# Manchester Health and Wellbeing Board Report for Resolution

Report to:	Manchester Health and Wellbeing Board – 4 July 2018
Subject:	Manchester Local Care Organisation Update
Report of:	Michael McCourt, Chief Executive – Manchester Local Care Organisation

# Summary

This report provides an update on the development of the Manchester Local Care Organisation (MLCO), and a briefing to the Board on the development of a Clinical and Professional Leadership Group for the Manchester locality, and its alignment to the Board via the Locality Plan Delivery Group, and Manchester Transformation Accountability Board.

The paper specifically provides context as to the development of a Local Care Organisation for the City of Manchester in accordance with the Manchester Locality Plan. The establishment of the MLCO from April 2018 is described through a series of transactional documents, including but not limited to a Partnering Agreement and 2018/19 business plan. The paper further provides an update on the development of the New Care Models that the MLCO is responsible for implementing in addition to an overview of the key deliverables that are to be achieved during 2018/19.

### Recommendations

The Health and Wellbeing Board are asked to note the contents of this report and specifically the following:

- The significant progress made in the establishment of a Local Care Organisation (LCO) for the City of Manchester initially outlined in the LCO Prospectus and realised from April 2018 through the establishment of the MLCO;
- The signing of the Partnering Agreement by each of the partner organisations of the MLCO; Manchester University NHS Foundation Trust, Manchester City Council, Manchester Primary Care Partnership, Greater Manchester Mental Health NHS Foundation Trust and Manchester Health and Care Commissioning, enabling the MLCO to establish in April 2018;
- The continued progress made in implementing and delivering the New Care Models associated with the Greater Manchester Transformation Fund and Adult Social Care Grant and continued development of Integrated Neighbourhood Team hubs;
- The creation of a co-designed and all-encompassing approach to the MLCO key deliverables for 2018/19 to ensure that it is best placed to meet the needs of communities and neighbourhoods of Manchester in regards to integrated health and social care;

- Approve the proposal to recognise the Manchester LCO Clinical Advisory Group as the clinical and professional leadership group for Manchester reporting to the Manchester Health and Wellbeing Board; and,
- Note the proposed priority of the Clinical Advisory Group to develop a clinical strategy for Manchester and the resourcing required to enable the Group to deliver that.

# **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	
Improving people's mental health and	
wellbeing	
Bringing people into employment and	
ensuring good work for all	The MLCO will deliver services and support which contributes towards the Health &
Enabling people to keep well and live	
independently as they grow older	
Turning round the lives of troubled	Wellbeing Boards 7 strategic priorities.
families as part of the Confident and	
Achieving Manchester programme	
One health and care system – right care,	
right place, right time	
Self-care	

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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:

- GM Strategic Plan Taking Charge of Our Health and Social Care Manchester
- Locality Plan A Healthier Manchester
- Local Care Organisation Prospectus

### 1.0 Introduction

1.1 Further to the establishment of the Manchester Local Care Organisation (MLCO), 1<sup>st</sup> April 2018 and update provided at the Health and Wellbeing Board

in March 2018, this paper sets out an update on the development of the MLCO specifically in regards to:

- Providing a background on the development of a Local Care Organisation in Manchester;
- Establishment of the MLCO through the Partnering Agreement;
- Development of a Manchester City Council Service Level Agreement;
- Approval of a 2018/19 MLCO Business and Finance Plan;
- Update on the implementation of New Care Models;
- Overview of key deliverables of the MLCO for 2018/19; and,
- Update in regards to the development of a Clinical and Professional Leadership Group for the Manchester locality.

# 2.0 Background

- 2.1 A key priority of the Our Manchester Strategy is to radically improve health and care outcomes, through public services coming together in new ways to transform and integrate services. This involves putting people at the heart of these joined-up services, a greater focus on preventing illness, helping older people to stay independent for longer, and recognising the importance of work as a health outcome and health as a work outcome. The Locality Plan, "Our Healthier Manchester", represents the first five years of transformational change needed to deliver this vision. The Council and its partners are now in the second year of implementing the Locality Plan. The plan sets out how Manchester is taking advantage of the devolution of health and social care spending and decision making to Greater Manchester.
- 2.2 Manchester currently has some of the poorest health outcomes in the country, and there are very significant health inequalities within the city. The Locality Plan aims to overcome the significant financial and capacity challenges facing health and social care in order to reduce these inequalities and to become clinically and financially sustainable.
- 2.3 The plan sets out the complex, ambitious set of reforms that are needed to integrate services for residents. This included developing a Local Care Organisation for integrating out-of-hospital care, a Single Hospital Service for integrating in-hospital care, and a Single Commissioning Function for health and social care.
- 2.4 The Locality Plan is fully aligned with the Our Manchester approach to change ways of working. This will mean supporting more residents to become independent and resilient, and better connected to the assets and networks in places and communities. Services will be reformed so that they are built around citizens and communities rather than organisational silos.
- 2.5 Further to the update provided at the last Health and Wellbeing Board, each partner organisation of the MLCO; Manchester City Council (MCC), Manchester University NHS Foundation Trust (MFT), Manchester Primary Care Partnership (MPCP), Greater Manchester Mental Health NHS Foundation Trust (GMMH) and Manchester Clinical Commissioning Group

(CCG part of MHCC) signed the Partnering Agreement which established the MLCO from 1<sup>st</sup> April 2018. This realised the Local Care Organisation element of the Locality Plan, creating a single leadership structure to provide integrated health and social care across the communities and neighbourhoods of Manchester as provisionally set out in the LCO prospectus released in March 2017.

# 3.0 Manchester Local Care Organisation Establishment

# 3.1 Partnering Agreement

- 3.1.1 In April 2018 the MLCO was established through the signing of the Partnering Agreement. The Partnering Agreement was produced by the Governance Working Group, which has representation from all Partners of the MLCO. The Partnering Agreement also contains a range of associated schedules, including but not limited to, the scope of the MLCO, delegated authorities and the reserved matters of Partner organisations.
- 3.1.2 The Partnering Agreement is a legally binding document which commits the Partners to supporting the establishment and the delivery of the MLCO, realising the ambition set out provisionally in the LCO Prospectus. The Agreement is for a ten-year term with provision for regular review and assessment, including whether it is possible to establish the MLCO as a legal entity in line with national regulatory barriers, such as VAT implications for local authorities and judicial review of Accountable Care Organisations (ACO) contracts.
- 3.1.3 Further to the approval of the MLCO Partnership Board, the Partnering Agreement was formally approved and signed by all Partner organisations internal governance processes during March 2018, ahead of go live in April 2018. It has been agreed that a review of the efficacy of the Partnering Agreement will take place during Quarter 1 2018/19 via the Governance Working Group.

# 3.2 Manchester City Council Service Level Agreement

- 3.2.1 As part of the Partnering Agreement a specific schedule was included which outlines the Service Level Agreement (SLA) for MCC. The SLA confirms those the functions and services that will be delivered through MLCO, and confirms those functions that will not be delegated into it.
- 3.2.3 The Executive Director for Strategic Commissioning, retains their statutory DASS responsibilities. In regards to the delivery of adult social care, services will be delivered by MCC staff operating within the ambit of the MLCO, with line management through to both the MLCO Chief Executive and the Executive Director for Strategic Commissioning.
- 3.2.4 The Executive Director for Strategic Commissioning will authorise the Director of Adult Services to perform the majority of adult social care functions except those that must remain with the DASS as the statutory accountable officer.

- 3.2.5 To the extent that certain decisions need to be undertaken at MLCO Board level, the Executive Director for Strategic Commissioning will authorise the Deputy Chief Executive to carry out those functions after consultation with the Executive Member on the MLCO Board.
- 3.2.6 The Agreement also makes provision for those decisions which must be made by full Council or statutory officers to remain with those decision makers, and for the MLCO Executive to attend and provide information to the relevant Council's Scrutiny Committees.

# 3.3 2018/19 Business and Finance Plan

- 3.3.1 Further to the update provided in February 2018, the MLCO produced both a business plan and finance plan which covers the period of 2018/19. The MLCO 2018/19 business plan was approved by Partners at the MLCO Partnership Board, 29<sup>th</sup> March 2018. The business plan provides an update on the progress made to date in the establishment of the organisation, including the context set out in section 2. The plan also sets out the key priorities of the MLCO in 2018/19 with plans to deliver these as set out in section 6.
- 3.3.2 The MLCO will plan, deliver, manage and evaluate services at 3 levels: Neighbourhood, Locality and Citywide as per the Target Operating Model outlined in the business plan.
- 3.3.3. As part of the production of the MLCO 2018/19 business plan, a financial plan for 2018/19 has also been produced. This Plan has been co-produced with Partner organisations and discussed at the Finance Transformation Accountability Board (FTAB) which has representation from each of the MLCO Partners Executive Directors of Finance or City Treasurer respectively.

### 4.0 New Care Models

- 4.1 The New Care Models (NCM) which the MLCO is responsible for mobilising, continue to progress through the key phases of business case, design, mobilisation, implementation and evaluation. These are the NCMs which have been funded through the Greater Manchester Transformation Fund and the Adult Social Care Grant as agreed during 2017/18.
- 4.2 The pilot of High Impact Primary Care (HiPC) in 3 neighbourhoods is now fully mobilised and the service is operational. Whilst still in its early stages there is evidence to suggest that there has been a positive impact on patients as part of the HiPC cohort, such as a reduction in A&E attendances. The metrics of reporting these outcomes are in the process of being finalised.
- 4.3 Recruitment of staff into the additional reablement capacity and complex reablement service has commenced with the complex reablement service going live 21<sup>st</sup> May 2018. A total of 42 additional posts have been recruited to in total with 25 of these already in post.

- 4.4 A number of the NCMs are still progressing through the stages of business case development and approval and design through to evaluation. These are being effectively monitored and tracked within the MLCO and with partners through the Health and Social Care Commissioning Group, chaired by the Executive Director of Strategic Commissioning.
- 4.5 The MLCO has developed an approach for those models that are mobilised, to be able to monitor and report on progress against delivery of key metrics; such as spend, activity, benefits realisation, and KPI delivery, along with the development of patient and resident stories to ensure a full picture of the impact of mobilisation on our current services. This is being refined and developed during Quarter 1 of 2018/19 and the reporting will be aligned to the management and delivery of current services that have transitioned to the MLCO in 2018/19.
- 4.6 The hubs for the Integrated Neighbourhood Teams (INTs) across Manchester continue to be mobilised, which will ensure that staff from across health and social care are physically co-located. All of the hubs are currently on track to become live in Quarter 3 2018/19 as agreed with MHCC. The locations of the hubs are as follows:

Central - Chorlton

- Central Gorton District Office
- Central Vallance Centre
- Central Moss Side Health Centre
- North Victoria Mill
- North Cheetham Hill PCC
- North Cornerstones
- North Harpurhey District Office
- South Etrop Court
- South Burnage
- South Parkway Green House
- South Withington Community

# 5.0 2018/19 Key Deliverables

- 5.1 During 2018/19 a collaborative approach to planning the MLCO's key deliverables for 2018/19 have been produced with MHCC. This was done to ensure that the transition of services into the MLCO was undertaken in a safe manner, whilst planning ahead towards 2019/20.
- 5.2 The 2018/19 deliverables will be managed by the MLCO Executive Team through internal governance processes. These will be monitored with progress and impact reports provided to the MLCO Partnership Board and MHCC (including regular and ongoing dialogue between the MLCO Executive and the Executive Director for Strategic Commissioning). The deliverables have categorised into six key priority areas, aligned to the Business Plan which are as follows:

# • Ensure a safe transition and a safe start

The MLCO will ensure that the services that transfer from partner organisations are done so safely, and that the delivery and quality of services is maintained for local people.

• Improve lives through population health and primary care The MLCO is to take a whole population approach throughout the 12 neighbourhoods of Manchester. During the year the MLCO will focus on making sure the neighbourhoods function effectively whilst understanding the needs of people in the communities that we work in.

### • Redesign core services

The MLCO delivers services across neighbourhoods, localities and citywide. We will continue the work with citizens on service improvement and on the design of new models of care.

# • Ensure financial sustainability

The MLCO is a platform to drive system change and ensure health and social care in the city is sustainable in the long term. As such will ensure that the anticipated financial benefits associated with the MLCO are delivered and also produce a longer term financial plan.

# • Create our organisational strategy

The MLCO has and continues to bring staff together from a range of organisations and sectors to work collectively to deliver services on behalf of the people of Manchester. We will create an organisation that staff, residents and stakeholders are proud to be associated with.

## • Prepare for 2019/20 and beyond

As more services will transfer to MLCO over the coming years, a focus will be placed on a number of critical tasks to embed the operational structures needed to realise the benefits of integrated working and ensure we are ready for this growth.

### 6. Establishment of the Clinical Advisory Group

- 6.1 The MLCO has established a Clinical Advisory Group. The current terms of reference are attached at appendix 1.
- 6.2 This is a new forum in the Manchester locality, looking to build the connections between clinicians, service and social care professionals across the Manchester system. It is intended to work at the interface between primary, community and secondary care services to strengthen relationships.
- 6.3 The Group will be strategic and ambitious in its approach and work across the system outside of organisational boundaries, supporting and facilitating the development of clinical, social care and professional relationships across Manchester with a focus on the integration and transformation of health and social care in community, primary, acute and mental health services.
- 6.4 Initially it will aim to:
  - Align existing clinical work programmes;
  - Determine system wide priorities and opportunities for collaboration and

provide clinical and professional assurance on the safe transfer of services to the MLCO in years 1-3. It will ensure there is clinical, social care and professional leadership of the management and transformation of services and provide a forum to develop and maintain clinical and professional relationships across the city.

- 6.5 The first meeting took place 19<sup>th</sup> December 2017 to establish and agree the rationale and approach of the Group moving forwards.
- 6.6 There is membership on the group from clinical leaders of the system partners (MFT, MHCC, LMC, MPCP, LCO, GMMH and PAHT), along with adult social care and children's services. It has been agreed that this meeting will take place monthly and will be hosted in turn by each of the system partners. The Group is also exploring the most appropriate way to ensure the VCSE sector is represented
- 6.7 The objectives for the group have been agreed as:
  - To deliver the requisite shifts from hospital to community services in a safe and sustainable manner;
  - The development and management of the clinical and professional interface between health and social care services within primary, community and secondary care services;
  - Agreeing and then understanding how to incentivise different clinical behaviours to deliver the MLCO strategy; and,
  - Support the development of holistic models of care to address clinical, mental, physical and social wellbeing.
- 6.8 The CAG has developed a list of priority work areas, which will support the management of current service challenges, the development of the approach to the locality priority cohorts and the development of new models of care. These are:

Prevention; Neighbourhood working; Urgent care; Children's services; Home and residential care; Frailty; Cardio Vascular Disease (CVD); Respiratory; and Diabetes.

# 7. Development of a Clinical Leadership Forum for Manchester

7.1 The MLCO Clinical Advisory Group is demonstrating the benefits of having one clinical, health and social care professional group to ensure there is strategic alignment of the approach, planning and delivery.

- 7.2 It is noted that there are a range of clinical and professional discussions and working groups that are in place across and within the Manchester system to address and resolve key pathway and service challenges. These groups are convened and led through all of our system.
- 7.3 This proposal recognises and acknowledges the work of these groups and seeks to provide strategic alignment and connectivity to our system priorities; it does not seek to duplicate or replace any existing work.
- 7.4 It is proposed that the Manchester Clinical Advisory Group:
  - Aligns to the governance of the Manchester Health and Wellbeing Board;
  - Continues to meet monthly;
  - Facilitates system-level clinical and professional alignment, connectivity and the resolution of key system challenges;
  - Develops a clinical strategy for Manchester; and,
  - As a priority, maps the current work and develops a Clinical and Professional Charter for how the Manchester system will progress and resolve common issues and challenges.
- 7.5 In order the for proposed Clinical Advisory Group to be effective, it will be necessary to compile a complete stocktake of all the groups and work taking place, which the MLCO CAG has already commenced.
- 7.6 It would also be important to resource the Group effectively to ensure the contribution and leadership of the clinicians and professionals in the system, as well as adequate administrative capacity supporting the operation and leadership of the Board.

# 8. Recommendations

- 8.1 The Health and Wellbeing Board are asked to note the contents of this report and specifically the following:
  - The significant progress made in the establishment of a LCO for the City of Manchester initially outlined in the LCO Prospectus and realised from April 2018 through the establishment of the MLCO;
  - The signing of the Partnering Agreement by each of the partner organisations of the MLCO; MFT, MCC, MPCP, GMMH and MHCC, enabling the MLCO to establish in April 2018;
  - The continued progress made in implementing and delivering the NCMs associated with the Greater Manchester Transformation Fund and Adult Social Care Grant and continued development of Integrated Neighbourhood Team hubs;
  - The creation of a co-designed and all-encompassing approach to the MLCO key deliverables for 2018/19 to ensure that it is best placed to meet the needs of communities and neighbourhoods of Manchester in regards to integrated health and social care;

- Approve the proposal to recognise the MLCO Clinical Advisory Group as the clinical and professional leadership group for Manchester reporting to the Manchester Health and Wellbeing Board; and,
- Note the proposed priority of the Clinical Advisory Group to develop a clinical strategy for Manchester and the resourcing required to enable the Group to deliver that.

# • Appendix 1: Clinical Advisory Group: Terms of Reference

#### Manchester Locality Care Organisation (MLCO) Clinical Advisory Group Terms of Reference

#### Purpose of the meeting

This is a new forum in the Manchester locality, which will be established by the LCO; looking to build the connections between clinicians and service and social care professionals across the Manchester system. It is intended to provide a clinical and professional advisory function to the Quality and Safety subcommittee of the LCO Board and work at the interface between primary, community and secondary care services to strengthen relationships.

Initially it will aim to align existing clinical work programmes, determine system wide priorities and opportunities for collaboration and provide clinical and professional assurance on the safe transfer of services to the LCO in years 1-3. It will ensure there is clinical, social care and professional leadership of the management and transformation of services and provide a forum to develop and maintain clinical and professional relationships across the city.

The Group will be ambitious in its approach and work across the system outside of organisational boundaries and the initial priority for the Group will be to build the clinical relationships and networks between clinicians and the professions in the LCO and those in partner services.

It will aim to support and facilitate the development of clinical, social care and professional relationships across Manchester with a focus on the integration and transformation of health and social care in community, primary, acute and mental health services.

#### Governance and reporting

The meeting will align to the Locality Plan Delivery Group and through that to the Manchester Transformation Accountability Board (TAB) and the Manchester Health and Wellbeing Board.

It will work in partnership with the Clinical Reference Group (CRG) of MFT, as well as the clinical, social care and professional forums in partner organisations such as GMMH, MHCC, MCC, MPCP and the 3<sup>rd</sup> sector.

It will also provide a clinical and professional advisory function to the Quality and Safety sub-committee of the LCO Board.

The meeting will also be aligned to a new forum to be established by the LCO Chief Nurse and Lead of Professions - Manchester Nurse, AHP and Professional Council. It is proposed that this will be established as part of the new LCO governance to ensure that the voices, views and considerations of the wider clinical and professional health and care community in Manchester is aligned to the work of this Group. Initially the Group will establish formal reporting to the Quality and Safety Committee and will inform the development and agreement of the work streams of the LCO Design and Transformation Board.

It will provide a multi-professional approach to pathway design and management to influence model change. The group will be able to work through the LCO Design and Transformation Board in order to develop work programmes. It will aim to ensure that this work is undertaken through collaboration of all partners.

The group will also look to develop relationships with the GM and Cheshire Clinical Senate.

# **Objectives of the Board**

The overarching objective of the Board will be to facilitate the building of relationships between the clinicians and health and care professionals working within and in partnership with the LCO. It will take an open and transparent approach to pathway redesign and will work across organisational boundaries to promote a whole system approach.

In so doing, it will then be able to:

- Work at the clinical, social care and professional interface to strengthen relationships and ensure a system-wide collaborative approach
- provide clinical, social care and professional assurance for commissioners, regulators and providers of services that will transfer to the LCO
- ensure clinical, social care and professional leadership of the management and transformation of services
- provide a forum to develop and maintain clinical and professional relationships across the city.

The Group will look to achieve the following objectives:

- To deliver the requisite shifts from hospital to community services in a safe and sustainable manner;
- the development and management of the clinical and professional interface between health and social care services within primary, community and secondary care services;
- agreeing and then understanding how to incentivise different clinical behaviours to deliver the LCO strategy;
- Support the development of holistic models of care to address clinical, mental, physical and social wellbeing.;
- Align to the workforce governance for the city and as such identify opportunities to support the development of professions.

The CAG will also look to develop a list of priority work areas, which would support the management of current service challenges, the development of the approach to the locality priority cohorts and the development of new models of care.

The priority focus of the Group will be ensuring the safe transfer of acute-based services into the LCO and working through the interface challenges to reduce the service impact on secondary care. The key deliverables for the first 6 months will be:

- Undertake a stocktake of all the clinical and service redesign work taking place across the locality and the governance through which it is working;
- Develop and agree clinical and service priorities for Manchester;
- Develop an overall Manchester clinical and service strategy aligned to the locality plan;
- Ensure alignment and connectivity to other groups in the system.

# Membership of the meeting

The meeting will be hosted by the Medical Director of the Manchester LCO and cohosted by the Chief Nurse and Professional Lead of the LCO and the clinical Head of Division from Manchester University Hospital Foundation Trust.

This meeting will be an open forum, but it is proposed that core membership for this meeting will be as follows:

ROLE	ORGANISATION	NAME
Medical Director (interim)	LCO (MPB)	Sohail Munshi (host)
Chief Nurse and Professional Lead	LCO (MPB)	Ian Trodden (co-host)
(interim)		
Chief Operating Officer (interim)	LCO (MPB)	Mark Edwards
GP Federation Clinical Leads	MPCP GP	Vish Mehra / Angus
	Federation	Murray-Brown
Chief Executive	LMC	Tracey Vell / Gill
		Edmondson
LCO / SHS interface – Medical	MFT (MRI)	Jon Simpson (co- host)
Director		
Chief Nurse	MFT	Cheryl Lenney / Sue
		Ward
Divisional Medical Director	MFT (UHSM)	Sally Briggs
Medical Director	NMGH	Matthew Makin
Consultant in Public Health	MHCC / LCO	Cordelle Mbeledogu
Clinical Director	MHCC	Manisha Kumar
Medical Director	NWAS	David Radcliffe
Medical Director	GMMH	Christopher Daly
Deputy Director of Nursing	MFT / LCO	Lorraine Ganley
(Community_		
Pharmacy / medicines management	MHCC / LCO	Kenny Li / Heather Bury
representation		

Director of Adult Social Care services	MCC	Bernie Enright
VCSE sector representative		Michele Scattergood
LCO AHP lead	LCO	Ian Trodden (to
		nominate)
Workforce / HR	Rep to be confirmed	

Other senior clinical, professional leaders and resident representatives may be invited to attend the meeting by the hosts including from partner and stakeholder organisations, dependent on the areas of work being discussed. Requests for attendance will be also be considered and agreed by the hosts of the meeting.

# Quoracy

The meeting will be quorate if there is a clinical or professional representative from each of the main partners of the Manchester Provider Board (MCC, MPCP, MFT and GMMH), LCO and MHCC.

It is expected that if members miss a meeting, they will be responsible for ensuring that they get an update on actions and progress from colleagues, prior to the next meeting.

# Frequency

This meeting will be held monthly in the shadow period until March and arrangements will be reviewed as part of the formal establishment of the LCO governance.

#### **Review date: March 2018**