INTEGRATED CARE STRATEGY 2014 – 2017

Integrated care involves the provision of seamless, effective and efficient care that responds to all of a person’s health needs, across physical and mental health, in partnership with the individual, their carers and family. It means developing a system of care and support that is based around the needs of the individual, provides the right care in the right place at the right time, and makes sure dollars go to the most effective way of delivering healthcare for the people of NSW.

The NSW Government has committed $120 million over four years to implement new, innovative locally-led models of integrated care across the State which will transform the NSW healthcare system. Funding will help achieve a more integrated health system with services connected across many different providers and focused on individual patient needs.

Locally led integration is at the heart of the integrated care strategy, with Local Health Districts (LHDs) working in partnership with other local health agencies to develop and progress approaches to integrated care, that will appropriately address the coordination and provision of services in full understanding of local factors that might impact on this integration.

The strategy will help to build strong partnerships within the health system, including primary, community and acute care, as well as public, private and not-for-profit providers. These partnerships are built around the patient and their health outcomes.

Depending on local circumstances partnerships may be strengthened through joint governance arrangements, shared financial incentives to encourage collaboration, and IT systems and tools that allow for better communication between providers from different sectors, such as between a GP and a specialist.

All health services in NSW will benefit from this funding boost with investment initially going into three integrated care demonstrators in Western NSW, Central Coast and Western Sydney Local Health Districts and progressively towards other LHDs through the Planning and Innovation Fund, which will provide resources for innovative approaches to integrating care across the State.

Additionally, a number of key pieces of statewide infrastructure that will support and enable integrated care will be funded across NSW. These include the statewide rollout of a fully linked-up electronic health record known as HealtheNet, tools to identify early intervention opportunities for people likely to need healthcare services frequently, and systems that will allow patients to provide direct feedback on their care to drive improvement in services.

The role of the NSW Ministry of Health in this program of investment is to remove the structural impediments to the desired change, increase local decision-making and incentivise further sustainable, system-wide innovations and reforms.
HOW THE FUNDING WORKS

The NSW Government has committed $120 million over four years from 2014 to 2017. The Integrated Care Strategy will cover three tranches of work including:

1. Statewide enablers including the rollout of HealtheNet, introduction of tools to identify early intervention opportunities, patient feedback systems and decision support tools to help inform patients about the best treatment options.

2. Planning and Innovation Fund* to provide seed funding for innovative integrated care initiatives at the local level, which may well become a critical part of the bigger integrated care picture over time.

3. LHD demonstrators including Western NSW, Central Coast and Western Sydney LHDs to progress new integrated care models in their localities, looking at establishing better connections between different health services and closer, more creative partnerships with other primary care organisations such as Medicare Locals, and providers such as the not-for-profit and private sectors.

Local Health Districts will be held accountable for how the new funding is spent, with regular monitoring of progress and ongoing funding contingent on results. All LHDs and partners that receive funding will need to address the following requirements:

- Clearly identified benefits and target populations for specific interventions
- Identification of service partners and resources they will bring to the initiative
- Details of resources the LHD will invest and evidence that the proposal is a new initiative
- Details of how the program will be monitored and evaluated against KPIs.

The following table identifies an indicative breakdown of investment dollars in each tranche, contingent on the delivery of results from those LHDs and agencies involved. The allocation of funding will be adjusted over the course of the strategy, in light of ongoing evaluation.

*Includes funding to roll out demonstrator initiatives in other LHDs.
STATEWIDE ENABLERS – SUPPORTING THE CHANGE

The current ability to share and link patient information across providers and settings, the sometimes fragmented and incomplete patient information stored in systems, and the difficulty in using this information to inform clinical decisions are major barriers to achieving integrated care across NSW.

To complement local activity around integrated care, the NSW Ministry of Health is investing in a series of statewide enablers, with a focus on establishing information infrastructure and tools to support integrated care, together with capacity building for LHDs and their partners.

Four areas have been prioritised for investment:

1. **HealtheNet**: HealtheNet allows for the mapping of different patient identifiers to create a single picture of patient information across LHDs, and is integrated with the national Patient Controlled Electronic Health Record (PCEHR) to provide a comprehensive set of patient information. Robust and complete patient information is a key enabler of integrated care. Additional investment in HealtheNet across the State will enable faster rollout so that it can mature in all LHDs and support the integrated care strategy. The continued rollout of the HealtheNet program allows people and their clinicians, hospitals and other healthcare providers, to view and share health information, providing a more seamless healthcare experience.

2. **Risk stratification**: developing tools for use by LHDs and healthcare providers to identify people at risk of illness or chronic disease that can be followed-up by early, targeted intervention.

3. **Patient Reported Outcomes Measures**: investing in better measurement, tracking and feedback of patient outcomes across the system, with a view to achieving better patient follow-up and patient-centred care.

4. **Real time patient feedback**: investing in tools to measure the experience of the patient immediately after or during treatment, providing a more realistic gauge of patient satisfaction, as well as prompt feedback loops to clinicians and managers to address issues.

In addition, funding will be provided to build strategic purchasing capability across the system and for evaluation of the investment program and its individual initiatives. The ability for LHDs to purchase services from alternative care providers and to understand and facilitate the market will be critical to achieving integrated care locally, particularly in building capacity to offer community-based services.

The NSW Ministry of Health proposes to establish an Expert Panel, from which LHDs can access a range of expertise and knowledge in areas such as strategic planning, funding models, procurement, health market management, legal and financial advice, information management, and monitoring and evaluation.
PLANNING AND INNOVATION FUND

The Planning and Innovation Fund has been established to provide seed funding for innovative integrated care initiatives at the local level, which may well become a critical part of the bigger integrated care picture over time.

Funding will be accessed by LHDs through an expression of interest process to commence from July 1, 2014. Full details including support for LHDs in making their application and the specific criteria for evaluation and selection will be made available to LHDs in April 2014. Initiatives will be expected to include partnership with other agencies and organisations and involve a truly innovative approach rather than the extension of existing programs.

The Planning and Innovation Fund will support initiatives for one or multiple years. Funding is also available for LHDs to support strategic planning around a local integrated care strategy.

In addition, funding has been allocated from 2015 to allow for the adoption and “scaling-up” of successful Demonstrator approaches in other parts of NSW.

The criteria for accessing this funding will be similar to those used for the Planning and Innovation Fund and will include a requirement to demonstrate the ability to implement the approach and establish as routine practice within 18 months.

INTEGRATED CARE DEMONSTRATORS

Three LHDs – Western NSW, Central Coast and Western Sydney – have commenced planning for new integrated care models in their areas, looking at establishing better connections between different health services and closer, more creative partnerships with other provider organisations such as Medicare Locals and the not-for-profit and private sector.

These LHDs are in the early stages of developing innovative integrated care for their local populations but the injection of funding gives these Districts a boost to further drive innovation and implementation, and will set the scene for locally led integrated care initiatives across NSW. Demonstrators have strong partnerships in place with primary care organisations such as Medicare Locals and will explore approaches to system-wide integration, rather than discrete initiatives.

Demonstrators will pursue a system-wide approach alongside a focus on local priorities with a view to transforming the local health system in a way that makes integrated care sustainable. They will have a strong emphasis on change management and culture, alongside service redesign, and are expected to work with a range of local partners including Aboriginal health services and other public sector local agencies.

The selected LHD demonstrators are required to make their own financial contribution towards their integrated care plans and work in partnership with the NSW Ministry of Health and the Pillar agencies, with clear accountability for performance and expenditure. Over time, the aim is to identify ongoing funding and purchasing models which focus on patient outcomes and which can be applied across the state.

To meet obligations around transferability and scaleability, demonstrators will be asked to develop approaches that will transfer the successful learnings from their initiatives to other LHDs. There will be opportunities for LHDs to be involved in peer review of the demonstrators, and learn from the approaches they have taken, both informally and through formal evaluation.
EXPECTED BENEFITS OF INTEGRATED CARE IN NSW:

- Improved patient experience of the health system
- Reduced waiting times for patients as they navigate the system
- Improved health outcomes for patients and better quality of life
- Reduced avoidable or unnecessary hospitalisations
- Less duplication of pathology and radiology tests through better sharing of information
- Better use of health resources

CASE STUDY

Integrated care has dramatically improved the health of a 64-year-old man in Western NSW with a history of poorly controlled diabetes, hypertension, coronary artery disease and depression. He was attending a hospital ambulatory clinic for dressings following the amputation of a toe on his left foot due to complications from diabetes. The nurse recognised he was having difficulty managing at home. He lives alone and his family was five hours drive away.

The nurse referred the man to a central contact service in the LHD to assist with coordination and management of his care. After meeting with a Care Coordinator in his own home, the patient agreed to his clinical information being shared with all relevant care providers such as GPs and Aboriginal health services.

The Care Coordinator arranged a home visit with a nurse from the Medicare Local chronic disease program. Both health professionals communicated with the patient’s GP and helped develop a plan to link him to local services to address his health and social issues. This included referral to a Medicare Local run multidisciplinary clinic with access to specialists, nursing staff and psychologists.

After six weeks of care coordination the patient’s foot healed and he said the various health services and providers involved in his care “have not only helped me achieve a happier, healthier life, I can honestly say the psychologist has probably helped save my life by referring me to the self-management support group”.

CONCLUSION

Although the NSW health system is performing well on key health indicators, healthcare needs to be better equipped to meet the needs of more people and older people accessing health services at a higher rate and expecting more comprehensive and expensive services than previous generations.

NSW must transform the health system to a more patient-centred integrated health system, with connected service provision across different healthcare providers and greater emphasis on community-based services, that better supports people with long term conditions, and is financially sustainable in the long run.

The Government’s $120 million investment in integrated care over four years is based on a robust analysis of initiatives to date in NSW, Australia more widely and internationally together with a review of the key barriers to, and enablers of, integrated care and the priority areas to focus on in the NSW environment.

This analysis highlights the importance of taking a whole of system approach to integrated care, investing in change management, establishing good governance, overcoming funding and cultural barriers, and ensuring a focus on patient outcomes.

The Integrated Care Strategy sets a new direction for the health system, transforming the way services are provided for patients and is an important start to a longer-term journey to achieve a more integrated health system in NSW.