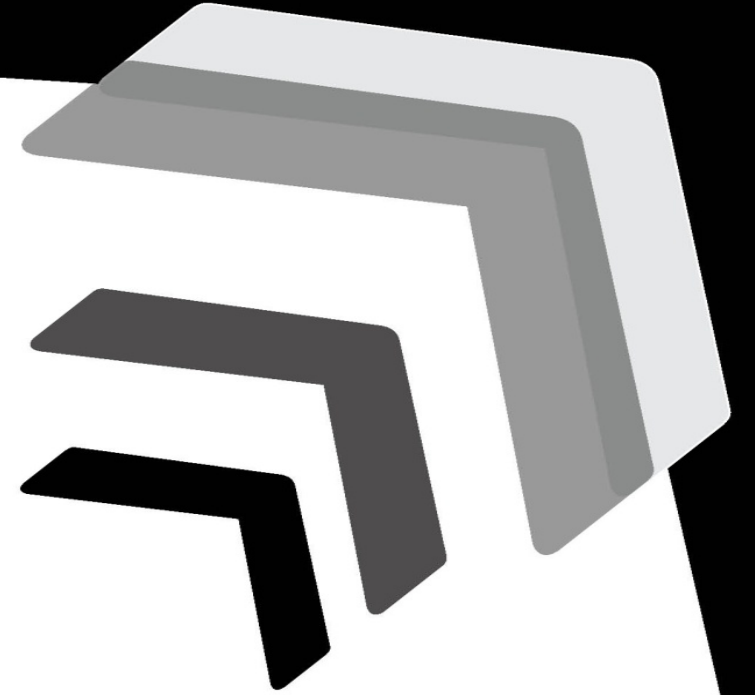


Supporting integration through new roles and working across boundaries

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Focus

- › What new roles are being developed?
- › What is the evidence to support these roles?
- › What works in supporting working across boundaries?
- › What this means for integrated care

Change in focus and context

- › Creating a liaison point between services

Hampshire's Sight Liaison Adviser and Communication Rehabilitation Officer

- › Coordination or management of an individual's care

Specialist nurses within Scottish HIV services

- › Dedicated roles to bridge health and social care

Nursing within nursing homes – providing care to avoid hospital transfer

Specialist residential care home nurse – creating a relational bridge between services

Change in individual skill-mix

- › Role enhancement

Psychiatric mental health advance practice nurses (US)

- › Role substitution

Intermediary health and social care coordinators

- › Role delegation

Enhanced tenancy support workers – Sex Workers Around Nottingham

Gwent Frailty support and wellbeing workers

Innovative roles

- › Care navigators

Greenwich Co-ordinated Care – care navigators

- › Community facilitators, enablers and link workers

Supporting service providers and GPs to access community resources

Bridging individuals with services and the community (and vice versa)

- › Health coaches

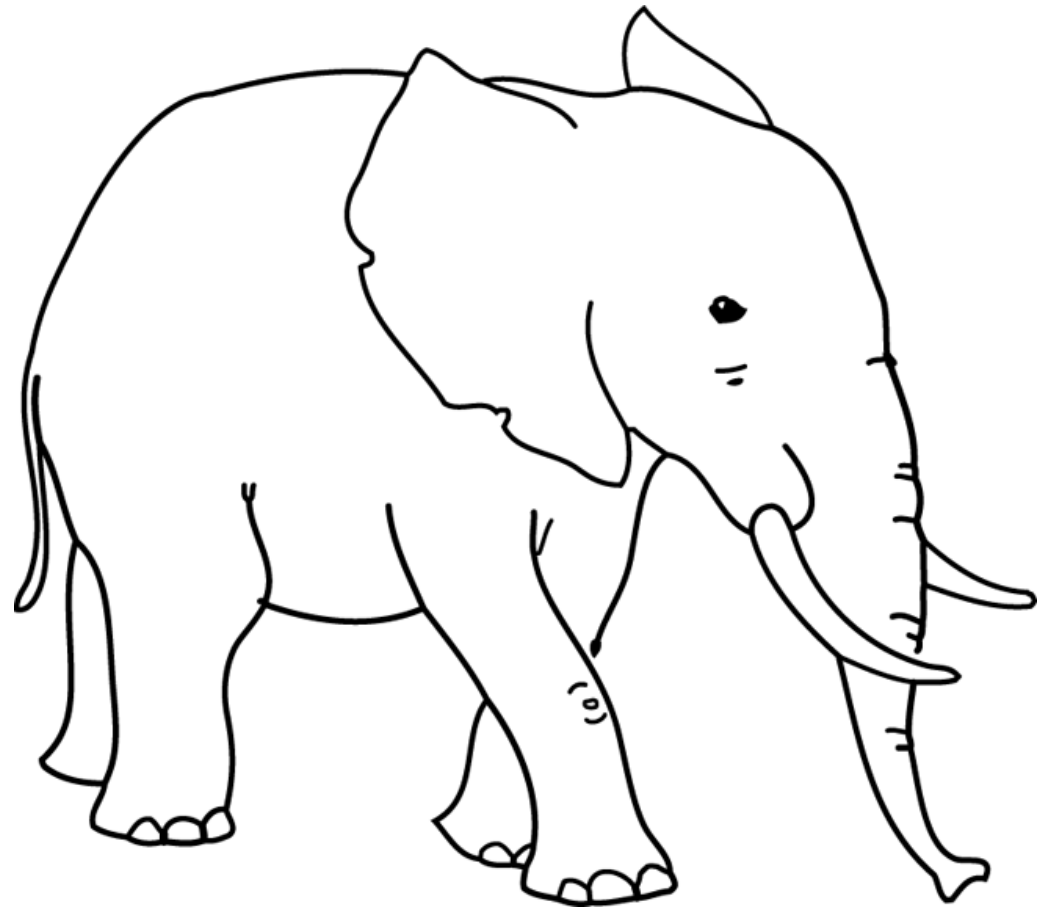
NHS Horsham and Mid-Sussex and NHS Crawley CCG – Tailored health coaching pilot

Evaluation of new roles

- › More flexible and multi-skilled workforce
 - › Increased uptake of service in areas with care navigator
 - › Upskilling nurses in primary care provided safe and effective care
 - › Pharmacists supporting GPs improved prescribing
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- › Very little focus on patient outcomes
 - › Lack of evaluation of cost-savings and cost-effectiveness
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- › Some evidence of negative impact
 - › Implementation of roles may cost more

Key issues

- › Professional roles and organisational cultures



Further issues

- › Training and development
- › Capacity of individual roles
- › How new roles sit within the wider system
- › Employment considerations
- › Resources
- › Sustainability
- › Accountability and regulation

A special note: roles in social care

- › Huge potential
- › Lack of underlying knowledge on workforce capacity and skills in social care
- › Many roles in social care are less well defined
- › Knowledge of what works in terms of workforce planning and development limited
- › Support worker roles remain unregulated, concerns around accountability, liability and competency
- › Access to, standardisation and funding of training
- › Large proportion of workforce in private and VCS sector
- › Staffing numbers and turnover

What supports boundary-spanning

- › Systemic approach to integration
- › Managing organisational and professional identities
- › Building relationships to support boundary-spanning
- › Designing boundary-spanning care
- › Considering the skills required for boundary-spanning
- › Developing appropriate training and recognition
- › Ensuring appropriate organisational investment
- › Getting the right accountability and governance in place

Leading workforce integration

- › Getting the fundamentals of integration right
 - › Ensuring a balanced focus on health and social care workforces
 - › Consideration of wider workforce developments and challenges
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- › There are many ways to deliver integrated care without the explicit need for new roles
 - › Engaging the workforce from the outset
 - › A focus on person-centred care and patient outcomes
 - › Valuing and recognising the 'skilled care professional'
 - › Ensuring the workforce have the skills for integration
 - › Enabling cross-professional and cross-organisational training

Key ingredients

