



Integration

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The Legal Bit



Department
of Health

The Care Act 2014:
Personalising care and support

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The Care Act 2014 uses the term “cooperation” rather than integration:

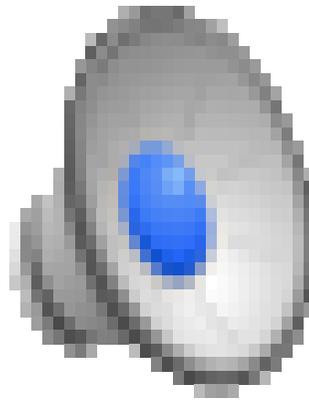
- 1) A local authority must cooperate with each of its relevant partners, and each relevant partner must cooperate with the authority in the exercise of:
 - (a) their respective functions relating to adults with needs for care and support
 - (b) their respective functions relating to carers, and
 - (c) functions of theirs the exercise of which is relevant to functions referred to in paragraph (a) or (b)

- 2) A local authority must cooperate in the exercise of its functions under this part, with such other persons as it considers appropriate who exercise functions, or are engaged in activities, in the authority’s area relating to adults with needs for care and support relating to carers

Section 3 of the Care Act 2014

- (1) A local authority must exercise its functions under this Part with a view to ensuring the integration of care and support provision with health provision and health-related provision where it considers that this would:
 - (a) Promote the well being of adults in its area with needs for care and support with the well being of carers in its area,
 - (b) Contribute to the prevention or delay of the development by adults in its area of needs for care and support or the development by carers in its area of needs for support, or
 - (c) Improve the quality of care and support for adults, and of support for carers, provided in its area (including the outcomes that are achieved from such provision)

What truly underpins the Care Act.



Benefits to integration

Willingness to challenge and overcome professional, cultural and behavioural barriers

Action to share information both within the NHS and between people, and social care

Organisational stability to avoid the distractions and delays that occur when structures are altered frequently

A willingness to provide financial support and flexibilities to enable the introduction of new models of care

Organisational stability and leadership continuity are important facilitators of integrated care

Issues with the policy direction

The risks to the social care perspective that the person should be in control of how resources are integrated around them

Professional consensus is seen as integrated working

Social work has a unique identity which experience in MH Trusts indicates can be lost

Social care resources are already stretched, how ready is health to truly value social care and social work in a climate of reducing resources

There are inherent contradictions in health and social care which form the safeguards to people's rights

Integration has to be so much more than the merger of social care and health

Benefits of a social work perspective

The social model and rights based care and support

Unique capabilities which social workers bring

- Relational approaches
- Understanding and working with complexity
- Holding and enabling risk
- Able to bring a mix of emotional and practical support
- Value & understand the whole person not just the presenting condition
- Emotional intelligence, resilience and understanding

Knowledge, experience and skills of supporting people in complex situations

Practical roles which social workers are best placed to take including:

- Named Social Worker
- AMHP
- BIA



So what does that mean for you?

Social work is more important than it has ever been so we must do it properly

Bring emotional literacy to every element of your practice. The default position for complex and emotional situations is not directed state care and control. It is freedom, choice and personal aspiration.

Legal literacy is at the heart of social work. Rights based practice and civil liberties are enshrined in law for a reason. “MCA assessments shouldn’t begin because the person has said no to our integrated care plan”.

Carry on and drive forward the long tradition of social work as a risk enabler. You may need to manage other professionals anxieties and risk averse behavior more than that of the citizens.

Influence and lead practice, Social work has a key role in understanding and leading beyond the system yet shape and work within them.

Embrace what it means to be a social worker. Positive, progressive and creative with a humanist understanding of the art of people, cultures, love and a dash of science to add colour.

Principles for Integrated Working

Improve the experience and outcomes of people who access support

People want health and social care to work better together

Integration must be genuinely coproduced with people at the heart of all levels of decision making – *no decision about me without me*

Social workers and social work managers must be engaged from the outset in any plans to progress integrated ways of working

Commissioners of integrated services must recognise that social work is a unique and distinct profession with its own set of principles and code of ethics and unique knowledge base and skills set

Principles for Integrated Working

Social work needs to be represented at a senior level (Board Level) in organisations employing or considering employing social workers

Regular governance meetings need to take place to hold the standards of professional social work into account

Organisational missions should actively reflect the value of social work and social work values

The social model of disability and the Mental Capacity Act should be core training for all health and social care practitioners and in the heart of any integrated care and support plans

Robust plans must be put in place to ensure that social workers receive good quality supervision from qualified social workers