

## Integration Workshop – Tues 23 Feb 2016

### Briefing Report for System Leaders Group

An integration workshop was held and hosted in Slough on 23 Feb with the purpose of starting a system wide discussion around the integration agenda in order to:

- i) develop a shared understanding of what we mean by integration and
- ii) where we aim to be in our ambition for integration by 2020 as set out in the NHSE Planning Guidance, the NHS Five Year Forward View , BCF Plans and Care Act responsibilities

### Outline

The session was quite short (3 hours) and therefore needed to be quite focused to make best use of limited time available. There were 39 people attending with broad representation across local authority and CCGS (Slough, WAM and Chiltern), together with other partners and stakeholders including Frimley, BHFT, Patient representatives, GPs. We did however miss representation from Bracknell and Ascot CCG and BFBC at the event (although John Nawrockyi from BFBC was not able to attend he did give his support).

The first part of the session was context setting to the integration agenda covering:

- New Vision of Care
- The BCF Planning and Policy context
- The Sustainability and Transformation Plan

The second part of the session then co-ordinated discussion around areas of:

- What do we understand by integration?
- Where are we now in terms of integration (what's working well and where are the barriers?)
- What would a joint approach look like?

### Feedback

There was very good engagement and enthusiasm from all those present particularly in the integrative table discussions and this was recognised in the positive feedback. There was a joint recognition from all about what needed to be done in terms of shared objectives and outcomes, and a real willingness to do this together across the system.

- 1) Feedback from session on '**what do we mean by integration?**' was that means lots of meanings but key messages were about:
  - Being person centred
  - Shared purpose
  - High level of trust
  - Avoiding duplication / doing things once
  - Keeping it simple
  - Connected / Coordinated care

2) Feedback about '**what was working well and the barriers**' included:

- A real willingness to work together and recognition of need to change ("all talking the same language")
- Sign up to the New Vision of Care model
- Several Joint Strategies developed and in place e.g. carers
- Good intermediate care / short term support
- Integrated MH teams

Barriers included:

- Trust / sharing risk
- Ownership at the front line
- Governance and decision making
- Thinking/ planning / training separately
- Capacity and lack of innovation
- Data and information sharing
- Communication
- Differing criteria, protocols, funding streams

3) Feedback on '**what a joint approach would look like**' included:

- Joint ownership
- Developing a joint/ shared governance arrangements to deliver
- Aligning strategic, operational and contracting together
- Aligning finances and sharing risk across whole system
- Single set of KPIs and outcomes
- Digital innovation

**Next steps** suggested:

- A commitment to action and taking this forward
- Get on with early adoption and learn from the experience
- Join Forces under New Vision of Care and getting involved in the development of the exemplars
- Practical examples that we can work through
- Feedback on what projects/services are being integrated currently
- Seek consensus on what kind of training and development needed for senior managers
- Having a quarterly workshop to keep up momentum
- Focus group with specific questions
- Invite email feedback from participants [and others that couldn't attend] on suggestions that they would like to make
- Identify quick wins and exemplars