Chairman's announcement Progress on integration

In 2017, Wiltshire Council and Wiltshire CCG agreed to the creation of a joint post covering both the roles of the Wiltshire CCG Accountable Officer post and the Council Director of Adult Services. Both roles are vacant, providing an opportunity for Wiltshire to take the next step towards an integrated health and social care system with a single individual overseeing both functions.

Keeping people well and living independent, productive and healthy lives at home is at the heart of the Wiltshire ambition. Integration of health and social care services supports a sustainable system and promotes the good health and wellbeing of our local population, set against high service standards for the achievement of good outcomes. We propose our approach be based on sound evidence with a focus on population needs: better prevention, self- care, improved detection, early intervention, proactive and joined up responses to people who require care and support across organisational and geographical boundaries.

The move towards a joint post was allied to a recognition that the integration of health and social care is the only option if we are to manage the demand for these services in the coming years. However, the creation of the joint post will not affect statutory responsibilities - the Clinical Commissioning Group will remain the statutory body responsible for commissioning health care in Wiltshire and likewise Cabinet for adult social care.

Both Cabinet and the CCG Governing Body reviewed a series of options, and concluded that seamless working between front line health and social care services will benefit Wiltshire people and patients in the best way. This means closer working between Wiltshire Council and Wiltshire CCG. The challenges faced by the health and care system are huge; and one way to address the issues we face is to integrate the leadership of health and social care services across our organisations and explore further options together.

Since agreement on the concept of the joint post, further work has taken place - agreeing the Job Description, the process for recruitment and the employment model. Work continues to establish the supporting legal agreements which are required to be in place in time for the appointment, including a Section 75 agreement and a Joint Employment Protocol. It is also necessary for the CCG to submit a Business Case for Integration to NHS England to sign off on any appointment agreed between Wiltshire Council and the CCG.

Alongside the implementation of the joint post, there is recognition that work on other aspects of integration cannot stand still. The Health and Wellbeing Board agreed a <u>statement of intent</u> on integration, agreeing with the concept of an accountable care system and noting that work now needs to take place on:

• Aligning budgets and commissioning intentions to develop whole place commissioning

A single source of commissioning intentions will provide more efficient, effective and coherent services to our population enabled by a single source of strategic commissioning intentions. This will allow better cohesion and collaboration across the sector, enabling strong market management, better use of resources against local priorities and drive unerring focus on the right outcomes for our people, which can become obscured when services are divided on budgetary lines.

To enable this, the potential for closer working between strategic commissioning teams in both organisations is being scoped – as well as considering how the intelligence and

expertise of the public health team can best be drawn upon – with options such as colocation of teams being explored.

• Developing the contractual vehicle for an accountable care alliance

This framework is likely to be based on the existing and evolving suite of contracts produced by NHS England for new care models. They will be long term contracts which incorporate new payment models, such as whole population budgets, improvement schemes and gain/loss share agreements.

The framework will take several years to implement (bearing in mind existing contracting timetables) and decisions will need to be made on where 'tactical' commissioning functions are best situated as well as how adult social care assessment staff are best integrated with the new arrangements.

Programme support is being put in place to deliver these commitments. In the meantime a considerable body of work continues to be delivered through existing but related programmes:

• Better Care Programme

Commissioning intentions for a range of intermediate care schemes have been agreed with the aim of reducing hospital admissions, length of stay in hospital and delayed transfers of care.

• Adult Social Care Transformation Programme

Delivering a one stop approach for the public to access guidance on social care; the establishment of a reablement service; remodelling of our safeguarding provision and; a review and redesign of our commissioning and procurement processes.

Bath & NE Somerset, Swindon and Wiltshire Sustainability and Transformation
Partnership

The STP is currently outlining areas where collaboration across the footprint makes sense (such as on workforce issues, specialist commissioning and ensuring value for money). This will provide the context for the development of healthcare commissioning arrangements in Wiltshire. Developments in Greater Manchester provide one <u>model</u> which can be drawn upon for future arrangements and the split between local strategic and tactical functions and those undertaken by the STP.

With this work underway to transform the way in which business is done, and recognising the complex and legal and logistical framework needed for successful integration, Wiltshire Council and CCG have agreed a revised timeline for the appointment to commence during 2018. This allows time for advertising the post in the new year, recruitment and for notice to be served by the successful candidate. The Steering Group overseeing the integration will meet again in February 2018 to receive the proposed governance arrangements for integration and the business case for submission to NHS England.