What is Integrated Personal Commissioning (IPC)?

Integrated Personal Commissioning (IPC) is part of the NHS 5 Year Forward View published in October 2014 and is a national programme being rolled out across different areas in England. IPC is part of the new models of care and Tower Hamlets is 1 of 18 sites across England testing out this new approach. The learning generated from the various sites will support the wider roll out of IPC across the country.

IPC enables people, carers and families to have greater choice and flexibility over the resources and funding available to them so that they can have greater control over their own care. This is a new voluntary approach to joining up health and in some cases social care for adults who typically have high levels of need. IPC will also join up health, social care and education needs for children.

What are the goals of IPC?

The goals of the IPC programme are to:

- Provide people with typically high levels of needs and their carers/families a better quality of life;
- Prevent crises in people’s lives that lead to unplanned hospital and institutional care;
- Improve how health and social care professionals work together and offer better quality of care.

Who would benefit from IPC in Tower Hamlets?

Anyone who has any of the following needs can be involved:

- Adults with long term conditions, such as diabetes, Chronic Obstructive Pulmonary Disease (COPD) and Chronic Kidney Disease (CKD);
- Adults with learning disabilities;
- Adults with mental health problems;
- Children and young people with disabilities, including those eligible for education, health and care (EHC) plan.

What does this mean for people taking part in IPC?

Individuals participating in IPC should experience the following, which is referred to as the '5 Key Shifts' by NHS England:
- **A proactive approach** – Being able to proactively identify individuals who typically have high support needs and preventing them from going into crisis.

- **A community and peer focus** – This is through having a clear offer with tailored information, advocacy and support available within the community to help people through the IPC process.

- **A different conversation** – This involves having a person-centred care and support plan, which will be based on the strengths and preferences of individuals and the outcomes they want to achieve, instead of a service offer driven by the care system.

- **A shift in control** – This is the option of having a personal health budget (PHB) or an integrated personal budget for health and social care. This could be managed by the council, the NHS, or by a third party provider (e.g. a voluntary sector partner); or by the person themselves through a direct payment.

- **A wider range of care and support** – This is having access to “more than medicine” services available within the community.

**How does the financial model work for IPC?**

Current financial models do not encourage a proactive approach to care; they tend to reward NHS and social care activity and crisis services. The IPC financial model attempts to shift incentives towards proactive care, prevention and coordination of care, by testing an integrated capitated payment approach. This will align financial accountability and the outcomes that matter to people. With capitation, providers are incentivised to understand who is at risk, take early action to prevent deterioration and coordinate services, which, to be effective involves working in partnership with the people and their carers.

Integrated personal budgets will give people greater flexibility over how they achieve their agreed outcomes. Providers will need to have a better understanding of what people want, respond to gaps in service provision (need for new services and/or for quality improvements to existing services) in order to become a provider of people’s choose. Whist for commissioners, understanding how people are using their budgets and potential gaps in provision will inform commissioning decisions and new commissioning approaches.

**How does IPC link with existing initiatives?**

IPC does not seek to duplicate or replace existing initiatives. Instead it aims to build and strengthen what is happening locally, particularly with the expansion of Personal Health Budgets (PHBs) beyond individuals in receipt of NHS continuing healthcare/continuing care. Follow this link for more information on Personal Health Budgets.

**How can I get more information about IPC?**

If you would like more information about the IPC programme please contact a member of the Personalisation Team at Tower Hamlets Clinical Commissioning Group (CCG) on 020 3688 2559 or email: thccg.towerhamletsipc@nhs.net. Alternatively you can view the Introduction to Integrated Personal Commission video.