

Integrating health and social care

Policy, progress, and lessons from the UK

Sarah Reed, Senior Fellow, Nuffield Trust

What I'll discuss...

1. **Health and care system basics:** How is health and social care organized in the UK?
2. **History of integrated care reform efforts in the UK:** Where have we got to and why?
3. **Outcomes and effects:** What does the data tell us about whether integration reforms have improved outcomes for patients?
4. **Policy learning:** How has integration been delivered in the UK, and what lessons are there for other countries and systems?

How is health and social care organized in the UK?

System basics

- Since 1990s, each country of UK is responsible for organizing health and social care services for their populations
- Health care services are funded through general taxation in each country
- All ordinarily resident people of UK are eligible for the National Health Service, free at the point of use
- Unlike health care, free access to social care services **is means-tested**



Funding for long-term care and social support

	England	Wales	Scotland	Northern Ireland
Means test thresholds	£14,250 - £23,250	£50,000	£17,500- £28,000	£14,250 – £23,250
Additional support	N/A	Cap on non-residential care costs: £90/week	Free personal care Free nursing care	Free domiciliary care
Number of publicly-funded service users per 100,000	148 (short-term) 1,960 (long-term)	4,507	3,079	1,797

UK health and social care system spend

	England	Wales	Scotland	Northern Irelands
Spending per person on health services, 2019/2020, £	2427	2546	2507	2616
Spending on health services as a share of total spending	25%	23%	22%	22%
Social care spending, 2019/2020, per person, £	318	416	476	521
Spending on social care services as share of total spending	3.3%	3.8%	4.1%	4.3%

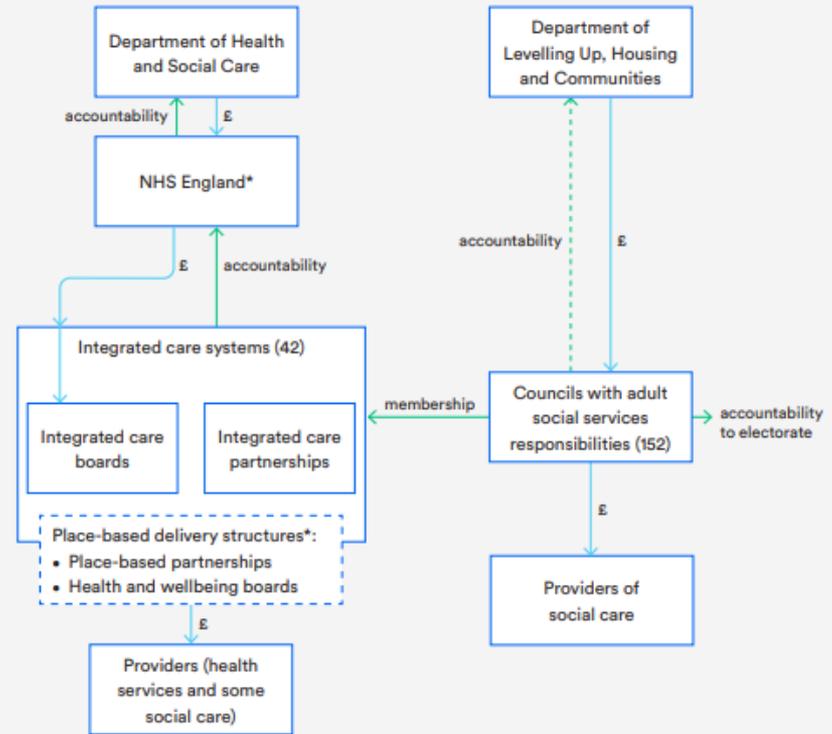
Funding and accountability for services

- Split accountability / funding flows across health and social care
 - **NHS:** health care
 - **Local authorities:** Social care + most public health

Mixed financial incentives / payment mechanisms:

- Scotland, Wales, NI:
 - Health: **Capitation**
 - Social care: **Per-diem**
- England:
 - GPs: **Capitation**
 - Hospitals: **Activity-based** (but move towards “blended” approach)
 - Social care: **Per-diem**

Figure 4: Funding and accountability in the health and social care system in England



History of integrated care reform

A 20+ year journey towards integrated care....

~70 major policy initiatives across the UK since devolution in 1999

Broadly consistent aims

Divergence in approach and broader health policy environment

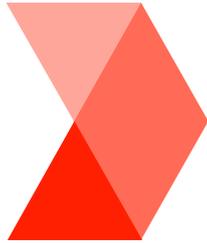
Similar population health challenges



A policy timeline for England

2001

Health and Social Care Act established Care trusts to pool health and social care functions into one organisation



1999

Health Act: Flexibilities introduced to encourage integration (eg, pooled budgets, lead commissioning)

2009

Integrated Care Pilots set up to support greater patient choice and control with joint commissioning and planning.



2006

Section 75 agreements established, expanding legal flexibilities to pool budgets and management structures.

2013

Better Care Fund set up and required NHS and health authorities to pool budgets and develop joint strategies to reduce unnecessary admissions



2014

NHS Five Year Forward View – set vision for new models of care delivery and commissioning to reduce inequalities and shift services into community

2015

Sustainability and Transformation Plans established – requiring local bodies to develop plans to support greater collaboration



2016

City and Local Government Devolution Act – allows transfer of budgets and powers to combined local authorities, including health and social care

2019

NHS Long Term Plan set vision that each STP would become Integrated Care System, giving local areas more accountability to control resources



2021

Health and Care Bill established Integrated Care Systems as statutory organisations. Merging of purchaser and provider split.

Consistent policy levers have been used to drive integration

Lever	Examples
Joint governance and organisational structures	Partnership structures of joint health social care boards
Financial integration	Pooled or aligned budgets
Performance management and accountability frameworks	Joint outcomes framework, regulation

Similarities and differences

	ENGLAND	WALES	SCOTLAND	NI
Joint governance	<p>System (1-2 million)</p> <ul style="list-style-type: none"> ▪ Integrated Care Boards ▪ Integrated Care Partnerships <p>Place (250K – 500K)</p> <ul style="list-style-type: none"> ▪ Health and Wellbeing Boards ▪ Place-based Partnerships ▪ Primary Care Networks 	<p>Regional Partnership Boards (130K – 700K)</p> <ul style="list-style-type: none"> • Local Health Boards • Local authorities 	<p>Integration Joint Boards (100K-500K)</p> <ul style="list-style-type: none"> • NHS Boards • Local Authorities 	<p>Health and Social Care Trusts (300K – 500K)</p>
Mandatory members beyond health + social care?	<p>Variable</p> <p>ICPs must include citizen reps ICBs may include broader system partners (undefined)</p>	<p>Yes</p> <p>Must include reps from housing, education, and charity groups</p>	<p>Yes (non-voting)</p> <p>Must include citizen reps, carers, and social care providers</p>	<p>Variable</p> <p>Must include 2 voluntary reps (but undefined)</p>
Aligned boundaries?	<p>Variable</p>	<p>Boundaries aligned</p>	<p>Variable</p>	<p>Boundaries aligned</p>

Similarities and differences

	ENGLAND	WALES	SCOTLAND	NI
Integrated finance?	<p>In part Budget for health services and pooled budgets for some social care, aligned budgets and targets</p>	<p>Limited Pooled budgets for care home accommodation and family support services</p>	<p>In part Pooled budgets required for social care, primary and community health, and unplanned acute care</p>	<p>In full One single allocation for health and social care</p>
Joint performance assessment?	<p>Limited Care Quality Commission moving towards Single Assessment Framework</p> <p>Most targets still organisation rather than system-based</p>	<p>Yes Separate inspection and regulation, but new National Outcomes Framework with joint inspection for degree of integration, pooled budgets, and joint commissioning</p>	<p>Yes National Performance Framework for Integration authorities, w/ specific integration measures.</p>	<p>Yes Programme for Government framework with health and social care indicators</p>

Implementation challenges

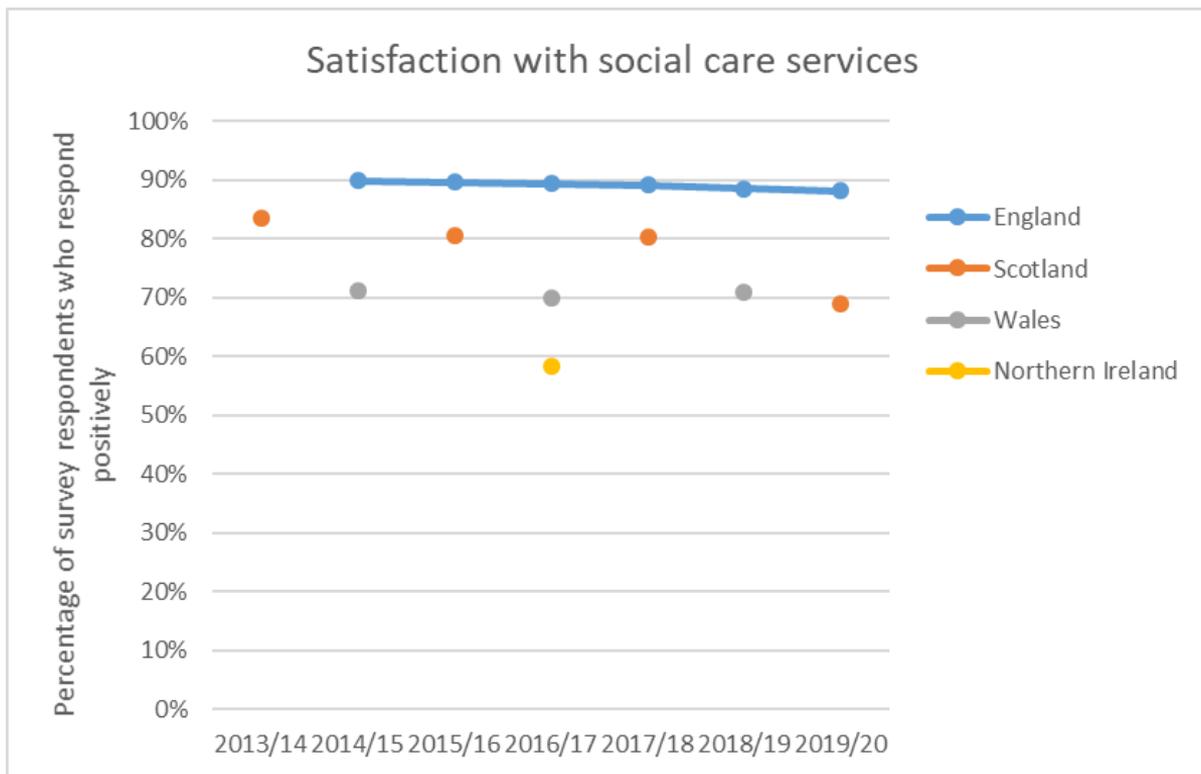
- Scale of partnerships and aligning boundaries across health and social care
- Overlapping roles and responsibilities of integrated partnerships and complex governance arrangements
- Deciding scope of integrated finances, and balancing trade-offs
- Technical complexity of pooling budgets and broader financial incentives
- Ensuring balance of partnership across members in joint governance / planning structures

Outcomes and effects

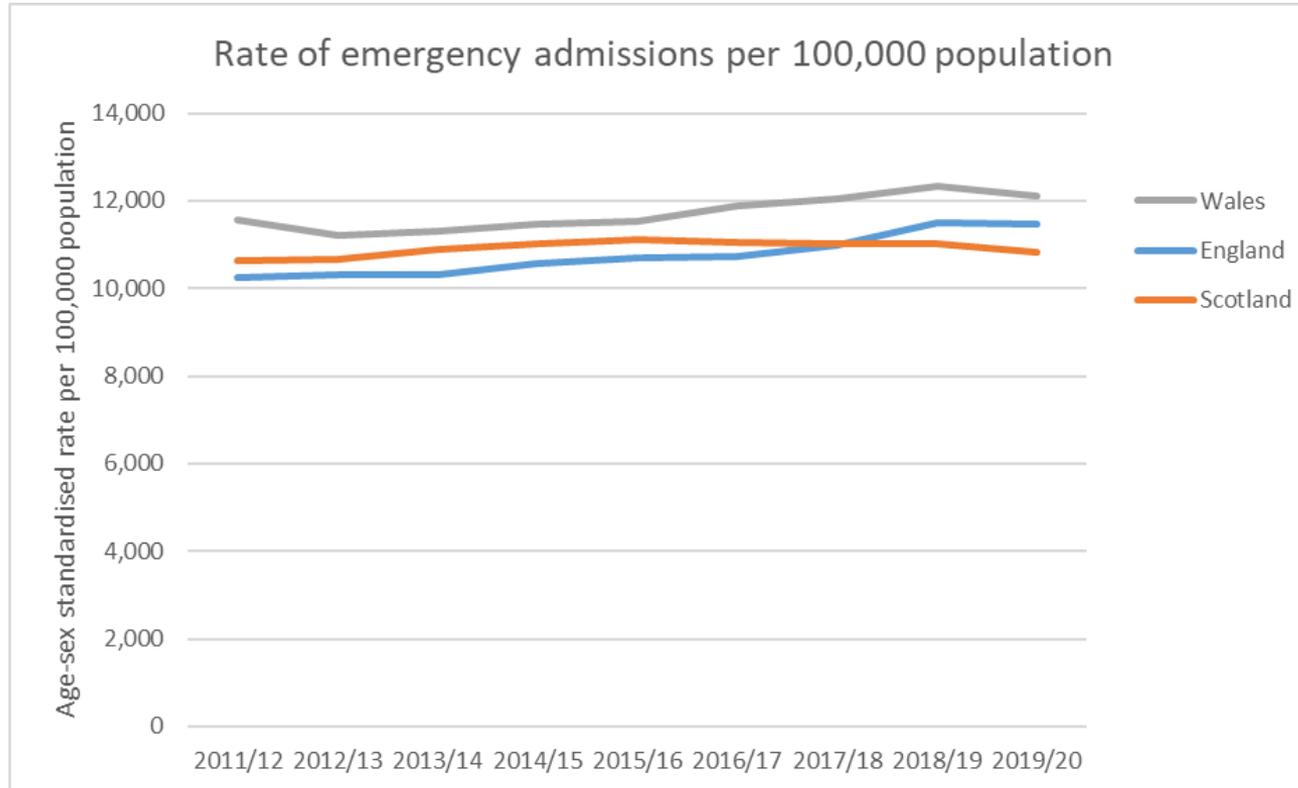
Can we tell if integrated care policy has made a difference?



Satisfaction and user experience



System efficiency



Verdict: modest change and few differences between countries

- Few measurable differences for patients – in any country
- Challenging to identify consistent and comparable measures
- Measures reflect policy aims – but difficult to isolate effect of integration from broader context / wider policy

Policy learning: explaining the gap between ambition and progress

1. Integration is more cultural than organisational – and cannot easily be legislated for or achieved with changes to governance

2. Integration is long-term investment project rather than a quick fix to system problems

3. Realistic expectations are needed about what integration can deliver – especially when it comes to cost savings

4. We can never know the impact of integration if we cannot measure it, or have clarity about its objectives

5. “Integration fatigue” can be dangerous side effect of continuous reform

Concluding remarks

- Even if progress is slow, the aims of integration are worthy
- Overreliance on organisational and structural change has been the biggest barrier to success – focus must now turn to the fundamental and deep-rooted changes needed to integrate actual services
 - behaviours, incentives, skills and resources
- Important to learn from the reforms / efforts that have come before it



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Extra slides

Spain and the UK

	United Kingdom	Spain
Total spend per capita (USD, PPP, 2019)	\$4,385	\$3,523
Total spend, % GDP (2019)	9.9	9.1
Life expectancy	81.4	84
Average length of stay in hospital (curative care, 2019)	6.2	6
Age-standardized rate of avoidable hospital admissions per 100K (congestive heart failure, 2017 or nearest year)	99	143