



# Manchester Clinical Commissioning Groups – one year on

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# North Manchester CCG: Our population

Overall residents in North Manchester wards report lower levels of alcohol consumption than the Manchester average; however these are still higher than the national average.

There are high levels of deprivation across North Manchester; the highest Index of Multiple Deprivation (IMD) scores are found in Bradford, Miles Platting & Newton Heath, and Harpurhey.

All Age All Cause Mortality rates are higher in North East Manchester wards than North West wards; the highest rates can be seen in Miles Platting & Newton Heath and Harpurhey

Most of the wards in North Manchester have higher-than-average rates of cancer mortality, with the exception of City Centre, Crumpsall and Moston

Alcohol-specific hospital admission rates are higher in North Manchester than in Central and South Manchester. The ward with the highest rate of alcohol specific hospital admissions is Harpurhey.

Most wards do not achieve the Manchester average life expectancy; only City Centre, Crumpsall, Moston and Higher Blackley.

Households in North Manchester wards have lower incomes and higher unemployment rates than the average for Manchester

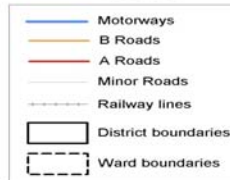
Bradford and Harpurhey have the highest prevalence of current smokers with 39% and 35% of the population respectively (compared to a national average prevalence of 21%)

Rates of teenage pregnancy in North Manchester are high, particularly in Newton Heath, Charlestown, Beswick and Clayton.

The highest proportions of over-64-year-olds referred to mental health services can be found in Miles Platting & Newton Heath, Crumpsall and Harpurhey

Harpurhey, Crumpsall and Cheetham, have relatively high birth rates in comparison to the rest of the city.

Oral health is very poor: in Bradford ward more than 70% of 5 year olds are affected by decay by the time they reach school. Having teeth extracted under general anaesthetic is the highest reason for child hospital admissions in North Manchester.



**CCG vision:** *Improving the health of local people through reducing inequalities and commissioning quality services for the best health outcomes*

CCG Strategic Objectives	Programmes of Work						Operational Plan Measures 2015/16	Values																																																															
	Years 1&2		Years 3,4 & 5																																																																				
1. Improving the quality of health services	Circulatory conditions guidance, standards & pathways	Respiratory conditions guidance, standards & pathways	Mental health commissioning programme	Living Longer, Living Better (North Manchester (Integrated Care delivery)	Gastrointestinal conditions guidance, standards and pathways	Endocrine, nutrition & metabolic conditions guidance, standards and pathways	Genito-urinary conditions guidance, standards and pathways	Reduce the rate per 100,000 population of potential years of life lost from 2997 to 2790	<b>Innovative</b> - inspiring improvement and engaging in delivery <b>Equitable</b> – patients receiving the same care no matter which practice in North Manchester a patient is registered with <b>Transparent</b> – accountable to patients and the public <b>Passionate</b> – driving improvement through change and clinical leadership <b>Respectful</b> – seeking views and opinions: having an inclusive approach																																																														
2. Manage planned care – use of pathways								Increase diagnosis of dementia to 67%																																																															
3. Manage urgent care – use of pathways								Improve IAPT access to 15%																																																															
4. Prevent and manage long term conditions								Improve the rate of health related quality of life for people with LTCs from 66 to 68																																																															
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# North Manchester CCG: Achievements

Successful partnership  
working with P.A.T and  
other partners

Diabetes self  
management sessions  
held in local mosques

4.5% reduction in  
emergency admissions  
for chronic ambulatory  
care patients

No growth in  
A & E attendances  
during 2013/14

680 more patients  
identified with Chronic  
Kidney Disease

Financial balance whilst  
investing in range of  
community based  
services

10.3% reduction in  
emergency admissions  
for under 19s with  
asthma, diabetes and  
epilepsy

c. 90% of newly  
diagnosed Diabetic  
patients referred to  
structured education  
sessions



# Central Manchester CCG: Our population

Where we are:



Population: 212000  
Young  
>30% from BME groups  
100+ languages spoken

40% of children living in poverty  
9<sup>th</sup> most deprived CCG  
population  
High levels of age specific  
chronic disease

## Quality Care

### Clinically Led

for healthier communities in Central Manchester

## Plan on a page 2013 - 2019



Central Manchester  
Clinical Commissioning Group

### About us....

#### Our group

- 41 member GP practices
- £265m budget
- 211,000 population and growing
- a young population; 56% under 30
- Over 30% from BME groups
- High levels of deprivation
- High prevalence of long term conditions

#### Our Mission

*'Informed by the views of local people and working closely with other health and social care professionals; Central Manchester Clinical Commissioning Group will design and develop health services which are high quality, safe and affordable. They will support communities to be the healthiest they can be.'*

#### We will be:-

- Fair in the way we make decisions
- Honest about the decisions we make and why we make them
- Open in our approach to decision making, encouraging involvement in our processes and structures
- Intolerant of poor quality services and health inequalities
- Robust in our support for the NHS and local health services

### Our vision is to....

Create healthier, more resilient communities in Central Manchester actively managing their own health.

Lead a network of health and social care providers, who promote, measure, monitor and improve quality over quantity

Create a better balanced system for Central Manchester by shifting hospital care to services delivered in the community

Create, with our practices and our partners, affordable and sustainable health services in Central Manchester.

### Our priority programmes are ....

#### Out of hospital care

- Population focussed services
- Integrated care within health and social care
- High quality consistent primary care
- Increasing services offered by primary care
- Building infrastructure in communities
- Mental health improvement

#### Hospital care

- Quality and safety
- Outcomes and experience
- A sustainable hospital system
- A single service across Greater Manchester
- Integrating with out of hospital care
- Mental health improvement

#### Making it happen

- Leading the health system
- Effective contracting and resource management
- Shifting resource to community settings
- Measuring quality and performance

### Strategic objectives....

Improve life expectancy by one year

Identify and optimally manage people with long term conditions – closing the gap with expected prevalence

Reducing hospital readmissions by 1/3, focussing on older people

Patient experience in primary care, integration of services and end of life care

Reducing avoidable harm through increase reporting and subsequently reducing incidence

Deliver a balanced budget each year and shift resource to out of hospital care

# Central Manchester CCG: Achievements

Emergency admissions per 1000 population down to 2008 levels

26 Multi Disciplinary teams meeting in Central Manchester

Over 3000 people seen out of core GP hours

Leading on Healthier Together, to save 1000 lives over next 5 years

£3.4m to invest in new services in 2014/15

£5.3m efficiency savings made to achieve financial balance

Effective collaborative working under the Clinical Integrated Care Board

Met all statutory targets and duties.

*Before I used to [be] more in the hospital than at home. If I need something sorted then they'll sort it out in a day.....My daughter is happy that I'm at home and since she was 8 years old, she was coming to hospital every day"- Central Manchester patient, 2014*

# South Manchester CCG: Our population

Burnage, Chorlton and Didsbury	Fallowfield and Withington
<p>High proportion of residents from a non-white ethnic group (Burnage)</p> <p>Life expectancy is higher than the Manchester average</p> <p>Burnage has a higher than average rate of low birth weight babies</p> <p>The prevalence of obesity in year 6 children</p> <p>Burnage has a higher proportion of adults with a limiting, long</p>	<p>High proportion of residents from a non-white ethnic group (Burnage)</p> <p>Prevalence of obesity in year 6 children is higher than the national average</p> <p>Higher proportion of younger people and students</p> <p>Proportion of adults "not in good health" is higher than the England and Manchester average</p>
Wythenshawe	Northenden and Wythenshawe
<ul style="list-style-type: none"> <li>• Very high levels of deprivation</li> <li>• Higher than average number of people killed or seriously injured in road accidents</li> <li>• High rate of births</li> <li>• High rates of births to lone mothers</li> <li>• Higher proportion of adults claiming benefits (Burnage)</li> <li>• A higher than average rate of low birth weight babies</li> <li>• Prevalence of obesity in year 6 children is higher than the national average</li> <li>• Mortality rates higher than the national average</li> <li>• Lower than the Manchester average level of academic achievement at GCSE</li> <li>• Proportion of adults "not in good health" is higher than the England and Manchester average</li> <li>• Higher proportion of adults claiming benefits</li> <li>• Mortality rates for all disease higher than the national average</li> <li>• Particularly high rates of mortality for CVD</li> </ul>	<ul style="list-style-type: none"> <li>• Prevalence of obesity in year 6 children is higher than the national average</li> <li>• Higher than Manchester average level of academic achievement at GCSE</li> <li>• Higher rates of sexually transmitted infections</li> <li>• Proportion of adults "not in good health" is higher than the England and Manchester average</li> <li>• Higher rates of smoking</li> <li>• Higher proportion of adults with a limiting, long term health problem</li> <li>• Higher proportion of adults claiming benefits</li> <li>• Mortality rates higher than the national average</li> </ul>





# South Manchester Clinical Commissioning Group

## Strategic Plan on a Page 2014 - 2019



South Manchester  
Clinical Commissioning Group

**CCG Vision:** Integrated health & social care; Coordinated & proactive care planning; Self-care ; Quality; Patient Experience.  
**Strategic Context :** Estimated resident population of 161,260 people. One CCG with four localities. CCG Budget £211 million  
**Strategic Challenges:** Growing elderly population & with LTC's. Manchester is ranked 150th out of 150 for cancer, heart disease & stroke. Poor life expectancy - 74.8yrs for men - 79.5yrs for women. QIPP challenge of c£4.8m 2014/15.

Strategic Priorities		Health & Wellbeing	National Outcome Framework
1. Deliver our new models of care	1. Enabling Manchester people to live longer, and live better; Develop and implement Manchester's 10 models of care; Implementation of Enhanced Neighbourhood teams & alignment of community services to proactively coordinate care	1,2,3,4 5,6,7,8	1,2,3 4,5
2. Improve primary care	2. Proactive, effective primary care offer; Increased access for patients; focuses on population health and reduce variation in outcomes; Implementation of 7 Day Model; Maximise uptake of Enhanced Services; Ongoing Practice Engagement; Increase number of patients proactively managed in the community with a GP as coordinator	1,2,3,4 5,6,7,8	1,2,3 4,5
3. Improve Urgent care	3. Universal, continuous access to high quality urgent and emergency care services; Re-design of A&E; Acute Frailty Pathway, GP Front Door, Acute access to care records of patients; Discharge to assess model; Rapid Response; Community Geriatrician	3,4,8	1,2,3 4,5
4. Improve planned care	4. To deliver high quality, value for money and effective services, safely in the right setting with the right professional; Consultant to consultant referral protocol; Provider efficiencies; Respiratory and CVD from GEM deep dive reviews: Dermatology, Endoscopy & DVT services	1,2,3,4 5,6,8	1,2,3 4,5
5. Deliver the healthier together	5. Provide the best health and care for Greater Manchester; GM wide configuration programme looking at Urgent, Acute and Emergency Medicine, General Surgery; and Women and Children's services acute	3,4	3,4,5

**Additional Priorities:** Finance configuration programme looking at Urgent, Acute and Emergency Medicine, Quality & Patient Voice  
 General Surgery; and Women and Children's services acute

**5yr Targets:** Reduction of PYLL 5%; Increase LTC reporting 1.68%; Reduce poor GP/OOH experience 3.90%; BCF targets & outcomes; LLLB outcomes

Health System: **Clinically led for better health** Greater Manchester; the Southern Sector; Manchester; South Manchester CCG  
 With you, for you

# Strategic Stocktake: Achievements to June 2014



South Manchester  
Clinical Commissioning Group

- Member practices engagement – greater understanding of their role in improving health and well being outcomes for patients
- Established GP Federation - CCG will be commissioning for the whole population through the Fed – not with 25 practices this will address variation, in Respiratory, Cancer, AF, Dementia,
- Commissioned SM GP Federation to deliver **primary care 7day service** - Deflecting 3 NEL admission per day
- Commissioned **additional community based care services implementation July- Sept 14** DVT, Dermatology & Endoscopy
- Implementation of the **Enhanced Neighbourhood Team** –Target of 70% (VH/H/M risk) patients to have care plan by 2015
- Co-commissioning with MCC: Intermediate Care; Extra Care Housing support ; Voluntary Sector services
- Jointly with Central and North CCGs commissioned the voluntary sector to **delivery social isolation interventions for Older people**
- **Building partnerships – working with LGF** improving awareness and understanding of the needs of LGBT communities

Total number of patients joining the Neighbourhood Team case load during June 2013 - Feb 2014: 532

A&E attendances	20% reduction in activity 11% cost saving
Non Elective Admissions	18% reduction in activity 22% cost saving
Outpatients	8 % reduction in activity 6% cost saving
<b>Total Case Load summary</b>	1044 residents have been supported through the case management process (June 2013 - May 2014. In May 14, we have 838 residents currently being case managed (active on the Neighbourhood Team case load

- **Cancer** – Working with MCIP programme to improve the identification and management of patients with cancer in Primary Care, along with a focus on breast and lung  
**Achieved QP increased prevalence targets**
- **Dementia Prevalence Rates** - a1% increase was required in 13/14. 11.4% increase to 64.9% achieved.
- **Atrial Fibrillation** –Medicines Management team & GP practices reviewing pathways for AF management to reduce the risk of AF-related stroke: 1.1% to 1.3%



# Manchester CCGs: challenges and opportunities

## Challenges

- Mental Health
- Finance
- Impact of other health economies
- National policy directives
- Primary Care estate
- Specialist Commissioning

## Opportunities

- Partnership working
- Strategic alignment
- Primary care co-commissioning
- Community assets
- Established programmes – LLLB, MCIP, MHIP
- Better Care Fund
- Health and social care estate e.g. NMGH