Integrated Care & Support Programme Longer Term Evaluation

Summary of Pioneer Evaluation Workshop 1

Background
The longer term evaluation of the Integration Care and Support Pioneers programme is being undertaken by an evaluation team led by the Policy Innovation Research Unit (PIRU) (see http://www.piru.ac.uk/projects/current-projects/integrated-care-pioneers-evaluation.html). The evaluation has been designed with a strong interactive component, which includes six-monthly workshops with the Pioneers and related stakeholders. These workshops will be led by Professor Judith Smith and Robin Miller from the Health Services Management Centre at the University of Birmingham and are intended to:

• test the emerging findings of the research against the experiences and views of the Pioneers;
• gain Pioneers’ perspectives on key issues to be explored in later elements of the evaluation;
• distil the practical lessons and implications of the evaluation findings for the Pioneers, and for wider health and social care policy; and
• provide an opportunity for informal discussions between Pioneers and evaluation team.

The first workshop was held at the University of Birmingham on 1 March 2016 and was attended by over thirty participants drawn from Pioneer sites, patient and public involvement representatives, local evaluators, and evaluation team (See below for details of the evaluation team).

Overview of workshop content

Early evaluation of the Pioneer programme
Professor Nick Mays presented the findings of the Early Evaluation of the fourteen first wave Pioneers. This explored the early development of the Pioneer programme from January 2014 to summer 2015. It covered how the Pioneers define themselves, their goals and activities, and the process of implementation of Pioneer plans. It concluded with the following key messages:

• It is too soon definitively to identify the extent to which the Pioneers have been able to bring about substantial service changes in their areas.
• Nonetheless, there are indications that the initial levels of ambition are being scaled back to some extent and sites are becoming more focused on a narrower range of initiatives, many related to organising multi-disciplinary teams based in the community, and a more restricted range of targets (e.g. reduced unplanned hospital admissions). This may be a reflection of the worsening financial situation of local health and care economies as well as the impact of planning for the Better Care Fund.
• There remain a number of barriers to service integration that require national resolution as much as local action such as information sharing, funding and payment systems, the procurement regime, workforce development and flexibilities, etc.

The slides used for the presentation are here
Aims, objectives and approach of the longer term evaluation

Nick Mays then talked through the overall aims and structure of the longer term evaluation which is taking place over the period 2015-2020 and is funded by the Policy Research Programme of the Department of Health. The study has three main strands:

- **Work package 1** aims, through interviews and short web surveys, to understand Pioneers’ experiences and progress of making integration-related changes, and, using routine data sources, to examine over time changes in key indicators of care co-ordination between Pioneers and other parts of the country.

- **Work package 2** will seek to determine the cost-effectiveness of specific integration initiatives within and across Pioneers. The specific initiatives/schemes to be evaluated will be chosen in consultation with the Pioneers, and other partners.

- **Work package 3** aims to synthesise learning derived from the Pioneers, feeding this back into the research process, and thus ensuring effective collaboration and shared learning between researchers and those leading the Pioneers.

The presentation used at the workshop to describe the overall approach to the longer term evaluation is here:

Further detail was given by Dr Bob Erens of the survey to be undertaken by the research team at regular intervals of a ‘panel’ of stakeholders within each Pioneer site. The aim of the survey is to collect regular data that capture the development of each Pioneer, and enable a longitudinal picture to be painted of each site over the five years of the study. It will be the team’s main way of keeping in touch with all 25 Pioneers in terms of their progress over time. The slides setting out the approach to be taken for the panel survey element of the research are here:

A key element of work package 1 of the study is the use of **quantitative indicators to examine change in measures of care and quality** within and across the 25 Pioneer sites. This strand of work is being undertaken by the Nuffield Trust. Eilis Keeble showed participants the dashboard of indicators planned to be used for this aspect of the study. In discussion following the presentation, Pioneer representatives expressed a desire to see the dashboard of indicators being made available to the 25 Pioneers, perhaps through the PIRU website. The team will be in contact with all Pioneers about this in the near future. The presentation to outline the indicators is here:
The afternoon session of the workshop focused mainly on work package 2, the **cost-effectiveness strand of the longer term evaluation**. Professor Richard Grieve set out the background and approach to undertaking studies of cost-effectiveness in complex service settings such as those of the Pioneers, and asked participants to discuss and identify possible local service interventions that may be suitable for this part of the research. It is important to note that the Pioneer initiatives outlined in the final slides were simply for illustrative purposes and their inclusion does not imply that they have been chosen for evaluation or yet agreed to be such case studies.

The slides used for this session are here:

**Themes emerging from workshop discussions**

Participants from 1 March were asked to complete a workshop evaluation form at the end of the day. All those who completed the form state that they are now clear of the aims of the longer term evaluation and most feel that they have a good grasp of the content and purpose of the three work packages. All saw engaging with the evaluation as being important to them, and were clear as to the opportunities to do so.

Perceived potential benefits for Pioneers from the evaluation included:

- refining the local focus of each Pioneer and then being clear as to how to measure its impact;
- providing useful analysis of local impacts (including quantitative and economic) that can be used to support continuous improvement and maintain local enthusiasm;
- enabling comparison with other Pioneers to facilitate good practice in other areas to be identified.

As well as providing an opportunity to learn about and comment on the emerging evaluation findings, it was also suggested by Pioneers that future evaluation workshops could helpfully include:

- research methods to be used in local evaluation studies for when a Pioneer wants to assess its own progress;
- sharing local approaches to evaluation and distilling initial learning from these; and
- developing outcome frameworks and common measures across the national group of Pioneers.

Wider themes regarding the Pioneer programme cited by participants on 1 March included:

- A number of Pioneers raised the need for support in developing and undertaking local evaluations including studies of economic impact, something that is of higher priority now, given the wider NHS financial context.
- The length of the national evaluation was seen as positive, although there were some concerns that five years may not be sufficient to achieve and demonstrate necessary behavioural and service change.
- The importance of gathering evidence regarding patient and service user experience against the National Voices ‘I’ statements was emphasised as a core priority.
• There are multiple (and often overlapping) change initiatives in each Pioneer site, with several also being NHS Five Year Forward View vanguard schemes and/or Prime Minister’s Challenge primary care access areas.
• The prior point means that some Pioneers do not tend to automatically think of themselves as a ‘Pioneer’ first and foremost – their wider service developments often pre-existed the Pioneer programme, so the focus may be something different and the research team was cautioned against assuming the ‘pioneer-ness’ is something that is commonly understood across all sites.

Robin Miller and Judith Smith

Birmingham, 8 March 2016

The second workshop of the longer term evaluation will take place on Thursday 15th September 2016 – Venue to be confirmed.

The longer term evaluation team

| PIRU team: | Nicholas Mays (Principal Investigator); Mary Alison Durand (study co-ordinator) – Nicolas Douglas, Bob Erens, Richard Grieve, Tommaso Manacorda, Sandra Mounier-Jack, and Gerald Wistow. |
| Nuffield Trust: | Martin Bardsley, Eilis Keeble and Paul Smith |
| Health Services Management Centre: | Judith Smith, Robin Miller and Evelina Balandyte |

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