Local Government Association

NHS England

Integrated Personal Commissioning

IPC operating model v1

July 2016

Purpose of the operating model

- Integrated Personal Commissioning will be the main model of care for around 5% of a local system's population, including people with multiple long term conditions, people with severe and enduring mental health problems, and children and adults with complex learning disabilities and autism
- The purpose of the **IPC operating model** is to translate the IPC Emerging Framework into what we would expect to see (1) for people, and (2) in local systems, if IPC was working successfully
- It provides an overview of how the five key shifts and work of the corresponding Collaborative Development Groups (CDGs) – including producing a range of blueprints to enable replication – contribute to IPC as a whole
- It also provides an opportunity for local IPC systems to describe IPC to their colleagues and provides a basis for developing their own local model

Overview

- The document:
  - Shares what IPC feels and looks like to people
  - Introduces the IPC operating model
  - Describes what IPC looks like in practice:
    - For people
    - For local systems
  - The pen pictures show how this works for people in a range of situations
- **This document includes a first version of the IPC operating model.**
- **We expect to update it by September 2016 based on feedback and practical experience in sites.**

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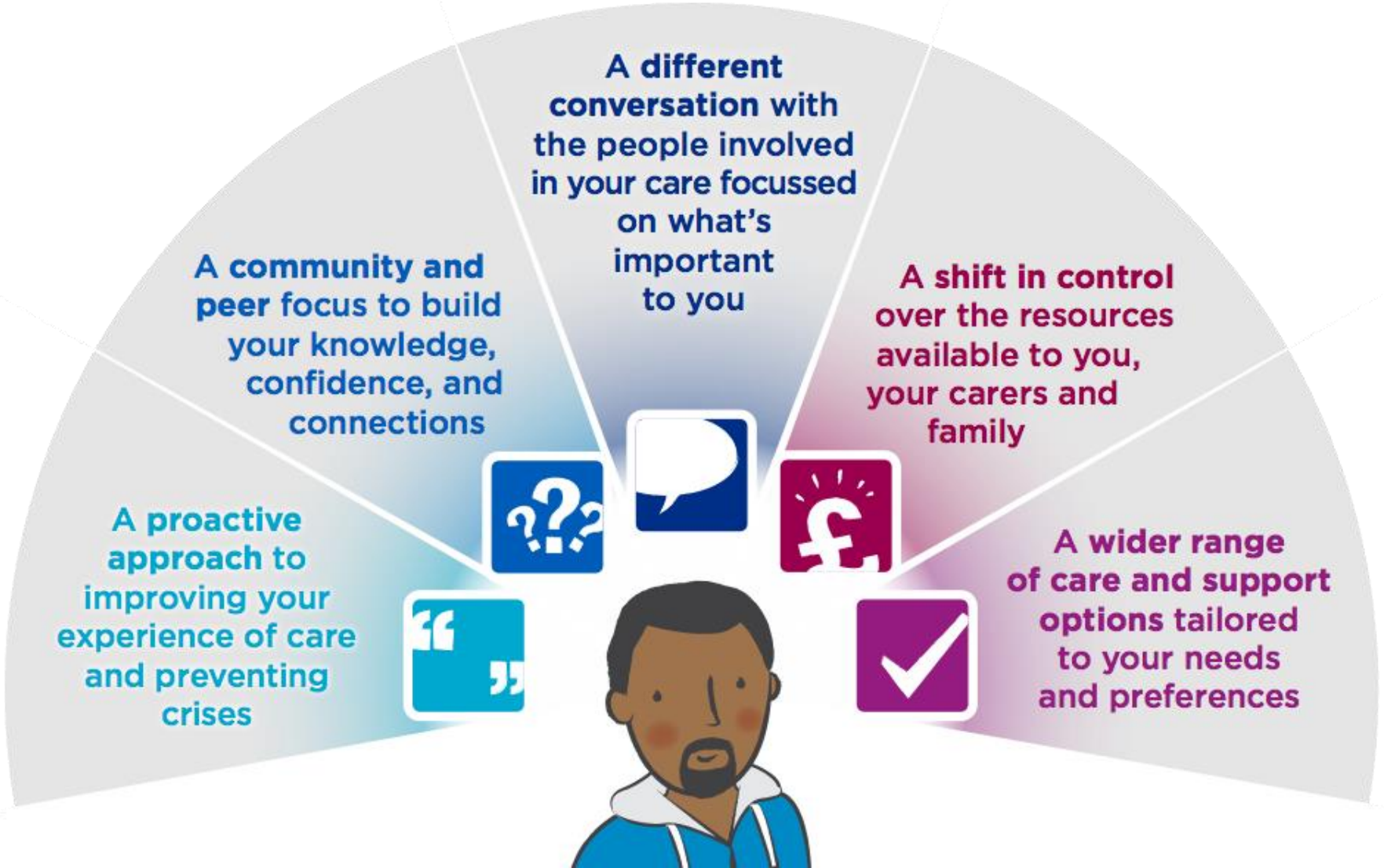
What IPC feels and looks like to people

Individual level experience of IPC



Key features - what can a person expect from IPC (1)?

A person should:

- Experience a coordinated approach that is transparent and empowering.
- Be valued as an active participant in conversations and decisions about their health and well-being.
- Be able to access information and advice that is clear and timely and meets their individual information needs and preferences.
- Be clear about what IPC is offering them, it's purpose and who is involved.
- Have access to a range of peer support options and community based resources to help manage their health and well-being
- Have a named coordinator to guide them on their IPC journey
- Be able to develop their knowledge, skills and confidence to better self-manage their own health and well-being.
- Be clear about what resources are available to meet their health, well-being and educational needs (for children and young people).

Key features - what can a person expect from IPC (2)?

A person should*:

- Be central in developing their care plan and agree who is involved
- Be able to agree the health and well-being outcomes they want to achieve, in dialogue with the relevant health, education and social care professionals.

If this leads to a personal budget*, a person should:

- Know upfront an indication of how much money they have available for healthcare and support.
- Be able to choose how the money is managed; a direct payment, a notional budget), a third party budget or a mix of these approaches.
- Be able to spend the money to meet their outcomes in ways and at times that make sense to them, as agreed in their plan

* These key features should be read in conjunction with the IPC personal budgets definition. This highlights relevant guidance that IPC sites must ensure is followed.

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IPC operating model

Introducing the IPC operating model

- The following slide describes the operating model that would be common to all local systems implementing IPC
- Local systems can tailor the operating model to create their own local (but commonly recognisable) version of IPC
- The 3 middle elements of the model are parallel shifts that don't necessarily happen sequentially:
  - Community capacity and peer support
  - Personalised care and support planning
  - Personal budgets
- People can experience one, two or all of them at any one time depending on their personal circumstances and current priorities, level of need, referral route, eligibility, appropriateness etc.
- The enablers are elements a person won't directly experience themselves, but which local systems need to do in order to create the conditions in which the operating model exists

Operating model – key:

- Colour coding shows how different parts of the operating model correspond to the 5 key shifts of IPC
- Arrows indicate how people can flow throughout the model and the relationships between the elements/shifts
- Enablers are shown in dotted boxes

Figure 2 shows:

- who will benefit – the IPC cohort
- who will have a care plan
- who will have a personal budget.

Integrated Personal Commissioning Operating Model

5% OF POPULATION
Cohorts identified on the basis of local priorities and need

PROACTIVE OR REACTIVE REFERRAL ROUTES

- GP referral (proactive – by population risk stratification)
- GP referral (reactive – by person presenting who could benefit)
- Specialist or acute health services
- Hospital discharge and intermediate care (post reablement)
- Social care (childrens and adults)
- Voluntary, community and social enterprise (VCSE) organisations
- Self-referral

PROACTIVE COORDINATION OF CARE
People proactively or reactively identified and offered information about IPC. Multi-disciplinary IPC hubs with single points of coordination for each person

The 3 middle elements are parallel processes that don't necessarily happen sequentially: people can experience one, two or all of them at any one time depending on their personal circumstances and current priorities, level of need, referral route, eligibility, appropriateness etc

FINANCE ENABLERS:
- Cohort ID
- Cost of individual services
- IG solutions
- Linked data
- Person-level costings

COMMUNITY CAPACITY AND PEER SUPPORT
Make the most of what's available to you through Local Area Coordination and systematic access to peer support

PERSONALISED CARE AND SUPPORT PLANNING
Have a different or better conversation to identify what matters to you, and capture this in one place

PERSONAL BUDGET
A personal budget blends resources to achieve health, wellbeing and learning outcomes

WORKFORCE ENABLER (underpins everything):
- Workforce capacity planning
- Multi-disciplinary team options
- Workforce development plan

LEADERSHIP, CO-PRODUCTION AND CHANGE ENABLER (underpins everything):
- Clear system leadership
- Vision, strategy and action plan for change
- Communication strategy

MAKING IT HAPPEN
Accessing a wider range of care and support options tailored to individual needs and preferences, through personalised commissioning and payment

REVIEW
Part of personalised care and support planning

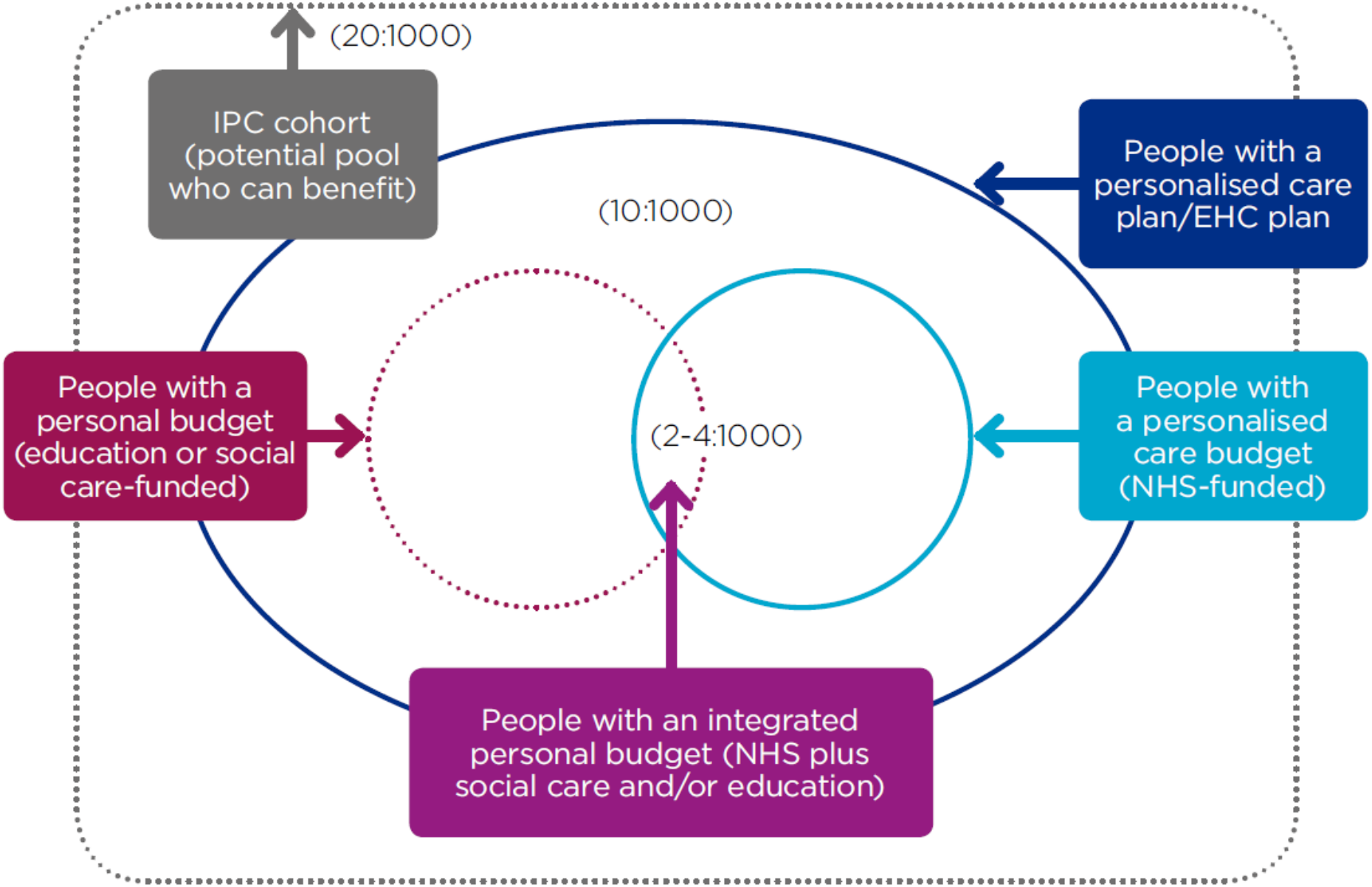
Check how well everything is working and adjust the plan and budget. Explore other elements of IPC offer that have not yet been considered, and repeat.

COMMISSIONING ENABLERS:
- Releasing money
- Personalised contracting and payment
- Market shaping

IPC key shifts (colour coded)

- Proactive coordination of care
- Community capacity and peer support
- Personalised care and support planning
- Choice and control
- Personalised commissioning and payment

Figure 2: Scope of IPC interventions per 1000 of a typical CCG population



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What IPC means in practice

What this means in practice

- The following slides capture at a headline level what IPC means in practice for each of the five key shifts for both:
  - People
  - Local systems

Proactive coordination of care

- People proactively or reactively identified and offered information about IPC

What happens for the person?	• You can find out about IPC from council and NHS websites, your GP, other health practitioners, education, social services, or the voluntary sector • It will be clear about what IPC offers you, the steps of the journey, and how this helps you get a better life • It is clear who can benefit from IPC in your area and who can get a personal budget • If you are in this group, we will contact you to offer the chance for a better conversation – or you can ask for this yourself
What will IPC sites need to put in place?	• Agreed, clear criteria for who can benefit from IPC • Information about IPC and how it works for people with different levels of needs

Proactive co-ordination of care – how it works

Information is made available to everyone, including those with long term conditions and those who care for and love them.
This information explains what support is available including what is a personal budget, how they can get this support and will include information about what may / may not be available as a personal budget.

This means that when Freda and her son who is helping her to get some support following a recent diagnosis of dementia can talk with people at the local GP surgery about how they might be able to help. With expert help Freda and her son can start to think about the support she needs to stay at home and in contact with her friends who she has known for years and extended family, especially her grandson Freddie who she loves spending time with.

If a personal budget is relevant, it will be made clear that this is an option.

Community capacity and peer support

- Make the most of what's available to you through Local Area Coordination and systematic access to peer support

What happens for the person?	• You will have the chance to find out what's available locally to help you develop relationships, make a contribution, and get the life you want • You will be encouraged to develop your knowledge, skills and confidence to self-manage your health condition in a range of ways that pay close attention to what matters most to you • You will have the chance to connect with other people who have experience to learn more, and build your confidence to take up the IPC offer
What will IPC sites need to put in place?	• A range of peer support options, including 1:1, group and online support • A range of community navigation options, including local area co-ordination/community navigators • Building community capacity – an asset map showing what is available and a plan and business case to invest in developing what's on offer

Community capacity and peer support – how it works

For Jason, who left his job a couple of years ago due to stress and who has experienced periods of depression which has meant he's spent a lot of time on his own (he has no family nearby) this means that the local team at the GP surgery would be linking him up with one or two local people who have experienced the same sort of thing; struggling to get back to work, feeling very isolated and understanding personally what depression means.

It would mean helping Jason to get in touch with and meet up if he would like to with these people. It might also mean helping him to find the right groups on the internet where he can share his experiences with others. If this works for Jason it might also mean helping him connect with groups locally who maybe share his passion for photography.

If a personal budget is relevant, it will be made clear that this is an option.

Personalised care and support planning

- Have a different or better conversation to identify what matters to you, and capture this in one place
- Check how well everything is working and adjust the plan and budget. Explore other elements of IPC offer that have not yet been considered, and repeat

What happens for the person?	• You will have the chance to have a conversation which focuses on what matters to you, and what is working and not working in your life • This will be done in a way that builds on your own skills, knowledge and confidence • You will experience an integrated planning process coordinated by a single point of contact • You will have one summary plan that is developed in partnership and owned by you • You will have the chance to regularly review your plan in a timely and appropriate way • It's easy to find out what support and services are available
What will IPC sites need to put in place?	• A co-produced shared vision and action plan for personalised care and support planning • Training, mentoring and support for all parties delivering better conversations • A common framework and integrated, proportionate process for personalised care and support planning (including assessment and review) • A single summary plan format

Personalised care and support planning – how it works

For Joe, whose parents are much older and his sister who is helping him at home this means being able to sit down in his family's front room and talk about the things that are really important to him, which people he loves to spend time with, what he likes to do in his spare time, how he has always wanted a job. Joe has learning disabilities and autism, he finds the world a very difficult place to live, finds new people difficult and likes a routine. His parents have cared for him at home for all his life but as they are so much earlier Joe needs more support from outside of the family home.

Getting the support right, being able to include familiar and important people, working to Joe's routine and doing things which Joe loves doing are all really important, as is helping him think about work, what he is good at and how he could make some contribution to the local rural community he lives in. Making this plan will need a lot of skill, time and patience as it's a new experience for Joe and his sister.

If a personal budget is relevant, this will be an integral part of the planning process.

Personal budgets

- A personal budget blends resources to achieve health, wellbeing and learning outcomes

What happens for the person?	• It's clear from the start of the process who could get a personal budget and what money can be included • For these groups of people, personal budgets are the mainstream approach • People get a individual statement of resources telling them what education, health and social care money is included and the indicative budget • The personal budget meets the key features and is the same, joined-up experience regardless of where the money comes from. • You can get advice with arranging care and support, recruiting personal assistants and to manage direct payments
What will IPC sites need to put in place?	• Agreement on what money to include in personal budgets for all groups in the current IPC cohort • A individual statement of resources for the people who can have a personal budget, which provides an indicative budget • A joined-up process for personal budget implementation and review • All three options for managing the money are in place with access to direct payment support services and third party budgets • Changes to contracts to enable money to be freed up for personal budgets • A market position statement setting out priorities, making clear what changes are needed and how these will be achieved

Personal budgets – how it works

For Mohamed Aaqil and his family this means being able to think about how best to Zaheera's personal budget. Zaheera is 16, she's a very lively young woman with a real zest for life. She has a lot of support needs with support from continuing care and education enabling her to attend a local special school. She has had quite a few stays in hospital and this often means she is at home quite a lot afterwards recovering. Consequently her mother, Madiha, has not been able to take up employment and has carried a lot of the responsibility for caring for her daughter.

Having a personal budget means the family can think about how to get the right and best support for Zaheera, how they can integrate the support at school and home, how they can ensure this support can continue in hospital and ensure that when at home and recovering Zaheera can continue to take part in learning activities because her support includes those who work alongside her when she is at school. It also means in the long run that Madiha can start to think about getting a job.

The four enablers

The enablers in the operating model are things that a person won't directly experience themselves

They are the things that local systems need to do in order to make the operating model work:

- Leadership, coproduction and change
- Finance
- Commissioning
- Workforce

Further information

Information already available about IPC includes:

- IPC Emerging Framework
- IPC operating model (this document)

During 2015/16 we are developing:

- a set of products through 5 collaborative development groups (Annex 1)
- a delivery support offer for IPC sites (Annex 2).

For further information about the IPC programme contact us at:
https://www.england.nhs.uk/commissioning/ipc/
england.integratedpersonalcommissioning@nhs.net

ANNEX 1: Collaborative development group products

Proactive coordination of care	Community capacity and peer support	Personalised care and support planning	Personal budgets	Personalised commissioning and payment
• Key risks / getting started guide • Cohort identification methodology • Catalogue of IG solutions • Directory of data sources • Analysis of skills and roles required to support financial model • Narrative around how the financial model fits with care and support planning • Planning tools • List of impacted services • Revised guidance for Deloitte model	• A business case for change • Underpinning design principles • Evidenced approaches to community capacity • A common framework for co-production • A mapping and reflecting tool for local communities • A diagnostic tool for coproduction • A diagram / infogram of a common framework • Case studies & key messages	• Common planning framework, tailored to PAM • Diagnostic and getting going guide • MDT workforce design options, including developing IPC hubs • Workforce support resources on training, coaching & mentoring • Business case and principles of PCSP • Good practice in monitoring and review, including panels • Directory of PCSP resources • Workforce capacity planning • Taking positive approaches to risk	• Definitions • High-level customer journey • Statement of resources • Options for managing the budget • Single administrative process - case studies • Key features • Review and monitoring framework	• Diagnostic commissioning tool • Service specification Inserts for commissioning intentions • CQUIN template re personalisation • Market position statement - provider • Commissioning Framework disaggregation of block contracts • Key performance Indicators to assure personalised commissioning

ANNEX 2: delivery support offer

Proactive coordination of care	Community capacity and peer support	Personalised care and support planning	Personal budgets	Personalised commissioning and payment
NHS England • IPC Finance Team **VCSE Partners** • RSA – Data mapping approaches	**VCSE Partners** • CBF – peer support • Community Catalysts – market development and community capacity • CDC – peer support • SPICE – developing community capacity through time credits • TLAP – community capacity building • Volunteering Matters – volunteering and the role of VCSE and volunteering in PBs • People Hub – peer support	**NHS England** • Rich Watts • Nicola Gitsham • Bernadette Simpson **VCSE Partners** • Age UK – personalised approaches • Alzheimer's – personalised approaches • Coventry University – self-management support • HSA – personalised approaches • Sense – personalised approaches	**NHS England** • Personal Budgets specialist • CHC/CC masterclass • Support from PHB team • Sue Bottomley – block contracts and PHBs • Local offer workshops and toolkits **VCSE Partners** • Alzheimer's Society – personal budgets for people with dementia • In Control – developing and implementing personal budgets • NDTi – PHBs for children and young people	**NHS England** • IPC Finance Team • Rich Watts **VCSE Partners** • CDC – joint commissioning children • Choice Support – ISFs • NDTi – strategic commissioning and market development, joint commissioning • TLAP – ISFs