

**Manchester Health and Wellbeing Board
Report for Information**

Report to: Manchester Health and Wellbeing Board – 2 November 2016

Subject: Manchester Health and Social Care Locality Plan Update

Report of: Lorraine Butcher, Joint Director Health and Social Care Integration

Summary

The purpose of this report is to give a high level overview of progress towards implementing the Locality Plan.

Recommendations

The Board is asked to:

- Note the update and the progress;
- Note the engagement with Greater Manchester Health and Care Team regarding investment requirements;

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	The Manchester Locality Plan aims to support the Health and Wellbeing Strategy by identifying the most effective and sustainable way to improve the health and social care of Manchester people
Improving people's mental health and wellbeing	
Bringing people into employment and ensuring good work for all	
Enabling people to keep well and live independently as they grow older	
Turning round the lives of troubled families as part of the Confident and Achieving Manchester programme	
One health and care system – right care, right place, right time	
Self-care	

Lead board member: Mike Eeckelaers.

Contact Officers:

Name: Lorraine Butcher
Position: Joint Director, Health and Social Care Integration
Telephone: 0161 234 5595
E-mail: lorrainebutcher@nhs.net

Name: Geoff Little
Position: Deputy Chief Executive
Telephone: 0161 324 3280
E-mail: g.little@manchester.gov.uk

Name: Joanne Newton
Position: Chief Finance Officer, Manchester Clinical Commissioning Groups
Telephone: 0161 765 4201
E-mail: joanne.newton6@nhs.net

Name: Caroline Kurzeja
Position: Chief Officer, South Manchester Clinical Commissioning Group
Telephone: 0161 765 4051
E-mail: caroline.kurzeja@nhs.net

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.

The Manchester Locality Plan (April 2016)

1.0 Implementation of the Locality Plan

Since the previous report to the HWBB in August work has progressed in each of the three main change programmes, the Single Commissioning Function, the Single Hospital Service and the Local Care Organisation.

Separate reports are included elsewhere on the Agenda so it is not intended to repeat the key issues here.

The key focus of work across the system since May has been on the further development of the 3 programmes and the identification of the necessary investment required to realise the ambition of improved health and care outcomes for residents while also securing financial sustainability of the health and care system for the city.

This report seeks to give an overview of the work undertaken to date to identify the investment requirements to support implementation of the Plan and some of the emerging opportunities resulting from the health and care system now beginning to more effectively work together.

In addition, this report provides a brief update on key development issues emerging for the North Manchester General Hospital in relation to the developing Transformation Programme and the findings of the recent Care Quality Commission Inspection.

2.0 Identification of Investment requirements

It is clear that the health and care system in Manchester and Greater Manchester is so inter-dependent that delivery of the ambition in the GM Strategy 'Taking Charge' requires Manchester to deliver the radical proposals for transformation contained in the Locality Plan.

Manchester represents:

- A population of around 530,000, which is 19.2% of the GM population of 2.8m
- Manchester hospital trusts account for 34% of all hospital spend in GM;
- Around 75% of acute spend in Manchester is on people living outside the city; and
- Around 14% of people who are registered with a Manchester GP live outside the city.

In addition, Manchester's transformation programme, articulated in the Locality Plan, represents whole system change. It represents the largest scale, most complex and complete set of proposals for transformation across any large conurbation in the UK.

The Manchester partner organisations have made significant progress in working collaboratively to get the 3 programmes to their current stage of development and to identify areas where investment will be required. The

complex interdependencies between the 3 programmes is a significant factor in the nature of investment required and it's alignment in the programme of implementation.

2.1 Greater Manchester Transformation Fund

Due to the complexity of the Transformation Programme in Manchester, a phased approach to investment is being pursued.

Initial investment (Phase 1) to support the development for the Single Hospital Service was submitted (June 2016), has been approved and is now subject to finalising of the Investment Agreement between GM and the locality.

As intended, a larger whole system application for investment into the Manchester transformation programme (phase 2) is now subject to discussion and exploration with GM, and subject to appropriate processes of review and evaluation. The investment requirements have been identified and include:

- Funding for new models of care to be delivered in the community reducing dependency on higher acuity settings where appropriate;
- Reorganising and transforming services to facilitate more community and home based care, supporting people to stay independent for longer in their own homes and communities;
- Investing in care interventions for those residents 'at risk' who through targeted interventions can have their needs met earlier, preventing ill health and recourse to costly reactive inputs;
- Funding to support the development and implementation of new clinical service models currently delivered through 3 acute trusts, and delivered in future through the single hospital service;
- The review and rationalisation of new clinical support functions, and the associated back office functions;
- Costs to support the development of a single commissioning function, bringing together the 3 CCG's and commissioning of adult social care and public health;
- Funding to support the development of a single approach to IMT, roll out of a single care record, and systems to support integrated working;
- Funding to support a major programme of workforce reform, development and planning; and
- Funding for technical support to ensure an estates strategy that supports the single health and care system, rather than organisational interest.

Investment required to transform Manchester's health and care system will need to demonstrate benefits in terms of:

- Population health
- System benefits
- Financial benefits

For population health our ambition includes that:

- There will be fewer earlier deaths from cardio vascular disease;
- Fewer early deaths from cancer
- Fewer early deaths from respiratory disease
- Less variation in health outcomes across the city

System benefits includes:

- Reducing A and E presentations and admissions
- Reducing length of stay in a hospital bed
- Minimising delayed transfers of care from hospital
- More people dying in their preferred setting
- Reduced length of time people stay in residential and nursing homes, where more appropriate settings could be used;
- Reducing the number of inappropriate referrals
- Reducing GP levels of activity where more appropriate support could be provided

Financial benefits will include:

- Total benefits of £128m for Manchester by 2020/21
- Total savings for GM by the Single Hospital Service of £145m, of which £39m is for Manchester
- Financial balance for the mental health provider

The phase 2 submission is at the initial advisory stage, and subject to feedback will progress to independent evaluation by the GM Transformation Fund Oversight Group. The outcomes from the evaluation will determine progress and timescale for potential approval and release of resources.

A further report on the progress of the application for investment will be presented to the next meeting of the HWBB.

3.0 North Manchester General Hospital

Leaders from across Manchester, Bury and Rochdale are involved in exploratory discussions to initiate the next phase of developing a vision for the future of the North Manchester site. This is in response to the CQC report and to support the Salford Royal leadership team at Pennine Acute NHS Trust to stabilise service provision at North Manchester as well as transform services in the future. This key first step acknowledged the need to prioritise the needs of individuals and communities in North Manchester and its borders and described a new vision for promoting health and wellbeing.

Through the development of the single health and care system embodied in Manchester's Locality Plan – A Healthier Manchester - key opportunities now exist to develop and deliver strengthened services required to improve the health and well being of residents and patients. This will cover acute services as part of the Single Hospital Service and integrated community services delivered via the LCO. As part of the delivery of the Locality Plan, this new

programme will ensure patients, carers and community members are actively engaged to shape how future services will be planned and delivered as well as the involvement of a wide range of organisations.

All partners involved in the discussions agreed to formalise the project with a clear plan and vision for the site. It is the intention that a report will be presented to the Health and Well Being Board in January 2017 to update on progress.

4.0 Summary

Progress is now being made to implement the ambition and transformation programme detailed in the Locality Plan. The complexity of the Programme is evident and as implementation progresses the interdependencies between the 3 pillars will develop and become more visible. The whole system approach to securing investment is appropriate to the requirements of our ambition. A further report will be provided on completion of the assessment of Manchester's investment submission.