

# Sector-led Improvement for Care and Health

Care and Health Improvement Programme (CHIP)

Story Board for 2018/19

*Year 2 of 3 year programme to end of March 2020*

*20171101 - SLI for Care and Health 18-19 StoryBoard for IIB for 1 Nov*

# Health and adult social care environment

- Ageing population with complex needs, 85+ up by 33%
- Increasing financial pressures on social care:
  - Immediate £1 billion for unavoidable costs eg growing population, plus
  - £1.3 billion now and annually to stabilise the market, plus
  - Funding other significant pressures eg 'sleep-ins' (est £400K)
- Increasing fragility and less resilience in all parts of the system – especially commissioning and markets and likelihood of failure
- Anxiety that DToCs targets used to control BCF funding commitments
- Long-term issues restrict ability to change or implement policy
- Sustainability of social care – Government Green Paper proposed

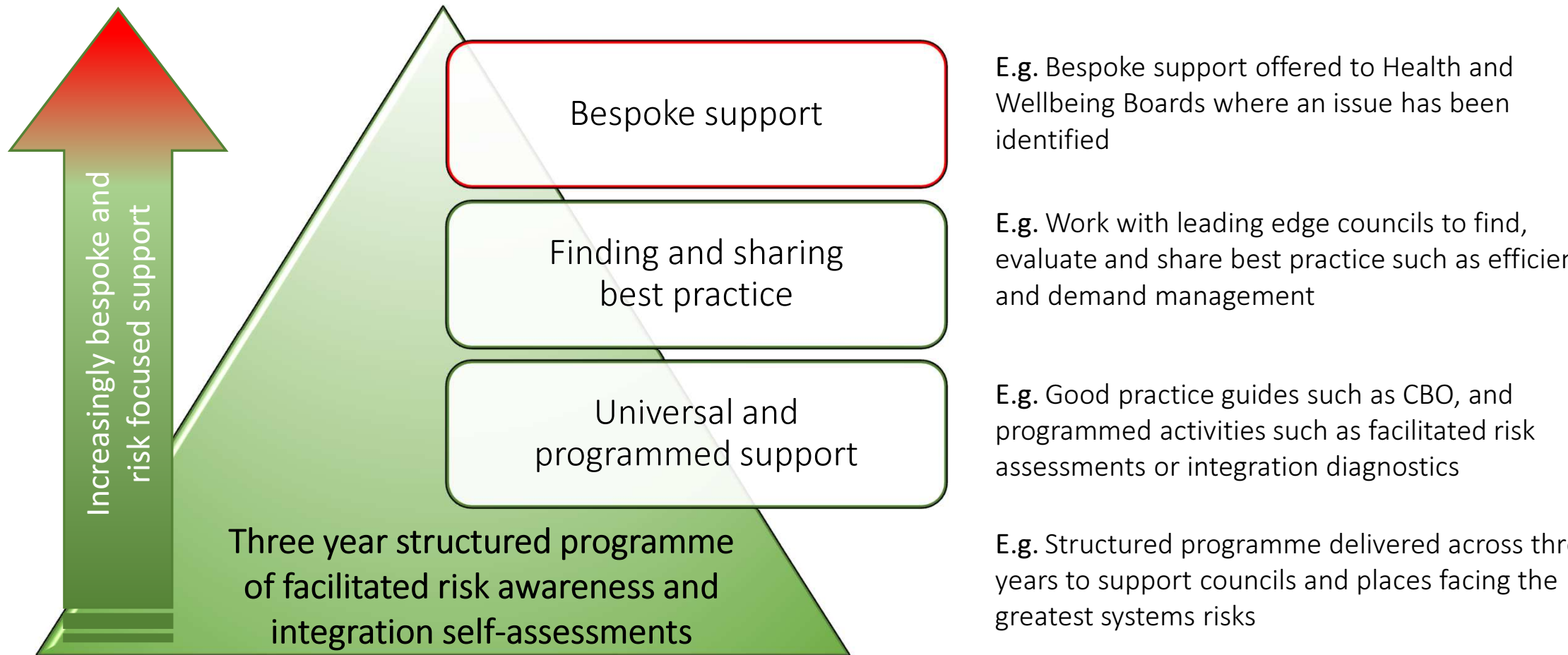
# Sector-led improvement for social care

- *CHIP* is the SLI programme for adult social care and health integration delivered with the Association of Directors of Adult Social Care and delivered in the context of the LGA's SLI approach
- LGA and DH have been working in co-operation since 2012 on a range of social care improvement and health integration programmes. Including discrete programmes focused on Health and Wellbeing Boards, the response to Winterbourne View (now Transforming Care), implementing the Care Act and more recently integration and informatics
- In 2014/15 the programmes were brought together as the *Care and Health Improvement Programme (CHIP)* to strengthen the strategic oversight and ensure a coherence
- In 2017/18, it is funded by the Department of Health (£7.24million) with contributions from NHS for Transforming Care and some digital and information activity (£1.2million).

# Our approach

- Active contact with all councils at member, corporate and service levels
  - Strong relationships with Councillors, Chief Executives, DASSs
  - Increasingly close working and links with NHS Confed/CC on policy and practice
- Proven sector-led approaches built on a consensus across all councils
  - Effective at supporting service delivery, delivering change and crisis support
  - Understanding of the politics of places and the drivers that encourage change
  - Cost effective leveraging of peer-to-peer support at minimal costs
- Able to adapt to change in policy and priorities
  - Redirecting planned resources to address growing demand for financial risk support
  - Responding to demand for practical solutions to support DToCs and market failure
- Bespoke support based on approaches that are known to work
- Collection and use of soft intelligence and insight

# Facilitated sector-led approach



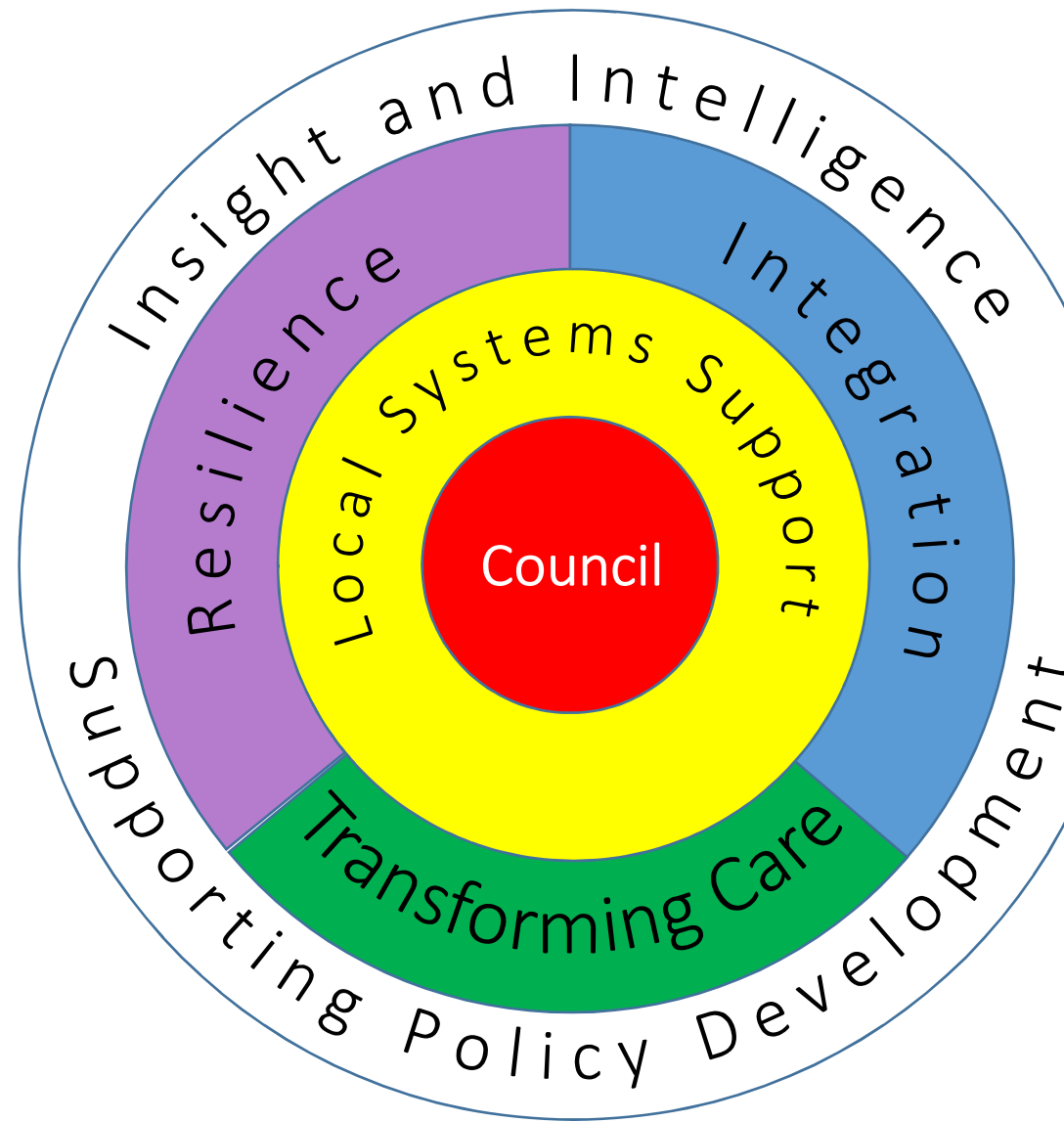
# Programme objective

Using sector-led improvement to support systems leaders to develop:

- resilience in adult social care
- effective care and health systems

and

- to fulfil our role in the Transforming Care Programme



# Sector-Led Improvement for Care and Health

Strategic Framework 2017/18

Priorities

Workstreams

## Resilience in adult social care

### 1.1 Risk

To improve risk management and financial risk awareness

### 1.2 Safeguarding

To support resilience in adult safeguarding

### 1.3 CBO

To refresh Commissioning for Better Outcomes for integrated services

### 1.4 Market Shaping

To promote sound market shaping and market position statements

### 1.5 Efficiency

To promote efficiency, demand management and innovation approaches

### 1.6 DToCs

To support councils to improve delayed transfers of care

## Effective care and health systems

### 2.1 Systems Leaders

To support the capacity and capability of systems leaders to enable integration

### 2.2 Integration/BCF

To support places to deliver BCF and integration

### 2.3 Prevention

To support evidence-based decision making in prevention and early intervention

## Transforming Care

### 3.1 Transforming Care

To support the Transforming Care Programme

# Areas of focus following priority review

Discussions confirm our 2017/18 priorities remain relevant for 2018/19 but with a shift in emphasis in some places:

- Greater need for bespoke local support – rather than more universal guidance/tools
- More on prevention – demand management, efficiency and innovation support
- Contingency planning – supporting arrangements and preparedness rather than drawing up plans
- Our support offer in the event of failure
- Data – provision of management information to inform local decision making



# Planning process and next steps

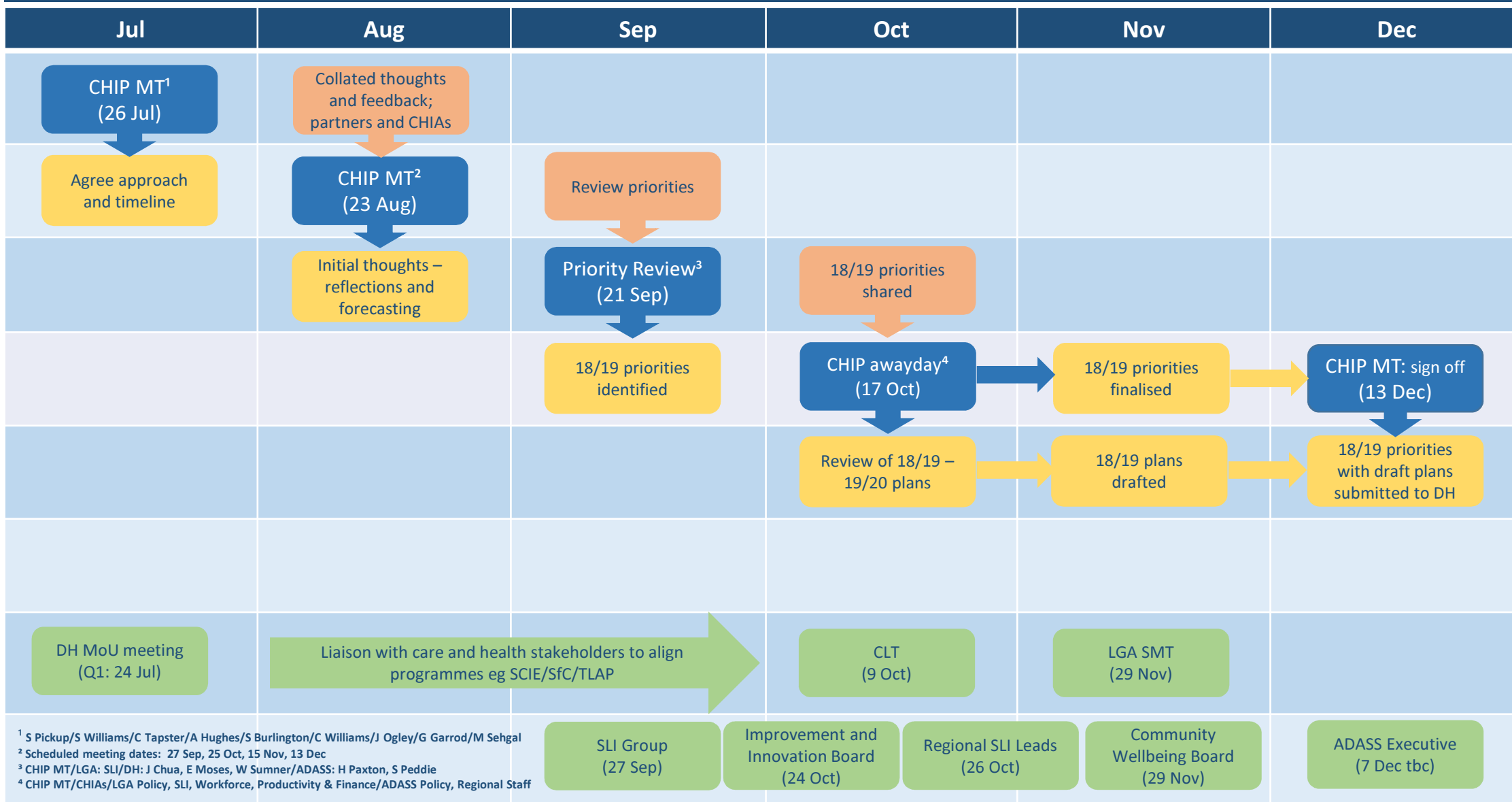
To date:

- CHIP Management Team has reconsidered 17/18 priorities
- Priority review meeting held with DH and ADASS to identify any changes and areas for re-focus
- CHIP Team event to consider evolution of work and proposed changes

Ongoing activity:

- Planning leads to refine detail of logic models and discuss with DH/NHS counterparts
- Plans to be shared with stakeholders and their internal boards
- Collation of revised offers and submit a costed proposal to funders by 19 December

# CHIP Planning timeline – 2018/19 (v0.7 at 19 October)



<sup>1</sup> S Pickup/S Williams/C Tapster/A Hughes/S Burlington/C Williams/J Ogley/G Garrod/M Sehgal  
<sup>2</sup> Scheduled meeting dates: 27 Sep, 25 Oct, 15 Nov, 13 Dec  
<sup>3</sup> CHIP MT/LGA: SLI/DH: J Chua, E Moses, W Sumner/ADASS: H Paxton, S Peddie  
<sup>4</sup> CHIP MT/CHIAs/LGA Policy, SLI, Workforce, Productivity & Finance/ADASS Policy, Regional Staff