



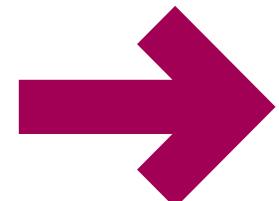
Me, My Family, My Home – The Challenge for NHS England

**Chris Easton, Head of
Person Centred Care**

8th March 2016

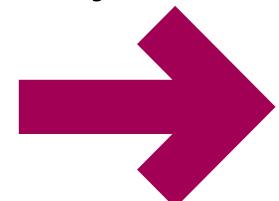
What is the challenge facing the NHS?

- Presentation title is a challenging one – this isn't a challenge for NHS England – it's a challenge for the whole system, for everyone who works within it, for people, their families and their communities;
- But there are significant challenges facing the NHS.....
- The way we support people needs to radically shift;
- The NHS is facing its greatest financial challenge in its history - £30bn funding gap by 2020/21;
- To have any chance of meeting the funding challenge we need to unlock the power of people and their communities – doing less of what we currently do isn't an option;



The challenge

- Acute focused, episodic single disease models will not work. Patients must be active partners in their own care and support – better for the system, but also better for patients;
- We need to view patients and their families as partners, as the greatest untapped resource that the NHS has at its disposal;
- The NHS is very often the place where people end up when other things aren't working – to solve the challenges facing the NHS we need to work collaboratively to tackle the challenges facing society;



Why change?

Legal Imperative

Economic Imperative

Moral Imperative

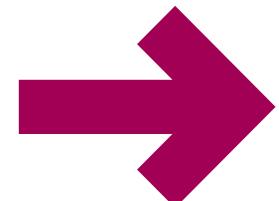
This can't be about tweaking around the edges, this has to be about looking at the fundamental ways we work and support people.

A story, but not an unusual one

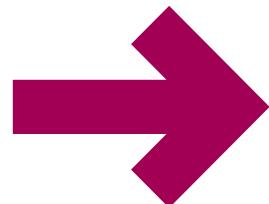
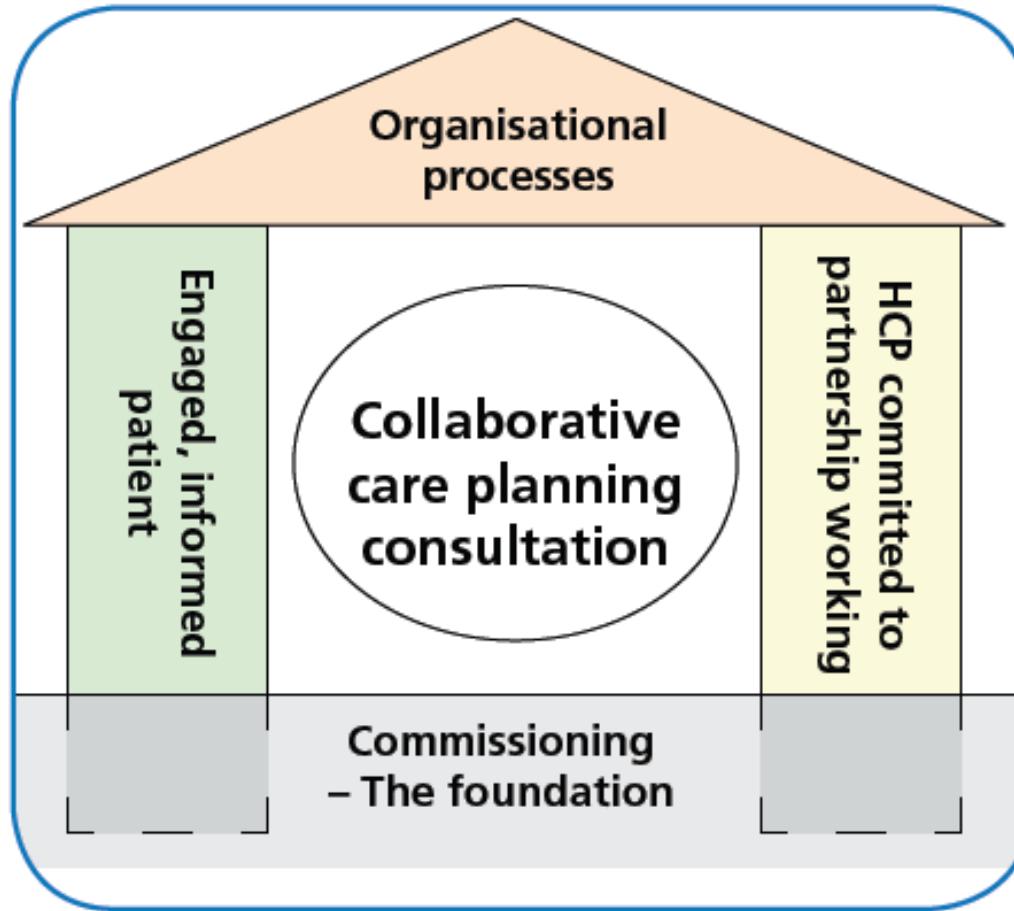


Person centred care at the heart of the NHS

- Personal Health Budgets are critical, but the discussion needs to be much wider than that, there are a range of evidence based approaches that support people to take control:
 - Collaborative care and support planning;
 - Health Literacy;
 - Shared Decision Making;
 - Patient Activation;
 - Peer support;
 - Self management education programmes;

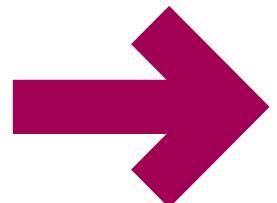


To genuinely drive person centred care requires a whole system approach

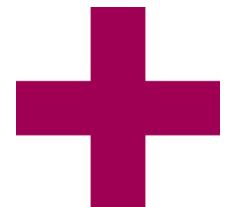


What should people expect from a modern NHS?

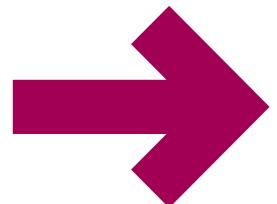
- People should be active participants in their own healthcare – not passive recipients of a medical model system;
- People should be at the centre of the commissioning system – coproduction, not consultation;
- We need to demystify the system – its complex but shouldn't feel that way for people receiving support;
- People should expect to be in control, to be actively involved in decisions about their health;
- Healthcare needs to be provided in the context of people's lives;



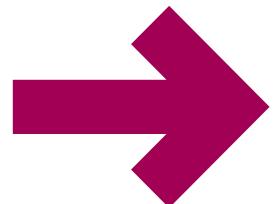
Challenges



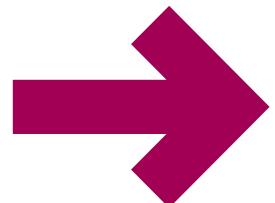
If we have a system orientated around individuals' deficits, how can we expect to provide support that recognises people's assets and strengths?



The NHS does what the NHS measures – are we measuring the right things? Are we measuring the things that matter most to people?



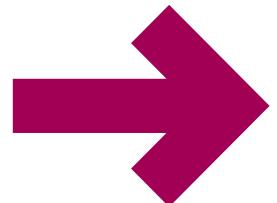
Joint commissioning is easy to say, but complex to achieve. Until we develop approaches that break through organisational spending silos this will continue to be extremely challenging.



We often talk about block contracts –
people don't often fit into blocks.

The balance of power needs to shift. The NHS isn't responsible for people's health and wellbeing, it is just one of the tools we have as citizens to help us.

Should self-care be where we start with healthcare?



A self-care framework

Organisational Leadership

Integrated Commissioning Approaches

Levers, Metrics and Incentives

SM
Education

Peer
Support

Health
Coaching

Group
Based
Activities

Asset
Based
Comm
Dev

PHBs

Collaborative Care and Support Planning

Health Literacy

Measurement of Patient Activation

Cross
Cutting
Enablers

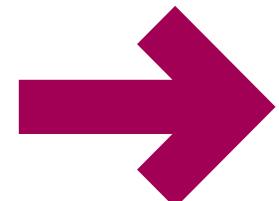
Evidence
Based
Approach
es

Fundame
ntal
Building
Blocks

The solutions to an individual's health and wellbeing very often lie outside of traditional health services

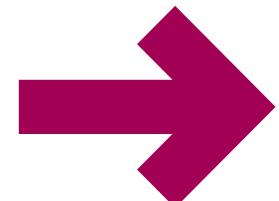
So what might progress look like?

- A system with services that intervene before people hit crisis rather than waiting for crisis before they are eligible
- A workforce empowered to be creative and rewarded for it
- Strong and collaborative and well articulated leadership giving the mandate for local change;
- New models of commissioning and contracting, outcomes focused, integrated and founded on partnership between providers
- Systems that support people to get the most from clinical interactions manage well at other times;



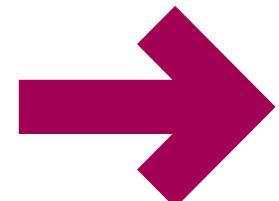
So what might success look like?

- Measuring success differently and moving away from a system that actually incentivises acute activity;
- We need to start talking a language that people understand;
- A recognition of the role of the VCS, and better local funding arrangements with them;
- People should feel responsible for their own health and wellbeing – be active and accomplished in managing their health.
- The NHS should be flexible, personalised and help people achieve the outcomes that are important to them.

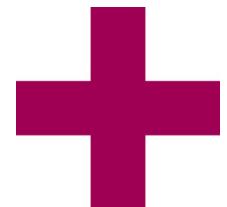


What is the challenge for NHS England?

- Leading the policy agenda – the national policy context is supportive of change in this area;
- Difficult not to be rhetorical from the centre with a policy area that is different in each locality and for each person;
- However we need to work harder to remove the barriers that make this incredibly difficult to achieve locally;



Questions and Discussion



Contact

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