

### **Accountable Care Partnership: Stakeholder Briefing**

Health and social care partners across Barking and Dagenham, Havering and Redbridge (BHR) have achieved a lot by working together over the past few years. However, our health economy remains one of the most challenged in the country in terms of quality and money.

While we have led, and overseen, major improvements locally – shorter waiting times in A&E, improved community rehabilitation services, better access to primary care and more integrated health and social care – we are now at a point where it's clear that current system will not be financially viable in the future, or deliver the quality improvements that we want to see for our residents.

The current health and social care budget in BHR is £1.2bn, but the health economy as a whole is looking at a substantial annual deficit in the coming years.

Most of our budget goes on hospital care, even though we all recognise that the focus needs to be on prevention and primary care which is more cost effective. But making that switch isn't easy, particularly given the way that each organisation operates within the current system.

So we want to try something new. Building on what's already working, with clinicians and elected representatives in the driving seat, we are looking at how we could dissolve the divide between primary care, community services, mental health services, hospital and social care and come together in a stronger partnership for the benefit of our population.

Of course, each of our boroughs has its own challenges, so while there is much we could do collaboratively, we would still retain the leadership and focus for residents in our respective boroughs.

Through a more cooperative approach we could agree together how to spend the total health and social care budget, making sure that we invest in the priority areas and keep people well in the community. New arrangements would also enable us to share risk across the system.

If the total budget for our patch – some of which is held by other organisations such as NHS England and Health Education England – is fully devolved to us, we would have much more autonomy to decide how we as a system deal with our local challenges – such as attracting, developing and retaining a high performing clinical and social care workforce across all organisations.

BHR is recognised nationally as a patch with strong clinical and political leadership and we are now exploring whether developing an accountable care partnership (ACP) could help us to deliver better outcomes for our patients while helping to bridge that funding gap.

This new partnership could be responsible for the cost and quality of care for all our communities. It could be jointly responsible for a combined budget and manage costs by aligning incentives for hospitals, GPs and out of hospital providers to encourage better co-ordination of care, more informed commissioning, and to promote continuous improvements to quality.