



Reimagining Health and Care Through Place-Based Budgets and Personalisation

A proposal to support Integrated Neighbourhood Teams, stabilise social care, and deliver community-led care at scale

Executive Summary

This proposal outlines how we can shift from a reactive, hospital-centric system to a proactive, personalised model of care by:

- Implementing **Integrated Neighbourhood Teams** with delegated, pooled **integrated neighbourhood operating budgets**
- Expanding **Personal Health Budgets (PHBs)** and **Integrated Personal Budgets (IPBs)**
- Removing **charging for domiciliary social care** to promote equitable, accessible timely healthcare
- Using existing policy flexibilities, reducing bureaucracy, and enabling local innovation

These changes will help stabilise the social care system, reduce NHS pressures, and improve outcomes—while delivering on the ambitions of the NHS 10 Year Plan and building foundations for a sustainable, integrated 10-year vision.

1. The Problem: Fragmentation, Inefficiency, and Inequity

- Health and care services are overstretched, reactive, and fragmented.
- Individuals face repeated assessments, long waits, and lack of coordinated support.
- Social care remains underfunded and means-tested, exacerbating inequalities.
- The system lacks local flexibility to focus on *what matters* to people.

2. The Vision: Local, Personalised, Preventative Care

We propose **Integrated Neighbourhood Teams** are empowered through:

- **Delegated operating budgets at neighbourhood level**, pooled across health and care
- Funding that includes **staffing, PHBs/IPBs, and community support infrastructure**
- Decision-making rooted in the **Comprehensive Model of Personalised Care**
- Teams co-producing care plans with people, focusing on early support and prevention

This approach allows local teams to fund solutions tailored to individuals' needs preventing problems escalating into crisis.

3. How It Works: Practical and Scalable

The model:

- Uses **existing legal and financial frameworks**—no new legislation required
- Builds on the **PHB and complex care plans expansion** already proposed in the NHS 10 Year Plan
- Is **cost-effective**: savings arise from fewer hospital admissions, reduced duplication, and leaner assessments
- Encourages **modern technology** to reduce admin costs and improve user access (e.g. NHS App)

It is not a new pilot. It is a scalable model that aligns with ICS priorities and national ambitions.

4. Addressing Social Care Sustainability

A key component is the **removal of domiciliary care charges**, a policy shift that:

- Aligns care funding more closely with NHS principles
- Reduces unmet need and delayed discharges
- Relieves pressure on informal carers (particularly women and minoritised communities)
- Contributes to financial stability across local systems

5. Policy Alignment and Impact

NHS 10 Year Plan & Neighbourhood Health Framework: Integrated working, PHB expansion, neighbourhood models

Social Care Vision: National Care Service, stability, dignity, and preventive investment

Wider Government Goals: Tackling inequalities, improving productivity, reducing reliance on hospital care

Next Steps

- Identify places in each region keen to explore this approach, with a particular focus on areas with high health inequalities (include a range of geography/demographics eg rural, urban, suburban, coastal etc that together are representative of the whole country)
- Model economic analysis within those neighbourhoods to understand budget shifts and implementation resource requirements
- Develop co-production approach in those neighbourhoods for designing local implementation
- Undertake focus group / polling activity in those neighbourhoods to understand public reaction to this proposal