

# Right care, right place, first time

## Commissioning Digitally Integrated Health and Social Care

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Bradford City and Districts Clinical Commissioning Groups

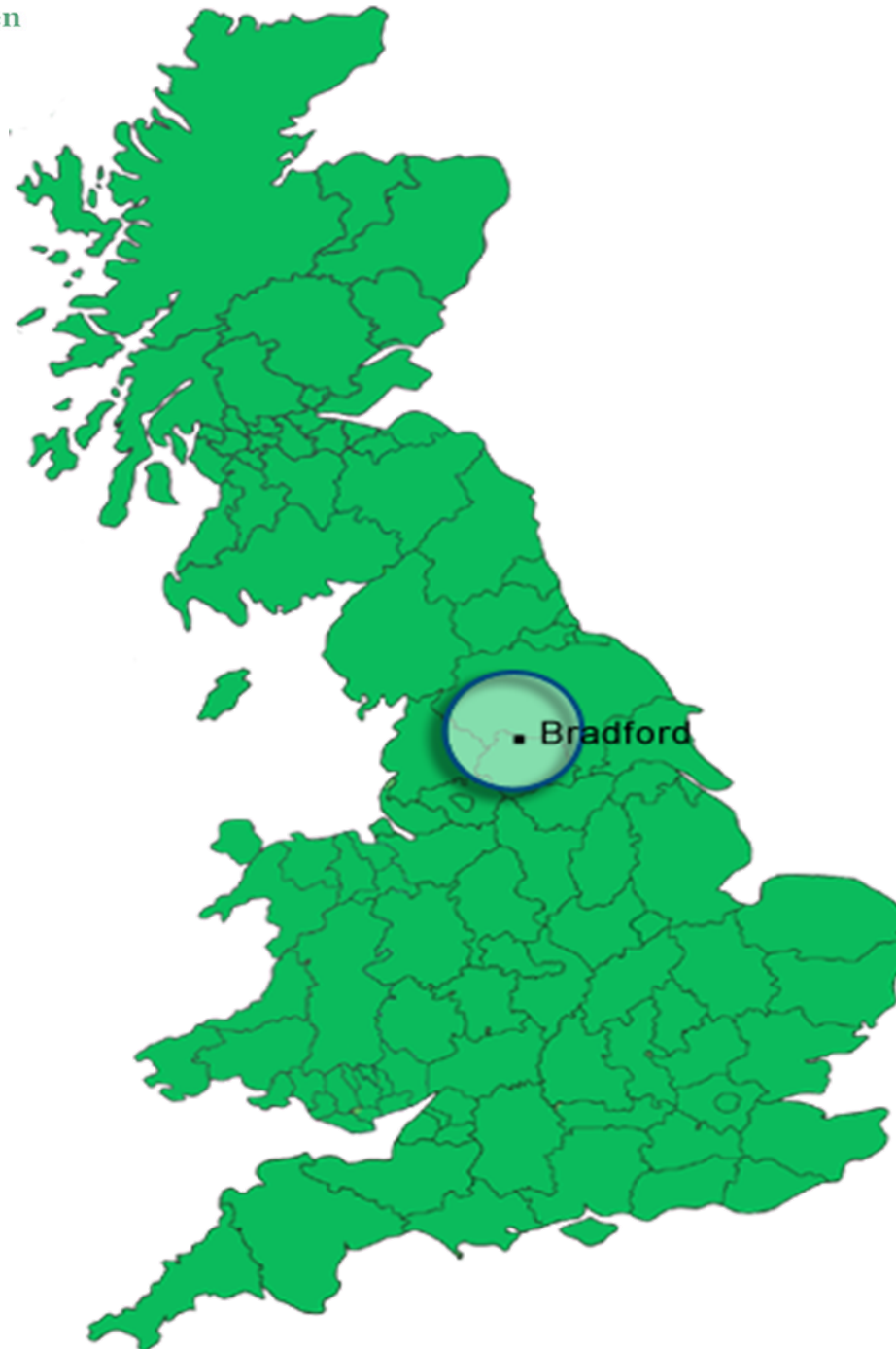
Airedale, Wharfedale and Craven  
Bradford Districts  
Bradford City

*CCGs working together*

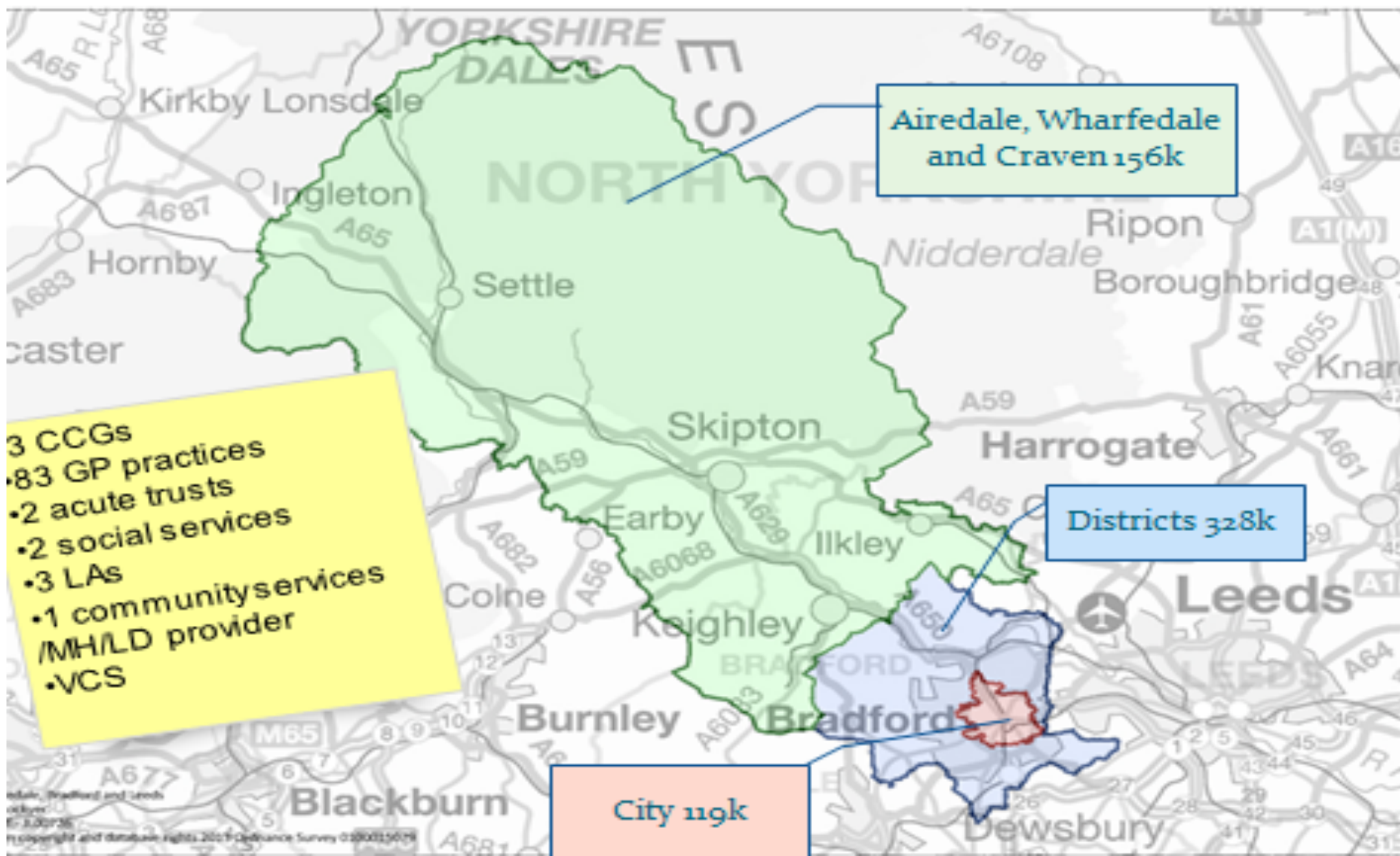
City of Bradford MDC

[www.bradford.gov.uk](http://www.bradford.gov.uk)

**NHS**



# Bradford District and Craven



# Our main health issues

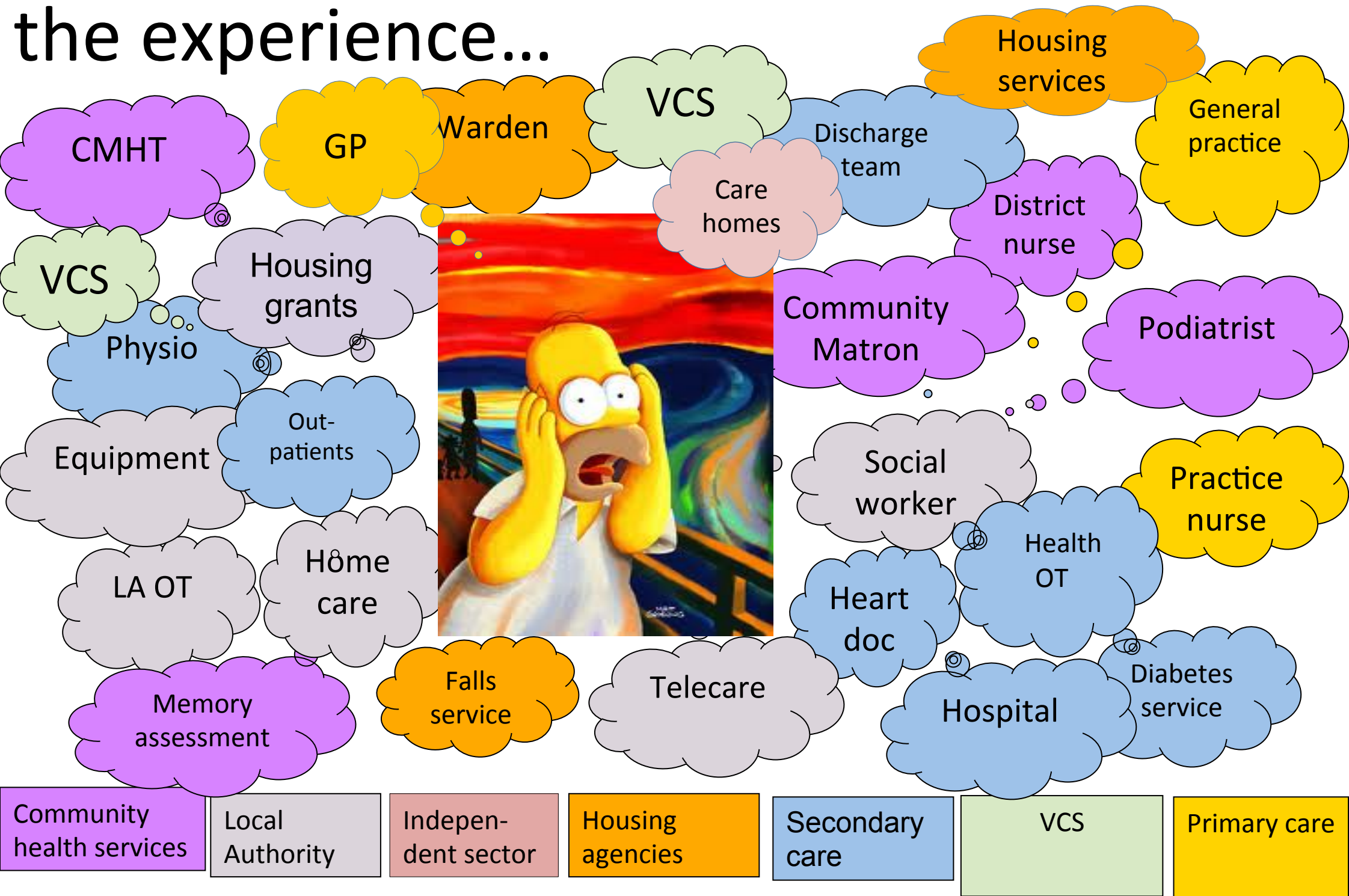
People die early: deaths for people under 75 years old are higher than our neighbours

People with alcohol problems attend A&E more frequently and liver disease is higher in our area

There is a greater risk of babies dying in their first year of life

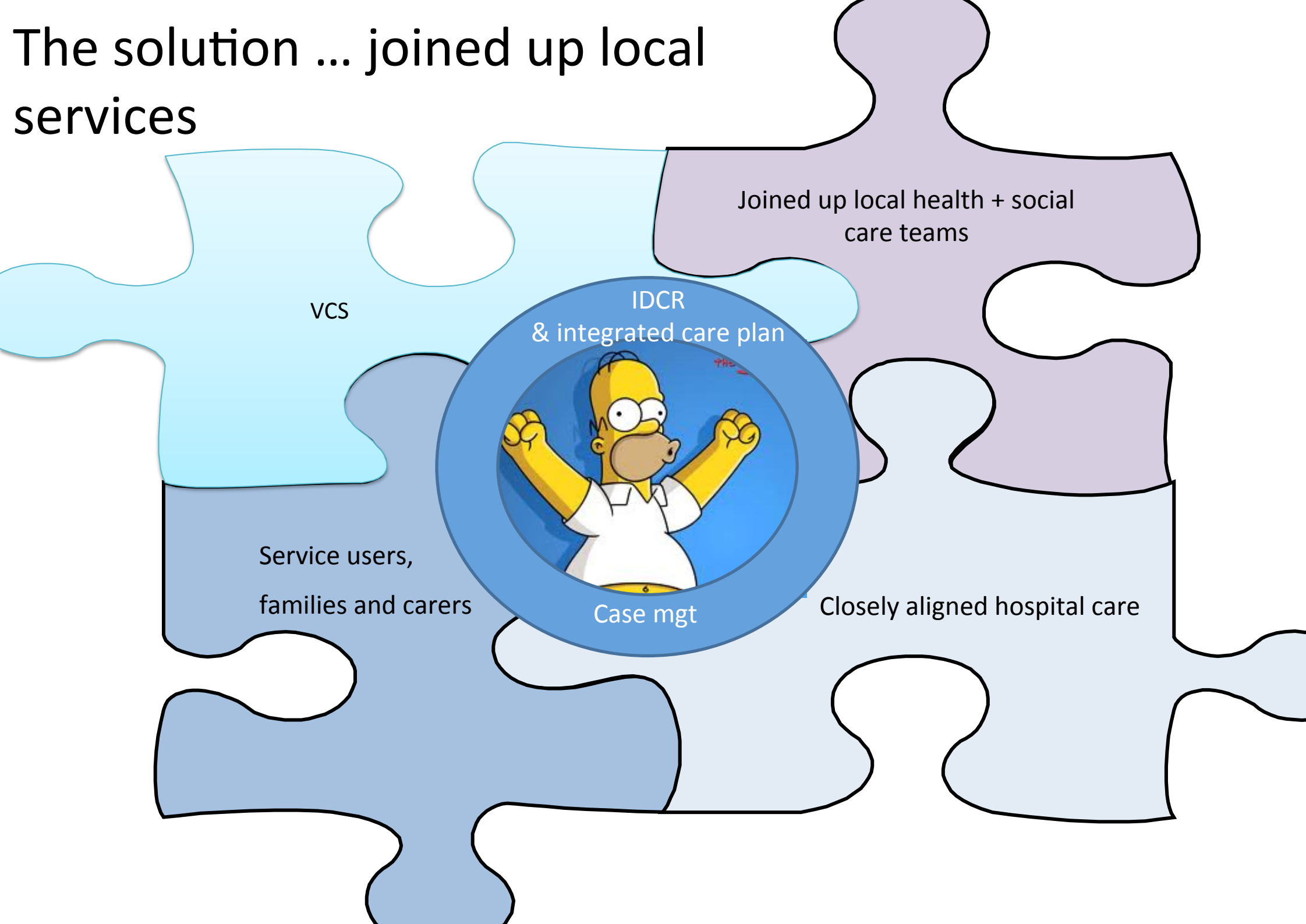
We also have a year-on-year increase in patients with dementia as well as other adult mental health needs

# the experience...





# The solution ... joined up local services





# Integrated care programme: main aims

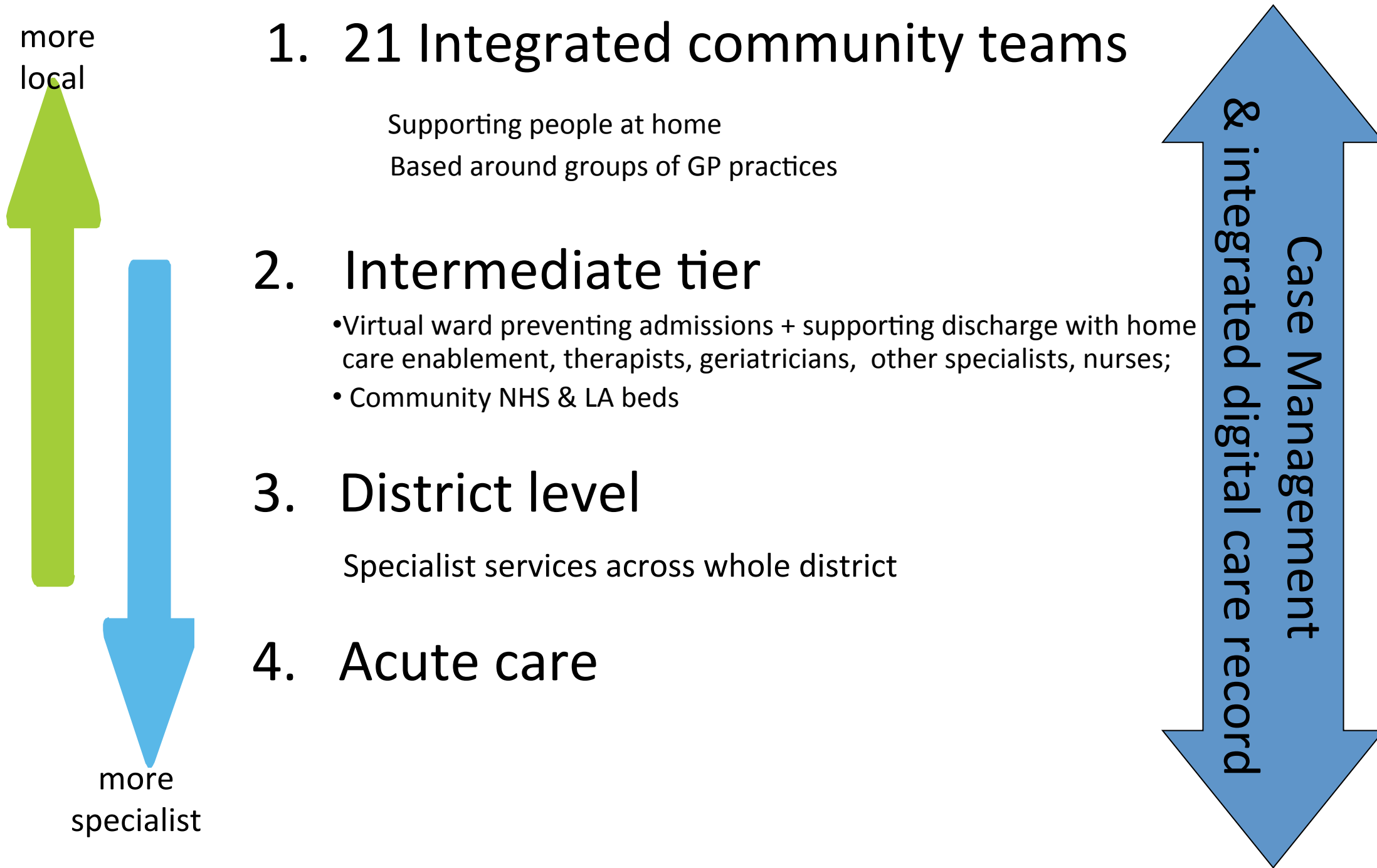
1. Join up services around the needs of the person
2. Increase community capacity and capability
3. Use rehabilitation and re-ablement to enable people to have best possible levels of health, wellbeing and independence
- 4. Sort out our systems and infrastructure to enable joined up care**
5. Reduce costs associated with non-elective admissions and long-term care and redirect savings to community-based care

# What we expect to achieve by integrating care

1. Improved quality and safety of care ✓ IDCR
2. Improved experience of care ✓ IDCR
3. Better outcomes for people, manifested through... ✓ IDCR
  - Reduction in avoidable unplanned re/admissions
  - Reduction in avoidable admissions to long-term care
  - Reductions in dependency on care packages
  - Increase in the availability of care at home
  - Better discharges
  - Staying healthy, well and independent at home
4. Increased efficiency ✓ IDCR
  - System-wide workforce planning
  - Reduced duplication through coordinated and collaborative care
  - Collaborative assessment and care planning



# In more detail...a tiered service model





# Integrated Digital Care Record: the foundation to delivering integrated care in Bradford

- Partnership bid into Safer Hospitals Safer Wards technology fund in 2013
  - Whole system proposal
  - Firmly grounded as an enabler of improved care
- Awarded £6.6m as match funding
- One of 3 national 'accelerator' sites, alongside Cumbria and Bristol
- Bradford's unique offer: IDCR across the NHS and local authority
- A single system strategy but not organisationally integrated
- NHS number from April 2015
- Enable the LA to comply with the requirements of the Care Bill: transparency around assessment and portability of care account

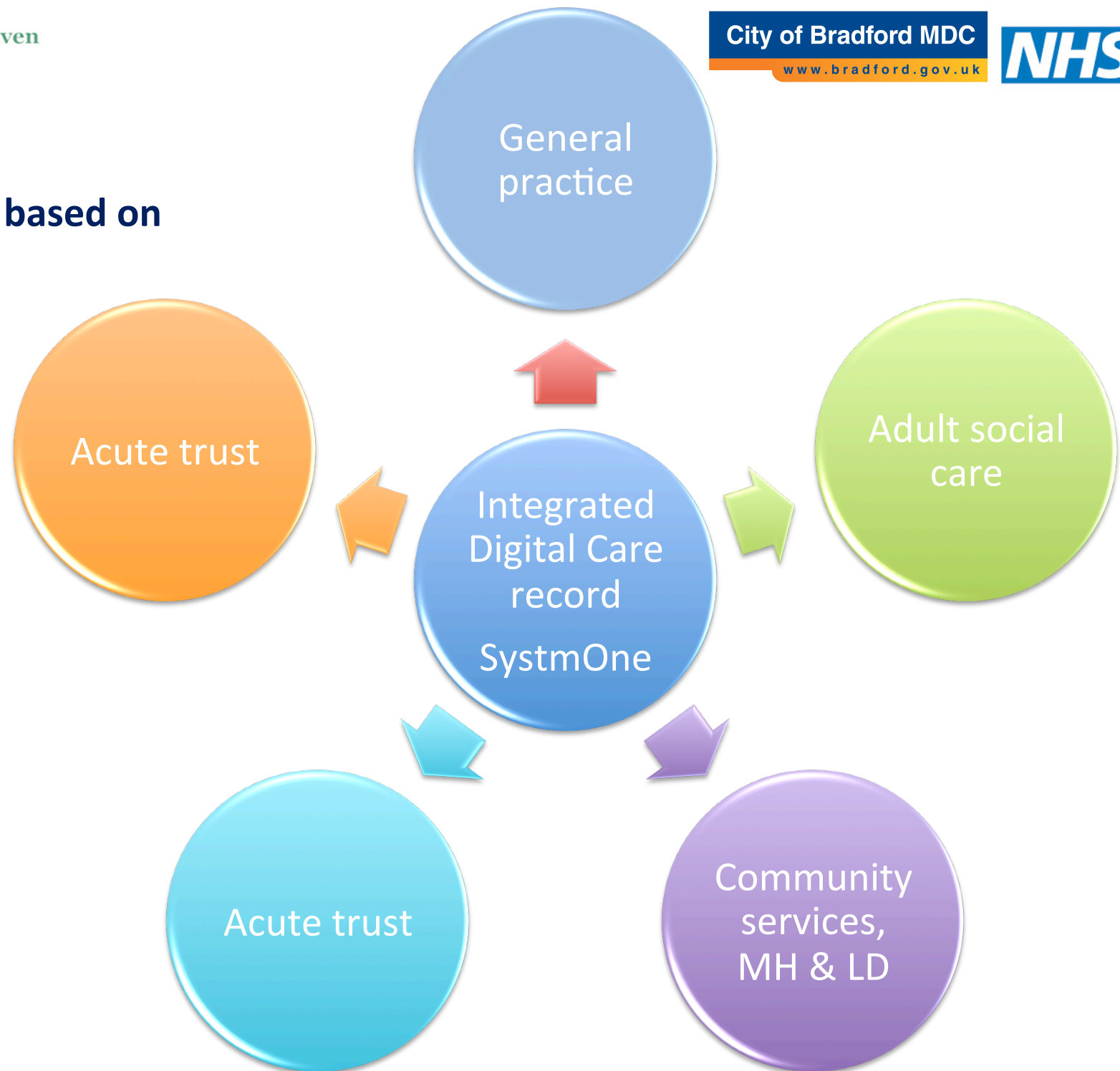
## What is the IDCR in Bradford?

- A shared electronic service user record across the NHS and social care to provide access for all primary, secondary, tertiary and social care practitioners ...
  - ... who have a legitimate relationship with that service user...
  - ...and only where the service user consents
- Access to relevant information at the point of care
- A critical enabler of the Integrated Care for Adults programme
- Led by Bradford District Care Trust, in partnership with:
  - Airedale NHS FT
  - City of Bradford Metropolitan District Council
  - Bradford Teaching Hospitals NHS FT
  - Three local Clinical Commissioning Groups



## District-wide strategy based on SystmOne as the hub.

Establishing the  
capability  
to share information,  
on consent from the  
service user





# Delivery of IDCR

<b>Bradford District Care Trust</b> Community services, mental health and Learning Disabilities	<b>Airedale hospital</b> Acute trust	<b>City of Bradford MDC</b> Adult social care
<ol style="list-style-type: none"> <li>1. Making better use of RiO</li> <li>2. E- referrals and e-discharges between RiO and S1</li> <li>3. SystmOne Record Viewer</li> <li>4. Sharing RiO information for wider health and social care community (in development)</li> <li>5. Optimising SystmOne + RiO functionality</li> </ol>	<ol style="list-style-type: none"> <li>1. E-discharge</li> <li>2. E-prescribing and medicines administration</li> <li>3. S1 PAS system enhancements including bed management</li> <li>4. Therapies onto S1</li> </ol>	<ol style="list-style-type: none"> <li>1. Unification of social care records with health records using S1</li> <li>2. Care planning financials integrated into S1</li> <li>3. NHS number as primary identifier</li> </ol>
<a href="mailto:Dean.davidson@bdct.nhs.uk">Dean.davidson@bdct.nhs.uk</a>	<a href="mailto:David.worth@anhsft.nhs.uk">David.worth@anhsft.nhs.uk</a>	<a href="mailto:Kathryn.lamb@bradford.gov.uk">Kathryn.lamb@bradford.gov.uk</a>

## What's in it for service users?

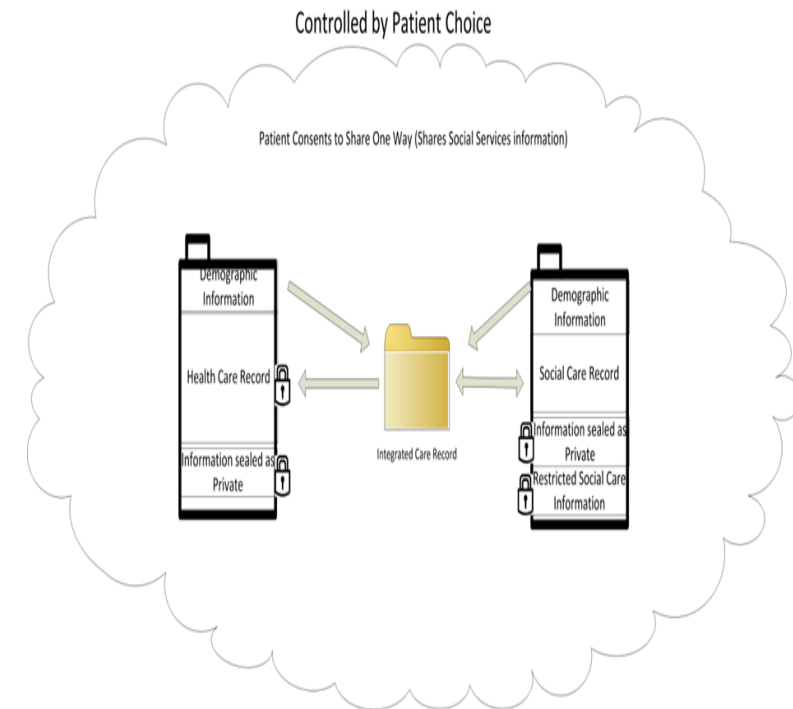
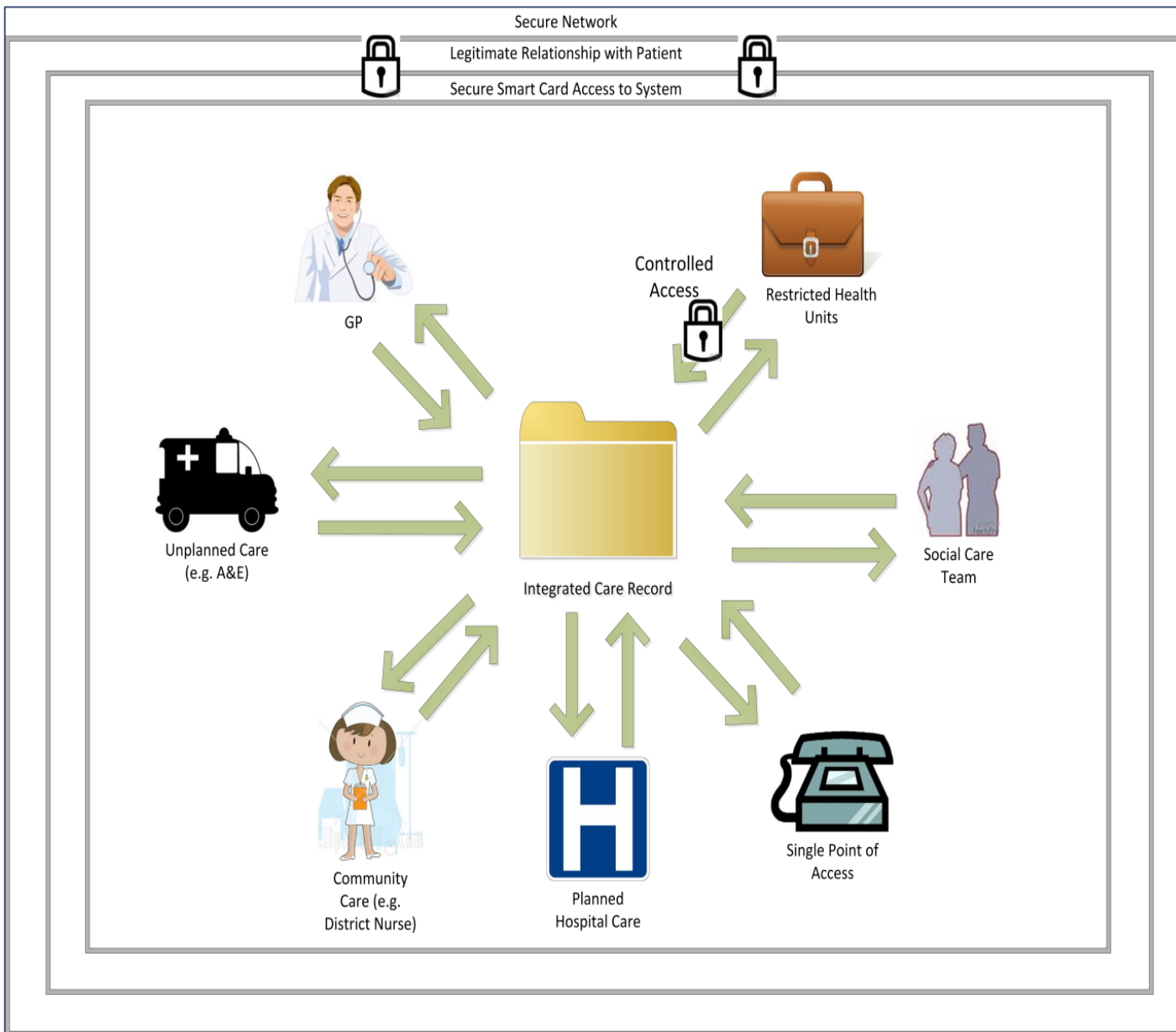
- Health and social care agencies will be confident that they have the full picture = better planning and delivery of care
- It is based on patient choice
- Experience and see a more joined up service
- Increased confidence that health and social care have got their act together

## What's in it for staff?

*'It is essential for providing integrated care in a timely and smooth manner, which will improve people's experience and outcome.'*

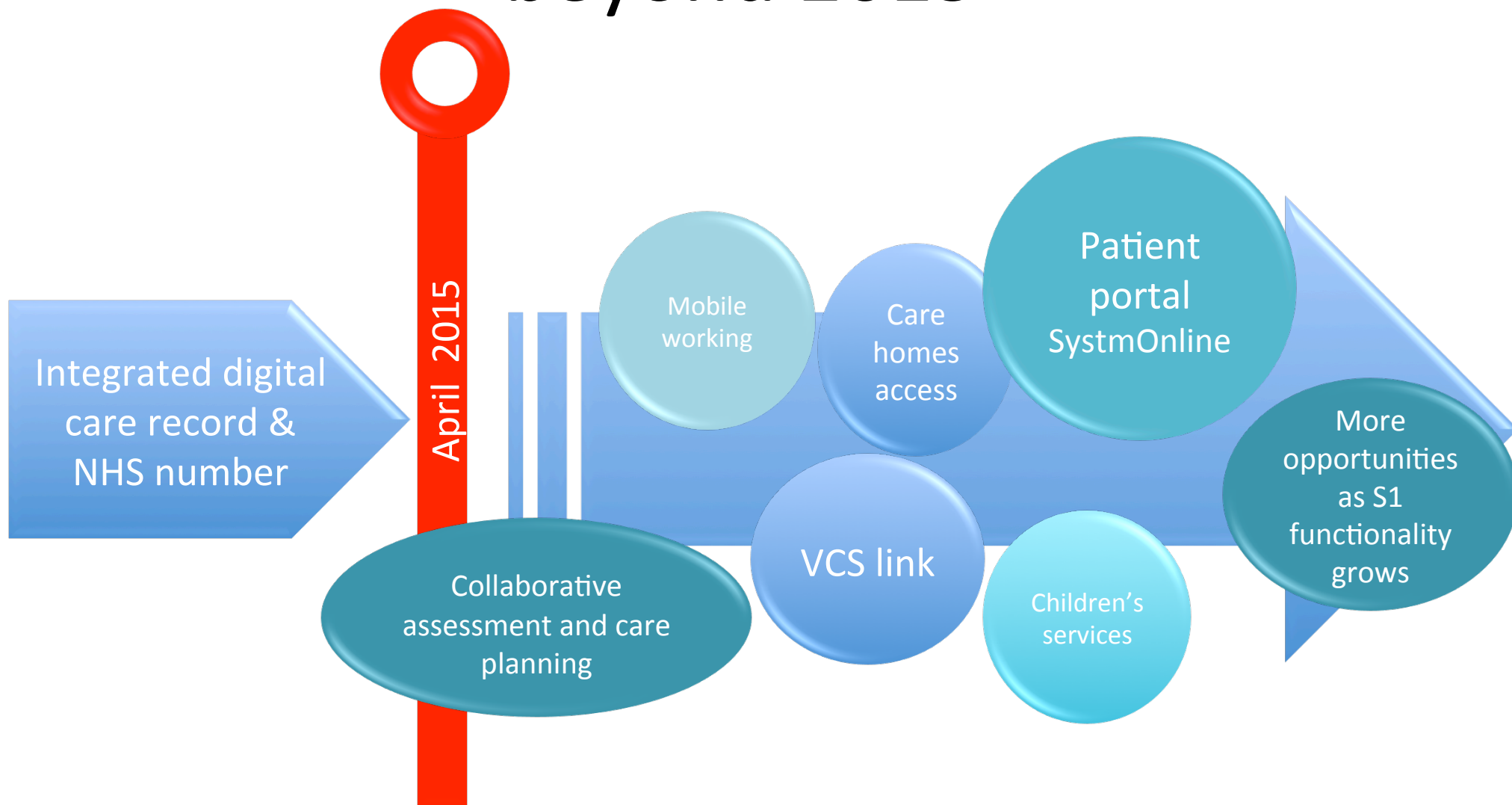
*'We won't go chasing GP records, acute hospital records and vice versa that would save clinical time and improve clinical decision-making. The time saved can be used for more patient contact.'*

*'For the Early Intervention team, having direct access to information about medical history, physical health checks (such as blood test and scan results), medication collection and A& E visits, will provide a more seamless service for the people supported by the team.'*



- A secure platform-secure smartcard access
- Access according to legitimate relationship & role-auditable.
- Data shared via patient/ service user consent.
- The ability to specify data sets as restricted/private

# Opportunities beyond 2015





If we can help, please contact us:

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Thank you