

## Manchester Health and Wellbeing Board Report for Resolution

**Report to:** Manchester Health and Wellbeing Board - 14 March 2018

**Subject:** Our Healthier Manchester – Strategy refresh

**Report of:** Dr Philip Burns, Chair, Manchester Health and Care  
Commissioning

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### Summary:

This paper proposes a refreshed health and care strategy for the City of Manchester. This builds on the 2016 'Locality Plan'. The paper also proposes the delivery plan for 2018/19.

### Recommendations:

The Health and Wellbeing Board is asked to:-

- Approve the refreshed strategy
- Approve the 2018/19 delivery plan
- Note that delivery of the strategy is complex and has material risks

### Board priorities addressed:

Health and Wellbeing Board Priority	Summary of contribution to strategy
Getting the youngest people in our communities off to the best start	The Our Healthier Manchester Strategy includes the full scope of reform for Health and Social Care. It also has a broader scope connecting to the wider determinants of health and the broader Our Manchester strategy.
Improving people's mental health and wellbeing	
Brining people into employment and ensuring good work for all	
Enabling people to live well and live independently when 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:  
Dr Philip Burns – Chair MHCC

Contact Officer(s)

Name: Ed Dyson

Position: Executive Director of Planning and Operations – Manchester  
Health and Care Commissioning  
Chair – Locality Plan Delivery Group  
e-mail: edward.dyson@nhs.net

Background documents (available for public inspection).

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

Manchester Locality Plan

Manchester Health and Wellbeing Board – April '16

[http://www.manchester.gov.uk/meetings/meeting/2828/health\\_and\\_wellbeing\\_board](http://www.manchester.gov.uk/meetings/meeting/2828/health_and_wellbeing_board)

Manchester Locality Plan – high level refresh – August '17

August 2017

[http://www.manchester.gov.uk/meetings/meeting/3009/health\\_and\\_wellbeing\\_board](http://www.manchester.gov.uk/meetings/meeting/3009/health_and_wellbeing_board)

Our Manchester – City Strategy

[http://www.manchester.gov.uk/downloads/download/6426/the\\_manchester\\_strategy](http://www.manchester.gov.uk/downloads/download/6426/the_manchester_strategy)

Taking Charge strategy

Greater Manchester Health and Social Care Partnership

<http://www.gmhsc.org.uk/delivering-the-plan/>

## 1.0 Executive summary

Through the leadership of the Health and Wellbeing Board the City's health and social care system is collectively tackling the long standing poor health of the citizens of Manchester and the challenging financial forecast over the medium term.

This paper proposes a refreshed strategy for Our Healthier Manchester, formerly referred to as the Locality Plan. The fundamental direction of the plan is unchanged but it is updated to reflect progress and to reflect changes to strategic context.

The paper also sets out the key deliverables proposed for implementation in the 2018/19 period.

The plan remains transformative, ambitious and has a number of material risks to delivery.

The Health and Wellbeing Board is asked to approve the refreshed strategy and the 2018/19 delivery plan.

## 2.0 Background

In 2013 Health and Wellbeing Boards were established. This gave an effective means by which leaders within the City could collectively develop and implement a strategy for health, social care and public health. It also gave a means to connect to wider City strategy.

In 2015 Greater Manchester received devolved powers for health and social care, following a series of devolution agreements to the Greater Manchester Combined Authority for areas of Local Authority responsibility. This prompted development of a Greater Manchester strategy for health and social care 'Taking Charge'.

Building on work within the City and the development of the GM strategy Manchester agreed its five year strategy for health and social care at the Health and Wellbeing Board in April 2016.

There have been a number of significant achievements made since the strategy was agreed. These have included organisational change to enable better care; new models of care and improvements to key indicators of health.

A high level refresh of the strategy, alongside revised governance, was agreed by the Health and Wellbeing Board in August 2017. This high level refresh reaffirmed the general strategic direction but it was amended to reflect the following:-

- The development of the wider City strategy 'Our Manchester'
- Progression from organisational change to new models of care

- A recognition of the need to impact upon the wider determinants of health
- Development of five strategic aims for the plan

The Health and Wellbeing Board agreed this direction and supported further development of this plan for agreement.

The governance arrangements agreed in August have been put in place and are working well. There are no proposals to make any further amendments to governance beneath the Health and Wellbeing Board.

### **3.0 Our Healthier Manchester refreshed strategy**

The refreshed strategy is attached. The development of the strategy has been led by the Locality Plan Delivery Group and has been endorsed by the Transformation Accountability Board.

The development of the strategy has involved significant involvement and engagement with partner organisations and VCSE groups as well as drawing on the wealth of existing engagement intelligence. This engagement has developed a richer content to the plan and its means of delivery.

The only change to the high level strategy approved by HWB in August is the clearer reference to people taking responsibility for their own health and wellbeing. This is within strategic aim four.

The plan sets out a clear description of the strategic aims, with measures of success and a clear description of what success will look like. It then sets out for each of the time periods the key milestones which will be achieved. An annual Delivery Plan will be developed prior to each financial year which sets this out in more detail. The Health and Wellbeing Board will receive regular reporting of progress, outcomes and examples of benefits to residents.

Further work is required to develop specific targets against the strategic aims. These will be developed following approval of the plan.

### **4.0 2018/19 Delivery plan**

The attached document also includes the key deliverables for the strategy during the 2018/19 period. This is a challenging work programme for the City but will see some significant achievements and benefits for Manchester people.

It is becoming increasingly clear that the Our Healthier Manchester strategy, as a programme, and the new organisational arrangements are aligning very effectively. Much of our transformation is becoming integrated into how the Manchester health and care system works in its mainstream activities, particularly cross organisational working. This has great potential to deliver greater benefits much more quickly.

As the emphasis shifts towards benefits to the people of Manchester there will be increased reporting of outcomes as part of the strategy. In part this will be the operationalisation of the Manchester Agreement which will measure, initially, the impacts of the Greater Manchester Transformation Fund initiatives in financial and non- financial terms. In addition the LCO will start to deliver against its outcome framework and MFT against its benefits plan. The new Performance and Evaluation enabling programme will put the mechanisms in place to do this effectively.

## **5.0 Risks**

Due to the scale and complexity of the strategy there are numerous risks. These are managed within the Locality Plan Delivery Group and escalated to the Transformation Accountability Board where required.

Key risk areas are as follows:-

- Even with successful delivery of the plan financial and health outcome challenges may still persist.
- Mainstreaming new models of care when non-recurrent transformation funding runs out through effective shift of resource from acute and long term institutional care settings.
- Implementing transformed services within a backdrop of significant operational challenges.
- The scale and complexity of the strategy is such is there is risk of non-delivery of priorities and impacts.
- Bringing together organisations with differing cultures and ways of working is challenging.
- Adapting the physical infrastructure e.g. estates and IT, to support new ways of working cannot be achieved.

## **6.0 Recommendations**

The Health and Wellbeing Board is asked to:-

- Approve the refreshed strategy
- Approve the 2018/19 delivery plan
- Note that delivery of the strategy is complex and has material risks

# MANCHESTER LOCALITY PLAN

## *“Our Healthier Manchester”*

[www.healthiermanchester.org](http://www.healthiermanchester.org)

**2018/19 REFRESH**

**FINAL DRAFT [v2.2 05/03/18)**



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## INTRODUCTION

### OUR HEALTHIER MANCHESTER

#### ***Our Manchester – The Manchester Strategy<sup>1</sup>***

The Manchester Strategy set the vision for the city: to be in the top flight of world-class cities by 2025. Manchester will:

- Have a competitive, dynamic and sustainable economy that draws on its distinctive strengths in science, advanced manufacturing, culture, and creative and digital business - cultivating and encouraging new ideas
- Possess highly skilled, enterprising and industrious people
- Be connected, internationally and within the UK
- Play its full part in limiting the impacts of climate change
- Be a place where residents from all backgrounds feel safe, can aspire, succeed and live well
- Be clean, attractive, culturally rich, outward-looking and welcoming.

This is a challenging, exciting and ambitious vision. To make it a reality across health and care, the system will work together in a new way, the 'Our Manchester' way, to get things done. The Our Manchester approach simply means having a different conversation with residents and partners, working together to build relationships and really listen to the people we work with. Starting from strengths - what people can do, rather than what they cannot do. All of this is aimed at helping people across the city lead better lives. It puts people at the centre of everything we do: Better lives – it's about people; Listening – we listen, learn and respond; Recognising strengths of individuals and communities – we start from strengths; Working together – we build relationships and create conversations.

The Our Manchester approach will over time be embedded throughout the entire Locality Plan. The initial areas of focus will be:

- Integrating health and social care with other services and assets in neighbourhoods, around how people live their lives
- Applying the Our Manchester approach to how we commission
- Trusted, strengths-based assessments
- Workforce development and the behaviours of our workforces

The LCO will focus initially on applying Our Manchester to: Integrated Neighbourhood Teams, Citizens Portal and Urgent Care



## INTRODUCTION

### OUR HEALTHIER MANCHESTER

#### ***Background to the Locality Plan***

*'Our Healthier Manchester<sup>2</sup>'* (2016), detailed the transformation ambition for health and care services in Manchester for delivery of its part of the Greater Manchester Plan *'Taking Charge of our Health and Social Care in Greater Manchester<sup>3</sup>'* (2016). It reflected the shared commitment and vision of the commissioners and providers within the system, at that time. The organisational landscape has now changed, reflecting the significant progress that has taken place. This in addition to the launch of Our Manchester, provided the opportunity to refresh the Locality Plan; enabling the system to reflect on progress, re-state the principles of change underpinning the Locality Plan, and describe the overall aim which is to improve the health and wellbeing of people in Manchester.

The seven principles of change which underpin the Locality Plan, consistent with the Our Manchester approach remain as:

- Principle one....** People and place of Manchester will have priority above organisational interests
- Principle two....** Commissioners and providers will work together on reform and strategic change
- Principle three ....** Costs will be reduced by better co-ordinated proactive care which keeps people well enough not to need acute or long term care
- Principle four....** Waste will be reduced, duplication avoided and activities stopped which have limited or no value
- Principle five....** The health and social care system is made up of many independent and interdependent parts which can positively or adversely affect each other. Strong working relationships will be developed within the system with clear aims and a shared vision for the future.
- Principle six....** Effective partnerships will be established with the people of Manchester, the workforce, voluntary and community organisations
- Principle seven....** Locality Plan partners will work to safeguard children, young people and adults, enhancing their health and wellbeing and protecting the rights of people at risk.

## INTRODUCTION

### *OUR HEALTHIER MANCHESTER*

#### ***Our Healthier Manchester – Refresh***

In recent years Manchester has transformed in terms of economic growth and infrastructure. However, people's health and wellbeing has not prospered, and in 2017 residents of Manchester still have some of the worst health outcomes in England. To drive improvement, the health and care system needs to provide excellent health and social care services, as part of a wider integrated system of public services. Health and wellbeing is predominantly influenced by the wider determinants of health such as education, housing, employment, and skills. Access to opportunities in these areas is unequal across the city, exacerbating disadvantages experienced by different communities, some of whom experience discrimination in accessing services and employment. This in turn fuels increased demand on health and care services.

Through the locality plan refresh, strategic aims have been agreed which commit the system as a whole to improving health and wellbeing for Manchester residents, driving up the quality of services, and ensuring people across the city do not receive differential quality or outcomes depending on where they live, or who they are. The role that the system will play in actively strengthening the wider determinants, reducing dependency, and therefore unlocking the potential of the community to live well and contribute towards the city's growth, is critical to the achievement of these aims. Although the original locality plan was a five year plan, the strategic aims are long term aims, in line with the Our Manchester Strategy, and achieving the vision for the city.

This refresh will set out the system's strategic aims, describe the progress that has been made over the last 18 months and the strategic programmes that will deliver the transformation, and the milestones against which progress across the system will be monitored, with the associated governance. Our Healthier Manchester (2016), is still relevant, and should be used as a original reference document for the Manchester Locality Plan.

## SYSTEM TRANSFORMATION - ACHEIVEMENTS

OUR HEALTHIER MANCHESTER

Manchester has made significant progress over the last 18 months in transforming the health and care system, spanning the development and implementation of new services, to whole system organisational change. This has been achieved through strong collaborative leadership, significant investment, high quality programme and project management, strong partnership working between sectors, and staff engagement and commitment. The key achievements by service transformation, and supporting organisational transformation change are summarised below and on the next page.

### ***Service Transformation***

- Achieving 7 day GP access across the city
- Increasing the provision of inpatient mental health beds across Manchester, to reduce instances of Out of Area Placements
- Expansion of Manchester's Lung Health Check pilot to benefit thousands more people at high risk in the north of the city
- The roll out of the Community Assessment Support Service (CASS) in the north of the city, delivering care closer to home
- The implementation of High Impact Primary Care (HIPC), helping people who are most at risk of being admitted to hospital to stay well at home
- The opening of Crumpsall Vale, a 24 bed intermediate care unit on the North Manchester General Hospital site
- Implementation of additional Extra Care housing through Village 135 in South Manchester
- Agreement and funding secured to deliver a fully operational 136 Suite in Manchester in 2018
- Demonstrable improvement in Mental Health Services across the city for example, providing additional capacity for IAPT services with more patients receiving timely treatment, investment and refurbishment of inpatient facilities across the city, and increased staffing agreed for Community Mental Health Teams
- Significant investment into health and care services in the city, to support developments in primary care; mental health services for children, adolescents and adults; social care services; and new models of care which aim to support people outside of hospital.

Further details about MFT, MHCC and GMMH can be found on their respective organisational websites – [mft.nhs.uk](http://mft.nhs.uk), [mhcc.nhs.uk](http://mhcc.nhs.uk) and [gmmh.nhs.uk](http://gmmh.nhs.uk). The Health and Wellbeing Board (HWB) and Health Scrutiny Committee also receive regular progress updates on transformation – past papers are publicly available at [manchester.gov.uk/meetings](http://manchester.gov.uk/meetings)

## SYSTEM TRANSFORMATION - ACHEIVEMENTS

OUR HEALTHIER MANCHESTER

### *Organisational Transformation*

- The delivery of the first phase of Manchester's single hospital service, through the establishment of Manchester University NHS Foundation Trust (MFT); and the initiation of the process for North Manchester General Hospital (NMGH) to transfer to MFT as the second part of the single hospital service programme
- The development of a Local Care Organisation (LCO) for Manchester, which has set up in shadow form in readiness to become operational from April 2018
- The establishment of MHCC as a single commissioner for health, public health and adult social care services in Manchester, in April 2017
- Greater Manchester West Mental Health NHS Trust (GMW) formally acquired Manchester's mental health services from the Manchester Mental Health & Social Care Trust on the 1<sup>st</sup> January 2017, and became Greater Manchester Mental Health NHS Foundation Trust (GMMH), achieving a CQC rating improvement in 12 months to 'Good'.
- VCSE representatives sat on all Locality Plan governance forums, and front line partnership working with the third sector developing apace.

The following pages of this document describe the achievements in more detail under each of the five strategic aims, set against the ultimate ambition for the transformed health and care system. The second half of the document introduces the three themes of 'Our Services', 'Our People' and 'Our Outcomes', provides details of milestones for 2018/19 aligned to these three themes, and outlines the governance in place to deliver this.

Further details about MFT, MHCC and GMMH can be found on their respective organisational websites – [mft.nhs.uk](http://mft.nhs.uk), [mhcc.nhs.uk](http://mhcc.nhs.uk) and [gmmh.nhs.uk](http://gmmh.nhs.uk). The Health and Wellbeing Board (HWB) and Health Scrutiny Committee also receive regular progress updates on transformation – past papers are publicly available at [manchester.gov.uk/meetings](http://manchester.gov.uk/meetings)

## STRATEGIC AIMS

### OUR HEALTHIER MANCHESTER



#### **Improve the health and wellbeing of people of Manchester**

- Proactively support people's health by starting well, living well, ageing well and at the end of life.
- Improve both mental and physical health.
- Provide services fairly, to reduce local variation in healthy lives.



#### **Strengthen the social determinants of health and promote healthy lifestyles**

- Enable healthy lifestyle choices and prevent ill health.
- Support improvements in housing, jobs, education, the economy and people's social connections.



#### **Ensure services are safe, equitable and of a high standard with less variation**

- Coordinate health and care, ensuring safety, quality, value for money and high standards for all.
- Transform the health and care system, shifting care from hospital to the community.



#### **Enable people and communities to be active partners in their health and wellbeing**

- Build on the strengths of communities, voluntary groups and social networks.
- Invest in individuals and carers, supporting them to manage their own health.
- Individuals take greater responsibility for their own health and wellbeing



#### **Achieve a sustainable system**

- Reinvest the savings we make into better care.
- Balance our finances now and in future years.
- Develop our workforce so we have committed, healthy, skilled, people where and when they are needed.

Each of the strategic aims has high level outcomes which will demonstrate over time the overall, system achievement. This will be underpinned by the monitoring of a series of existing outcome frameworks across the health and care system, including the GM Transformation Agreement<sup>4</sup> and Manchester Agreement<sup>5</sup>.

This refresh will describe the overall ambition for each Strategic Aim in more detail, where we are now, and how the system will look in order to achieve delivery.

As we move into delivery across the system, the refresh will then describe the milestones and specific deliverables in three phases of delivery; the foundation years (17/18, 18/19), performing years (19/20) and maturity, from 21/22.

## STRATEGIC AIMS

### OUR HEALTHIER MANCHESTER

### 1. To improve the health and wellbeing of people in Manchester

**How do we measure success?** The main indicator of success will be the extent to which we narrow the **life expectancy gap** between residents in different areas of the city, and more broadly between Manchester residents and England as a whole, with an emphasis on the **quality of life enjoyed**. This will be measured through the achievement of Manchester contribution to the GM Population Health plan outcomes relating to **preventable deaths from respiratory disease, cardiovascular disease and cancer**.

#### Where we are now in 2018

##### THE CONTEXT – HEALTH & WELLBEING IN MANCHESTER

The health of people in Manchester is generally worse than the England average. Manchester is one of the 20% most deprived districts/unitary authorities in England and life expectancy for both men and women is lower than the England average. Life expectancy is 8.2 years lower for men and 6.4 years lower for women in the most deprived areas of Manchester than in the least deprived areas.

##### DEVELOPING SOLUTIONS - HOSPITAL & COMMUNITY SERVICES

Both MFT and the LCO are working on transformation plans to improve services. MFTs plans are in development, following the successful merger, based on a number of key patient benefit areas.

Using GMTF funding, the LCO has mobilised a new High Impact Primary Care service across the city, which specifically targets those most in need of health and care services. This service works alongside 12 Integrated Neighbourhood Teams (INT) operating in neighbourhoods across the city that are tasked with delivering coordinated, person centred community care. All these services are supported by Community Connectors that connect residents to sources of non-medical support in their community.

GMMH have also made significant progress in delivering improved services across nine clinical and service improvement priorities as identified by mental health commissioners locally and nationally.

This is underpinned by dedicated GP leadership in the 12 neighbourhoods, and developing working relationships with the voluntary and community sector (VCSE).

##### SUPPORTING BETTER CARE THROUGH INSIGHT

Partners are working together to make best use of the data and intelligence capabilities in the city, to better link population health insight to service design and delivery. A patient-level data warehouse underpins this approach, along with cost benefit analysis' produced to support investments.

#### What a transformed health and care system will look like from 2021/22

##### A HEALTHIER MANCHESTER

Manchester is committed to achieving its share of the Greater Manchester targets which would result in improvement in nine key measures covering children's and adults health. For example, 916 more children starting school ready to learn; 383 fewer early deaths from Cancers which are considered preventable. These targets can be found in more detail in the Population Health Plan.

##### INTEGRATED HOSPITAL & COMMUNITY SERVICES

MFT will operate a single, integrated hospital system across Manchester following the incorporation of NMGH into the MFT hospital group. Patient benefits across a number of 'single service' areas will have been delivered through a programme of service redesign and improvement, undertaken in conjunction with the LCO to ensure seamless care for residents regardless of the care setting.

The LCO will be providing local care leadership, including community health, social care and mental health services, linked to the VCSE. Local people will drive the change, building on their strengths, to promote leadership in neighbourhoods and bring together primary, community, social and voluntary sector services at neighbourhood level. The shift in the focus towards early help and population based health and care services will be the first step in the journey towards reshaping the health and wellbeing of Manchester's people.

##### STRATEGIC COMMISSIONING FOR BETTER OUTCOMES

MHCC will take a long-term and outcomes based approach to the commissioning of integrated services for the population of Manchester. This role will go beyond the bounds of traditional health and care commissioning; MHCC will work with its partners and communities to influence and improve the wider determinants of health and wellbeing in the city. These include areas such as housing, leisure and social inclusion. Work will be underpinned by the Our Manchester philosophy, in which people are active partners in improving their health and wellbeing.

Further details about the health and wellbeing of people in Manchester can be found in the city's *Joint Strategic Needs Assessment (JSNA)* on the MCC website - [manchester.gov.uk/info/500230/joint\\_strategic\\_needs\\_assessment](http://manchester.gov.uk/info/500230/joint_strategic_needs_assessment)

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## STRATEGIC AIMS

### OUR HEALTHIER MANCHESTER

## 2. To strengthen the social determinants of health and promote healthy lifestyles

**How do we measure success?** The main indicators of success for this aim will be the degree to which there is (1) a reduction in **smoking prevalence to 15% or lower** by 2021, (2) an increase in the proportion of children who are school **ready** across the city, and (3) a reduction of the proportion of residents who are **out of work with an underlying health condition**.

### Where we are now in 2018

#### THE CONTEXT –SOCIAL DETERMINANTS IN MANCHESTER

To reduce health inequalities Manchester must address the social determinants of health - the conditions in which people are born, grow, live, work and age. Efforts to tackle lifestyle factors - poor diet, physical inactivity, smoking, excess alcohol and drug misuse - will fail if employment, education, housing and income inequalities are not addressed.

Similarly, the focus on prevention and early help by all partner agencies, built on a sound evidence base, will reduce future demands on more expensive public services. As a system we will prioritise actions to address adverse childhood experiences, fuel poverty, social isolation and loneliness, homelessness, healthy employment and air quality.

#### DEVELOPING SOLUTIONS - HOSPITAL & COMMUNITY SERVICES

The Our Manchester strategy provides the umbrella for cross sector, cross discipline working, and the Our Manchester approach sets the standards by which health and social care services are redesigning and improving services for Manchester residents. Much of the wider determinants work will be undertaken in communities, drawing on the experience of in-hospital clinicians along with clinical and non-clinical staff from across the system.

'Person, Partner, Place' training is being delivered to staff in INTs to support the move to asset and strengths-based care. The LCO is working with the VCSE sector to support the development of strong working relationships to positively influence the wider social determinants of health (housing, employment, education, leisure) and deliver some tangible outcomes in 2018/19, such as those associated with employment.

A new care model - Community Links for Health - promotes and supports healthier lifestyles by offering one-to-one support, and utilising team of specialist health coaches.

### What a transformed health and care system will look like from 2021/22

#### A HEALTHIER MANCHESTER

The Population Health Plan<sup>6</sup> outlines a number of actions through which the health and care system can maximise its contribution to addressing the social determinants of health. Examples include:

- Adopting a 'think family' approach in all our services for children
- Connecting people to broader sources of social support and advice to improve wellbeing
- Using our leverage as commissioners and providers of services to include good employment conditions within contracts and to increase recruitment of local people
- Taking a strengths based approach, building relationships and working collaboratively with partners and communities, and responding to what people tell us will make a difference to their lives. This includes strength-based, trusted approaches to assessments
- Facilitating strong connected communities to increase social sources of support in order to reduce social isolation and loneliness.

#### INTEGRATING SERVICES AROUND PEOPLE

The Our Manchester approach is about working together in new ways so services are brought together around people in neighbourhoods and how they live their lives.

The LCO INTs will not only integrate primary care, community health, social care and mental health in multi-disciplinary teams in 12 neighbourhoods. The INTs will also take a neighbourhood leadership role to work more effectively with the assets that exist in neighbourhoods, and the range of other services that already work with residents, for example work and skills and housing support. By taking this approach the teams will help to understand the underlying causes of problems in the lives of their patients, and work with other services to overcome these.

MHCC will support this by joining up strategic commissioning of services around lives of people.

Further details about social determinants of health and Manchester's plans can be found in the *Population Health Plan* - [http://www.manchester.gov.uk/meetings/meeting/3012/health\\_and\\_wellbeing\\_board](http://www.manchester.gov.uk/meetings/meeting/3012/health_and_wellbeing_board)



## STRATEGIC AIMS

OUR HEALTHIER MANCHESTER

### 3. To ensure services are safe, equitable and of a high standard with less variation

**How do we measure success?** Indicators of success will be all CQC registered providers in the system rated 'good' or above, and all national and local quality and performance targets and standards met.

#### Where we are now in 2018

##### CONTEXT – HOW WE MEASURE UP

Manchester's CQC ratings for Primary Care, Acute Care, Adults Social Care (ASC), Mental Health (MH) and small independent providers are variable. We have areas of outstanding and good practice across the city, as rated by CQC, but we are not where we would like to be.

##### COMMISSIONING FOR QUALITY

MHCC's Performance and Quality Improvement (P&QI) Team is in the process of implementing a strengthened PQI framework across health and care commissioned services to address CQC, national and local challenges. This framework will ensure that all aspects of performance and quality improvement is governed in a consistent way, assurance is robust and improvement challenges known.

##### HOSPITAL & COMMUNITY SERVICES

MFT is effectively managing non-merger related financial and operational challenges arising from current systemic pressures in health and social care, and historical performance issues in legacy Trusts. Robust governance arrangements have been implemented for the new organisation, including clinical governance processes and an Accountability Framework. The new structures enable clinicians and managers to begin the implementation of changes to deliver improvements in safety and equity of access and to drive down variations in standards of care.

Plans have been developed and robust processes are in place to manage the operational and transformational changes required, including the establishment of Clinical Standards Groups.

The LCO, through its organisational set up process and service strategy, is beginning to address the variation in community services across the city that have arisen from the legacy of multiple providers and commissioners. Early examples include the alignment of the crisis response model, standardised operating procedures and processes for INTs, and better sharing of resources across the city to ensure more equitable provision.

#### What a transformed health and care system will look like from 2021/22

##### COMMUNITY SERVICES

Community health and social care is provided under the leadership and management of a single organisation, that will collaborate to commission and directly deliver sustainable and consistent services across:

- The key cohorts, system and health challenges (i.e. adults with complex lives cardio vascular disease/Respiratory/Cancer/Frailty)
- Pathway delay-related Delayed Transfers of Care (DTocS)
- Private sector partners delivering residential and homecare, and VCSE partners delivering community services
- The LCO workforce in terms of roles, recruitment, culture and retention.



MHCC as the strategic commissioner ensuring strategic operational and clinical synergy.



##### HOSPITAL SERVICES – SIX AREAS OF FOCUS

- Quality of Care – reduce variation in the effectiveness and safety of care. Improve access to specialist care
- Patient Experience – reduce fragmentation and duplication. Transfer care closer to home
- Workforce – Support the provision of 7 day services. Improve the recruitment and retention of an appropriately skilled workforce
- Financial/Operational Efficiency – Improve operational performance. Ensure resource is focused appropriately
- Research & Innovation – Improve access to clinical trials. Ensure learning from research and innovation is consistently implemented
- Education and Training – Widen student and trainee exposure and optimise curriculum delivery.

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Further details about safety and quality standards can be found in MHCCs PQI Frameworks for providers, and in the recent CQC local system reports produced by CQC as part of their Manchester review in late 2017.



## STRATEGIC AIMS

### OUR HEALTHIER MANCHESTER

#### 4. To enable people and communities to be active partners in their health and wellbeing

**How do we measure success?** The main indicators of success will be (1) the level of knowledge and confidence that people have in managing their own health (**patient activation**), (2) an increase in the use of **non-clinical community services/activities** to support patients' health and wellbeing and (3) the **level of participation of residents** in the development of neighbourhood plans and services.

##### Where we are now in 2018

###### STRONG ENGAGEMENT BETWEEN SERVICES AND RESIDENTS

In line with the Our Manchester principles and approach, MHCC's commissioning strategy and the approach to this Locality Plan refresh has been shaped by local people's views on health and social care services. The VCSE is represented on the main governance bodies steering and assuring the delivery of the Locality Plan.

MFT and MHCC have well established public and patient engagement services that help inform commissioning and service delivery. Both organisations are, along with the emerging LCO, looking to make better use of these services, in aggregate, to develop coordinated, person-centred services.

A core purpose of the LCO is to build social value in neighbourhoods and city-wide. The LCO is building its public engagement capabilities. For example, 'Future Search' engagement events were recently undertaken in each neighbourhood, and citywide, to develop the vision, goals, principles and strategic objectives of the LCO.

Improvements to technology are being pursued that will result in a shared care record for patients and residents that will enable greater levels of personalisation and involvement from people in their health and care planning. This will also provide more opportunities for opening up access for people to their care records.

Projects such as CityVerve and Assistive Technology are also increasing opportunities for people to play a more active role in their care management.

##### What a transformed health and care system will look like from 2021/22

###### ACTIVE PARTNERSHIP BETWEEN SERVICES AND RESIDENTS

The LCO will bring together and integrate services across health and social care in neighbourhoods to ensure that offers around prevention, assessment and referral and local, neighbourhood and city wide services are co-ordinated around the needs of the person, whilst recognising the need to support people to take greater responsibility for their own health and to become more self reliant in managing their health. Plans for support and if required care, will be based on the person's strengths, which is a core part of the Our Manchester approach.

The LCO will support people to live healthy, independent, fulfilling lives and be part of a thriving and supportive community, and will ensure people have fair and equitable access to health and social care services, receiving effective, safe, compassionate care, closer to their homes.

To enable coproduction, involvement will always be sought from commissioners, service providers, the VCSE sector and people using services, in the design and delivery of services and in all strategic decision making. Long term relationships will be established, and VCSE sector will operate as an equal strategic partner with an equal role to play in transforming health and care.

People will be supported to make the most of digital opportunities for management of their health and care services, thereby helping to tackle the 'digital divide' in the city. Greater levels of real-time information sharing at a case management level between professionals and people will be achieved by linking systems and data. Digital monitors will be in place to help reduce hospital visits, the use of wearable health tech will be routine, and greater use of SmartVideo will be made to reduce the costs of routine check-ups.

Further details about the planned changes, how people can get involved, and case studies to illustrate success, can be found on the *Healthier Manchester website* – [healthiermanchester.org](http://healthiermanchester.org)

## STRATEGIC AIMS

### OUR HEALTHIER MANCHESTER

## 5. To achieve a sustainable system

**How do we measure success?** The main indicators of success for this aim will be (1) the system needs to achieve **financial balance** (2) delivery of **constitutional and statutory targets** and (3) a **sustainable workforce**.

### Where we are now in 2018

#### SUSTAINABILITY CHALLENGES

Manchester, like the majority of the country, faces sustainability challenges, most notably related to finances and the health and social care workforce, resulting from high demand for services and pricing pressures. The current Locality Plan financial gap is £146.85m, although this is being revised in Q1 of 18/19.

However, control totals and financial obligations are planned to be met for 2017/18, inclusive of non-recurrent resources.

Levels of investment in system transformation up to 2020/21 are high, and include:

- Mental Health and Primary Care to deliver the 5YFV<sup>7</sup>;
- Greater Manchester Transformation Fund (GMTF) funding the development of: new care models; SHS; Mental Health and Primary Care;
- ASC grant for the investment in social care, and
- Investments in the North of the city to tackle health inequalities.

A Locality Financial Plan to 2020/21 to deliver financial sustainability is in place, which reflects the challenges outlined above.

Workforce challenges being experienced are related to the recruitment and retention of staff to meet demand, and the need to ensure a suitably skilled workforce to deliver the city's health and care ambitions.

The Manchester Workforce Transformation Group is working closely with the GM HSCP Workforce Programme to deliver a regional approach that ensures sustainability across the sector and the region.

### What a transformed health and care system will look like from 2021/22

#### SUSTAINABILITY AMBITIONS

Financially, the system needs to achieve a balanced Locality Finance Plan, with all organisations meeting their control totals and financial obligations. This will be achieved through:

- A joined up approach to health and social care commissioning, maximising value for money
- A cost-effective shift of resource from acute to community and prevention and successful delivery against wider business case benefits
- A system wide approach to financial planning, sharing risks and benefits to incentivise the right behaviours for the benefit of our population
- An effective pooled budget, commissioning services for the best outcomes for the population whilst avoiding a 'one size fits all' approach by recognising the specific needs of disadvantaged communities
- The achievement of the 5YFV for Mental Health and Primary Care, ensuring parity of esteem and reduced variation
- A stable residential, nursing and home care market which is high quality, is fit for purpose and is affordable
- An appropriately funded VCSE sector that is effectively meeting demand.

In terms of the workforce, Manchester's health and care organisations will be employers of choice. The workforce, at all levels of organisations, will be more representative of the community it serves, with a higher proportion of local people working in the city's health and social system.

## TURNING STRATEGY INTO DELIVERY

### OUR HEALTHIER MANCHESTER

Significant progress has been made against the delivery of the ‘three pillar’ organisational changes. Moving forward, system transformation will be delivered against three areas of focus which reflect changes to services and our relationship with residents. These are:

#### ***‘Our Outcomes’***

This means:

- Delivery of quality, safety and performance across the system
- Achieving financial balance across the health and social care system in the short and medium term
- Good levels of recruitment, retention and staff satisfaction reflecting a diverse and healthy workplace
- Modern buildings and technology supporting effective working.

#### ***‘Our People’***

This means:

- Addressing the causes of poor health outcomes across Manchester with interventions that will impact on in the short, medium and long term
- Achieving equity in quality and service provision across the city by designing new service models in partnership with those that receive and deliver services, and addressing the root causes of disadvantage in the city
- Engaging residents in the identification of positive lifestyle choices regarding smoking, diet, exercise and alcohol
- The health and care system being an exemplar of the Our Manchester approach
- Working in partnership to drive equality of access and opportunity in the provision of education, employment, good housing, a developing economy and social inclusion.

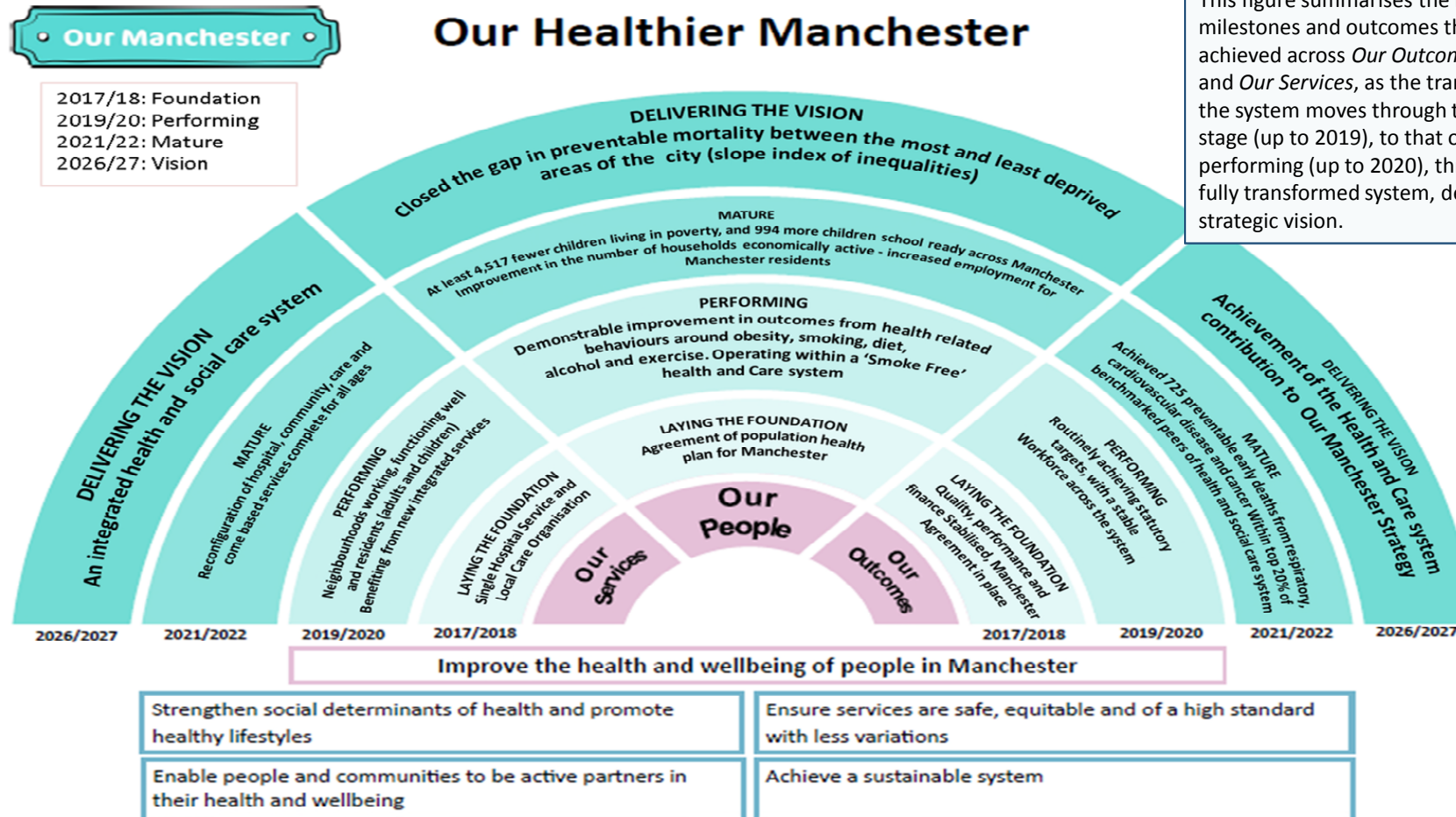
#### ***‘Our Services’***

This means:

- Developing integrated, well-coordinated and proactive person centred care
- Standardised care which consistently follows evidence based pathways and interventions
- Connecting with communities, delivering excellent user experience in neighbourhoods where possible
- Completing organisational changes to commissioning and provision
- Maximising the potential reach of research and innovation breakthroughs in the city.

# TURNING STRATEGY INTO DELIVERY – A NEW FOCUS

## OUR HEALTHIER MANCHESTER



This figure summarises the high level milestones and outcomes that will be achieved across *Our Outcomes*, *Our People* and *Our Services*, as the transformation of the system moves through the foundation stage (up to 2019), to that of a system that is performing (up to 2020), through to a mature fully transformed system, delivering the city's strategic vision.

## TURNING STRATEGY INTO DELIVERY

*OUR HEALTHIER MANCHESTER*

Turning the strategy into delivery requires a clear thread from the high level system outcomes and milestones to the programmes of work. The high level milestones and outcomes outlined in the 'rainbow' on the previous page are underpinned by more detailed system milestones, across *Our Outcomes*, *Our People* and *Our Services*. These are described for the foundation, performing and mature stages in the following pages.

### FOUNDATION (2017/18 – 2018/19) System Milestones

#### *Our Outcomes*

- Quality, performance and finance stabilised across the system
- Undertake neighbourhood based engagement to understand experience of and preferences for local health and care services
- Manchester Agreement in place with a system-wide outcome framework (MHCC / LCO / SHS).

#### *Our Services*

- Implementation of New Delivery Models
- Integrated Neighbourhood Teams working in established hubs across the city working with integrated patient records
- Strategic plans in place for system enablers & new organisations
- Integration plans in place for MFT, LCO, MHCC.

#### *Our People*

- Agreement of Population Health Plan for Manchester
- Proactive promotion of opportunities for health improvement / healthy living to staff and local people
- Targeted action plans to address specific skills and capacity shortages across the system
- Increase in participation of the voluntary and community sector (VCSE), individuals and communities in the development of services, supported by a coordinated infrastructure across LCO, MHCC and MFT
- Development of a personalisation strategy, setting out how individuals and carers will be supported to manage their own health.

## TURNING STRATEGY INTO DELIVERY

OUR HEALTHIER MANCHESTER

### PERFORMING (2019/20) System Milestones

#### *Our Outcomes*

- Demonstrable improvement in health outcomes that can be attributed to the successful delivery of new care models targeted to improve physical and mental health, enhanced primary care standards, and clinical benefits delivered through the single hospital service
- Strengthened research and innovation increasingly facilitates the delivery of the most effective care to the Manchester population.

#### *Our Services*

- Use IT to enhance autonomy for patients and staff, including through improved care coordination, online patient portals and improved access to and control of records
- Personalisation will be default approach; citizens managing their own health and care budgets
- NMGH incorporated into MFT
- Single clinical pathways agreed for key services (LCO/SHS)
- The split of strategic / service commissioning across the system is operational.

#### *Our People*

- Improvement in the city in healthy lifestyle behaviours e.g. not smoking
- The health and care workforce is putting the Our Manchester principles into action, taking a strengths based approach and working together with stakeholders from across the health and care system and beyond to build trusting relationships that enhance service delivery
- Use of apprenticeships and other mechanisms optimised by LCO, SHS and MHCC to facilitate local recruitment
- Coordinated use of all the research, evaluation and business intelligence assets in the city resulting in more effective, targeted commissioning and delivery of services.

## TURNING STRATEGY INTO DELIVERY

*OUR HEALTHIER MANCHESTER*

### MATURE (From 2021/22) System Milestones

#### *Our Outcomes*

- Citizens report improved experience of health and social care services in Manchester
- The system is financially sustainable, has closed the Locality Plan financial gap, delivered the Manchester Agreement, and in doing has moved activity from the acute to community sector.
- The health and social system is actively influencing and improving the wider determinants of health across the city
- The SHS is a leader in its field and has a reputation for excellence
- The system is commissioning on an outcomes basis.

#### *Our Services*

- Across the system we should see community health and care services, following the Our Manchester approach, linking up with a wider range of services and support within **neighbourhoods** that help address the wider determinants of people's health, including, (for example) physical activity, diet, parenting skills, housing options and employment opportunities
- Professionals across the health and care system and beyond using an integrated assessment framework to better address the range of interconnected issues people and communities have
- Effective clinical models are functioning across the city, within and across organisations to ensure effective, standardised care and equity of access
- New Gorton hub operational, Withington new build in progress.

#### *Our People*

- The system is routinely providing multi-agency facilities that have been developed in conjunction with service users
- Manchester's health and care organisations are employers of choice and the workforce is more representative of the community it serves, with a higher proportion of local people working in the city's health and social system at all levels of organisations
- A responsive and efficient CVS network is working within the neighbourhoods, that match the expected increased demand in social prescribing.



## PROGRAMMES OF WORK – 2018/19 DELIVERY

**OUR HEALTHIER MANCHESTER**

The Locality Plan has established a number of work programmes to deliver against the strategic aims. These programmes have all profiled their main deliverables against *Our Outcomes, Our People* and *Our Services* to inform delivery plans for 2018/19. These deliverables are described over the next two pages, for service transformation programmes (this page) and system enabler programmes (following page).

PROGRAMMES	OUR SERVICES	OUR PEOPLE	OUR OUTCOMES
<b>COMMUNITY SERVICES</b> <i>Led by the LCO</i>	<ul style="list-style-type: none"> <li>All INTs live and new models of care mobilised.</li> <li>LCO service strategy (1, 3, 5 and 10 years) in place</li> <li>Transfer of the management of existing contracts agreed, for 1<sup>st</sup> April 'go-live', underpinned by a Partnership Agreement</li> </ul>	<ul style="list-style-type: none"> <li>Equality Impact Assessments on target operating model(s) undertaken</li> <li>LCO Organisational Development (OD) Plan in place and being delivered against</li> <li>Coordinated infrastructure in place with MFT, MHCC and GMMH to increase participation (VCSE, communities, individuals).</li> </ul>	<ul style="list-style-type: none"> <li>Describe, develop and agree metrics for key population cohorts (LCO OF)</li> <li>New models of care delivering against key outcomes indicators.</li> </ul>
<b>HOSPITAL SERVICES</b> <i>Led by MFT</i>	<ul style="list-style-type: none"> <li>Year 1 project implementation commenced</li> <li>Programme of corporate service integration complete</li> <li>Clinical service strategy developed</li> <li>NMGH acquisition progressed.</li> </ul>	<ul style="list-style-type: none"> <li>Equality Impact Assessments undertaken on Integration plans</li> <li>MFT OD Plan in place and being delivered against</li> <li>Organisational values and behaviours agreed for the new Trust, based on extensive consultation with staff, governors, etc.</li> </ul>	<ul style="list-style-type: none"> <li>Integration plans include standardisation of hospital care provision across Manchester ensure high quality services, regardless of where and when a patient accesses care.</li> <li>Service stability maintained, with all constitutional targets met.</li> </ul>
<b>COMMISSIONING SERVICES</b> <i>Led by MHCC</i>	<ul style="list-style-type: none"> <li>Target Operating Model for phase 2 developed, including corporate service integration and a roadmap for becoming a strategic commissioning organisation.</li> </ul>	<ul style="list-style-type: none"> <li>Social value strategy implemented</li> <li>Evidence funnel developed to support commissioning decision making</li> <li>Approach to develop population health dataset/database agreed.</li> <li>Development of a personalisation strategy for the system</li> </ul>	<ul style="list-style-type: none"> <li>National and local Quality and performance requirements achieved (for Health and Social Care)</li> <li>Initiation of SHS outcome framework.</li> </ul>



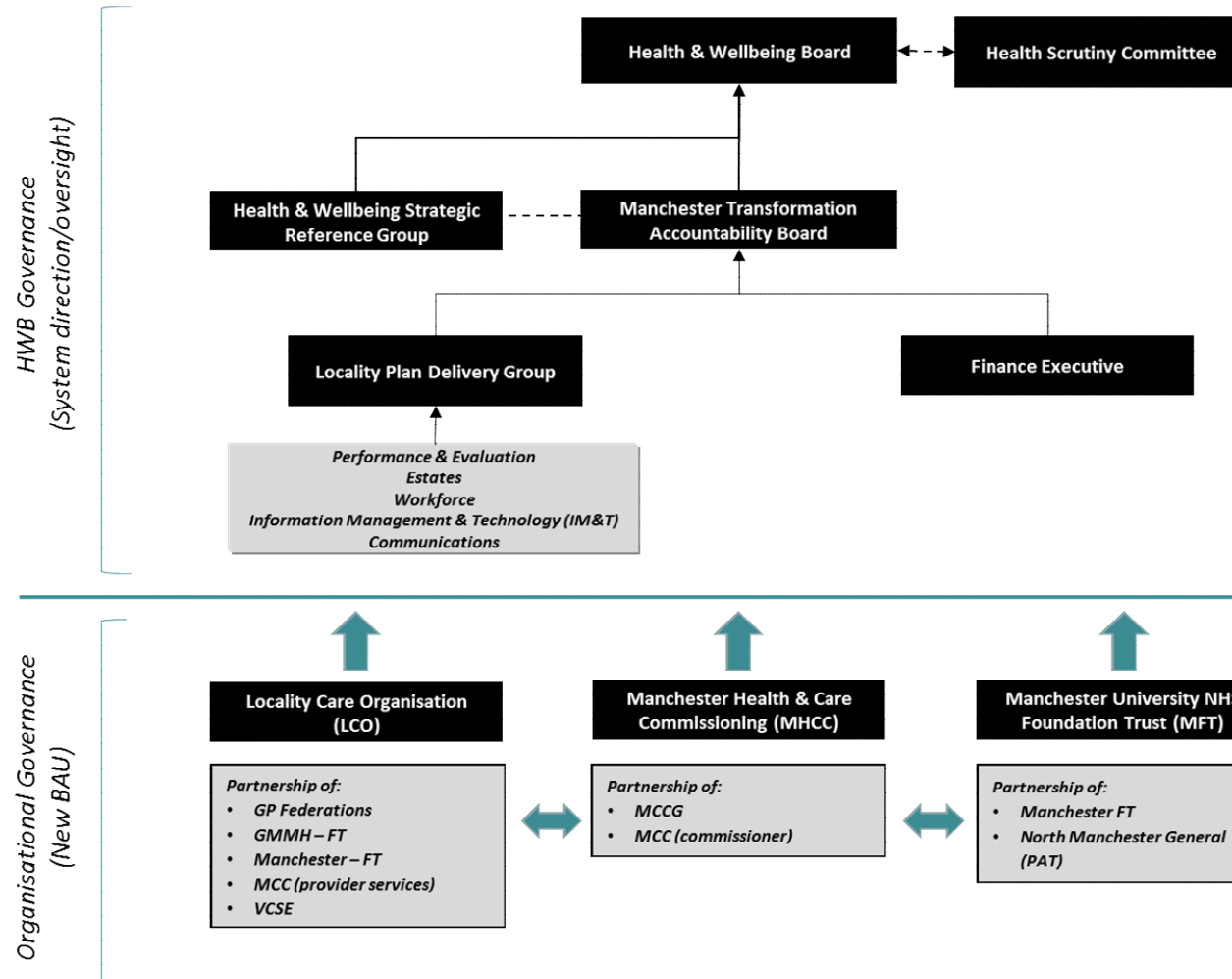
## PROGRAMMES OF WORK – 18/19 DELIVERY

**OUR HEALTHIER MANCHESTER**

PROGRAMMES	OUR SERVICES	OUR PEOPLE	OUR OUTCOMES
<b>ESTATES</b> Enabling programme Collaborative leadership	<ul style="list-style-type: none"> <li>Hubs established in neighbourhoods for integrated neighbourhood teams</li> <li>North Manchester masterplanning complete</li> <li>SHS Phase 1 complete.</li> </ul>	<ul style="list-style-type: none"> <li>Local population involved in the planning of local estates (in the context of wider locality planning)</li> <li>New teams including High Impact Primary Care Teams and Early Help Teams are co-located in appropriate neighbourhood locations.</li> </ul>	<ul style="list-style-type: none"> <li>Neighbourhood estates profiles describing existing estate, future build, ownership and populations needs will be available to enable informed strategic estates decisions.</li> </ul>
<b>WORKFORCE</b> Enabling programme Collaborative leadership	<ul style="list-style-type: none"> <li>Streamlined corporate functions to deliver performance and cost efficiencies.</li> <li>Cultural diagnostic and analysis undertaken as baseline for building leadership and culture strategies.</li> </ul>	<ul style="list-style-type: none"> <li>Targeted action plans to address specific skills and capacity shortages identified in workforce plan.</li> <li>Introduce work programmes to support the health and wellbeing of our staff to build resilience and performance.</li> </ul>	<ul style="list-style-type: none"> <li>A changing culture is starting to emerge where staff look across their professional and organisational boundaries to support integration of health and social care.</li> <li>Embedded leadership framework supporting distributed leadership.</li> </ul>
<b>Digital</b> Enabling programme Collaborative leadership	<ul style="list-style-type: none"> <li>Expanding Manchester's Shared Care Record capability, with the upgrade of MCR to v3.</li> <li>Develop plan for technology assisted care</li> </ul>	<ul style="list-style-type: none"> <li>Enabling the co-location of H&amp;SC teams by implementing the appropriate technology at INT Hubs</li> <li>Equipping INTs with the information they require in electronic format, through the deployment of integrated EPR and Social Care systems.</li> </ul>	<ul style="list-style-type: none"> <li>Utilising some of the technology developments through CityVerve:</li> <li>Electronic records reducing/removing the reliance on paper, freeing up the estate to be used for other purposes, resulting in savings, cost avoidance.</li> </ul>
<b>COMMUNICATIONS</b> Enabling programme Collaborative leadership	<ul style="list-style-type: none"> <li>Staff engagement to support new organisations in the city</li> <li>Deliver neighbourhood based engagement to inform MHCC and LCO work</li> <li>Deliver public engagement on new Locality Plan.</li> </ul>	<ul style="list-style-type: none"> <li>Promote opportunities for health improvement/healthy living to staff and local people</li> <li>Deliver resourced plan for delivery of screening based campaign in one neighbourhood.</li> </ul>	<ul style="list-style-type: none"> <li>Deliver a range of citywide engagement projects to understand experiences of, and preferences for, local health and care services</li> <li>Resourced public-facing campaign plan in place, funded by all partners, in line with Our Manchester.</li> </ul>
<b>PERFORMANCE &amp; EVALUATION</b> Enabling programme Collaborative leadership	<ul style="list-style-type: none"> <li>Deliver the performance, benefits and evaluation aspects of the Manchester Agreement</li> <li>Align research and insight work to better support decision making.</li> </ul>	<ul style="list-style-type: none"> <li>Develop an options appraisal for the delivery of an integrated system wide business intelligence and evaluation service.</li> </ul>	<ul style="list-style-type: none"> <li>Deliver a citywide evaluation programme for the system that measures the impact of system transformation.</li> </ul>

# GOVERNANCE

OUR HEALTHIER MANCHESTER



This governance structure provides the strategic oversight and assurance environment that supports the delivery of the Locality Plan.

Programme involvement and leadership is distributed across the system to ensure the delivery of the Locality Plan continues to be positively influenced by a plurality of voices.

The distributed leadership model also ensures the governance model is robust and resilient.

To ensure alignment of strategy and delivery, this governance structure also links into the *Our Manchester Investment Board (OMIB)*; a number of senior leaders represent their organisations and programmes of work on both the OMIB and Locality Plan governance forums.

## REFERENCE DOCUMENTS

### OUR HEALTHIER MANCHESTER

Reference	Web location
1. Our Manchester: The Manchester Strategy	<a href="http://www.manchester.gov.uk/info/500313/the_manchester_strategy">http://www.manchester.gov.uk/info/500313/the_manchester_strategy</a>
2. Our Healthier Manchester	<a href="https://healthiermanchester.org/">https://healthiermanchester.org/</a>
3. Greater Manchester Plan - Taking Charge of our Health and Social Care in Greater Manchester	<a href="http://www.gmhsc.org.uk/the-plan/">http://www.gmhsc.org.uk/the-plan/</a>
4. Greater Manchester Transformation Agreement	<a href="https://www.greatermanchester-ca.gov.uk/homepage/59/devolution">https://www.greatermanchester-ca.gov.uk/homepage/59/devolution</a>
5. Manchester Agreement	<a href="http://www.manchester.gov.uk/meetings/meeting/3011/health_and_wellbeing_board">http://www.manchester.gov.uk/meetings/meeting/3011/health_and_wellbeing_board</a> (Item 8)
6. Population Health Plan	<a href="http://www.manchester.gov.uk/meetings/meeting/3012/health_and_wellbeing_board">http://www.manchester.gov.uk/meetings/meeting/3012/health_and_wellbeing_board</a>
7. NHS Five Year Forward View	<a href="https://www.england.nhs.uk/five-year-forward-view/">https://www.england.nhs.uk/five-year-forward-view/</a>

Further information can also be found at:

Reference	Web location
Manchester Joint Strategic Needs Assessment	<a href="http://www.manchester.gov.uk/jsna">http://www.manchester.gov.uk/jsna</a>
Greater Manchester Health and Social Care Partnership	<a href="http://www.gmhsc.org.uk/">http://www.gmhsc.org.uk/</a>
Organisational Websites: MFT, MHCC and GMMH	<a href="http://www.mft.nhs.uk">http://www.mft.nhs.uk</a> <a href="http://www.mhcc.nhs.uk">http://www.mhcc.nhs.uk</a> <a href="http://www.gmmh.nhs.uk">http://www.gmmh.nhs.uk</a>
The Health and Wellbeing Board (HWB) and Health Scrutiny Committee – past papers are publicly available	<a href="http://www.manchester.gov.uk/meetings">http://www.manchester.gov.uk/meetings</a>