



Caring Together: Update

Dr. David Supple, CCG Clinical Chair Rob Persey, Executive Director



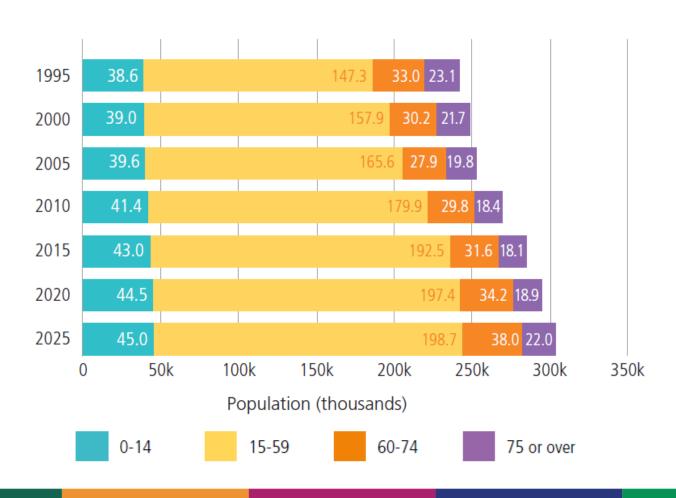
ယ

Content

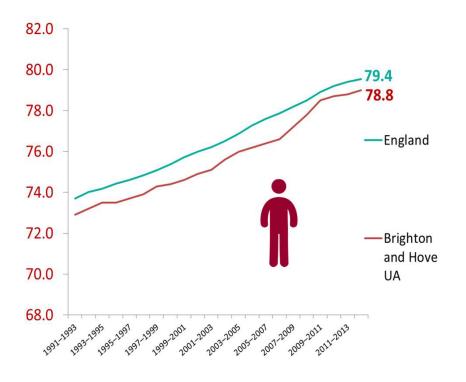
- Joint Overview of Caring Together and Integration progress
- Highlight key health and social care challenges facing our city
- What does this mean in terms of demand
- How are we addressing this and how are we engaging with our residents and other stakeholders
- How are we managing the complex changes

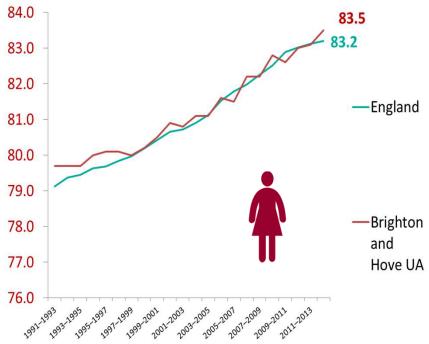
5

Figure 1 Population (thousands) by broad age band, Brighton & Hove, 1995 to 2025







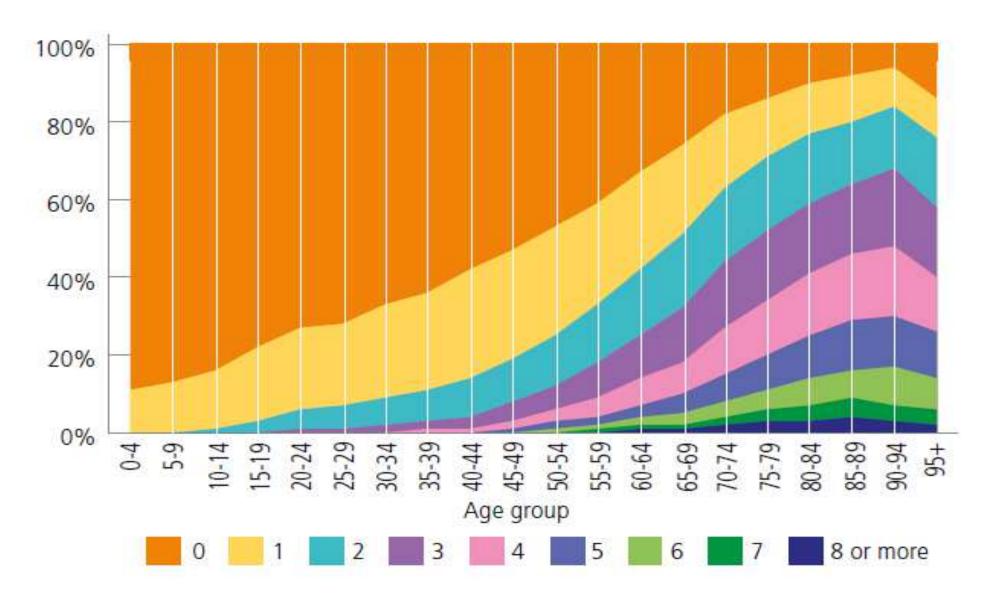


We are living longer but in ill-health - and health inequalities persist

- Between 2001/3 and 2013/15 life expectancy increased for males from 75 to 79 years and from 81 to 84 years for females.
- Between 2009/11 and 2013/15 healthy life expectancy decreased from 64 to 62 years for males and 64 to 61 for females.
- The healthy life expectancy gap between the most and least affluent local people is 14 years for males and 12.5 years for females.



Long term conditions by age Brighton & Hove 2017



Summary

- Demand is increasing
- Complexity is increasing
- Potential for cost to increase is significant
- Integration has the potential to help reduce and better manage demand
- Caring Together is a clinically driven programme to identify improved pathways and models of care
- Considerable future opportunity from further alignment, focussing now on first steps

9

Caring Together

Current position

- The Care Programmes that are currently out for discussion are:
 - 1. Preventative Services and Community Care.
 - Planned Care and Cancer.
 - 3. Access to Urgent Care and Primary Care.
 - Mental Health, Learning Disability, Children and Families.
 - Medicines Optimisation.
 - 6. Primary Care Development.
- The objective is to arrive at a system-wide agreement on the outcomes, benefits and timescales of these care programmes by 8 January 2018.

Big Health & Care Conversation

- Continuing Big Health & Care Conversation communications and engagement during September 2017 and rolling until January 2018
- Significant amounts of engagement taken place, conversations included two open debates about STP and informal 'drop ins' for staff
- Big Health & Care Conversation evaluation report will come to the Health & Wellbeing Board in March 2018
- Our engagement will continue in 2018 building on data gained in the first phase

Caring Together / Integration

- Social Care and Health working together more closely
- Whole systems approach to managing demand
- Whole Systems Reporting group -more sophisticated analysis to understand demand across the whole Health and Care System
- Caring Together Outcomes Framework
 - overarching indicator set to track progress towards high level outcomes, evidence effectiveness of new ways of working and highlight areas requiring improvement.
 - Combines existing statutory frameworks and local transformation metrics

NHS & Public Health

- Employment of people with long term conditions
- Infant mortality
- Under 75 mortality rate from all cardiovascular diseases
- · Under 75 mortality rate from cancer
- Under 75 mortality rate from liver disease
- Under 75 mortality rate from respiratory diseases
- Excess under 75 mortality in adults with serious mental illness
- Estimated diagnosis rate for people with dementia
- Emergency re-admissions within 30 days of discharge from hospital
- Amenable / preventable mortality*

CURRENT SHARED OR COMPLEMENTARY* INDICATORS

NHS Outcomes Framework

Adult Social Care & NHS

- Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services
- Dementia: effectiveness of post-diagnosis care in sustaining independence and improving quality of life
- •Improving people's experience of integrated care
- Health-related quality of life for carers / carer-reported quality of life*
- Health-related quality of life for people with long-term conditions / social-care related quality of life*

Key

- Unmarked indicators are shared - having shared responsibility between the named frameworks and the same indicator is included in each
- Indicators marked with a star are complementary there are different measures in the named frameworks that look at the same issue

Public Health Outcomes Framework

Adult Social Care Outcomes Framework

NHS, Public Health & Adult Social Care

- Employment of people with mental illness/those in contact with secondary mental health services*
- Employment of people with a learning disability*

Public Health & Adult Social Care

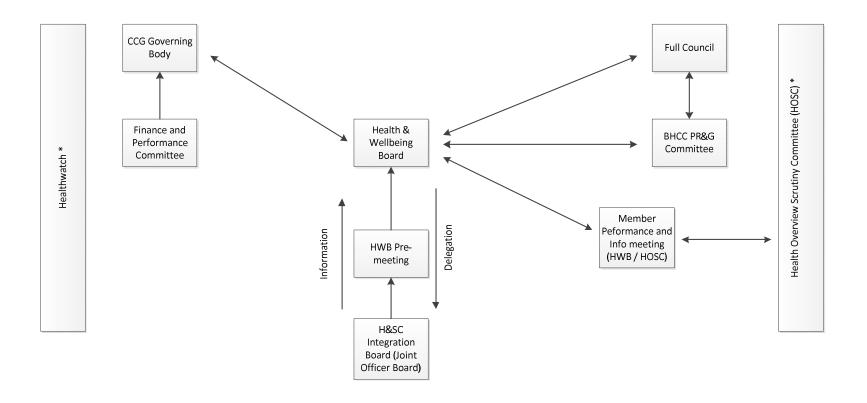
- Adults with a learning disability who live in their own home or with their family
- Adults in contact with secondary mental health services living independently with or without support
- Social isolation
- The proportion of people who use services who feel safe / older people's perception of community safety*

Manging the process

- Integration paper going to CCG GB in November and approved at Brighton & Hove City Council Policy, Resources and Growth Committee 12 October 2017 Report available here: https://present.brighton-hove.gov.uk/Published/C00000912/M00006704/\$\$ADocPackPublic.pdf
- With recent announcement of establishment of Central Sussex Commissioning Alliance from January 2018 we are actively discussing a complementary relationship with city based integration proposals
- Formally begin shadow year working together from April 2018
- Start to see some changes now e.g. Board papers being more strategically focused
- The shadow year governance structure follows

Governance Structure

Proposed shadow year Governance arrangements commencing April 2018



Questions and discussion

Dr. David Supple Rob Persey