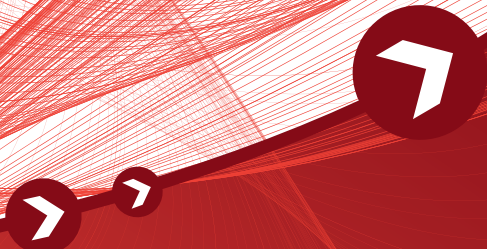


A joint commissioning
strategy for

Older People's Services
in Buckinghamshire:
2009 – 2012



Summary Version

Developed in partnership by:

Buckinghamshire Older People's
Partnership Board

Buckinghamshire Primary Care Trust

Buckinghamshire County Council



Summary version of the
joint commissioning
strategy for

Older People's Services in Buckinghamshire: **2009 – 2012**

Introduction

This strategy identifies six major ideas to improve the health and well-being of older people in Buckinghamshire over the next three years. These shifts will help to deliver the requirements of the 2006 White Paper 'Our Health, Our Care, Our Say', which set a new direction for the entire health and social care system. They also respond to a series of national initiatives, notably 'Next Steps: A New Ambition for Old Age' (Department of Health, 2006) and 'Putting People First' (Department of Health, 2007).

The strategy addresses and incorporates local drivers such as the Buckinghamshire Community Strategy, the Buckinghamshire Older People's Strategy and the Buckinghamshire bEAM Strategy. Successful implementation will mean that by 2011:

- More people will experience emotional and physical well-being in old age.
- More older people will have choice and control over their own lives.
- More older people will be supported to live in their own homes.
- Fewer people will be admitted to hospital and will instead be supported in the community through intermediate care and re-ablement services.
- More older people will die where they choose.

Before looking in more detail at these commissioning intentions, it is important to understand the current situation. So, the first section of this summary document describes briefly the current policy context, the financial and demographic background and the case for change. Anyone wishing for a deeper understanding, including the comprehensive mapping of services, should consult the full strategy on the Buckinghamshire County Council website, www.buckscc.gov.uk.

The context

- Local and national policies •
- Demographic challenges •
- Financial challenges •
- The case for change •

LOCAL AND NATIONAL POLICIES

Services for older people in Buckinghamshire have changed and improved in recent years with a greater emphasis on prevention and public health initiatives, stakeholder engagement, high quality primary care, support for carers, dignity in care, more community based mental health services, safeguarding and personalisation of care. These developments have been given further impetus by the new strategic framework for adult social care in the county, 'because Every Adult Matters' (bEAM).

Under bEAM, services will be commissioned for the whole community that promote:

- Timely access to services for those people who are eligible.
- The minimum intervention necessary.
- The safeguarding of vulnerable people.
- Independence and control.
- Well-being.

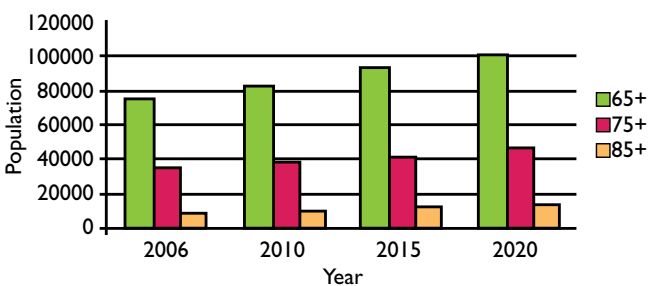
These changes reflect national policy. In 2006, the Department of Health published 'Next Steps: A New Ambition for Old Age', which built upon and updated the 2001 National Service Framework for Older People. This identified the three themes of dignity in care, joined up care and healthy ageing. The present strategy addresses these

themes and most of the ten specific programmes that were outlined, namely:

- Dignity in care.
- Dignity at the end of life.
- Stroke services.
- Falls and bone health.
- Mental Health in old age.
- Complex needs.
- Urgent care.
- Care records.
- Healthy ageing.
- Independence, well-being and choice.

DEMOGRAPHIC CHALLENGES

The first stage of a county-wide Joint Strategic Needs Assessment was completed in Spring 2008. This showed that there are marked inequalities in the burden of ill health experienced by older people living in different wards within the county and that the numbers of older people in Buckinghamshire will increase markedly by 2020 (see graph). Longevity is a reason for celebration, with many older people making a major contribution to their communities, but there are likely to be significant resource implications; all the more reason, therefore, to focus now on prevention and healthy ageing.



FINANCIAL CHALLENGES

The NHS is able to benchmark expenditure against programme budget categories but there is no specific category for older people. As a result, comparisons of expenditure levels are not easily made across geographical areas.

The local authority has a stronger evidence base through participation in the CIPFA benchmarking initiatives. In 2006/07, Buckinghamshire spent 52.9% of adult social care expenditure on older people compared to the average among the benchmarking authorities of 56.5%.

Looking ahead, the recently formed Buckinghamshire Primary Care Trust inherited a cumulative debt of £22.5 million. It has a detailed programme of efficiency savings in place. Adult social care, on the other hand, operates within the context of a medium term financial strategy that seeks to deliver a low council tax increase with high quality services. As a result, each of the service areas has been asked to modernise services to achieve efficiency savings and manage pressures within budget.

THE CASE FOR CHANGE

These demographic and financial pressures strengthen the case for the major strategic changes that are outlined in this commissioning strategy. There needs to be a shift away from residential and hospital care to support more people in their own homes and a stronger emphasis on prevention. Quality of care is also being addressed through the focus on end of life care, more personal choice and greater concern for well-being.

Having briefly summarised the context within which this work is set, we now move on to summarise the major changes that are planned and the reasons behind each of them.

Six Major Strategic Changes

As a result of workshops and consultations carried out in 2007 and 2008, Buckinghamshire has developed six 'Big Ideas for Action'. These capture the broad strategic shifts in the way services are to be delivered by the end of the lifetime of this commissioning strategy.

More people will experience emotional and physical well-being in old age

.....
Working together to support people with long term conditions in their own homes

.....
Increasing choice and control for Older People

.....
Enable more people when they become acutely unwell to be treated in the community

.....
Increased choice and control at the end of life - palliative care

.....
Making it happen

MORE PEOPLE WILL EXPERIENCE EMOTIONAL AND PHYSICAL WELL-BEING IN OLD AGE

Promoting healthy ageing is a key priority. We want to ensure that ill health towards the end of life is minimised.

This means we need to focus on keeping older people active and healthy. Better preventative and health promotion services will not only allow older people to have a better life but will also help us to manage the resource implications of an ageing county.

A key component of this is to increase support to those in the most deprived areas of Buckinghamshire (where rates of ill health are 14% higher than expected) and to those long-term conditions where the greatest gains can be made.

WORKING TOGETHER TO SUPPORT PEOPLE WITH LONG TERM CONDITIONS IN THEIR OWN HOMES

Effective housing, allied to the right care support and wider services, such as transport and community safety, can be a springboard that enables older people to remain involved and live their lives to the full.

Under this heading we will increase extra care housing capacity, further develop telecare, continue the implementation of Project Care, review and re-provide home care, increase support to self-funders and build the wider housing requirements of older people into the relevant strategies.

INCREASING CHOICE AND CONTROL FOR OLDER PEOPLE

Individual budgets are central to future social care provision. They will allow people to use the available public resources to choose their own support – a right previously only available to self-funders.

They are also seen as an essential element in addressing increasing cost pressures that result from demographic changes and the increasing expectations of users and carers. As a result, the social care function will change to deliver a greater focus on enablement, advice and information giving.

During 2008, Buckinghamshire will develop its high level vision for individualised budgets, leading to a detailed implementation plan for the radical changes that are involved. This will cover areas such as communication with stakeholders, brokerage models, advocacy, costing models, governance structures and safeguarding arrangements.

The Social Care Transformation Grant will be used to support this programme of change.

ENABLE MORE PEOPLE WHEN THEY BECOME ACUTELY UNWELL TO BE TREATED IN THE COMMUNITY

Action is required to reduce the number of emergency hospital admissions of older people. This will require better community support, especially for those who frequently attend hospitals, for those whose stays are less than three days, and for those whose discharge is delayed unnecessarily.

In particular, intermediate care will be made more effective, an urgent care centre led by primary care will be established, key pathways of care will be redesigned and community equipment services will be further improved.

INCREASED CHOICE AND CONTROL AT THE END OF LIFE - PALLIATIVE CARE

A national end-of-life strategy was published during 2008, drawing on one of the workstreams of the review being led by Lord Darzi, the Under Secretary of State for Health.

Buckinghamshire will develop a local strategy based upon this. It will also focus on improved joint working, leadership of change by the Older People's Partnership Board, greater staff training, better out of hours care and improved outcomes based contracting.

MAKING IT HAPPEN

The final 'Big Idea' underpins all of the others and is designed to ensure that change happens in a joined up, planned, systematic and timely way. This approach is essential if older people are to benefit from the priorities set out in this document.

Key areas of work include reviewing and refreshing the Older People's Partnership Board to lead this process, improved contract monitoring processes, developing a three-year market management strategy, greater engagement with service users and their families and staff development to deliver the World Class Commissioning competencies.

CONCLUSIONS

Buckinghamshire has made exciting progress in recent years through its bEAM strategy that has reached out to more than 3000 older people, through its growing network of forums for older people and through a series of public health initiatives that have had a significant impact.

That focus on healthy ageing is reinforced by this strategy that will help to deliver more joined up care and greater respect for the dignity of older people. It will also support older people to receive care where they most want to receive it, typically in, or near to, their own homes.

For more information phone
0845 3708090 and ask for:

Adult Social Care

Commissioning & Service Improvement
Strategic Commissioning Team

or email adultcare@buckscc.gov.uk

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**You can also access the full
versions of the Commissioning
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Commissioning strategies.**