# Health and Social Care Integration in Scotland

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European Regional and Local Health Authorities

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# 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, Deputy First Minister**

**Budget Speech, 12/15**

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# We know the problems…

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

## and we have solutions…

**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 effective health improvement activity

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# But having the solution is not enough to effect change

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

All 3 = not enough

Plans, strategies also = not enough
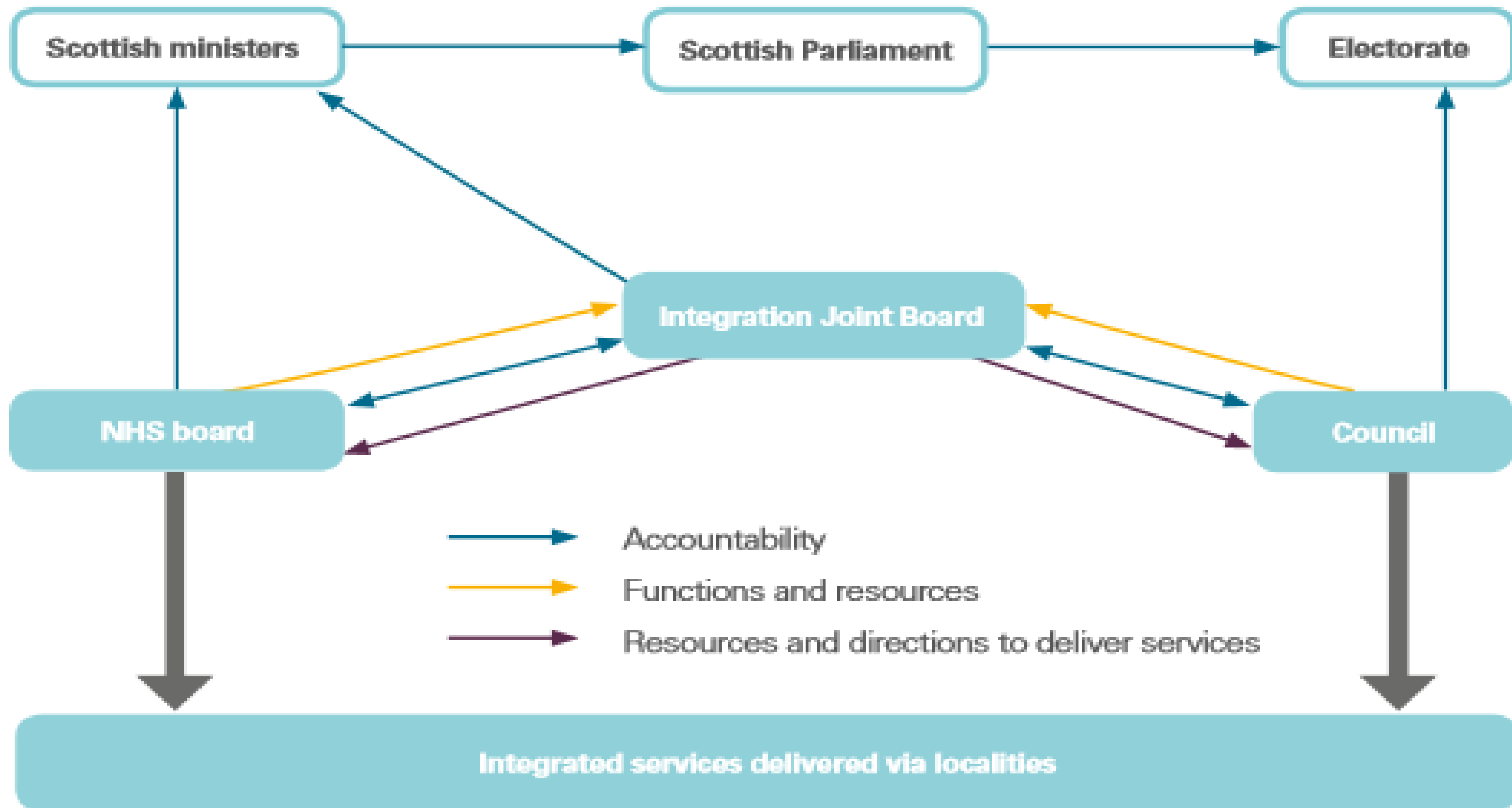
We need a new approach….

# 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 services
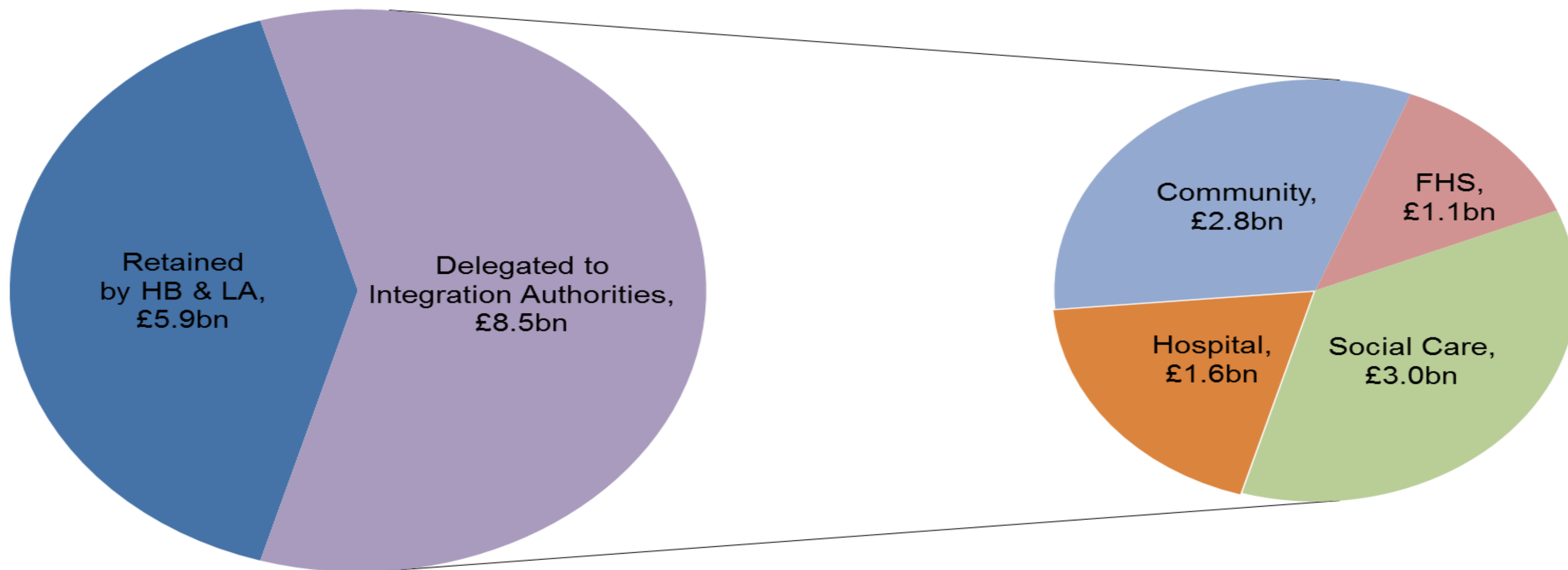- Operational integration of services

**Public Bodies (Joint Working) (Scotland) Act 2014**

# Body corporate or Integration Joint Board model

| Scottish ministers | Scottish Parliament | Electorate |

Integration Joint Board

NHS board

Council

Accountability

Functions and resources

Resources and directions to deliver services

Integrated services delivered via localities

# 2017-18 Delegated Budgets

# Scottish Government commitments

- By 2018, we aim to reduce unscheduled bed-days in hospital care by up to 10 % (i.e. by as many as 400,000 bed-days) by reducing delayed discharges, avoidable admissions and inappropriately long stays in hospital.

- By 2021, we aim to ensure that everyone who needs palliative care will get hospice, palliative or end of life care . . . The availability of care options will be improved by doubling the palliative and end of life provision in the community, which will result in fewer people dying in a hospital setting.
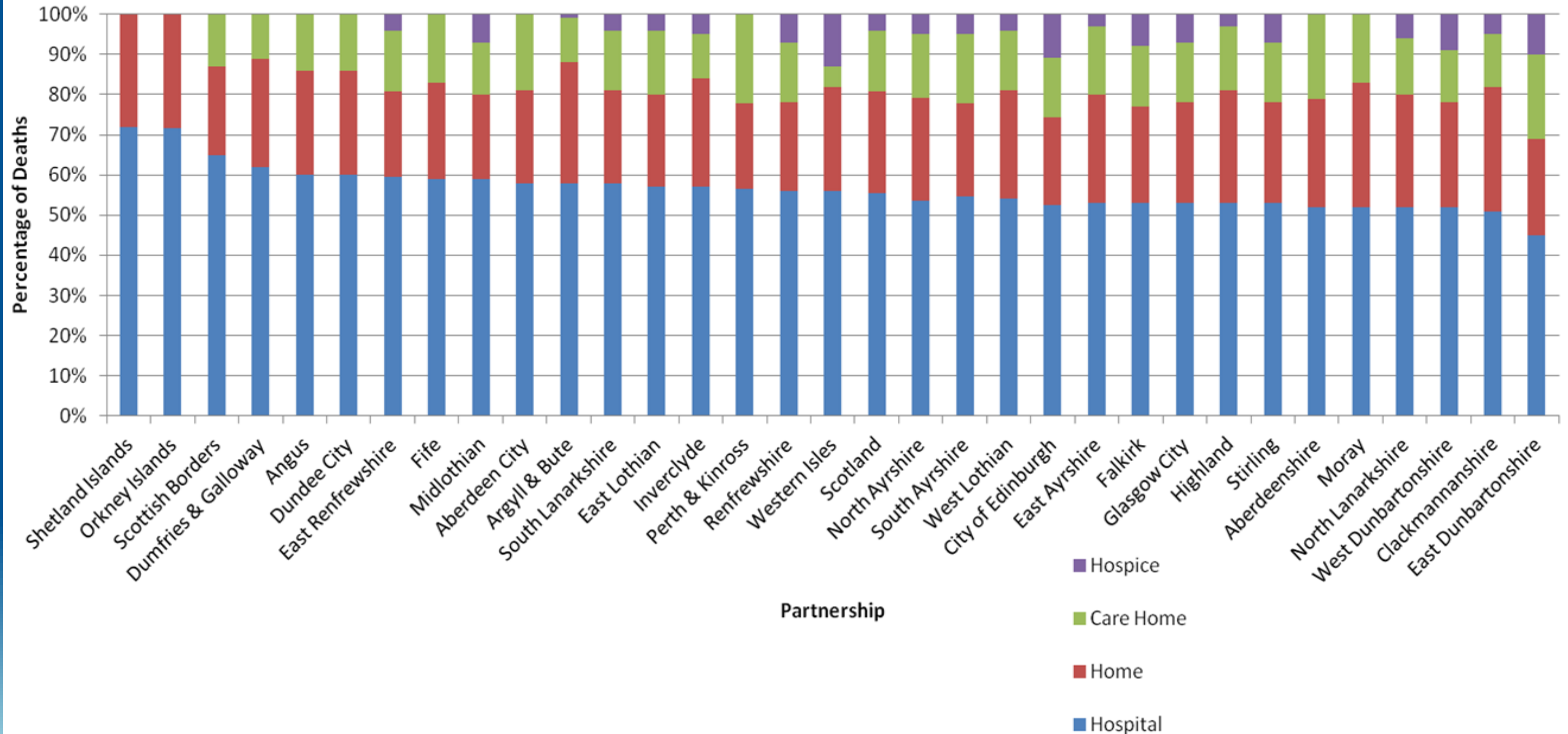
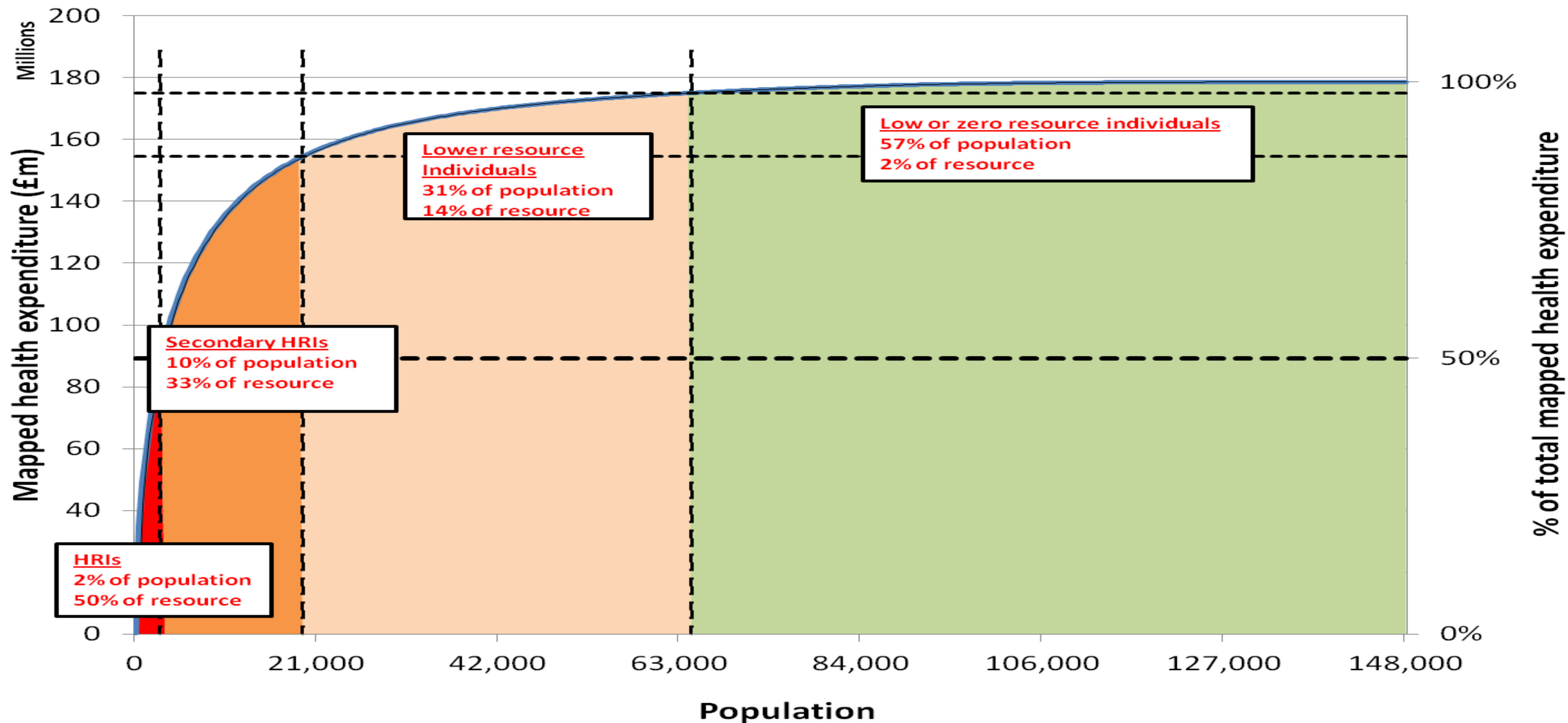# Unscheduled occupied bed days - Variation



Unplanned bed day rates, acute specialties, all ages, Scotland;
16/17 actual and 18/19 objectives
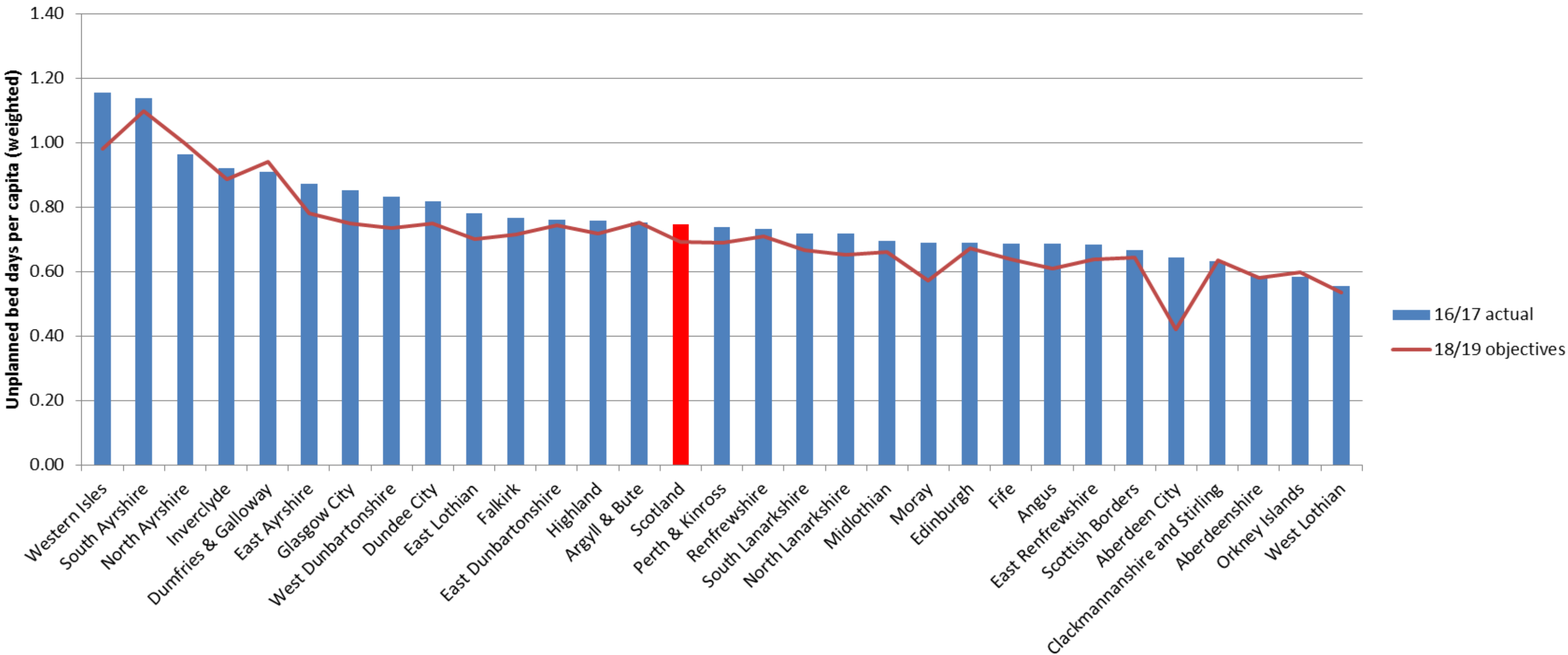
Location of Death by Partnership during 2015/16

# High Resource Individuals



**Low or zero resource individuals**
57% of population
2% of resource

**Lower resource Individuals**
31% of population
14% of resource

**Secondary HRIs**
10% of population
33% of resource

**HRIs**
2% of population
50% of resource

Making progress, but just the start of the process...

SLOW

*MotiveWeight.Blogspot.com*

SOME QUIT DUE TO SLOW PROGRESS. NEVER GRASPING THE FACT THAT...

...SLOW PROGRESS IS PROGRESS

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http://www.audit-scotland.gov.uk/report/health-and-social-care-integration-update-on-progress

Health and social care series

# Health and social care integration

**Update on progress**

ACCOUNTS COMMISSION ✓   AUDITOR GENERAL ✓

Prepared by Audit Scotland
November 2018

# Lessons Learned

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...

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