Whole System Integrated Care Workshop

survey feedback
Individuals working across health and social care were invited to take a survey in advance of the LGA Integrating Care workshops in London, Leeds and Bristol.

Invitations went out to all Health and Wellbeing Boards to nominate individuals to respond.

53 responses were received between 11\textsuperscript{th} and 28\textsuperscript{th} July 2013.
Currently involved in the development of integrated care in their locality

- 84% Yes
- 16% No

A large majority of respondents were already involved in developing integrated care in their locality.
Survey respondents tended to be at a later stage of development than the workshop participants as a whole, with a majority at the development and piloting stage.
Respondents could choose one or more options. The survey indicated a broad range of existing stakeholder involvement including GPs, a range of providers and service users.
We have a process in place to engage local people and service users in co-design and delivery.

We are able to link up data between health and social care service users.

We have systems to share information and data across multiple partners.

We have a good awareness of and access to national and international best practice.

We can quantify the financial savings of integration.

We have a clear plan in place for rolling out integrated services across our locality.

We can quantify the financial costs of integration.

We have shared performance indicators in place to help us monitor progress.

We have a clear and shared understanding of how integration will deliver better quality outcomes.

Where are we now?

- Our plans are communicated and understood at all levels
- We have a clear and shared understanding of how integration will deliver better quality outcomes
- We have shared performance indicators in place to help us monitor progress
- We can quantify the financial costs of integration
- We have a clear plan in place for rolling out integrated services across our locality
- We can quantify the financial savings of integration
- We have a good awareness of and access to national and international best practice
- We have systems to share information and data across multiple partners
- We are able to link up data between health and social care service users
- We have a process in place to engage local people and service users in co-design and delivery

Top 3 barriers

- Attribution of cost and savings
- Information governance and sharing
- Resource allocation and capacity

Respondents felt that there was a shared understanding of integration, but significantly more challenges around quantifying precise costs and savings, ability to undertake detailed planning and resource allocation, information and data sharing, and engaging local people and service users.
Guidance to support leadership through difficult decisions

Top ranked value case components

- A persuasive case for integrated care in terms of financials / outcomes / service user experience
- Clearly linked qualitative and quantitative data
- Guidance to support leadership through difficult decisions

Top ranked toolkit components

- A review of the financial implications of integrating services and how to understand whether this represents a sustainable business model
- Defined measures for understanding cost, outcomes, activity and individual flow through the health and social care system
- Specific support for modelling and comparing assumptions

Based on highest ranked (score of 9) options. Individuals could rate more than 1 option as a 9.
94% of survey respondents wanted to part of the future community of practice, testing and development work.