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East Lancs CCG

How to Network Effectively Across the Health Economy to Maximise Support for Carers
East Lancashire Carers Centres

Both Centres are funded and supported by:

Lancashire County Council
East Lancashire NHS

3 out of 5 people will care for someone else in their lifetime

WORKING TOGETHER TO SUPPORT CARERS ACROSS EAST LANCASHIRE

Both Centres are proud to be part of:
Where to Start
Why is it Important?

Houston, We Have a Solution
Health & Social Care Act 2012

What this means for commissioners

The Act sets out two duties for NHS commissioners with respect to patient and public participation. These and related reporting requirements are summarised here.

**NHS commissioners should:**

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<th>Make arrangements for and promote individual participation in care and treatment through commissioning activity.</th>
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<td>Make arrangements for the public to be engaged in governance arrangements by ensuring that the CCG governing body includes at least two lay people.</td>
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<th>Listen and act upon patient and carer feedback at all stages of the commissioning cycle – from needs assessment to contract management.</th>
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<td>Publish evidence of what ‘patient and public voice’ activity has been conducted, its impact and the difference it has made.</td>
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<th>Engage with patients, carers and the public when redesigning or reconfiguring healthcare services, demonstrating how this has informed decisions.</th>
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<td>CCGs will publish the feedback they receive from local Healthwatch about health and care services in their locality.</td>
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The £3.8bn Better Care Fund (formerly the Integration Transformation Fund) was announced by the Government in June 2013, to ensure a transformation in integrated health and social care.

The Better Care Fund (BCF) is one of the most ambitious ever programmes across the NHS and Local Government. It creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their well-being as the focus of health and care services.

The BCF is a critical part of the NHS 2 year operational plans and the 5 year strategic plans as well as local government planning.
Integrated Care
Neighbourhood teams

- reduce complexity of services - wrap services around primary care
- build multidisciplinary teams for people with complex needs, including social care, mental health and other services
- specialist medical input and redesigned approaches to consultant services – particularly for older people and those with chronic conditions
- create services that offer an alternative to hospital stay
- **develop the capability to harness the power of the wider community**
Risk Stratification Meetings

- Identifies people who are more likely to require hospital or long-term care in the future, in order to target them with more intensive support at an earlier stage. Aim to reduce the number of people who go into A&E or hospital unnecessarily, or need long-term social care.

- When people do go into hospital, our aim is to reduce their stay when possible and ensure they are discharged in a co-ordinated and timely manner, with tailored information and support to help them take more responsibility for their own wellbeing.

- Reduce the number of patient primary and secondary care interventions and so reduce the increasing cost of patients using primary and secondary care resources where not required. This has the potential to reduce healthcare costs.

- To increase the current number of people able to co-manage their own condition with the support of health and social care professionals.
Friends & Family Test

How likely are you to recommend our GP practice to friends and family if they need similar care or treatment?

Free text Question:

If we could change one thing about your care or treatment to improve your experience, what would it be?
Now it's your turn.
Feedback

What is happening in your area and how have you tapped into this to maximise support for carers in your work?

How do you keep ahead of changes?
Keeping Ahead of Changes

Caring Matters – An update for Councillors

September 2014

What not to miss in this month’s bulletin:
- Care Act Consultation – Carers Trust response
- Better Care Fund Plans
- Who’s Who in the Regions – A useful guide to the Health and Social Care structure

This month’s bulletin also includes:
- Policy team update
- 2014 Party conferences
- Parliament and National Policy Developments
- Easy to read versions of NHS Constitution and NHS Complaints Guide
- NHS Car Parking Principles guidance
- Local Government
- Local Government Association outlines its vision of the first 100 Days of a New Government
- Sources of information and advice for constituents
- S/RK IMPACT Awards – Applications for 2015 open now
- Other News and Events
- Care and Support Alliance survey shows that the public has given a ‘vote of no confidence’ in the care system
- Household Finances of Carer’s Allowance Recipients July 2014 Consultation on End of Life Care
- Manifestos for Better Mental Health
The NHS Beyond the 2015 General Election

At a glance: key pledges so far

**Conservatives**
A real-terms increase in NHS funding
All patients to have access to a GP from 8am to 8pm, seven days a week by 2020
5,000 more GPs to be trained
Jeremy Hunt also called for health and social care to be integrated in his conference speech, but gave no specifics about this other than a strong endorsement of the Better Care Fund as the vehicle for achieving it.

**Labour**
A £2.5 billion Time to Care Fund to pay for 20,000 nurses, 8,000 GPs, 5,000 care workers and 3,000 midwives
Whole person care to be at the heart of Labour’s manifesto
The Health and Social Care Act to be repealed
A guaranteed appointment with a GP within 48 hours
The NHS to be the preferred provider of services
All hospitals will be asked to evolve into integrated care organisations, as well as support for carers and a right to die at home.

**Lib Dems**
A real terms increase in NHS funding of £1 billion in 2016/17 and 2017/18
An extra £500 million for mental health services
Health and wellbeing boards to be increased in size and given power to hold budgets
NHS mergers will no longer come under the jurisdiction of the Competition and Markets Authority and commissioners will not have to put all services out to tender
All patients to be issued with a ‘care footprint’ detailing the costs of their care
Improved rights and benefits for carers.
Final Message

Starting something new or making a big change requires effort, persistence, and motivation...

Doubt, fear, & worry will only slow you down. Focus on doing your best now, & celebrate every step of the way.

~ DOE ZANTAMATA