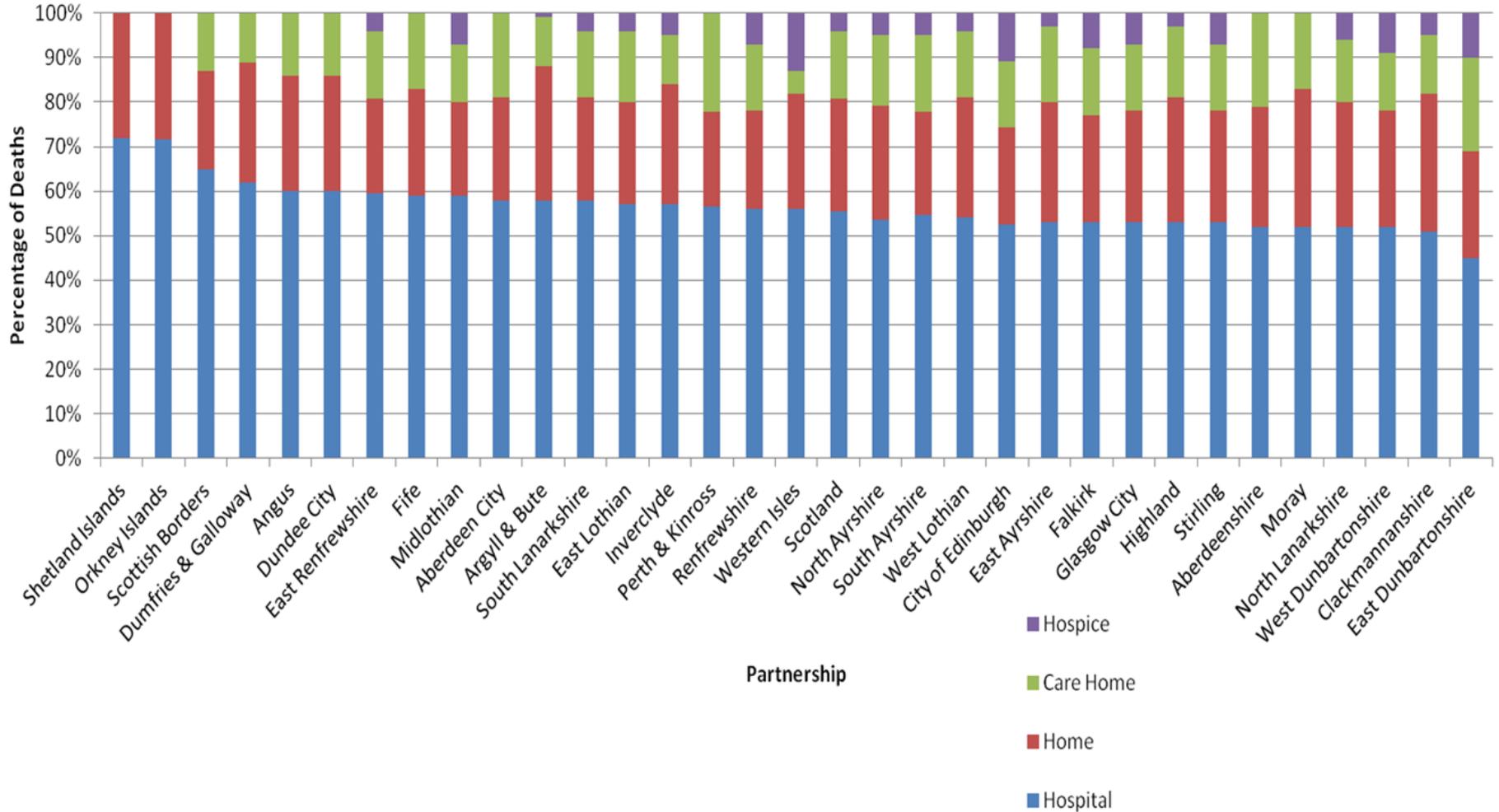


Unscheduled occupied bed days Variation

Unplanned bed day rates, acute specialties, all ages, Scotland;
16/17 actual and 18/19 objectives



Location of Death by Partnership during 2015/16



High Resource Individuals

