

From: Paul Carter, Leader and Cabinet Member for Health Reform
To: Health Reform and Public Health Cabinet Committee, 15
January 2019
Subject: **Update on Local Care**
Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: An outline of the implementation of Local Care within the Kent and Medway Sustainability and Transformation Partnership - this paper outlines the key areas in development and those enablers required to deliver Local Care at pace.

Recommendation:

The Health Reform and Public Health Cabinet Committee is asked to consider and endorse the progress and direction within Local Care.

1. Introduction

- 1.1 Central to the delivery of integrated care under the Kent and Medway Sustainability and Transformation Partnership [STP] is Local Care, community-based services made up of multi-disciplinary teams [MDTs] built around GP led primary care networks, that keep people safe and well in their own homes and avoid admission to hospital.
- 1.2 Each locality area across Kent is supported by a Local Care Implementation Board, focused on delivering an ambitious plan, supported by significant investment in key areas, totalling c.£32million of NHS investment across Kent and Medway.

This paper outlines the key areas in development and those enablers required to deliver Local Care at pace.

2. Financial Implications

- 2.1 The NHS investment has been identified for Local Care in 2018/19, with clear timelines for identifying the key deliverables in 2019/20 and beyond.

3. Policy Framework

- 3.1 The Kent and Medway Sustainability and Transformation Partnership outlines the vision “Quality of Life, Quality of Care” with an intention the Kent and Medway health and care system will deliver an integrated health and social care model that focuses on delivering high quality, outcome focused, person centred, coordinated care that is easy to access and enables people to stay well and live independently and for as long as possible in their home setting.

3.3 The NHS 10 Year Plan and the forthcoming Green Paper on Older people will both focus on better integration of health and social care, so that care is seamless when patients are moved between systems.

4. Local Care

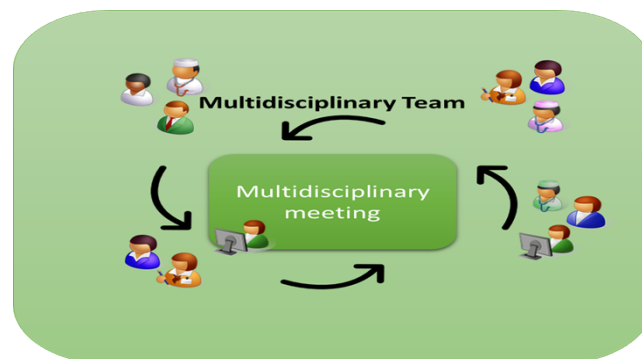
MDTs

4.1 Central to the delivery of Local Care is the implementation of MDTs working together around a GP. These are teams made up of community nurses, social care, specialists like physio-therapy or pharmacists and care navigators with links into the voluntary and community sector. They are based on a 30-50k population footprint and centred around what are now called primary care networks.

There are currently 109 social care practitioners who attend Local Care Multi-Disciplinary Team Meetings (MDMs) across the nine localities, these practitioners are the voice of social care at these meetings and co-ordinate social care and support from the Council's specialist services as required.

The vision is for all services to be part of these Local Care Multi-Disciplinary Teams.

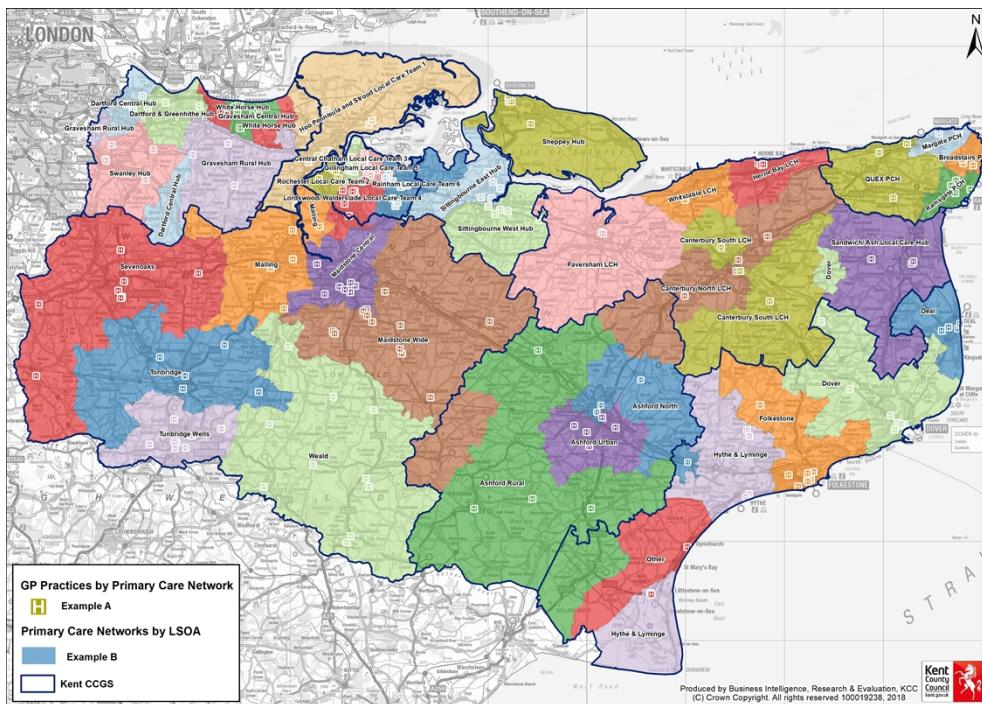
Fig 1. Multi-Disciplinary Team Meeting (MDMs)



4.2 Different models of team working are being trialled through new models of care, such as ESTHER and Buurtzorg, which focus on putting the patient at the heart of delivery, with a team wrapped around them for care and support.

The challenges and solutions for these new ways of working have been brought together in an integrated organisational development toolkit which has been developed through the STP workforce stream. The new models call for the retention, recruitment and development of staff with the right skills who can work across organisational boundaries and who can practice from multiple and multiagency locations. It is essential that career progression pathway opportunities across adult social care, health and the wider sector workforce are developed and promoted.

Fig 2: Emerging Primary Care Networks Geography



Hubs

- 4.3 The MDTs will be supported by a network of Hubs across primary care networks. These Hubs will follow the vanguard model of Encompass and will bring supporting services together enabling improved out of hospital care and reducing the duplication of work completed by professionals. Further work is required to understand what can be delivered from the Hubs and to align existing estates activity – for example linking to sheltered housing provision.

Prevention

- 4.4 In addition, the development of an Integrated Community Navigation Service brings together the different services involved in guiding people through the health and social care system, providing information and advice, signposting to services that support their wellbeing, supporting people to maximise their income, connecting people to community resources and carrying out statutory carers assessments.

Urgent Care

- 4.5 Within Urgent Care, work continues through the Integrated Discharge Teams, who are located in the acute and community hospitals and work hand in hand with all rapid response and enablement services across the county, to prevent admissions to and facilitate timely discharges from hospitals. At a locality level social care is working with Kent Community Health Foundation Trust (KCHFT), Virgin Care and Kent and Medway Partnership Trust (KMPT) to embed Integrated Screening Services to ensure the right support is available by the right professional when required. This ensures a quicker response time for the individual, reduces multiple referrals to different organisations and promotes joint working.

The Role of the GP

- 4.6 Central to the success of Local Care is involvement and buy-in from GPs. The Local Care workstream is working to align the newly formed Primary Care Board with the delivery of Local Care. Across Kent and Medway, Primary Care Networks are emerging, largely through coming together in Federations. By aligning the Local Care and Primary Care workstreams it:
- Provides support for implementation
 - Helps with consistency of practice
 - Helps sharing learning and building on best practice
 - Improves primary care recruitment and retention

Enablers

- 4.7 Local Care is underpinned by several enablers, supported through additional STP workstreams: Digital, Estates and Workforce. Specific developments are already underway including the implementation of a Carers App, the development of the Kent and Medway Care Record, the Kent and Medway Workforce Strategy and an Estates plan to support Local Care.

Adult Social Care and Health has also implemented a new management structure in order to support the integration agenda, with a dedicated partnership team led by the Director of Partnerships, Anne Tidmarsh.

Measuring Success

- 4.8 The implementation of Local Care also needs to be supported by the right governance and funding streams. The STP governance structure for Local Care has been revised with a new Local Care Executive Board that has closer links with the GP led Locality Boards.

Further work has also taken place with the Clinical Commissioning Groups (CCG) to identify their allocated funding for Local Care through a series of deep dives. This has confirmed the allocation of £32m of NHS investment across existing plans. In addition for Social Care, £29.8m of the Better Fund (BCF), £17.4m of the improved Better Care Fund (iBCF) and £6.1m of Winter Pressures money funds joint initiatives such as Discharge to Assess, Home to Decide and Home to Settle.

- 4.9 It is important that across Local Care there is a consistent way of monitoring progress and an agreed Local Care Delivery Framework. This needs to focus on key outcomes for people, alongside measuring success in developing our workforce and avoiding hospital admissions. Further work is taking place on this framework following the deep dives and a draft will be presented to the first Local Care Executive Board in February.

5. Conclusion

Considerable progress has been made within Local Care and the recent deep dives have highlighted that plans are in place to progress this at pace and scale over the next year. This will be supported by the new Governance within Local Care, with the aim of improved decision making and greater transparency of progress.

Reinforced by the implementation of the Local Care Delivery Framework to monitor the outcomes of spend and ensure progress is made across key areas such as workforce.

6. Recommendation

Recommendation:

The Health Reform and Public Health Cabinet Committee is asked to consider and endorse the progress and direction within Local Care.

7. Background Documents

none

8. Contact details

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