Integrated Care and Support Pioneers Programme

Questions and answers

Over recent weeks the Integrated Care and Support Pioneers Programme has held several events and workshops focusing on the programme’s aims and objectives, and the shared responsibilities of pioneers, national partners and other organisations offering support.

The NHS Improving Quality national programme support team has been capturing questions raised at these events and via Twitter and email. This is our first set of questions and responses – we will keep capturing questions and will issue a refreshed version of Q&As on a regular basis. In the meantime, if you would like more detail on any topic please let us know. See the end of this document for different ways to get in touch.

1. How can I find out quickly and easily what other sites are doing, so I can see where I might want to collaborate or link in?

ICASE is the best and quickest tool for this. All those involved in each pioneer site should be registered and using ICASE to share learning and discuss approaches to integrating care and support. If you have any queries or feedback about ICASE please either post on the site or contact the ICASE team.

Each site also has a Delivery Support Manager who can act as a link to the central programme team and national partners. Speak to your Delivery Support Manager if you have a specific area of interest or concern and are not sure where to start. You can find a link to a list of Delivery Support Managers and the sites they support on ICASE.

NHS Improving Quality has reviewed feedback from recent workshops and events and noted the key areas of support required. This will enable us to bring groups together to work on particular issues and themes. This information will be available on ICASE.

2. If I have a specific question for one of the national partners, what should I do?

Pioneers who have specific questions for national partners could speak to their Delivery Support Manager as a first point of contact, and/or post a question on ICASE.

Delivery Support Managers will act as links between pioneers and national partners to ensure that, for example, a solution found to a problem at one site can be passed on where needed. This will give us a clear idea of who needs support in which area so we can match up requests with expertise – and better understand areas of the greatest concern across the country.
Posting on ICASE enables other members to offer useful insights, discuss their experiences and benefit from any advice offered.

3. I’m not very technical. How can I learn to use ICASE?

ICASE is fairly simple to use – and there’s a lot of help available. When you visit the ICASE home page for the first time it’s a quick and straightforward process to register. Once registered you’ll find there’s a large number of user-friendly guides for using ICASE in the ‘my support’ section – just follow the link from the homepage. If you’re struggling please contact the ICASE team. ICASE is being continually developed to make it as user-friendly as possible so do pass on any feedback to your Delivery Support Manager contact, visit the ICASE feedback page or drop the team a line at enquiries@icase.org.uk.

If you’ve started using ICASE but would like to find out more about getting the best out of social networking and social media, we sometimes run WebExes on these topics – keep an eye on the ICASE events page or speak to a Delivery Support Manager for further information.

4. How do you get questions answered on ICASE?

ICASE is quite new and we are all learning as we go – so there may have been a short delay in responding to some of the questions sent in or posted. During the launch of the programme many questions were received, and because it was likely that a large percentage of these would be relevant for most participants, we felt it would be more helpful if we answered them in clusters rather than one by one.

However, ICASE is a tool for conversation and networking, so it’s not intended that just the central support team will respond. As more pioneers, national partners and others start using the site we hope that it will grow into a widely-used forum for discussion and co-production.

5. What’s on the ‘menu’ in terms of support for pioneers?

There is a range of dedicated expertise available from almost 40 different organisations, in areas such as leadership, information governance, financial modelling and service redesign. See question 2 for more on this. Information is available on ICASE about the national partners and the type of support on offer from each.

ICASE is a new social networking website enabling pioneers, partners and others to seek and share information, benefit from others’ expertise and collaborate in areas of work. Support to use the site is available if needed. As pioneers and partners start using this site to talk to each other and share information and learning, there will be a lot of mutual support and advice available from the ICASE community. See question 3 for more on ICASE.

A central NHS Improving Quality programme support team is available to offer dedicated support to each pioneer and partner via Delivery Support Managers – for example in terms of sourcing and brokering advice from national partners, identifying support to overcome barriers to integration and more. A regular e-bulletin is sent out to pioneers and partners highlighting useful information and events. Please contact the ICASE team or let your Delivery Support Manager know if you’re not receiving these and we will add you to the mailing list.

Workshops, events, web-exes and more are being held to support pioneers in areas such as leading system change at scale and pace, procurement, choice and competition, social media, measurement and evaluation. These are publicised in e-bulletins and on ICASE. Please let us know if there are other topics that you would like included.
6. Will ‘the system’ really allow us to make changes at scale and pace?

The health and care system isn’t meeting people’s needs in its current form, and the challenges will only increase as the population ages and more people require care. Change is essential to ensure that we can make care and support more collaborative, more person-centred and more sustainable. There is support for these changes at the highest level of government and this work is a priority. The national partners are keen to offer support to address any barriers you encounter, and internal collaboration will help us to harness learning and tackle the challenges together.

For example, Health Minister Norman Lamb MP has asked a team of experts to work with one pioneer site to resolve information governance issues and produce ministerial advice for addressing these. This will be followed by a workshop for all 14 pioneer sites to share and disseminate findings and practice.

See also the answer to Question 17.

7. What happens in 2016 after the Integration Transformation Fund (ITF) – now known as the Better Care Fund – comes to an end?

The Better Care Fund will support all local areas to take important steps towards joined up health and care, but this is only the first step. Pooled budgets in every area by 2015/16 will ‘light the touch paper’ for greater integration of budgets between clinical commissioning groups and local authorities.

The Autumn Statement (5th December) made it very clear that pooled budgets would be an enduring part of the framework for health and social care post-2015/16. Whilst the structure of the fund and the pay-for-performance elements may change as progress is made, the principle is here to stay.

➢ Read supporting guidance about the Better Care Fund on the NHS England website or download the Better Care Fund Support and Resources Pack for Integrated Care.

It should be noted that although the Better Care Fund has close links with the Pioneer Programme they are not the same thing, and BCF funds are available to any area submitting a business case.

8. We are working on something that has great potential but we’re not sure it’s going to achieve what we want. Should we share anything about it at this stage or wait until we know if it’s a success?

It’s important to share what you are doing as early as possible so others can learn from your experiences – or share their own.

Why not ask on ICASE if anyone else has experience or expertise in that particular area of work and would like to collaborate? Be clear about where you’re at – if something is in the early stages don’t be afraid to say so, or ask for help. At the same time, be on the lookout for others who might just be starting down a road you’ve already ‘tried and tested’, so you can offer support and advice. Of course every pioneer area is different – but there may still be elements of a piece of work that are relevant across any shape, size or configuration of site, so for that reason we would encourage you to share information about the work you’re doing early on, and as widely as possible.

9. Have any of the 14 pioneers achieved any transformational changes so far?

Pioneers were chosen for their innovative change programmes and evidence of achievements so far in specific areas. The best way to find out about local programmes in detail is to ask the question directly on ICASE. Many sites have uploaded descriptions
about what they are doing onto ICASE (see the introductions thread). We will also be working with each site to support them to communicate about their specific areas of work to make it easier to share information and expertise nationally.

10. How are sites going to measure and evaluate what they do for the pioneers programme? What support is available for this?

The Department of Health is working on behalf of the national partners to plan, commission and deliver an independent evaluation of the integrated care and support policy programme. This will start with an early evaluation carried out by the Policy Innovation Research Unit (PIRU), based at London School of Hygiene and Tropical Medicine. It will focus on the first year of the pioneers’ work, within the context of the Better Care Fund, and will deliver a series of interim reports to facilitate early learning.

Dr Michelle Barclay, an expert in healthcare evaluation and research, is able to offer dedicated support to help pioneers with their local evaluation work. To find out more, speak to a Delivery Support Manager or post a query on ICASE.

11. I would like some support to help my area understand more about the pioneer programme locally and nationally, and influence people at a local level to start working and thinking differently. Is this kind of support available?

We are keen to build up a communications network across pioneers and national and supporting partners. The communications manager for the pioneers programme will be working closely with Delivery Support Managers, pioneers and partners to ensure that there is support for sites to address any communications challenges and share good practice, information, ideas and evidence nationally. If there is something specific you would like support with in this area, please post on ICASE or speak to a Delivery Support Manager.

12. Will the Integrated Care and Support Pioneers programme be renamed ‘Better Care Pioneers’, in line with Integration Transformation Fund being changed to ‘Better Care Fund’?

No. These are two separate work programmes, managed and monitored separately, albeit closely linked.

13. Will a video be released about integration pioneers – and why not live stream to engage wider health/care sector?

What a good idea – we’d love to hear from more people as to whether you would prefer events to be live-streamed, so we can plan this for future events. In terms of a video about the benefits of integrated care and support and/or explaining what the pioneers programme is all about – we would be interested to hear whether people feel this would be useful, to help ‘tell the story’.

14. Have any other local authorities, clinical commissioning groups and health and wellbeing boards engaged with #integrationpioneers via Twitter?

We’d love you all to sign up to Twitter (if you’ve not done so already) and join in the #integrationpioneers conversation! We are encouraging people to engage this way and will be running introductory social media web-ex sessions. Sessions in January have already been announced (see ICASE events calendar) and we will run further sessions if people would find them useful. To read what people have been saying already, see the recent Storify of tweets about the inaugural workshop on 3rd December.
15. Is Richard Eccles, the new Pioneers programme lead for NHS Improving Quality, on Twitter?

Yes – you can contact Richard at @REccles1972.

16. How will 211 clinical commissioning groups, 152 local authorities, 161 acute trusts and 56 mental health trusts link 7-day-services plans with £3.8bn better care fund plans to get best outcomes?

There is no simple answer to this question! Each area of the country is different, and local areas will find solutions that work best for them, supported by expertise and learning from national partners and fellow pioneer sites. One of the main purposes of the pioneer programme is to harness and spread innovative solutions to complex problems. Creating an environment of open innovation would seem to be one of the best ways to approach this complexity, by creating links, building conversations and encouraging the sharing of ideas and solutions.

We would love to hear more from pioneers on how they are approaching the problem of complexity – please share your thoughts on ICASE!

17. What’s the potential for the 14 pioneers to influence policy nationally – and any thoughts on how can we influence providers locally? This is a huge cultural change.

This is a national collaborative – we are all signed up to the same outcomes and there is support for these changes at the highest level of government. The Integrated Care and Support Collaborative national partners will be driving the policy and the programme – read more in Integrated Care - Our Shared Commitment (May 2013).

In terms of influencing local providers – yes, this represents a big culture change. Experience from the pioneers will be key to helping us to develop policy based on solid evidence of integrated care in practice. Pioneers also have access to almost 40 organisations with a rich collection of expertise, many of whom will be able to advise and support them in this. See a list of them here. There are also workshops taking place in January and February on leading large-scale change quickly in complex, multi-organisational systems. Collaborating and sharing learning will be very important to ensure that we can collectively know what sites are doing and saying in different parts of the country to change working practices and influence behaviour – and harness it. We need to know what’s working and what isn’t, which means moving beyond sharing ‘what we made earlier that worked’ to sharing ‘what we’re trying out now’ in real time!

See also the answer to Question 6.

18. There have been many attempts to make changes in the past, but often good practice stays local and doesn’t spread across the country. How can we do it differently this time?

We need to build in spreadability and an enduring capacity for change. Change must be transformational not transitional. Innovation must be open, not closed. What does this mean in practice?

- **We should focus on areas of work rather than organisational or locality-based ‘silos’**. This isn’t just about making something work locally and feeling good that you did it first! It’s about sharing work-in-progress around key themes, not just the end result. Share the good and the bad, so others can learn what may and may not work.

- **Involve people in other parts of the country**. People value things when they feel a sense of ownership – they are more likely to use and support what they helped to create. If you are innovating, let people see the steps you’re taking and ask them to
get involved. And look at what others are doing and offer to link in. We must be prepared to share ideas that may fail. We must also be prepared to share ideas that others may be able to pick up and run with more quickly, hence appearing to ‘get there first’.

- Include ‘spreadability’, and how widely and well an innovation was communicated, in evaluations from now on – this has sometimes been overlooked in the past.

Please see Helen Bevan and John Atkinson’s presentation for more on this topic.

19. Is one model of integrated care better than another?

Care and support can and should take many different forms if they are to be responsive to people’s individual needs. There’s no single model for delivering integrated care – it is up to local areas to determine what suits the needs of their local population. Integrated care and support may involve structural integration (for example, merging different organisations into a single organisation) or cooperation between different professionals, teams and providers (for example, a network of separate providers, often linked contractually). It does not require that all services are delivered by a single organisation. In fact, care within a single organisation can also be fragmented if professionals and teams do not communicate effectively with one another.

Read more in Monitor’s Frequently Asked Questions about integrated care.

20. Is there any support or advice available about co-production?

Co-production means that people who use care services, and their family and carers are not only consulted but are equal partners and co-creators. Think Local Act Personal is the national co-production advisory group and is able to offer advice and support in this area. The Social Care Institute of Excellence have also developed some useful resources outlining what co-production is and how to develop co-productive approaches. SCIE can train and support organisations in co-production. Many other organisations can offer support too – see the list of partners offering support and advice.

There is a discussion thread on ICASE about this topic – please add your thoughts!

21. We weren’t chosen as a pioneer site – how can we share our ideas and access learning and support?

We know that there is much innovative work going on right across the country and would like to maximise this and spread the learning. ICASE is available to everyone to comment on the work they are doing and access knowledge and expertise from others. The central programme support team will be working with pioneers and partners to look at different ways to disseminate learning as widely as possible. The Kings Fund, Monitor, NHS England and other organisations offer conferences and workshops regularly around large-scale change, integration, the Better Care Fund and more.

How to get in touch

Let us know if you have other questions or would like any further details. Pioneers and partners can speak to their delivery support manager contacts, post questions on ICASE (www.icase.org.uk) or email us at enquiries@icase.org.uk.
Please use #integrationpioneers in your tweets about the Integrated Care and Support Pioneers Programme.

Partners responsible for developing and directing the Integrated Care and Support Pioneers programme include the Association of Directors of Adult Social Services (ADASS), the Care Quality Commission, Department of Health, Local Government Association, Monitor, NHS England, NHS Improving Quality, Health Education England, the National Institute for Health and Care Excellence, Public Health England, the Social Care Institute for Excellence and Think Local Act Personal in association with National Voices.

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