

Joining Up Care in Cheshire West

Moving towards an Integrated Care Partnership

Frequently Asked Questions (FAQs) - Public

Q1: Why does the local health and care system need to change?

A: Cheshire West's health and care system provides good levels of care, but we can do better. Too often people tell us they experience delays or disjointed care.

People with multiple conditions – in particular – tell us their care can be fragmented, confusing and inefficient. They often have to repeat their story. Many people are also treated in hospital when their needs could be better met closer to home.

It has been clear for some time that simply challenging local health and care organisations to work harder in a fragmented and reactive way is not the answer.

Instead, local partners need to work together to shift more focus towards prevention and early intervention and to provide more care closer to home.

Q2: What do we mean by “integration” of health and social care?

A: Health and care integration is a broad term used to describe closer working between the local NHS, Cheshire West and Chester Council and wider partners.

Integrating health and social care may involve planning and buying services together as well as providing frontline services in a more joined up way.

By joining up services which are currently provided separately, we can make better patient decisions by pooling experience, expertise and resources.

By focusing on preventing ill-health and unnecessary hospital admissions we can ensure local services are sustainable for the future.

Q3: Is this another “top down” NHS restructure?

A: No. Our approach has been developed collaboratively by both the local NHS and Cheshire West and Chester Council to build on existing foundations of integration, for example via the pooled budget called the Better Care Fund and the Connecting Care and West Cheshire Way health and care transformation programmes.

Clinicians and frontline staff from across Cheshire West’s health and care system are among those leading the work.

Q4: Which organisations are involved?

A: Organisations which have pledged to work together on health and care integration across Cheshire West are:

- Cheshire West and Chester Council
- NHS West Cheshire Clinical Commissioning Group
- NHS Vale Royal Clinical Commissioning Group
- The Countess of Chester Hospital NHS Foundation Trust
- Cheshire and Wirral Partnership NHS Foundation Trust
- Primary Care Cheshire
- South Cheshire and Vale Royal GP Alliance
- Central Cheshire Integrated Care Partnership

Q5: Are there any examples of this working elsewhere?

A: There are a number of examples of different integrated care models, both nationally and internationally. The [King’s Fund](#) is an independent charity which collates and analyses emerging integrated care models.

Q6: Will this lead to privatisation of the public sector?

A: No. Nationally and locally, there has been some public concern about whether integrating health and social care may open the door to US-style healthcare. This is not the direction of travel in Cheshire West.

Partners will not initiate any competitive procurement involving private providers, but will instead bring local public sector organisations together via an Integrated Care Partnership Board with the common aim of improving the health and care of people in Cheshire West.

Q7: Is this about saving money?

A: No. While it is true that inefficient, fragmented care impacts on the cost of care delivery, it also impacts on the quality of care and people’s experience of care. There is a collective desire to integrate care to improve people’s experiences of care and to achieve the best possible value for the people of Cheshire West.

Partners firmly believe that working together to integrate health and care is the right thing to do for the people of Cheshire West – both to enhance patient care and safeguard the financial sustainability of the local health and care system.

Q8: What is new or different about this approach?

A: By working together, we believe the way local services are planned, paid for and delivered can be simplified. To achieve this, we will support the development of nine healthy, thriving “care communities” across Cheshire West which offer more care closer to home.

Health professionals and social workers will work together across dedicated geographical areas to deliver increasingly comprehensive and proactive care – with a greater focus on prevention and early intervention to promote positive health and wellbeing.

This new model of care will help to ensure funding is directed where it is needed most – enabling more people to access the right care in the right place at the right time.

Q9: What changes can people expect to see?

A: We have identified some high-level priorities for our early integration work but any proposed changes need to be developed further with the full engagement of local people.

The public document “Joining up Care” describes the vision, case for change and objectives. Using case studies, it brings to life how people might access care and support in the future and what that care may look and feel like in Cheshire West.

Q10: Are there any local examples of integration which are already delivering benefit to people in Cheshire West?

A: Yes. Health and care partners across Cheshire West already work closely together to ensure consistent, high-quality care in a number of ways. Community teams consisting of a range of health professionals and social workers already provide some care closer to home. We want to build on this foundation.

Local health and care organisations also work closely together on key challenges such as falls prevention.

Q11: How have patients and the public been involved so far?

A: For years people have been telling us about their experiences of health and care in Cheshire West. This feedback has not only brought into sharp focus the problems we are trying to solve, but has helped partners to develop early priorities.

Informal engagement has been carried out with Healthwatch Cheshire and local patient groups, with all partners fully committed to engaging with local people about the integration work.

We need to understand what the views of local people are and recognise that it is really important to give people time to consider our plans and provide their thoughts, comments and feedback.

Q12: Will there be formal consultation with local people?

A: Formal public consultation will only be required if significant service changes are proposed. This is not anticipated in the short to medium term. Instead we'll focus on working with local people to develop meaningful and real health and care integration.

Local people are key to successfully transforming services for the future. We are committed to listening and learning from their experiences to help shape our integration work as we work together to deliver the best possible outcomes for the people of Cheshire West.

Where formal public consultation is required, partner organisations will work closely with Cheshire West and Chester Council's People Overview and Scrutiny Committee and seek expert advice from Healthwatch Cheshire and the voluntary sector.

Q13: How will the Integrated Care Partnership be governed?

A: The Integrated Care Partnership will be subject to a formal integration agreement and will be governed by a partnership board that will start meeting from September 2018.

The membership will be a combination of executive and non-executive representatives from each partner organisation and senior members of the Integrated Care Partnership team.

The Cheshire West and Chester Health and Wellbeing Board will provide the public oversight required.

Ultimately, the work of the emerging Integrated Care Partnership is accountable to the residents of Cheshire West.

Q14: How does this link to proposals to merge the four Cheshire Clinical Commissioning Groups?

A: While we focus on delivering more care closer to home, we also recognise that there will always be some services that are better delivered at a regional level – for example ambulance services and continuing healthcare for patients with highly complex needs.

A Cheshire-wide committee is already in place to look at those services that can be delivered more sensibly on a larger scale, helping to promote consistency across the county.

Proposals to move towards a merger of the four Cheshire CCGs by April 2020 – at the earliest – would enable some services to be planned and bought more efficiently.