



# **DEVELOPING NEW MODELS OF END OF LIFE CARE: KICK-OFF DISCUSSION**

**MARCH 2016**

## ●■ OBJECTIVES

**Recap on Social Finance and the End of Life Care Incubator**

**Discuss the opportunity for improving End of Life Care (EOLC)**

**Share initial thoughts on the payment model and the role of social investment**

**Agree the key steps for completing the feasibility study**

**Agree immediate next steps**

# ● ■ INTRODUCING SOCIAL FINANCE AND THE END OF LIFE CARE INCUBATOR



## END OF LIFE CARE INCUBATOR

**Not-for-profit** social enterprise, founded in 2007

**Designed / developed first Social Impact Bond**

**Work across multiple issue areas,** including employment, health & social care, and children's services

**Mobilised ~£100M** socially-motivated investment; **£33M contracts under management**

**Partnership with CCGs** to improve community EOLC services

**Development support and capital** of up to £1.5 million available for each locality to support this process

**A social investment model** for a 24/7 EOLC community nursing service developed

**Sits within the Care & Wellbeing Fund, managed by Social Finance** – a £12 million social investment fund backed by two socially-motivated investors (Macmillan, Big Society Capital)

## **Growing need to better meet people's preferences for End of Life Care**

- Number of people with palliative care needs set to rise by 17% by 2030<sup>1</sup>
- While 63% of people would prefer to die at home, only 22% do<sup>2</sup>

## **Meeting EOLC needs would improve social outcomes and reduce demand for acute services**

- Improved community based palliative care can reduce emergency inpatient admissions by 66%<sup>3</sup>
- The total cost of acute care at the end of life is significant, estimated at approximately £4,500 per patient.<sup>4</sup>

## **Multiple challenges to deliver patient-centric and holistic support for patients at end of life**

- Limited identification of EOLC patient needs and preferences, especially non-cancer sufferers
- Lack of service coordination, with multiple providers in each area and limited information flow
- Lack of appropriate community-based services, leading to increased use of generalist hospital care

## **Growing evidence base for “what works”**

- NICE Quality Standard – information, identification, co-ordination, holistic support, personalised plans<sup>5</sup>
- Rapid-response and/or planned specialised nursing service can double chances of patient dying at home<sup>3</sup>
- EOLC coordination hub can reduce emergency admissions by up to 57%<sup>6</sup>

## **How do these challenges affect your area?**

1) B Gomes (2008) Where people die (1974 2030)

2) Sue Ryder (2013) A Time and a Place and Public Health England End of Life Care Profiles

3) Nuffield Trust (2012) The impact of the Marie Curie Nursing Service on place of death and hospital use at the EOL. 4) Nuffield Trust (2014) Exploring the cost of care at the end of life

5) NICE (2013) QS13 6) Bristol University (2012) Independent Evaluation of the Marie Curie Cancer Care Delivering Choice Programme in Somerset and North Somerset

# THE EOLC INCUBATOR PRESENTS AN OPPORTUNITY TO DEVELOP AND EXPAND EFFECTIVE SERVICES

## Analysis and feasibility assessment

- **EOLC Incubator will sponsor a feasibility assessment to determine scope for 24/7 specialised nursing for improving care in last weeks of life**
  - Is the population large enough to support a specialised nursing service?
  - What are the anticipated outcomes from a service?
  - What are the potential local savings from reduced acute spend to cover improve community service costs?
- Enables CCG and Care and Wellbeing Fund to decide whether to co-design detail

## Partnership working to tailor service and focus on outcomes

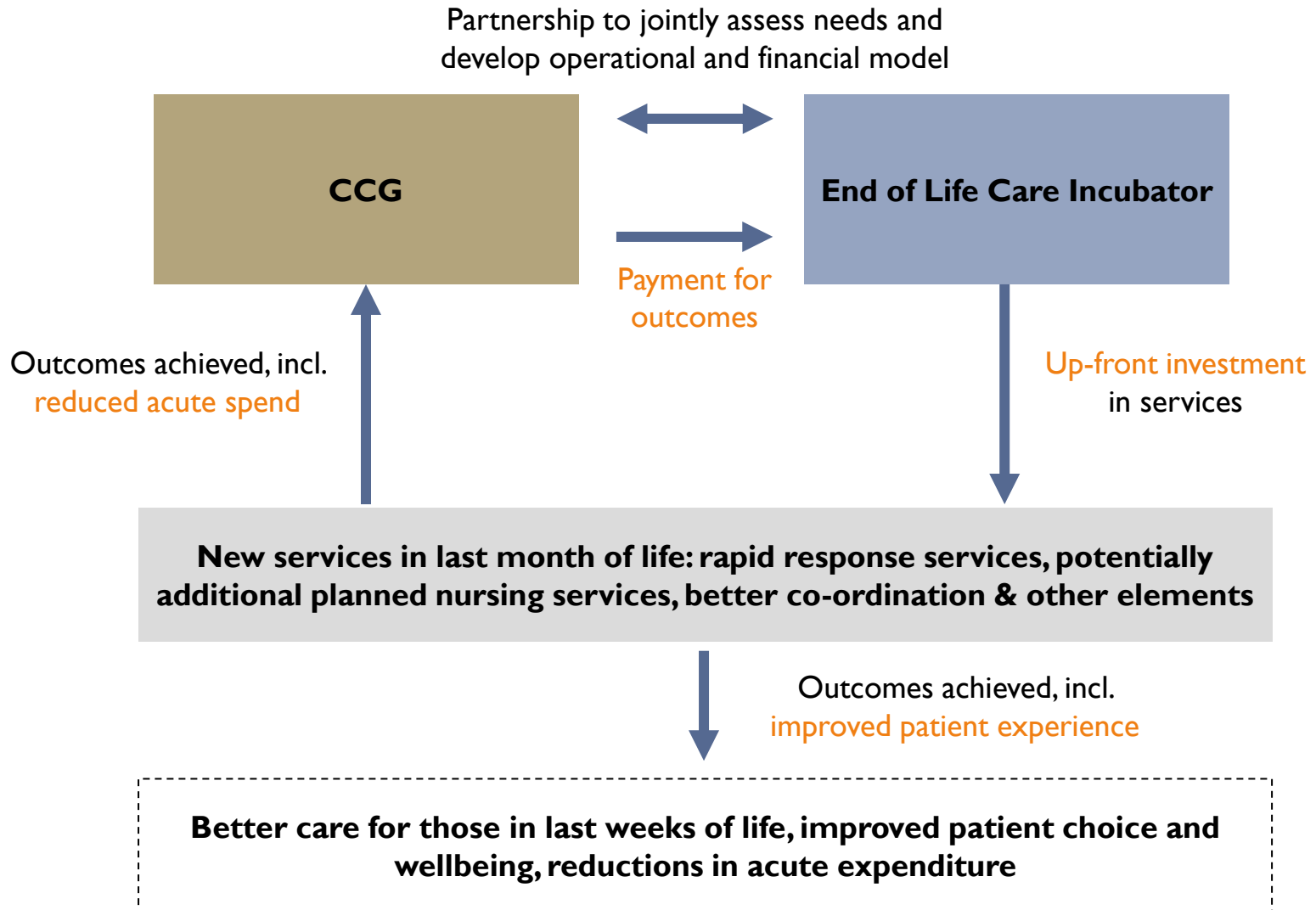
- **EOLC Incubator will form a partnership with each CCG** to tailor the core service model to local need, e.g. nature and scale of specialised nursing service and fit with wider service landscape (coordination hub, district nurses, hospices)
- **Incubator will draw on Social Finance's extensive experience** to develop a funding model that meets CCG's financial requirements, incentivises positive outcomes, and supports external investment

## Access to social investment and EOLC expertise

- **EOLC Incubator has direct access to a £12m investment fund** (Care and Wellbeing Fund) backed by two socially-motivated investors, including Macmillan
- Fund has already indicated that End of Life Care is a strategic priority
- **Use of social investment allows CCG to reduce the risk** of commissioning a new service, since payments are made on the basis of outcomes
- Of equal importance, the **EOLC Incubator is able to draw on significant national expertise** in EOLC and apply to local areas



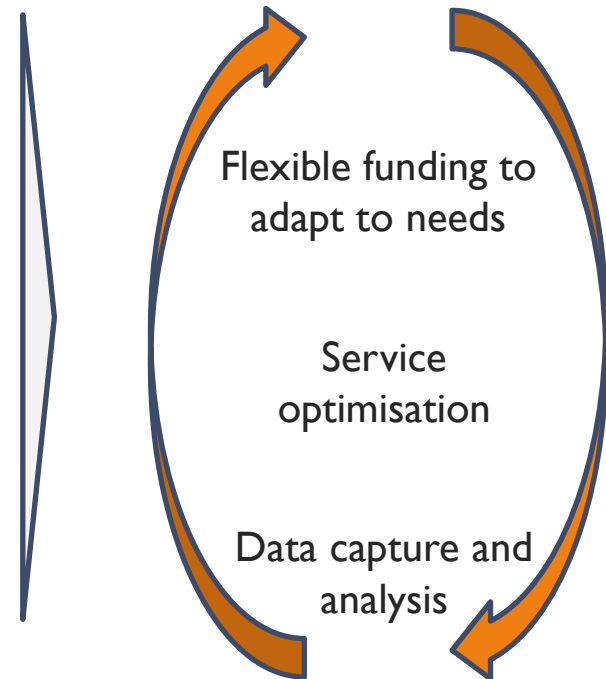
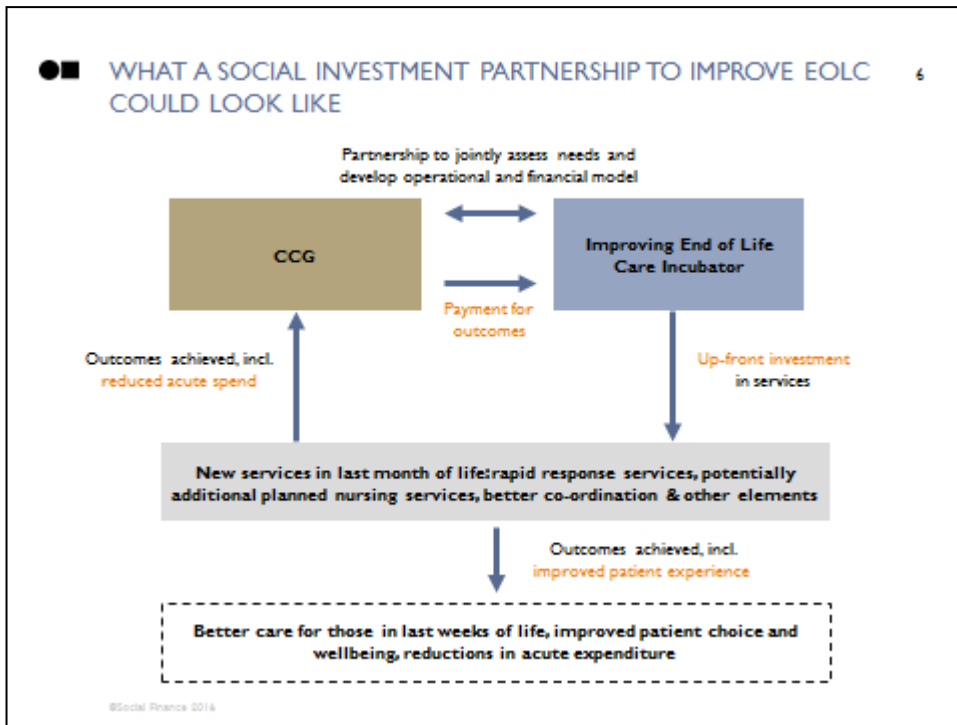
# WHAT A SOCIAL INVESTMENT PARTNERSHIP TO IMPROVE EOLC COULD LOOK LIKE



# ●■ A FOCUS ON OUTCOMES CAN SUPPORT RIGOROUS SERVICE DEVELOPMENT AND DELIVERY

## Outcomes-focused service model...

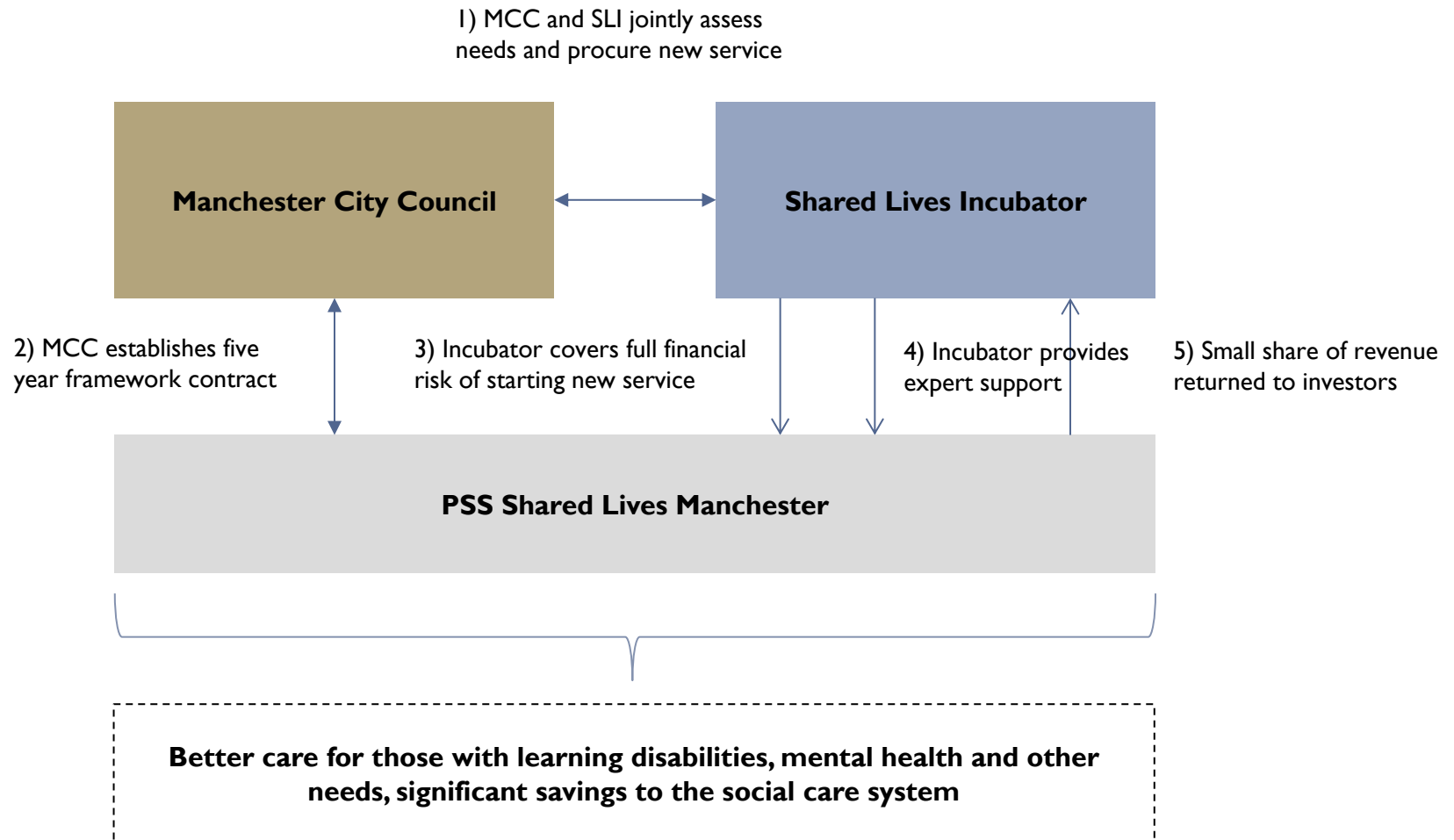
## ...Driving rigorous delivery





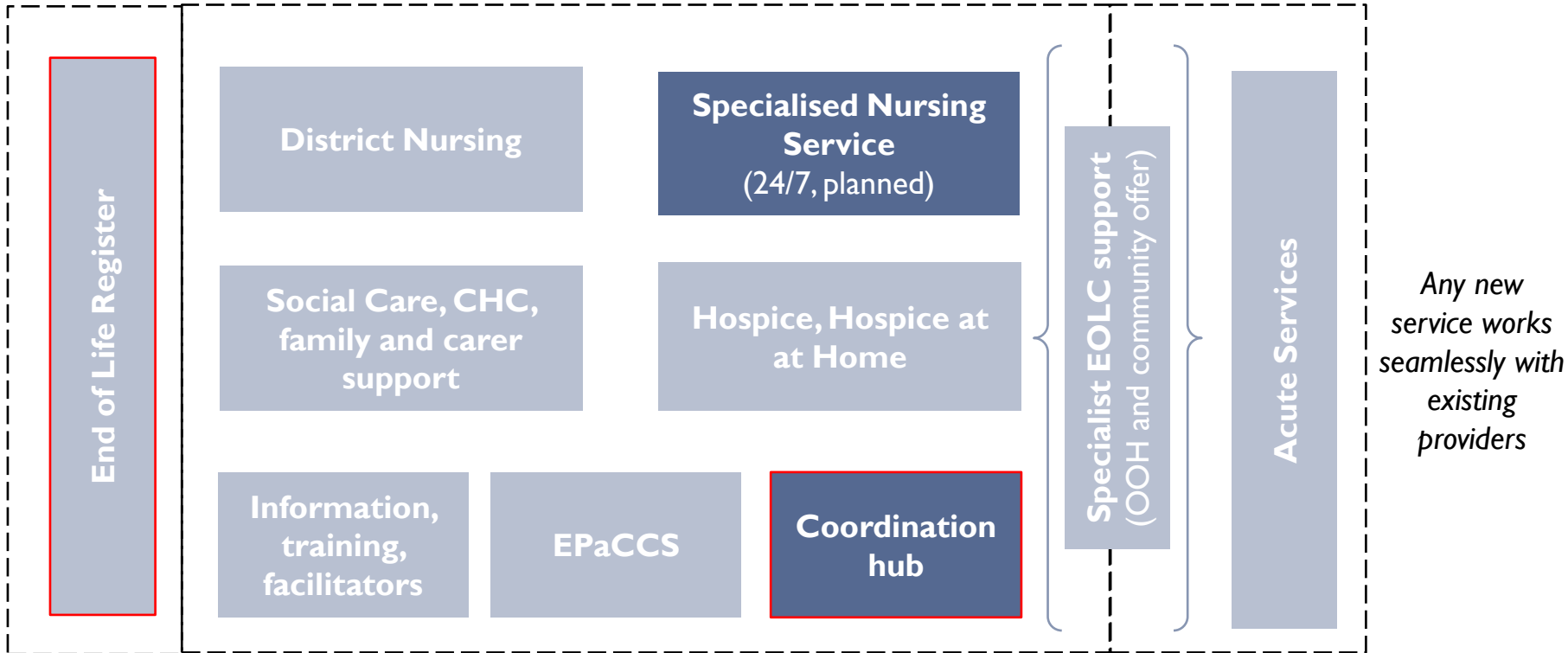
# WE ARE DRAWING ON SIMILAR SUCCESSFUL SOCIAL INVESTMENT PARTNERSHIP MODELS – E.G., THE SHARED LIVES INCUBATOR

- The Shared Lives Incubator brings together investment and expertise to support local authorities and providers to transform shared lives provision





# OPERATING MODEL: AIM TO DEVELOP EOLC COMMUNITY MODEL TO PROVIDE MORE PERSON-CENTRED, COORDINATED CARE

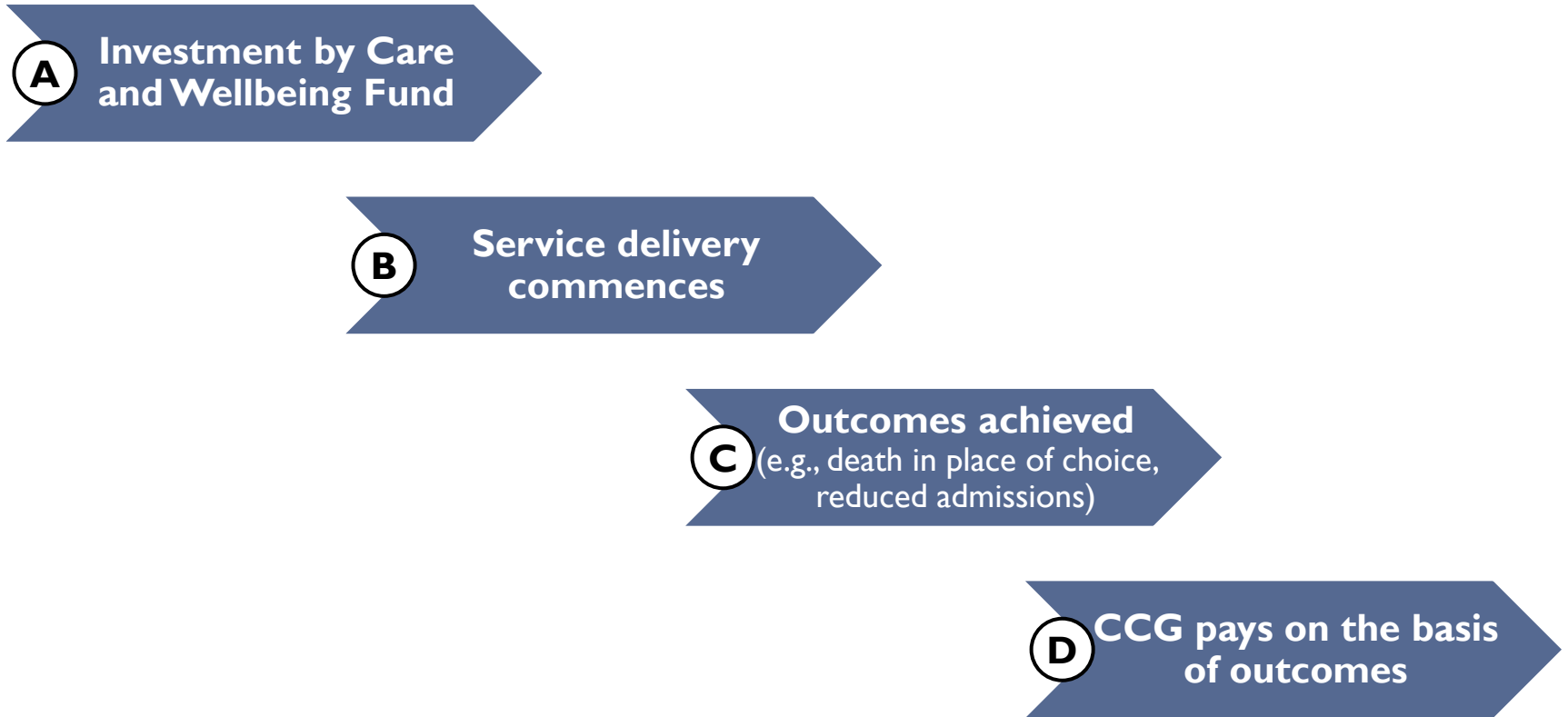


**Underpinned by engaged, informed and compassionate professionals, working alongside families and communities**

**▶ What are the key services to develop in your area?**

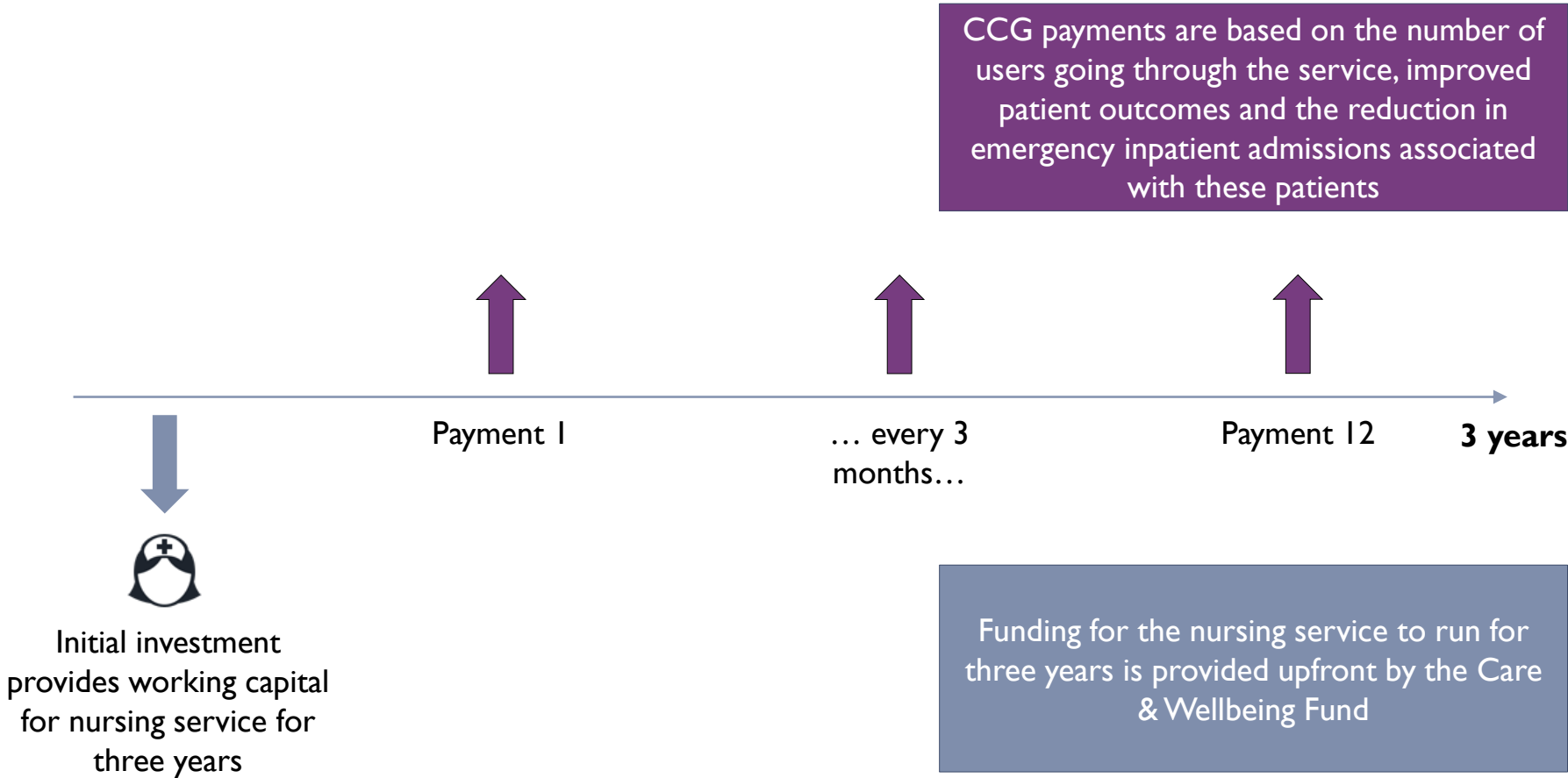
- Potential new services ■
- Existing EOL service ■
- Key EOL enablers

●■ ACCESS TO SOCIAL INVESTMENT ENABLES CCG TO PAY FOR SERVICE OUTCOMES, LINKED TO REDUCED ACUTE DEMAND



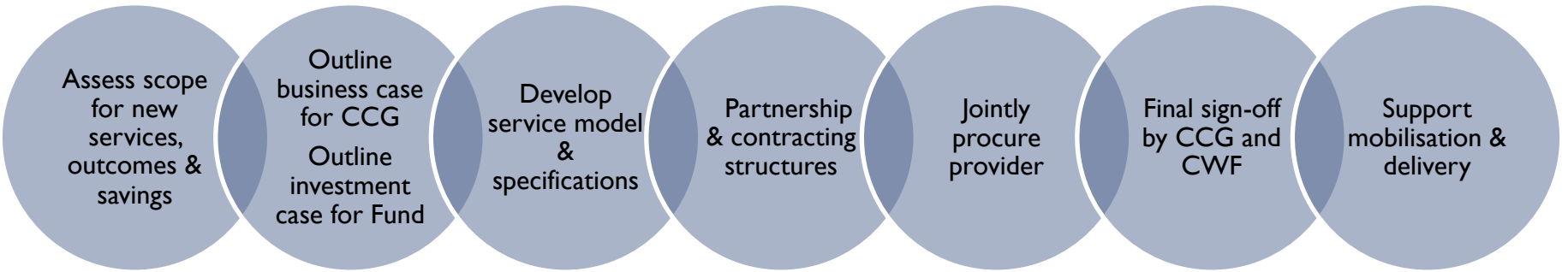
**Illustrative**

# ● ■ HOW FUNDING MIGHT WORK IN PRACTICE



# KEY POTENTIAL STEPS FROM TODAY TO IMPLEMENTATION

**For discussion**



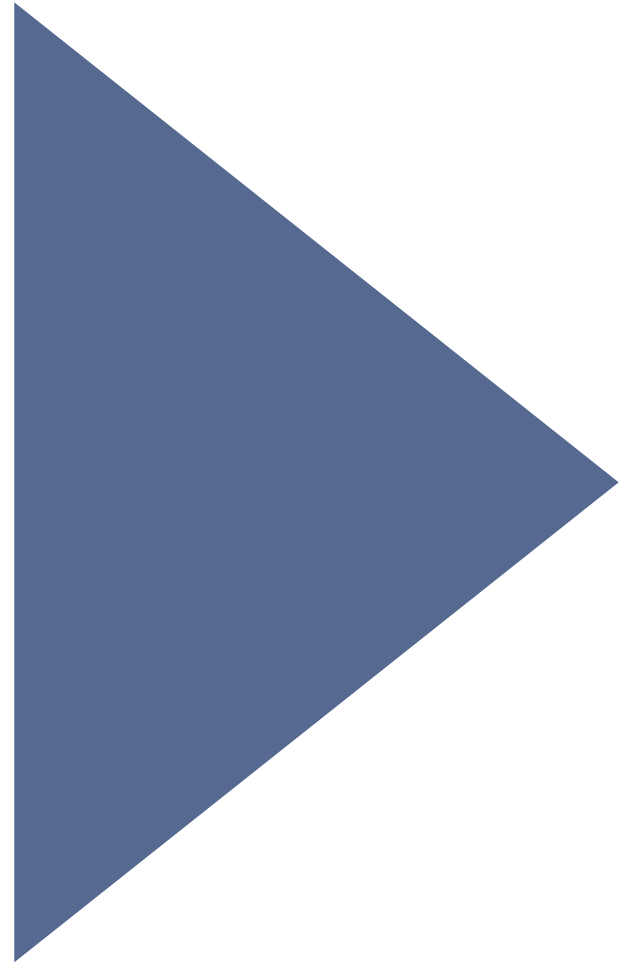
Underpinned by strong partnership working & alignment of values

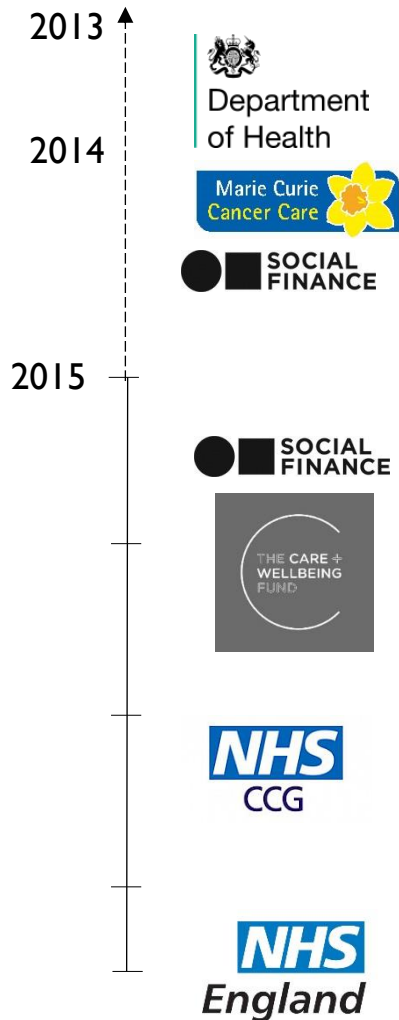
1. Confirm executive sponsorship of this project and a working partnership with the End of Life Incubator
2. Conduct analysis and local interviews to test and develop operating and financial model assumptions, including benefits for CCG and end of life patient population
3. Tailor specialised nursing service model within context of wider EOLC service landscape
4. Agree commissioning approach, i.e., partnership model with EOLC Incubator, procurement approach
5. Agree targeted outcomes and payment mechanism for CCG(s) in outline

- **Completed feasibility study to determine suitability for investment**
- **Completed study forms basis for consideration by CCG**

- Would be followed by an MoU and co-development stage if both parties wish to proceed

- An improved specialised 24/7 nursing service will form the core of the service model**
  - With option to explore planned nursing and a coordination hub
  
- Services will be commissioned on a payment-for-outcomes basis, supported by social investment**
  - Outcomes could include the number of users in the service, improvements in patient experience (e.g. death in place of choice or usual place of residence), measurable reductions in emergency admissions or total acute costs
  
- Aim to procure or extend services in the coming 12 months and would like to work in partnership to develop the right operating and financial model**
  
- We will start working together right away**
  - Aim to complete feasibility study within c. 8 weeks
  - CCG project lead (c. 1 day a week)





In late 2013 and during 2014, Social Finance and Marie Curie Cancer Care were funded by the Department of Health’s Social Enterprise Investment Fund to develop a social investment approach to funding End of Life Care Services. The work was crystallised around one CCG in the Midlands.

**During 2015, Social Finance launched the Care & Wellbeing Fund**, a £12 million investment fund which aims to support improvements in community based care for those with cancer and other long-term health conditions. Backed by socially motivated investors BSC and Macmillan.

Social Finance worked with another CCG interested in the End of Life model. This was an opportunity to align the model with up-to-date policy and test against another CCG landscape.

**In September 2015, the End of Life Care Incubator was developed**, as a way for commissioners, socially motivated investors and providers to work together to develop, iterate and scale new end of life services. NHS England were instrumental in facilitating contact with interested CCGs, with an aim of identifying up to 6 to take forward as a cohort, to ensure learning across the cohort. Insights from the analysis will be shared with Prof Bee Wee and her team





## SOCIAL FINANCE ANALYSIS SHOWS POTENTIAL FOR A BETTER SERVICE WHICH IS BROADLY COST NEUTRAL

Over 2014, Social Finance undertook a major review of the costs and benefits of community based care services. Focusing on the Rapid Response Nursing Service, a source of cost savings was found. This provided a strong case for either internal NHS investment or externally provided social investment in supporting the expansion of such services.

Average cost of End of Life Care emergency admission - £2,500

Average emergency admissions in last month of life - 0.7

Typical costs of emergency admissions per 1,000 patients - £1.75 million p.a.

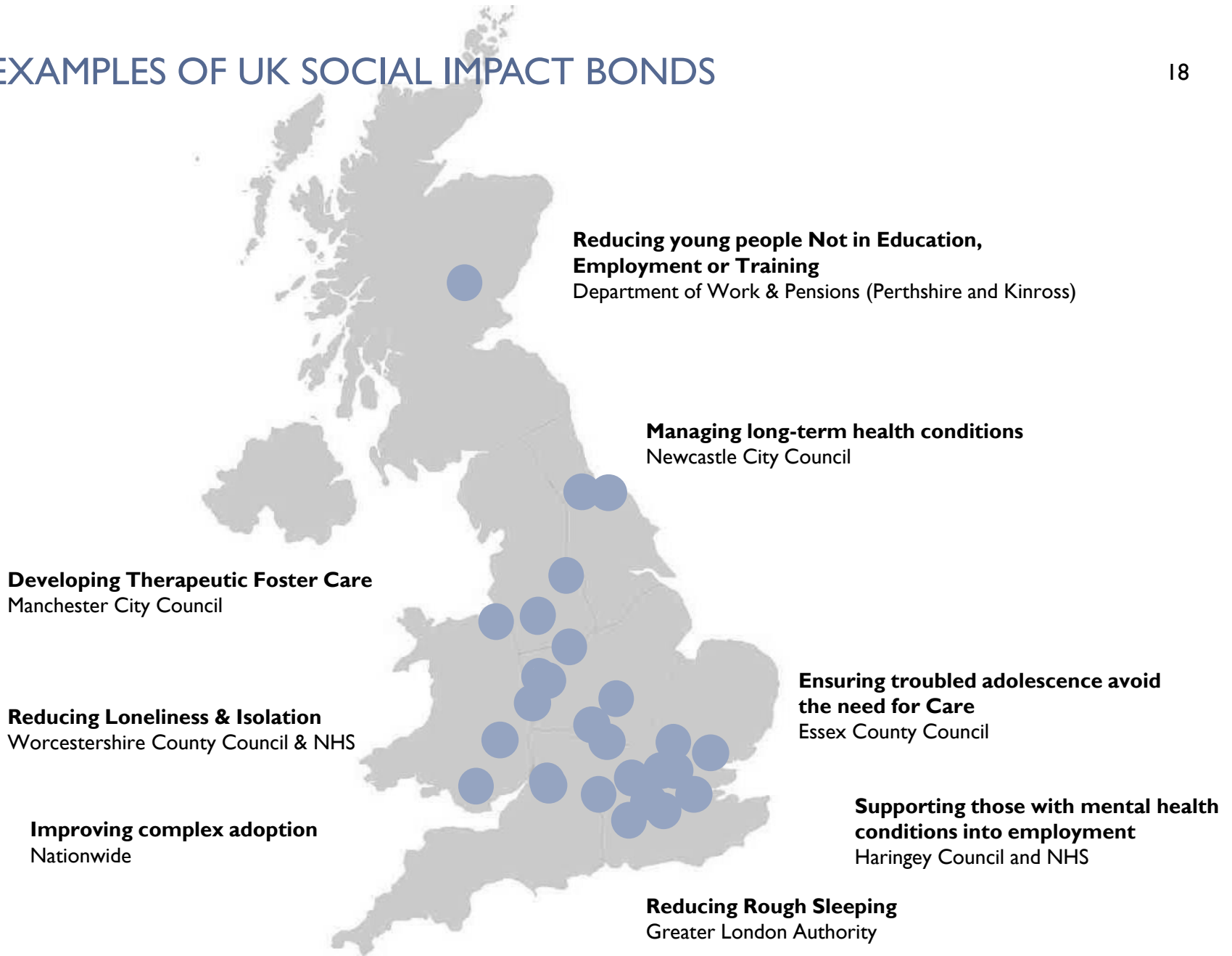
Typical cost of Rapid Response Nursing Service - £0.5 million p.a.

Savings generated by reducing emergency admissions by 33% - £0.58m p.a.



**Expected net saving per 1,000 patients - £0.08m p.a.**

# EXAMPLES OF UK SOCIAL IMPACT BONDS



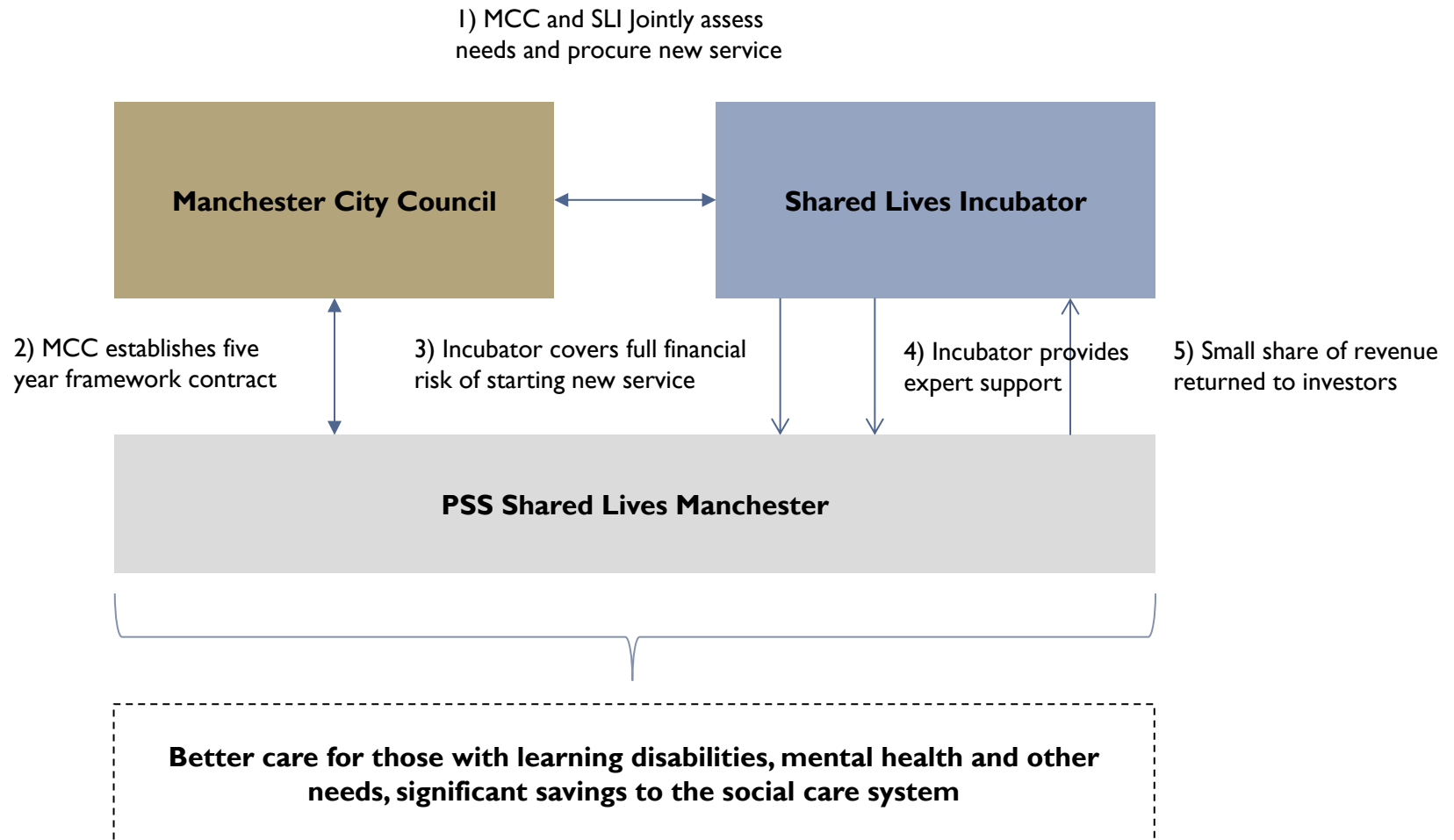
# EXAMPLES OF OUR HEALTH AND SOCIAL CARE PROJECTS

1. **Care & Wellbeing Fund** – a £12 million investment fund focused on unlocking innovation in the provision of a range of community services and early interventions for those with cancer and LTC particularly the elderly across the UK
2. **Cornwall Adults LD** - exploring the potential for social investment opportunities in learning disability services
3. **Cornwall Living Well**– supported Age UK and CCG to develop programme aimed at reducing loneliness and social isolation
4. **End of Life Care** – working with partners to develop a social investment approach to EOLC
5. **Health and Employment Partnerships** – investing in programmes to provide employment (vocational rehabilitation) for people with mental health needs
6. **Lancashire integrated well-being** – supported commissioners to develop Integrated Wellbeing Service
7. **MySupportBroker** – advice on business development and raising capital to a social enterprise focused on the provision of low cost support to those managing personal budgets
8. **Newcastle Adults LD** – providing advice to commissioners across learning disability provision
9. **Reconnections** – social investment in a new approach to tackling loneliness
10. **Salford Health Matters** – providing business advisory services in particular with respect to raising capital to this innovative primary care enterprise
11. **Shared Lives Incubator** – investing in the development and growth of Shared Lives schemes around the country
12. **Swindon** – working with partners to develop a social investment approach to EOLC
13. **Ways to Wellness** – supported the development of the first health SIB focused on LTCs management
14. **Winterbourne View Cohort** – informing the independent report on the future of care for people with learning disabilities



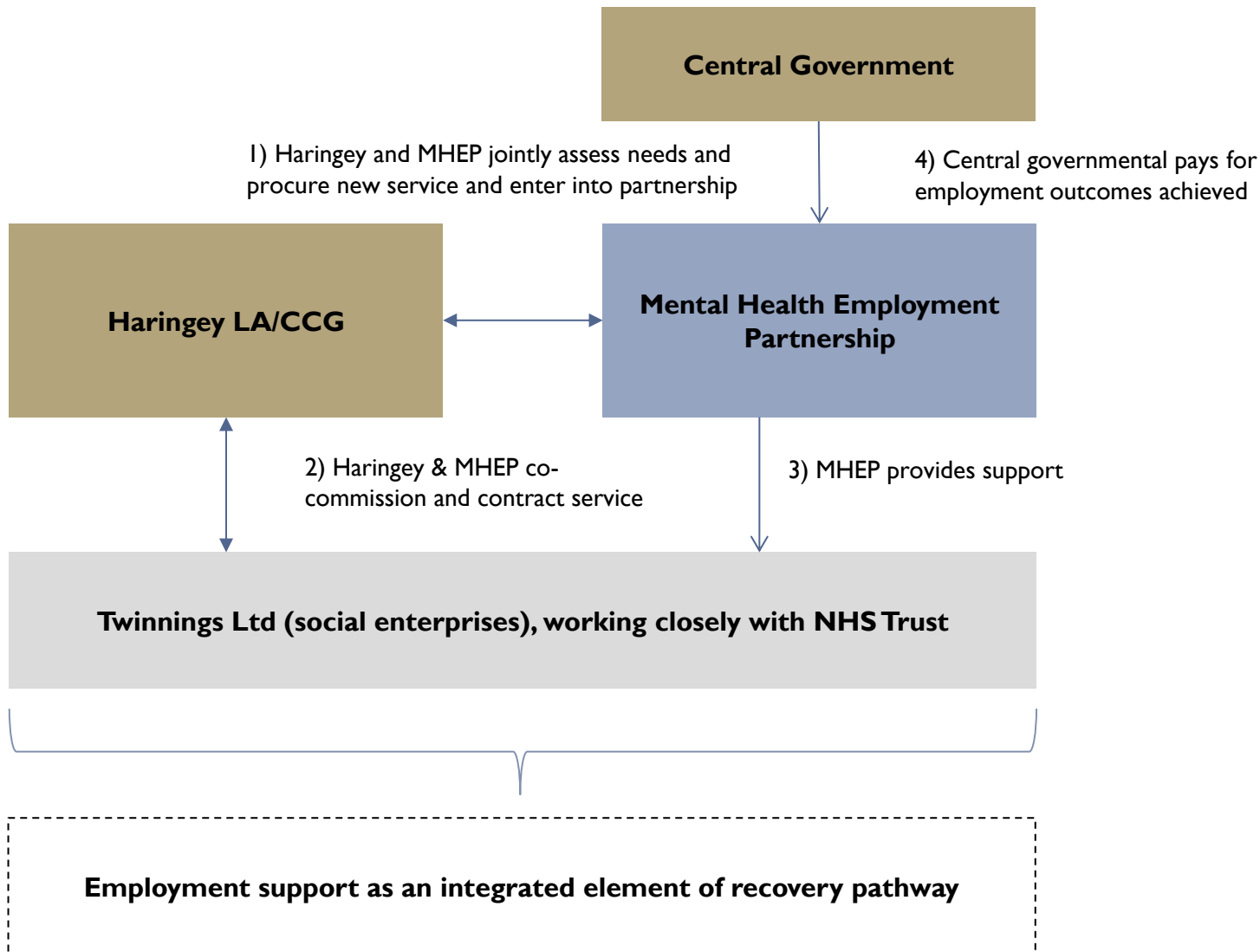
# EXAMPLES OF SOCIAL INVESTMENT PARTNERSHIPS – THE SHARED LIVES INCUBATOR

- The Shared Lives Incubator brings together investment and expertise to support local authorities and providers to transform shared lives provision



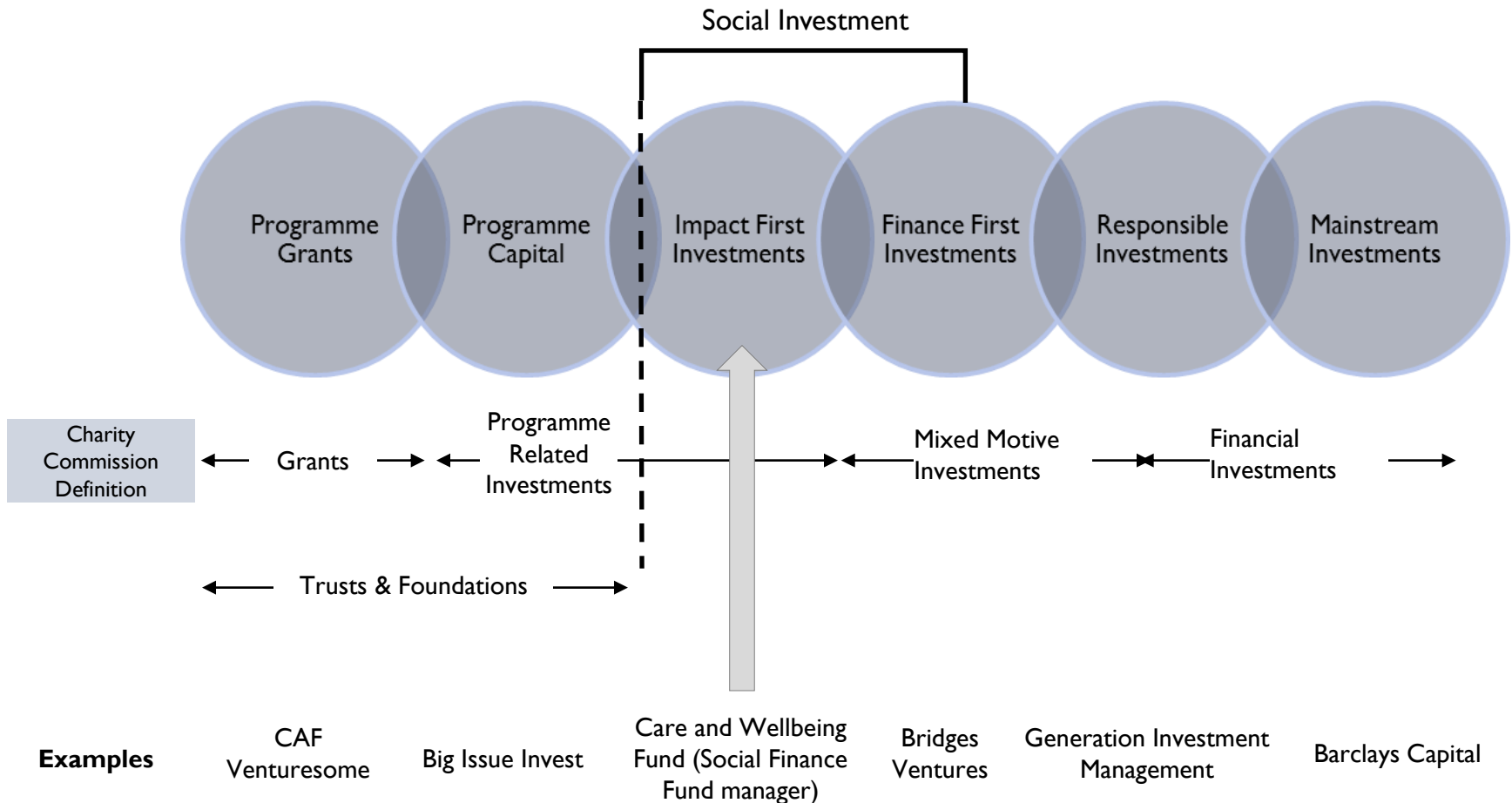


# EXAMPLES OF SOCIAL INVESTMENT PARTNERSHIPS – MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP



# WHAT IS SOCIAL INVESTMENT?

Investment where, at the time of the investment decision, the social purpose of the enterprise is a principal motive for the investment



# WHAT ATTRACTS SOCIAL INVESTORS TO SOCIAL IMPACT BONDS?

**Interest in scaling a particular intervention or supporting a specific community**



**Desire to increase government efficiency**



**Desire to promote collaboration, innovation and build new markets**



**Interest in shifting funding toward prevention**



**SELECTED SIB INVESTORS**

 King Baudouin Foundation	 Esmée Fairbairn Foundation	 BARROW CADBURY TRUST
 the Tudor Trust	 Lankelly Chase Foundation	 Rockefeller Foundation Innovation for the Next 100 Years
 Bridges Ventures	 BIG SOCIETY CAPITAL Transforming social investment	 The Getty Foundation

**Focus on improving outcomes around a particular social issue**



**Desire to invest in effective social programmes**

