

Integrated Care Value Case

Cumbria, England



November 2013

This Value Case has been commissioned by the Local Government Association with support from the national partners on the integrated care and support collaborative

Guiding principles for the value case:

The overall goal of this work is to develop value cases which are:

- Aimed at Health & Wellbeing Boards

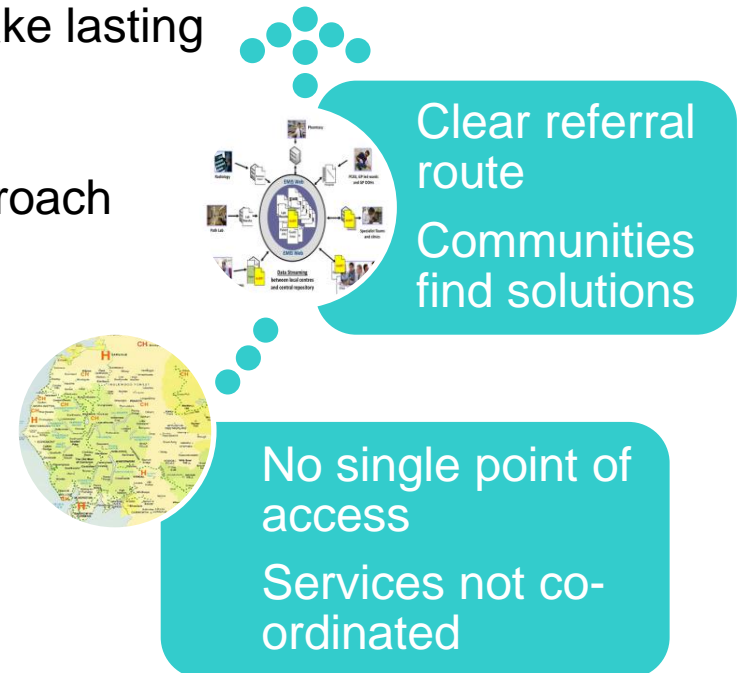
And incorporate:

- Service user stories, capturing changes to the service user's journey
- Features of the model, including enablers (e.g. technology initiatives to support the model)
- Costs of the model
- Evidence of benefit, including activity, spend and outcomes

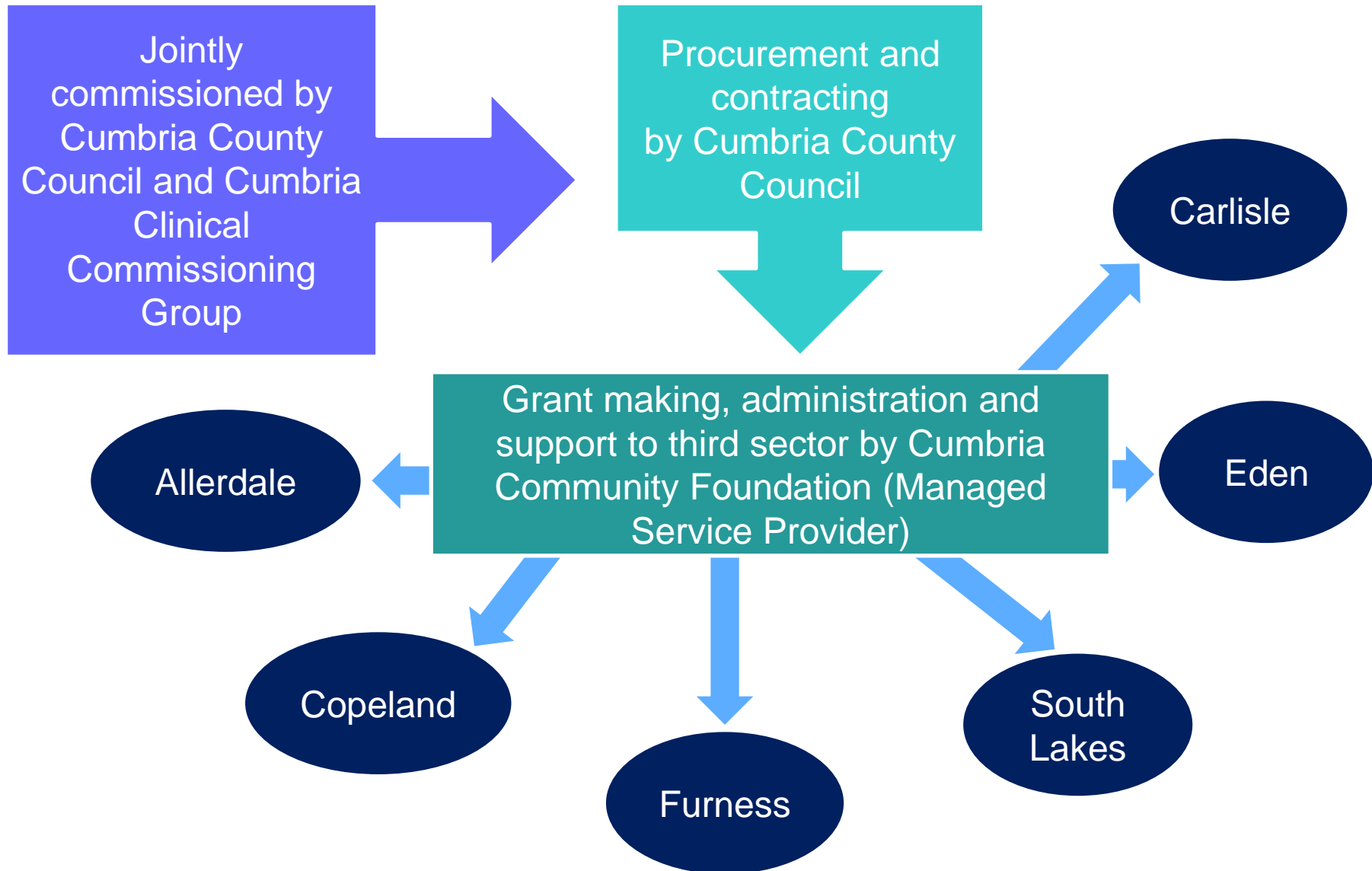
We recognise that the information contained in the value case may prompt further questions, in which case we recommend you use the contact details at the end of the value case to follow up with a direct contact.

About Cumbria Neighbourhood Care Independence Programme

- Cumbria has a population of 494,400 and is England's second largest County. The total land area equates to 48% of the North West region, 51% of the population live in rural areas and by 2035 a third of the population will be over 65 years of age.
- The County Council and CCG want to help more people to retain their independence and control over their lives. This a key objective in Cumbria's latest Joint Strategic Needs Assessment.
- We believe that this can be achieved by recognising that each community in Cumbria is unique and has the skills and knowledge needed to make lasting changes to people's lives.
- We call this asset- based community development approach *Neighbourhood Care*.
- In April 2013, we launched a new Neighbourhood Care Independence Programme in partnership with the third sector which is currently supporting thousands of adults who need extra support from time to time to remain independent.



Cumbria Neighbourhood Care Independence Programme visual model



Outcomes evidenced by Cumbria: What difference does it make?

User experience

- Access to prevention services, befriending and social activities
- Receive practical advice and help to stay independent
- Support after discharge and reduced social isolation

Frontline staff experience

- Easy referral through single point of access
- Alternatives to statutory provision in local communities
- A flexible service that responds to needs -thus reducing the pressure on frontline staff

Health & wellbeing outcomes

- Survey of customers shows better quality of life and more control: “doing things I value”, socialising, feeling useful, getting interested, being comfortable at home, feeling safe
- Having a healthy lifestyle, being active

Impact on institutional care

- Projected outcomes include:
 - reduced reliance on statutory services
 - reduced or avoided admissions to hospital
 - reduced or delayed admissions to residential care

Impact on cost

- Cost of the programme is approximately £900,000 per year
- External evaluation of the 3 year programme through the Institute for Public Care, Oxford Brookes University

Productivity

- So far over 3,000 people have received help and support through the Neighbourhood Care Programme in six months
- Plan to recruit 1,000 volunteers to support the programme



“We don’t know what we would have done without it. I think I would have torn my hair out.”

How we did it: key enablers

Commissioning and governance

- Joint commissioning of programme by Cumbria County Council and Cumbria CCG
- Programme led by Cumbria Community Foundation
- 6 locality partnerships of over 30 voluntary and community organisations
- Locality model influenced by joint health and social care management teams

Asset-based community development

- Emphasis on building community capacity and volunteering by building on local assets
- Harnessing the expertise of communities and the voluntary sector, e.g. Age UK, Red Cross and others to develop local solutions to local needs

Communications and stakeholder support

- Very strong support from County Council Members
- Written information sent to every household in the county

Legal & contracting models

- County Council procured a Managed Service Provider to manage the programme for 3 years through a managed service contract- option to extend for a further 2 years
- Section 256 transfer from Clinical Commissioning Group to contribute funds to the programme

Financial enablers

- Grant funding and support for local voluntary and community organisations
- Small grants to fund very small community groups and activities
- Commitment from partners to lever additional funding to the programme



“I would still be struggling on without the help. It’s surprising how something so basic can affect daily life.”

What we did: integrated care design

Governance

- Cumbria Community Foundation manage the programme, administer grants and utilise their award-winning experience to provide on-going support to groups involved through dedicated grants officers. Grants are also agreed with the Council.

Single point of access

- Each locality partnership has a single point of telephone/IT access for referrals to all activities whether from health, social care, self-referrals or other organisations.
- Customers are linked to Trusted Assessors, volunteer befrienders, handypersons etc.

Building around community

- Independence and resilience is promoted by linking people with local community activities such as support groups, social activities, day opportunities and libraries.

Practical support

- Advice and access to equipment, small adaptations, handyperson schemes, and other practical help such as decorating and gardening is a key feature of the programme.
- Trusted Assessors ensure that the right options are offered to customers in each locality.
- Support for people who return home from a spell in hospital is integral to the scheme.

Volunteer opportunities

- Older people and others are encouraged to keep active and healthy by participating in volunteering or offering their skills through 'time banking'.



“If I had not received the service my health would have been affected greatly, as getting into the shower had become a huge difficulty.”

Who we did it for and why

People and neighbourhoods

- Given the forecasted demographic changes in Cumbria, a new way of providing services was needed; which was rooted in communities, adapts to need and builds on the strengths and assets of people, small groups and neighbourhoods.
- The scheme gives greater flexibility and provides support to working-age people who need additional help to remain independent, as well as older people.

Voluntary and community sector

- In response to requests from the third sector for greater flexibility, grants rather than contracts are used to fund the scheme, bringing more freedom for innovation.

Partnerships

- More than 30 different charities and third sector organisations are brought together in the delivery of the programme in a way which integrates with health and social care locality teams.
- Organisations and groups involved also bring additional capacity and resources to the delivery of the programme.

Community building

- The scheme complements activity that the council already undertakes in communities across Cumbria to support vulnerable people including: free home safety checks, the home delivery scheme offered by the Library Service, volunteer snow champions and no-cold calling zones.
- More than 1,000 extra community volunteers are expected to be recruited over the (current) three year life-time of the programme.



“The day my husband went to the open day turned his life around.”

Anticipated benefits

Benefits

- Alternative to the health and social care offer
- Reduced need for statutory interventions
- Reduce delay and avoidance of residential and hospital admissions
- Good value for money

Benefits

- Flexible funding and opportunities for match funding
- Better support and co-ordination
- Better partnerships and joined-up working



Benefits

- People supported to stay independent
- Feel safe, in control, occupied and active
- Improved health and wellbeing
- Reduced isolation and better quality of life

Benefits

- Resilience through building on strengths
- More inclusive communities
- Empowerment and interconnectedness

Lessons learned

Customers

- Feedback from customers so far is positive. Encouraging continuous feedback and evaluation is integral to the programme.

Communications

- Good communications from the outset through the planning and implementation stage
- A large number of stakeholders and customers helped to market the scheme and establish the changes needed.

Community asset building

- Asset Based Community Development underpins the approach. It takes time to develop and needs to be nurtured and supported.
- In times of austerity and pressures on budgets it is important to maintain investment in communities and prevention activities. Establishing and ring-fencing the funds needed is key to success.

Leadership and relationships

- It doesn't happen overnight! The Neighbourhood Care Programme in Cumbria is built on years of planning, good working relationships, clear leadership and a willingness to work together for the benefit of customers by health, social care and third sector organisations.
- Gaining the confidence of Council elected members and GPs was crucial to creating the programme.



“I am happier knowing that I will have some practical support that I can rely upon when I am discharged again.”

Contact details

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