Manchester Health and Wellbeing Board Report for Resolution

Report to: Health and Wellbeing Board – 10 September 2014

Subject: Healthier Together

Report of: Manchester Clinical Commissioning Groups

Summary

This paper summarises the Healthier Together programme and provides an update on the progress of the public consultation

Recommendations

Health and Wellbeing Board members are asked to:

- 1) Note the contents of this report
- 2) Promote the consultation amongst their staff and stakeholders
- 3) Provide and organisational response to the consultation

Board Priority(s) Addressed:

Joint Health and Well Being Strategy Objectives 3, 4 and 8

Contact Officers:

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

1. Background/Introduction

- 1.1 Healthier Together is a wide ranging programme, aiming to dramatically improve health and care services across Greater Manchester. Its vision is 'For Greater Manchester to have the best health and care in the country'.
- 1.2 The need for health and social care reform has been the subject of much debate, both locally and nationally. In Greater Manchester, there are 4 principle drivers for changes:
- Need to improve quality and outcomes no GM hospital can meet all the national quality and safety standards, and lives are currently being lost
- Demand is increasing 90,000 more A&E attendances in 2012/13 across GM
- Clinical workforce is limited even if money were unlimited, we could still
 not recruit the consultants needed to safely staff all services 24/7
- Budgetary pressures all but 3 Trusts in Greater Manchester already facing serious financial pressure
- 1.3 In February 2013, NHS and Council leaders across Greater Manchester came together to sign up to a 'system agreement' which described, in broad terms, what a future health and care system should look like. The following was agreed:
- "The future health and social care system will look substantially different and that improved quality of health care for Greater Manchester residents will underpin the following key principles of a new system:
- People can expect services to support them to retain their independence and be in control of their lives, recognising the importance of family and community in supporting health and well being
- People should expect improved access to GP and other primary care services
- Where people need services provided in their home by a number of different agencies they should expect them to planned and delivered in a more joined up way.
- When people need hospital services they should expect to receive outcomes delivered in accordance with best practice standards with quality and safety paramount – the right staff, doing the right things, at the right time.
- Where possible we will bring more services closer to home (for example there are models of Christie led Cancer services delivered from local hospitals)
- For a relatively small number of patients (for example those requiring specialist surgery) better outcomes depend on having a smaller number of bigger services.
- Planning such services will take account of the sustainable transport needs of patients and carers.
- This may change what services are provided in some local hospitals, but no hospital sites will close"
- 1.4 The Healthier Together programme aims to implement this system agreement across the conurbation. The programme is overseen and managed by the 12 Clinical Commissioning Groups (CCGs) in Greater Manchester, and delivered by a central team with Central Manchester CCG is the lead CCG for the programme, and Ian

Williamson as the Senior Responsible officer. Governance is via a 'Committees in Common' where the CCGs meet to set direction, make decisions and monitor progress.

- 1.5 The reforms proposed by the Healthier Together programme are the result of continual engagement with clinicians and patients over the last 18 months. The programme has adopted a standards-based approach whereby quality standards have been developed for primary care, community based, and hospital services. Different service models than currently exist are required in order to deliver these standards consistently across Greater Manchester.
- 1.6 Planning and delivery of the primary care and community based care standards is being carried out within each health economy. In Manchester, this is being done as part of the Living Longer Living Better programme alongside the work each CCG is undertaking to reform primary care in their localities.

2. Progress

- 2.1 In April 2014, the CCGs agreed the pre-consultation business which details the case for change, vision and proposals. This is a lengthy document and can be found online at https://healthiertogethergm.nhs.uk/resources/pre-consultation-business-case-pcbc/pcbc/
- 2.2 Public consultation begun on 8th July 2014. Citizens are being asked to feedback, via a consultation document, on the proposals for all 3 areas of care primary care, community based care and hospital care. The results of the consultation will inform the development of primary care and community based care services as well as identifying which hospitals across Greater Manchester will provide the specialist services which are proposed to be delivered on fewer sites than they are currently.
- 2.3 Much of the consultation has been planned, and is being delivered, on a Greater Manchester basis by the central team. Details of the consultation, along with programme of events across Greater Manchester, can be found at https://healthiertogethergm.nhs.uk/your-views-count/. Public 'Listening events' have been held in Central and North Manchester, with a further one being held in South Manchester on 9th September. In addition to these there will be 'Question time' style events held in each locality during September with panels including local Trusts, CCGs, Healthwatch and Manchester City Council. An engagement event specifically for voluntary and community sector organisations has also been held in Manchester.
- 2.4 The CCGs and Trusts in Manchester are supplementing this work with distribution of the consultation document, public meetings, targeted sessions with vulnerable groups, and media/social media promotional activity. Further details of this local activity can be obtained from n.gomm@nhs.net.
- 2.5 At the time of writing, over 5000 responses to the consultation document t had been received. The consultation is due to finish at the end of September 2014.

Following this, all the responses will be independently analysed to inform a decision making process which will take place during 2015.

3. Recommendations:

Health and Wellbeing Board members are asked to:

- 4) Note the contents of this report
- 5) Promote the consultation amongst their staff and stakeholders
- 6) Provide and organisational response to the consultation