
CONFERENCE ABSTRACT

Development of a framework for the delivery of integrated child healthcare: a commissioning support tool

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Introduction: Designing a new model of healthcare for children is complex. There is a tendency to take a top-down 'one-size-fits-all' approach. At Connecting Care for Children (CC4C, an inner London integrated child healthcare scheme), we like to do something different and be the leaders of change! We offer an integrated approach to the care of children and young people based on a 'whole population framework' consisting of patient segments, covering the healthy child, the acutely unwell child and the child with long term illness¹. It deviates away from pathways for specific conditions and redirects focus to the experience of the child with the condition, rather than just the medical aspects².

Policy context and objective: There is a need to improve outcomes and patient experience, without increasing costs. In order to build upon current services effectively, it is imperative to (i) understand the services already on offer, and (ii) identify areas where attention is needed. As such, CC4C devised a framework using a six patient segment model, to extend knowledge of services available across the sectors and act as an aid to strategic planning and commissioning. The framework lists the access points and services available to children and their families, across a population footprint. It also identifies important gaps in provision and issues relating to child health, with reference to the Child and Young People Joint Strategic Needs Assessments for the geographical area, as well as CHiMAT (National Child and Maternal Health Intelligence Network) data. Current initiatives that are underway or planned, are presented alongside the key issues, as an aid to 'place-based' commissioning.

Targeted population: With new interest into commissioning in the form of accountable care organisations and partnerships³, this working document is especially helpful, and can be used as a tool in the planning of such partnerships and to allocate funding. The framework can be populated and grown with ideas generated from multi-agency input as well as patients themselves.

Highlights: This easy to use, manageable framework aims to promote and deliver integrated care by identifying child health issues at a grassroots level. By identifying the issues at the 'point-of-healthcare', by both providing and receiving parties, we can define 'never been seen before' issues that have not previously been highlighted at the commissioning level, but that, when addressed, would have a real impact on patient experience.

Transferability: Currently developed for child health, such a framework can be modified to be applicable across all age groups, populations and healthcare settings. It has already been adopted for use by three clinical commissioning groups for child health, and interest has been shown by the 'care of the elderly' sector.

Conclusions: We believe this framework can be used as a building block for integrated care to allow all stakeholders to view current services, areas of need and thus offer solutions that really work. Through such an approach, we can truly connect with our patients and improve the patient healthcare experience.

(Word count excluding references: 486)

References:

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