The power of Integration to deliver better outcomes for People

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National context

Integration and Innovation: a robust call to action and an opportunity for Warrington



- On 11th February 2021, the Government published 'Integration and Innovation; working together to improve health & social care for all', a landmark White Paper setting the clear strategic direction of requiring 'our health and care system to work together to provide high quality health and care, so that we live longer, healthier, active and more independent lives'
- This builds on the Long Term Plan, and the more recent 'Integrating care: next steps to building strong and effective integrated care systems across England' and 'and is a clear call to action for the health, social care and broader systems to work as one system to meet people's health and care needs.
- More recently the DHSC have published 'People at the Heart of Care' a comprehensive policy paper that sets out the government's 10-year vision for transforming adult social care in England emphasising personalisation, prevention and an increasingly digitalised, technology enabled offer.

Regional and Local context

What we wanted to achieve for our population.....



Out ICS' Joint Forward Plan is an ambitious regional medium term plan with a triple aim to improve the health and wellbeing of the population, improve the quality of services and make efficient and sustainable use of resources.

A new, shared approach for Warrington

What does this mean in practice for us as system leaders?

From separate....

- Separate programmes of work, separate enabling groups (finance, IT, etc).
- Separate 'caseloads', multiple care plans and silo criteria
- Separate management reporting lines, into your parent organisation and multiple 'leads'
- Separate governance structures
- Separate data sets, success criteria and reporting
- Focusing on increasing activity, efficiency and streamlining to support community targets and system needs

...to shared

- A single structure covering community delivery
 (2 ODGs), shared enabling groups (finance, IT, etc) and a
 focus on progress and supported action in task and
 finish delivery groups.
- Shared 'caseloads', single pathways, single care plans and single shared criteria
- An agreed integrated management structure and a 'one registered manager' model for services with professional and clinical leadership supporting
- Shared governance structures
- Shared data sets, success criteria and reporting
- Continuing to focus on increasing activity, efficiency and streamlining to support community targets and system needs









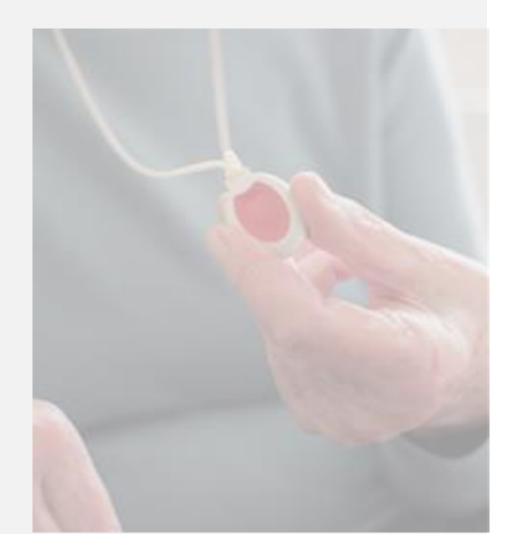


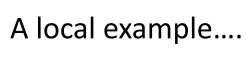
Integrated service and the impact of TEC provision and their contribution to our system...

Pendant alarms provide a valuable service to people all across the country ensuring people in need can connect easily in a crisis. There are approx. 200 pendant alarm companies and some are linked to a responder service.

2600 Estimated calls per day, nationally, from pendant alarm companies to ambulance teams

If 50% of calls were more appropriately directed through partnership work this could reduce ambulance calls by 1300 per day UK wide







Working collaboratively to connect **Urgent Community Response**, **Falls Response** and **Technology Enabled Care** services









Integration and patients outcomes...



Situation

Person activated her Carecall pendant because she had been stuck on her sofa all day, unable to mobilise. Usually, a sudden and complete loss of mobility would call for mandatory ambulance attendance but UCR despatched Responders alongside a Physiotherapist.

Intervention

On arrival, the FAST test and observations were taken to assess the likelihood of a new infection/illness. Once confirmed that her observations were all within acceptable parameters, the Physiotherapist & Occupational Therapist worked with her to enable her to mobilise herself using the surrounding furniture and the mobility aids at hand.

Outcome

Patient had capacity and did not want an ambulance to attend as the thought of this caused her significant emotional distress. Our service made a huge difference to this patient and she was incredibly grateful and was able to remain at home.

Warrington's TEC Response Service

• 24/7 Service • Typical response time 30 minutes. 100% within 1 hour

The Impact in Warrington

For People

80% of people using these services remain at home or the place they call home

95% of callers have an in person on site response within 30 minutes of calling

Serious illness, sepsis, spotted by the service who summoned an emergency ambulance to enable life saving treatment

Peace of mind for people and the people closest to them that someone is there 24/7

Avoidable Call Outs & Admissions

80% of calls received that were handled by the TEC responder service/UCR, resulted in the patient being successfully lifted and remaining at home

Cost Savings in Warrington

108 out of 149 calls (monthly average) successfully dealt with by TEC Responder Service/UCR

Cost saving each month = £59,400 *

Potential National Impact Avoidable Call Outs & Admissions

https://www.tsa-voice.org.uk/downloads/case_studies/warrington_case_study-_final.pdf

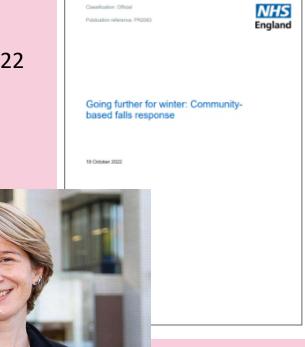
2600 Estimated daily calls from pendant alarm companies to ambulance teams80% Call outs avoided by using TEC Responder Service/UCR

Potential Yearly Saving = £375,804,000 *

^{*}Figures exclude any hospital admissions costs, costs for attendances only

Going further for winter: Community based falls response.

October 2022



Amanda Pritchard
Chief Executive
NHS Foundation England

We are proud to have steered health policy.....



Increase coverage of Technology Enabled Care (TEC) Responder Services who are trained in falls assessment, management and pick up, ensuring:

- Providers are certified to the <u>TSA Quality Standards Framework</u>, a UKAS
 accredited scheme (UK Accreditation Scheme appointed by Government to ensure
 Quality and Safety), and provide pick up services including a holistic and outcomes
 based 'at home' assessment
- At home assessments are completed by the TEC Responder Service delivered within timescales of 45 minutes from deployment and 60 minutes in more rural areas of the referral – seeking to improve and reduce variation in response time where these standards are already being achieved
- Personal use of TEC equipment is encouraged in individuals at risk of falling, recognising that evidence indicates that poor patient acceptability and usability can detrimentally affect their use.





- ✓ Home based solutions are *much less stressful for the patient* and allows *Ambulances to attend higher category* calls.
- ✓ Staying positive and true to our ambitions-patients tell us that their experience is "First-class" which makes all the "ups and downs" and building of the service worthwhile.
- ✓ Communication betweenn all services is imperative, ensuring that everyone understands what each other has to offer and how to access all teams in a timely way.
- ✓ The undertaking of *regular meetings* to update on capacity, what is going well and not so well.
- ✓ Learning from each other and not being afraid to challenge your colleagues and other professionals.
- ✓ That a clinical response is not always required, the *right response at the right* time is crucial.

