A Highland Approach To Commissioning Care @ Home
In The Beginning…

• Joint = Statutory Partners
• Integrated = Across Sectors
• Change Fund = “Creative Tension”
• Commissioning = ?
Real Commissioning =

- Building trusting relationships
- Delivering compassionate care
- Relinquishing power
- Continually improving
- Changing culture
- Changing expectations
- Acting with integrity
Governance?

- ASCG
- Membership
- Chair
- Challenge
- Commissioning or Purchaser/Provider
- Commitment to change
Hospital unmet need

- 40 people @ 10 hours per week
- around 400 hours per week / £322k per annum

Community unmet need:

- 246 people @ 10 hours per week
- 2,460 hours per week / £2m per annum
  - Estimated cost of current unmet need is £2.3m p.a.
  - Market split 60% (in house) / 40% (independent sector)
  - In-house provision more expensive
  - Competition between providers to recruit
  - Not all geographical areas of operation sustainable
  - Inconsistent (and some poor) quality of provision
Components of Change

- The level playing field
- Collaboration
- Zones
- Living Wage
- Fair Tariff
• Level playing field, means commissioning across sectors, not protecting in house service.

• Collaborative zoning, means providers can access cost effective “runs”, not scattered provision

• Paying (75p) to achieve compliance with Living Wage

• Developing a single tariff for all providers which can be enhanced for remoteness and complexity
Market Changes

CAH client numbers by provider type

Dashed lines represent quarterly data points, solid lines represent monthly data points

- Highland clients with in house service
- Highland clients with external service
Changes in Provision
• Single Tariff for a standard hour of care @ home

• Conditions on sustainability, assurance, training; supporting the community, supporting each other etc... Written by the Sector!

• £18.59 (indexed)
Another Perspective

• Is it really that different?
• How it feels to the 3rd and Independent Sectors
• Integration across the whole sector
• Innovation across Sectors
Example: Boleskin

- Starts with the impossible
- Community moves from demanding to solving
- Community provision established in collaboration with Independent Sector
- Model rolling out to a Strath near you?
Lessons

- For the Statutory Sector.... *Change*?
- For the Independent Sector... *Trust*?
- For the 3rd Sector.... *Really Innovate*?
- For those about to integrate..... *It’s not just the NHS and the Council*