

Engaging patients in their own care

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Integrated Care

The citizen at the centre

- ◆ **Citizen** at the centre
- ◆ **All providers** must communicate real time
- ◆ **Today** use modern technology revolution
- ◆ **Agreed care plan** patients / carers should agree the plan
- ◆ **Integrated care** should be seamless – no gaps or duplications
- ◆ **Health and social care** working together with the person
- ◆ **Move** from a medical model to a supported self care model

Fulfilling the telehealth promise

- ◆ **Technology** there to support not replace care
- ◆ **Older people happy** with technology provided easy to use
- ◆ **Needs** to be responsive 24/7
- ◆ **Available** information for crisis decisions
- ◆ **Confidence** home is best - must enable more independence
- ◆ **Empower** citizen and carer to take more control

Large scale deployment

- ◆ **Culture change** required with strong clinical leadership
- ◆ **Service** change required for sustainable NHS / Social Care
- ◆ **Kent HWB** enabling local ownership of 7 CCGs/HWBs
- ◆ **Local** implementation with strategic plan
- ◆ **Focus** on integrated health and social care teams
- ◆ **Focus** on meeting citizen's needs
- ◆ **Make it easier** for clinicians / providers to do the right thing

Working with 7 CCGs

- ◆ **Developing Clinical Design Service**
- ◆ **Linked to Local Authority** (Kent County Council)
- ◆ **Very important** that the service is owned at CCG level
- ◆ **Complex** but flexibility key
- ◆ **Co-design and co-production key** – lessons of past mistakes
- ◆ **Empower** the citizen and carer to be safe and feel supported

Realising cost savings

- ◆ **Not add on** – must facilitate change in service – WSD
- ◆ **Needs** to be at pace and scale
- ◆ **Home** as default place of safety not A&E
- ◆ **Realtime** communication across all providers will lead to efficiency
- ◆ **Supported** self care not medical / dependence

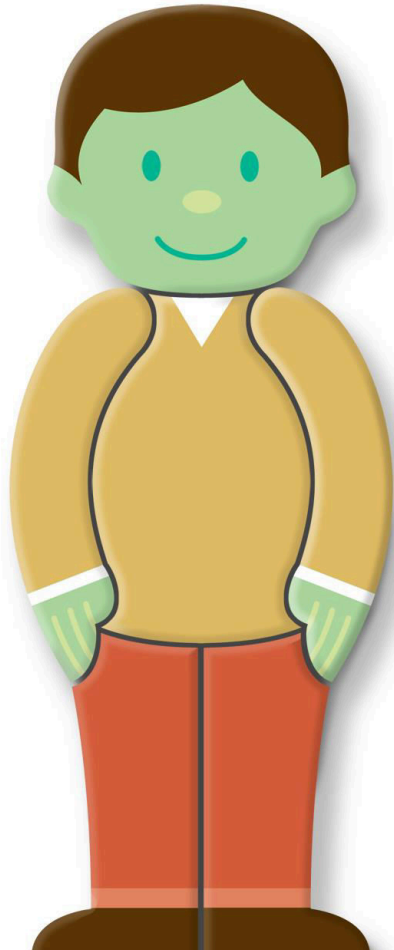
Innovations in telehealth/care

- ◆ **Citizen at the centre** – major provider of care / monitoring
- ◆ **Clinicians** must access care plan / telehealth especially in crises and in acute setting
- ◆ **Virtual ward** – hospice
- ◆ **Citizen** needs to travel to specialist / GP?
- ◆ **Televideoconference**, apps
- ◆ **Reduce** social isolation – technology
- ◆ **Patient control** of information – Patients Know Best
- ◆ **No information about me** without me knowing about it!

Opportunities and challenges for delivering telecare/health

- ◆ **System** must change!
- ◆ **Integrated** health and social care teams now a reality
- ◆ **24/7** support in community setting
- ◆ **Realtime** information sharing
- ◆ **Information governance** still a challenge
- ◆ **Clinicians** must value service
- ◆ **Citizen and carer** must feel safe

Whole person

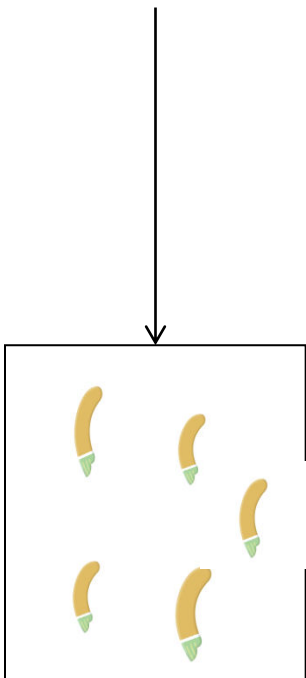


Medical view Dismembered patient

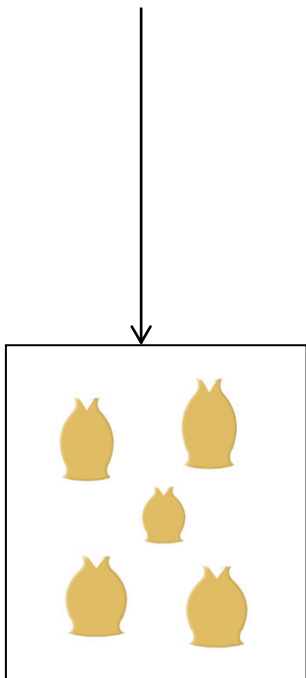


Patient – where am I and where do I go – who cares for me?

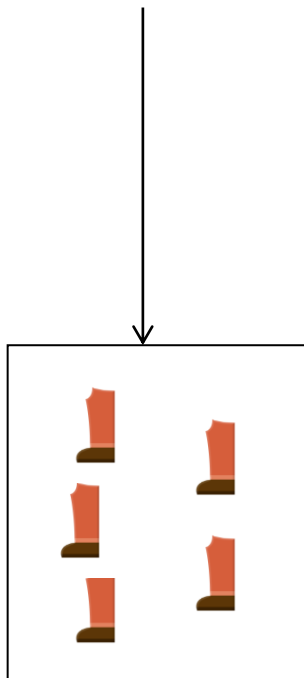
Team A



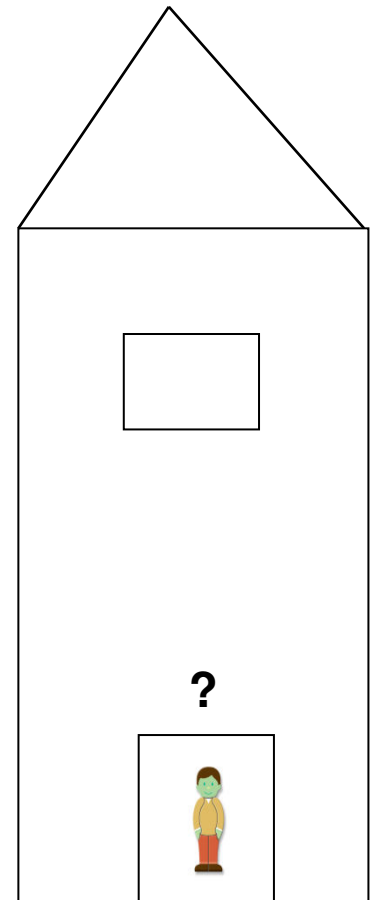
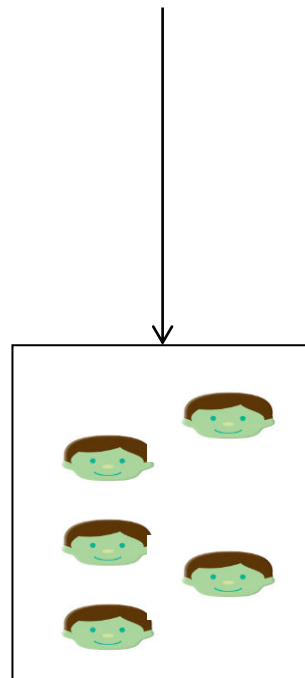
Team B



Team C

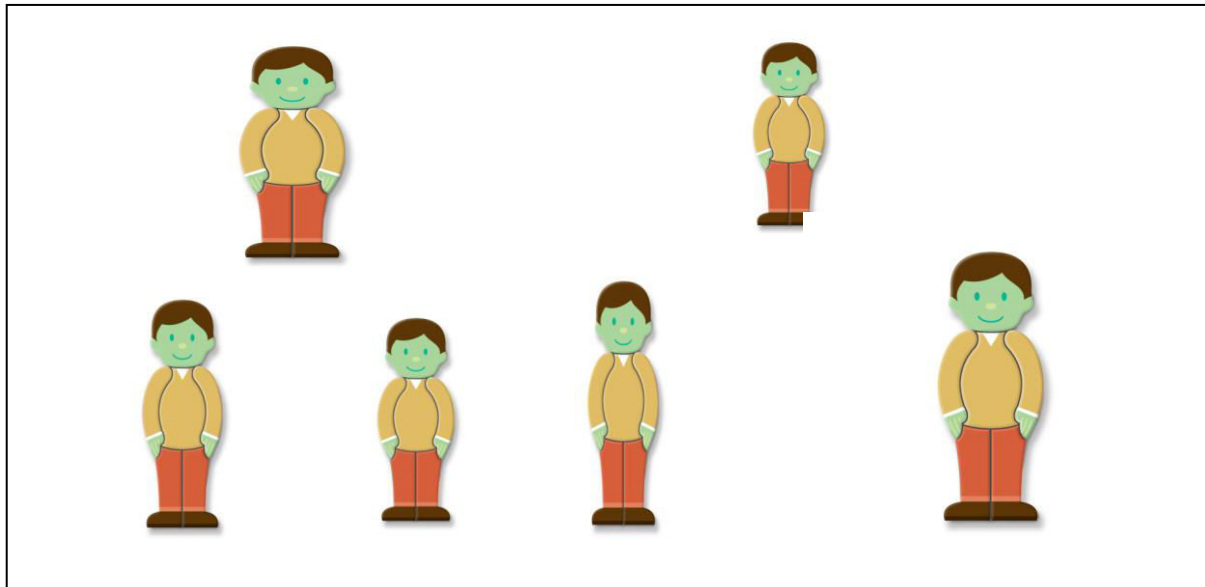


Team D



Citizen at the centre – we care and patient and carer knows!

Integrated Neighbourhood Care Team with specialist input, advice and care when needed



I want....

...less time in hospital

...fewer trips to see specialist

...independence

...empowerment

...understand own condition

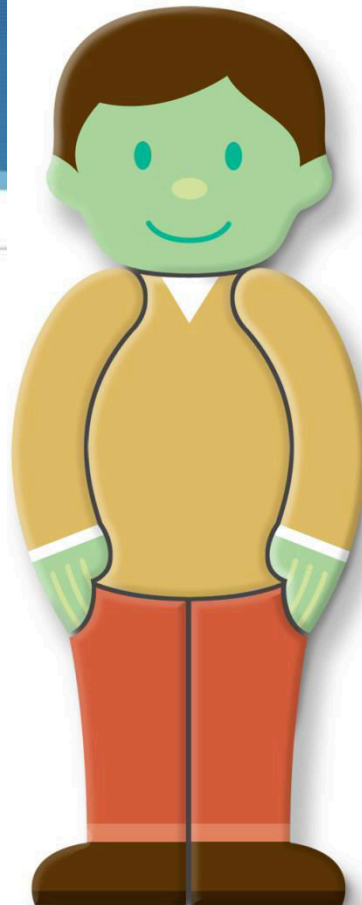
...own bed

...more time

..prevention of exacerbation

...freedom

...in control



“Putting the citizen at the centre”

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