



Health Scrutiny Committee

Date: Tuesday, 4 December 2018

Time: 10.00 am

Venue: Council Antechamber, Level 2, Town Hall Extension

This is a **Revised Supplementary Agenda** containing further items of business (agenda items 5a, 5b and 5c) that are to be considered as part of agenda item 5 (Budget 2019/20 Refresh: Update for Scrutiny Committees) which were not available when the original agenda was published.

Access to the Council Antechamber

Public access to the Council Antechamber is on Level 2 of the Town Hall Extension, using the lift or stairs in the lobby of the Mount Street entrance to the Extension. That lobby can also be reached from the St. Peter's Square entrance and from Library Walk. **There is no public access from the Lloyd Street entrances of the Extension.**

Filming and broadcast of the meeting

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Membership of the Health Scrutiny Committee

Councillors - Farrell (Chair), Battle, Clay, Curley, Holt, S Lynch, Mary Monaghan, O'Neil, C Paul, Reeves, Riasat, Smitheman, C Wills and J Wilson

Revised Supplementary Agenda

1. Urgent Business

To consider any items which the Chair has agreed to have submitted as urgent.

2. Appeals

To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

3. Interests

To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

4. Minutes

To approve as a correct record the minutes of the meeting held on 6 November 2018 – **Previously circulated.**

To note the minutes of the Public Health Task and Finish Group meeting held on 26 October 2018 – **Previously circulated.**

5. Budget 2019/20 Refresh Process: Update for Scrutiny Committees

The Committee will consider the reports detailed below as part of the 2019/20 budget refresh process.

5a Update on Revenue Financial Strategy and Business Plan Process 2019/20

5 - 18

Report of the Chief Executive and City Treasurer

This report provides an update on the Council's financial position and sets out the next steps in the budget process, including scrutiny of the draft Budget proposals and Directorate Business Plan reports by this Committee. The report also summarises the officer proposals for how the Council could deliver a balanced budget for 2019/20, the detail of which will be discussed at the relevant scrutiny committees.

5b Manchester Health and Care Commissioning Pooled Budget 2019/20, including Adult Social Care

19 - 38

Report of the Director of Adult Social Care and the MHCC Chief Accountable Officer

This report sets out the priorities for MHCC during the 2019/20 financial year. It describes the MHCC's operational plan and progress towards the vision set out in the Our Manchester Strategy. The report provides an update on MHCC's financial plan for 2019/20, reflecting the Manchester Health and Care Locality

Plan and Adult Social Care Business Plan for the period 2017-2020. The report sets out both the progress made to date in delivering savings and the focus over the next year of the three year plan. The report is a refresh of the Joint Financial Plan for MHCC for 2018-20 in the context of changing resources, challenges and opportunities – with a specific focus on the Adult Social Care and Population Health components of the plan.

5c Homelessness Business Planning: 2019/20

39 - 56

Report of the Strategic Director, Development

This report sets out in broad terms the directorate's key priorities, key activities and revenue and capital strategy for 2019-20.

In the Business Plan for the period 2017-2020, directorates set out their proposed savings in the context of their objectives. This report sets out both the progress made to date in delivering these savings and the directorate's focus over the final year of the three year plan. This report is a refresh of the directorate's Business Plan for 2018-20 in the context of changing resources, challenges and opportunities.

Taken together, the directorate business plans show how the directorates will work together and with partners to deliver our Corporate Plan and progress towards the vision set out in the Our Manchester Strategy.

6. Adult Respiratory

Report of the Clinical Director, Manchester Health and Care Commissioning – **Previously circulated.**

7. Young people moving in to adult services

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Report of Strategic Director of Children and Education Services, Executive Director of Nursing and Safeguarding, Manchester Health and Care Commissioning and Director of Population Health and Wellbeing

This report provides an overview of work that is being done and work that is planned to improve the experience and outcomes of those young people moving from children and young people services to adult services and to improve the experience for their families and carers too.

8. Final Report and Recommendations of the Public Health Task and Finish Group

Report of the Public Health Task and Finish Group – **Previously circulated.**

9. Overview Report

Report of the Governance and Scrutiny Support Unit –
Previously circulated.

Further Information

For help, advice and information about this meeting please contact the Committee Officer:

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This supplementary agenda was issued on **Thursday, 29 November 2018** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Mount Street Elevation), Manchester M60 2LA

Manchester City Council Report for Information

Report to: Health Scrutiny Committee – 4 December 2018
 Children and Young People Scrutiny Committee – 4 December 2018
 Neighbourhoods and Environment Scrutiny Committee – 5 December 2018
 Economy Scrutiny Committee - 5 December 2018
 Communities and Equalities Scrutiny Committee – 6 December 2018
 Resources and Governance Scrutiny Committee – 6 December 2018

Subject: Update on Revenue Financial Strategy and Business Plan Process 2019/20

Report of: The Chief Executive and City Treasurer

Summary

This report provides an update on the Council's financial position and sets out the next steps in the budget process, including scrutiny of the draft Budget proposals and Directorate Business Plan reports by this Committee. The report also summarises the officer proposals for how the Council could deliver a balanced budget for 2019/20, the detail of which will be discussed at the relevant scrutiny committees.

Recommendations

The Committee is asked to consider and make recommendations to the Executive on the budget proposals which are within the remit of this Committee and to comment on initial Directorate Business Plans which have been designed to ensure the Council invests in the services that are valued by its residents achieving both high quality services and outcomes for residents, as well as a balanced budget.

Committee are asked to note that the joint funding for commissioning as part of the pooled budget for Health and Social Care will also need to be formally agreed at MHCC Board as part of finalising the budget.

Wards Affected: All

Contact Officers:

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Background documents (available for public inspection):

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

Suite of budget reports to Executive, 7 February 2018-
<https://secure.manchester.gov.uk/meetings/meeting/2997/executive>

Autumn Budget 2017, 29 October 2018 –
2018 Autumn Budget document is available on the Government's website
<https://www.gov.uk/government/publications/budget-2018-documents>

1 Overview

- 1.1 At its meeting on 8 February 2017, Executive agreed a three-year budget strategy for 2017-20. The financial position for years two and three of the strategy, 2018/19 and 2019/20 respectively, was adjusted to reflect changes arising from 2017/18. This included the financial benefits from the city's economic, population and housing growth. However, it also included the impact of austerity and a longer-living population, many with health problems and needing social care. The 2018/19 proposals therefore took into account the increase in demand for some services – adults and children's social care, support for homelessness and the need to reduce the impact of the reduction in government funding in some areas.
- 1.2 At its meeting on 7 February 2018, Executive agreed the final budget recommendations for 2018/19 to 2019/20 of three-year budget strategy for 2017-20. The budget was subsequently presented to Resources and Governance Scrutiny Committee on 20 February and approved by Council on 2 March 2018.
- 1.3 The three-year budget strategy followed consultation with Manchester people on what services matter most to them. The budget set reflected what Manchester people valued most, which was:
 - care and support for vulnerable people including older people and those with learning disabilities and mental health needs;
 - taking action on family poverty and giving young people the best start in life;
 - tackling homelessness;
 - supporting people into jobs and training;
 - keeping roads and neighbourhoods in good shape; and
 - parks and leisure to keep people active and happy.
- 1.4 The 2017-20 budget also set out the changes required to make the savings and deliver what was agreed by:
 - bringing health and social care services together,
 - supporting people earlier and more thoroughly so they will avoid more costly help later,
 - safely reducing the cost of children in care by finding more foster carers, and
 - changing the waste disposal arrangements to reduce costs.
- 1.5 The original revenue budget for 2018/19 totalled £576m. Of this, around 55% was invested in caring for our vulnerable adults and children; 10% for waste management including recycling, as well as looking after neighbourhoods including tackling fly-tipping, maintaining grounds and trees, trading standards and licensing; 11% to support the costs of investment in major projects; 9% on transport, roads and street lighting; 2% for supporting people in to work and training; 3% for libraries, culture, leisure, parks and open spaces. The remaining 10% is invested in supporting services that keep the City running such as customer services, elections and IT and making sure that benefits and other payments are handled properly.

- 1.6 The Council also delivers major projects through a separate longer term capital strategy which is refreshed each year. The investment priorities are aligned to Our Manchester and also recognise the priorities that residents have identified; making Manchester an attractive place to live and further improving the quality of life for its residents - increasing their overall social and economic prospects and enabling them to fully participate in the life of the City.
- 1.7 The priority areas of investment agreed for 2017-20 included improving housing with care for older people, supported housing for adults with learning disabilities, building and refurbishing leisure centres, and improving the City's roads.
- 1.8 Building on the above, the Council's Executive has recently agreed a set of priorities which are also reflected in the Council's new Corporate Plan. These provide the framework for the refreshed business plans on the agenda for each Scrutiny Committee. The Corporate Plan has 15 key priorities (see also Appendix 1) which are based around the seven main themes of:
- **Young people** - *From day one, support Manchester's children to be safe, happy, healthy and successful, fulfilling their potential, and making sure they attend a school graded 'good' or better.*
 - **Healthy, cared-for people** - *Work with partners to enable people to be healthy and well. Support those who need it most, working with them to improve their lives.*
 - **Housing** - *Ensure delivery of the right mix of good-quality housing so that Mancunians have a good choice of quality homes*
 - **Neighbourhoods** - *Work with our city's communities to create and maintain clean and vibrant neighbourhoods that Mancunians can be proud of.*
 - **Connections** - *Connect Manchester people and places through good-quality roads, sustainable transport and better digital networks.*
 - **Growth that benefits everyone** - *To support our priorities, we need to continue to promote and drive sustained economic growth and job creation that benefits everyone.*
 - **Well-managed council** - *Support our people to be the best and make the most of our resources.*
- 1.9 The Chancellor's Autumn Statement has also been published and there is a separate paper on the agenda for the Resources and Governance Scrutiny Committee which covers the main details. Whilst the specific details of the overall funding for individual local authorities will not be known until the Local Government Finance Settlement which is due on 6 December, there are some funding announcements which have already been made. These have not yet been built into the budget for 2019/20 and include:
- a further £240m in 2019/20 for adult social care which equates to £2.667m for each year for Manchester - this follows the allocation of a similar amount in 2018/19,

- £410m Social Care grant in 2019/20 for adults and children's social care, Manchester's indicative amount is £4.555m,
- £420m in 2018/19 for potholes that will be allocated directly to highways authorities and must be spent prior to 31 March 2019. The allocation for Manchester is £1.686m.

2 The Original Revenue Budget Position 2019/20

- 2.1 2019/20 represents the third and final year of the Council's current three-year strategy. Last year the 2018-20 budget was refreshed to protect the City's most vulnerable but remained focused on delivering the overarching strategy.
- 2.2 The original budget for 2018/19 and 2019/20 as reported to Council in March 2018 has been restated for the implications of changes within 2018/19 including those listed below and these may also lead to some changes in 2019/20:
- the allocation of budgets originally held centrally for inflation (non-pay and pay, including meeting the minimum wage requirements), growth items and funding set aside for high risk areas to Directorate budgets;
 - budget transfers between directorates
- 2.3 The updated position is as follows:

Table One: Updated Original Revenue Budget Position 2019/20

	Original 2018/19 £,000	Rebased 2018/19 £,000	Original 2019/20 £,000	Rebased 2019/20 £,000
Resources Available				
Business Rates Baseline	314,212	316,597	241,901	241,901
Business Rates Top Up	(16,630)	(19,015)	41,536	41,536
<i>Baseline Funding Level</i>	<i>297,582</i>	<i>297,582</i>	<i>283,437</i>	<i>283,437</i>
(Reduced) / Additional Business Rates Income	7,393	7,393	21,223	21,223
Business Rates Grants	19,778	19,778	15,535	15,535
Council Tax	154,070	154,070	161,723	161,723
Other non-ringfenced Grants	35,809	35,809	39,662	39,662
Dividends and Use of Reserves	53,342	53,342	53,342	53,342
Use of other Reserves	8,188	8,188	4,490	4,490
Resources to be identified	0	0	8,967	8,967
Total Resources Available	576,162	576,162	588,379	588,379
Resources Required				
<i>Corporate Costs:</i>				
Levies/Charges	68,045	67,945	68,862	68,762
Contingency	3,103	3,103	2,100	2,100
Capital Financing	44,582	44,507	44,582	44,507
Transfer to Reserves	7,181	7,181	3,409	3,409
<i>Sub Total Corporate Costs</i>	<i>122,911</i>	<i>122,736</i>	<i>118,953</i>	<i>118,778</i>
<i>Directorate Costs:</i>				
Additional Allowances and other pension costs	10,183	10,030	10,183	10,030

	Original 2018/19 £,000	Rebased 2018/19 £,000	Original 2019/20 £,000	Rebased 2019/20 £,000
Insurance Costs	2,004	2,004	2,004	2,004
Directorate Budgets	422,086	437,003	423,111	438,028
Inflationary Pressures and budgets to be allocated	18,978	4,389	34,128	19,539
<i>Total Directorate Costs</i>	<i>453,251</i>	<i>453,426</i>	<i>469,426</i>	<i>469,601</i>
Total Resources Required	576,162	576,162	588,379	588,379
Balance	0	0	0	0

- 2.4 The budget for 2019/20 identified a funding gap of £8.967m in 2019/20. The February 2018 report to Executive noted that this would need to be met from a combination of changes to business rates and commercial income, commissioning decisions, efficiencies and a further review of budget requirements.

3 The Revised Revenue Budget Position 2019/20

- 3.1 In July 2018, the Council reported an in-year overspend of £13.7m, this was reduced to £6.1m as reported to Executive in October through the recovery plans that were being implemented.
- 3.2 It is expected that the in-year position for 2018/19 will further improve through:
- continuing implementation of the recovery plans;
 - effective use of any one-off resources
 - further progress on the delivery of social care savings, recognising the ambitious targets in Social Care
 - controls on spend
- 3.3 It is important that the Council works to set a sustainable budget position going forward in to 2019/20. The most significant risk to the budget position is the additional need arising from services such as Social Care and Homelessness, together with the non-achievement of planned savings, accepting that some savings may be delayed into future years. At present the full year effect of these budget pressures for 2019/20 is estimated at £12.686m which will further increase the original budget gap of £8.967m to £21.653m
- 3.4 To support the budget position and meet the identified pressures, there has been a full review of resources available, which has identified an additional £4.930m, and further officer recovery proposals of £15.508m. These are set out later in the report.
- 3.5 Taken together this leaves a gap of £1.215m in 2019/20 as summarised in the table below.

Table Two: Revised Shortfall 2019/20

	2019/20 £m
Original 2019/20 Budget Gap	8.967
Additional Pressures	12.686
Initial Shortfall	21.653
Resource Review	(4.930)
Officer Recovery Proposals	(15.508)
Revised Shortfall	1.215

- 3.6 The options for closing this gap will include the application of the one-off grant for Adult and Children's Social Care announced for 2019/20 as part of the Chancellor's Autumn Budget 2018, taken together with any changes arising from the Local Government Finance Settlement and potential further changes to the resource position arising from Council Tax and Business Rates when the figures are finalised in January 2019.
- 3.7 The additional pressures and proposed recovery actions are set out in full in the Directorate Business Plan reports for consideration by the relevant Scrutiny Committee. The main areas are highlighted in the paragraphs below.

Additional Pressures (£12.686m)

- 3.8 **Children's Services (£6.039m).** This includes the planned use of £1m of inflation provision.
- 3.9 The 2017-20 budget strategy provided for an investment approach for Children's Services which was to be sustained from the savings delivered. This meant that as the non-recurrent resources reduced, the placement budgets for 2018/19 and 2019/20 would need to make savings in order to sustain the current spend on social work and Early Help.
- 3.10 Whilst the Investment Strategy has made considerable progress in reducing expensive placements, this has not been at the pace budgeted for and, in line with the national position, the service is experiencing continued need.
- 3.11 **Health and Social Care (£2.807m)** The financial plan has been updated to reflect revised timelines to deliver savings, mainly relating to New Care Models. The underlying assumptions are broadly in line with the approved business cases, but the phasing of the delivery of benefits has changed to reflect differences in mobilisation and implementation. This has led to a pressure of £2.807m which will be mitigated within the directorate as set out in the Health and Social Care budget report.
- 3.12 **Homelessness (£3.840m)** The pressure is made up of:
- The demand for dispersed accommodation is continuing to rise at the current rate to 1,500 properties during 2019/20 - £1.3m.

- Bed and breakfast numbers being stabilised at existing levels from work ongoing to meet the need differently. The full year impact of current numbers would be an additional budget requirement of £1.740m.
- Additional capacity for Homelessness support to reduce caseloads - £0.8m.

Resources Review (£4.930m)

3.13 There has been a review of resources including an update to resources following the final Council Tax and Business Rates surpluses for 2017/18 and 2018/19 estimates; the announcement that Greater Manchester are to retain the 100% Business Rates pilot for 2019/20; completion of the latest Council Tax Base return and announcements on New Homes Bonus funding. These have a net impact of improving the position by £4.930m as follows:

- Council tax (£3.146m) Increased prior year surplus partly offset by slightly lower than forecast growth in Council Tax base.
- New Homes Bonus (£0.865m) - The estimate is based on the number of new properties as at October 2018. This assumes the government's growth threshold is increased to 0.8%, however, if it is retained at the current 0.4% a further £1m could be received. Confirmation is expected in early December.
- Business Rates (£0.919m) resulting from an increase in the prior year surplus and updated forecast income.

3.14 It is proposed that these additional resources are utilised to support the priority areas agreed with residents. However, further funding is required to deliver a balanced budget and Strategic Directors have put forward a number of recovery proposals to meet the budget requirement.

3.15 It should be noted that resources may change further following the Local Government Finance Settlement which is expected 6 December and confirmation of the forecast Council Tax and Business Rates positions in January 2019.

Officer recovery proposals (£15.508m)

3.16 One of the biggest risks to the delivery of any balanced budget is optimism bias in the level of savings achievable, any plan needs to be supported by evidence and be realistic. The proposals put forward are detailed in the individual Directorate Business Plans and involve:

- The requirement to identify some further savings/recovery proposals
- Allocation of any remaining unallocated and ongoing corporate budgets such as inflation to the best effect to address budget pressures
- Increasing the Looked After Children's (LAC) reserve from one-off income in order to support delivery of a revised strategy for Children's Services and address need. The detailed proposals will be presented to the Children and Young People Scrutiny Committee.

- 3.17 Officer proposals have been developed for detailed discussion at the relevant scrutiny committee, the table below summarises these by directorate. The recovery is being managed by careful application of the council's resources (£6.1m), risk share contribution from the pooled budget (£4m) and revised savings proposals (£5.4m). It is important to note that joint funding for commissioning as part of the pooled budget for Health and Social Care will need to be formally agreed at MHCC Board as part of finalising the budget.

Table Three: Officer Proposals by Directorate

Directorate	Proposed Savings £'000	Grant income and other resources £'000	Total 2019/20 Recovery £'000
Children's Services	776	3,000	3,776
Adult Social Care	1,625	5,382	7,007
Homelessness	440	1,400	1,840
Corporate Core	1,189	0	1,189
Neighbourhoods Directorate	376	300	676
Strategic Development	1,020	0	1,020
Total Directorate Budgets	5,426	10,082	15,508

4 Revised Position Budget Position 2019/20

- 4.1 Requests for additional funding to meet the spending proposals outlined in this report and detailed within Directorate Business and Budget Plans remain subject to Scrutiny and Executive consideration. Should all the requests and recovery proposals be agreed there will be a resource gap in 2019/20 of £1.2m.
- 4.2 As stated earlier in the report, the options for closing this gap will include the application of the one-off grant in 2019/20 for Adult and Children's Social Care announced as part of the Chancellor's Autumn Budget 2018 alongside the announcements arising from the Local Government Finance Settlement and potential further changes to resources from Council Tax and Business Rates which will be known in January 2019. A revised position will be brought forward as part of the updated budget proposals to be reported to Scrutiny Committees and Executive in February 2019.

Table Four: Proposed Revised Budget Position

	2018/19 £'000	2019/20 £'000
Resources Available		
Business Rates Baseline	316,597	323,290
Business Rates Top Up / (Tariff)	(19,015)	(39,853)
<i>Baseline Funding Level</i>	<i>297,582</i>	<i>283,437</i>
(Reduced) / Additional Business Rates Income	7,393	18,114
Business Rates Grants	19,778	19,563
Council Tax	154,070	164,869
Other non-ringfenced Grants	35,809	40,527
Dividends and Use of Airport Reserve	53,342	53,342
Use of other Reserves	8,188	4,490
Total Resources Available	576,162	584,342
Resources Required		
<i>Corporate Costs:</i>		
Levies/Charges	67,945	68,762
Contingency	3,103	2,100
Capital Financing	44,507	44,507
Transfer to Reserves	7,181	3,409
<i>Sub Total Corporate Costs</i>	<i>122,736</i>	<i>118,778</i>
<i>Directorate Costs:</i>		
Additional Allowances and other pension costs	10,030	10,030
Insurance Costs	2,004	2,004
Directorate Budgets	437,003	435,206
Inflationary Pressures and budgets to be allocated	4,389	19,539
<i>Total Directorate Costs</i>	<i>453,426</i>	<i>466,779</i>
Total Resources Required	576,162	585,557
Shortfall	0	1,215

5 Scrutiny of the Draft Budget Proposals and Directorate Budget reports

- 5.1 The Directorate Business Plans are attached for the Committee's consideration. These reports contain details of how the Directorate will support the delivery of the Council's priorities as set out in the Our Manchester Strategy.
- 5.2 The Committee is invited to consider the proposals which are within its remit, alongside the draft Directorate budget reports and business plans and to make recommendations to the Executive before it agrees the final budget proposals.

6 Next Steps

- 6.1 Recommendations from the Scrutiny Committees will be considered by Executive at its meeting in January 2019 when it considers the draft budget proposals. These will incorporate any changes arising from the Local Government Finance Settlement and other funding announcements which are expected in early December.
- 6.2 The Executive will agree its final budget recommendations on 13 February 2019.
- 6.3 These recommendations will be considered by the Resources and Governance Scrutiny Committee at its special budget meeting on Monday 25 February. Chairs of the other five Scrutiny Committees will be invited to attend this meeting to articulate the views of their Committee regarding the proposals. The Council will then make its final decisions and will set the budget on 8 March 2019.
- 6.4 The timeline is detailed below. It is aligned with MHCC funding announcements and approvals. The pooled budget for Health and Social Care will need to be formally agreed at MHCC Board as part of finalising the budget.

Table Five: Budget Timeline

Dates	Milestones
December 2018	Consider Autumn Budget announcements and Directorate Business Plans for 2019/20. Identify consultation requirements.
4-6 December	Scrutiny Committees will consider the draft budget report and Directorate business plan(s) relevant to their remit
Early December	Local Government (Provisional) Finance Settlement issued and other funding announcements
Mid December	Publication of health and care national guidance and funding settlement
16 January 2019	Executive to consider draft budget proposals.
5-7 February	Scrutiny Committees to consider the updated budget position and make recommendations to Executive (13 February) and then on to Council in March, taking into account any consultation feedback
8 March	Council - Budget Approval and Council Precept Approval 2019/20 MHCC - Approve Final Budgets for the Pool (27 March)

- 6.5 Early next year work will begin on the budget requirements for 2020/21 and beyond. This is in the context of considerable changes to Local Government Funding including the outcome of the Spending Review, changes to how local government funding is distributed, changes to the Business Rates Retention

scheme, and the Green Paper on the future of Adult Social Care funding and interaction with the NHS 10-year plan.

7 Conclusions

- 7.1 The Council remains committed to the priorities within the three-year strategy 2017-20 which followed consultation with Manchester people on what services matter most to them.
- 7.2 The proposed 2019/20 budget has been adjusted to reflect changes arising following the first two years of the strategy, including increased service need, partly met by financial benefits generated from the City's growth.
- 7.3 In July 2018, an in-year overspend of £13.7m was forecast for 2018/19, this was reduced to £6.1m as reported in October through recovery plans. Work is ongoing to close this further, including the effective use of one-off resources and continuing budgetary controls. The full-year effect of the position in 2018/19 has been reflected in the 2019/20 proposals.
- 7.4 The 2019/20 original gap of £8.967m could be reduced to £1.215m if the proposed actions set out in this report are supported. Consideration must be given to closing the remaining gap. Potential options include application of additional funding expected following the Autumn Budget announcements, confirmation of funding in the provisional finance settlement expected early December and any changes to Council Tax or Business Rates when figures are finalised in January.

8 Recommendations

- 8.1 The recommendations appear at the front of this report.

Appendix 1**Corporate Plan Priorities**

Theme	Priority
Young people <i>From day one, support Manchester's children to be safe, happy, healthy and successful, fulfilling their potential, and making sure they attend a school graded 'good' or better</i>	• Ensure all children have high-quality education
	• Support more Manchester children to have the best possible start in life and be ready for school and adulthood
	• Reduce the number of children needing a statutory service.
Healthy, cared-for people <i>Work with partners to enable people to be healthy and well. Support those who need it most, working with them to improve their lives</i>	• Support Mancunians to be healthy, well and safe
	• Improve health and reduce demand by integrating neighbourhood teams that are connected to other services and assets locally, delivering new models of care.
	• Reduce the number of people becoming homeless and enable better housing and better outcomes for those who are homeless.
Housing <i>Ensure delivery of the right mix of good-quality housing so that Mancunians have a good choice of quality homes</i>	• Accelerate and sustain delivery of more housing, with enough affordable housing for those on low and average incomes, and improved quality of housing.
Neighbourhoods <i>Work with our city's communities to create and maintain clean and vibrant neighbourhoods that Mancunians can be proud of</i>	• Enable clean, safe, vibrant neighbourhoods
	• Reduce greenhouse gas emissions and improve air quality.
Connections <i>Connect Manchester people and places through good-quality roads, sustainable transport and better digital networks</i>	• Improve public transport and highways, and make them more sustainable
	• Facilitate the development of the city's digital infrastructure, to enable delivery of transformed public services and support a thriving digital

Theme	Priority
	economy.
Growth that benefits everyone <i>To support our priorities, we need to continue to promote and drive sustained economic growth and job creation that benefits everyone</i>	<ul style="list-style-type: none"> • Support good-quality job creation for residents, and effective pathways into those jobs.
	<ul style="list-style-type: none"> • Facilitate economic growth of the city
Well-managed council <i>Support our people to be the best and make the most of our resources</i>	<ul style="list-style-type: none"> • Enable our workforce to be the best they can be through the Our People Strategy and Our Manchester behaviours
	<ul style="list-style-type: none"> • Balance our budget, including delivering savings, reducing demand through reform, and generating income.

Manchester City Council Report for Resolution

Report to: Health Scrutiny Committee – 4 December 2018

Subject: Manchester Health and Care Commissioning Pooled Budget 2019/20, including Adult Social Care

Report of: Bernadette Enright – Director of Adult Social Care, Ian Williamson – MHCC Chief Accountable Officer

Summary

Manchester Health and Care Commissioning (MHCC) is responsible for commissioning health, adult social care and public health services for the city of Manchester. Building upon its establishment in April 2017, MHCC has operated a single planning, delivery and assurance process since April 2018. This has overseen all of MHCC's commissioning responsibilities and includes single budget arrangements.

This report sets out the priorities for MHCC during the 2019/20 financial year. It describes the MHCC's operational plan and progress towards the vision set out in the Our Manchester Strategy. The report provides an update on MHCC's financial plan for 2019/20, reflecting the Manchester Health and Care Locality Plan and Adult Social Care Business Plan for the period 2017-2020. The report sets out both the progress made to date in delivering savings and the focus over the next year of the three year plan. The report is a refresh of the Joint Financial Plan for MHCC for 2018-20 in the context of changing resources, challenges and opportunities – with a specific focus on the Adult Social Care and Population Health components of the plan.

Recommendations

The Committee is invited to review and comment on the Manchester Health and Care Commissioning Business Plan.

Wards Affected: All

Manchester Strategy Outcomes	Summary of the Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Supporting the City in driving forward the growth agenda with a particular focus on integrated commissioning and delivery which will focus on utilising available resources effectively and developing a diversity of providers including entrepreneurs and social

	enterprises. This will provide opportunities for local jobs
A highly skilled city: world class and home grown talent sustaining the city's economic success	Integrated commissioning will focus on utilising available resources to connect local people to education and employment opportunities, promoting independence and reducing worklessness. Working with schools to engage and support our communities.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	The focus is on changing behaviours to promote independence, early intervention and prevention, the development of evidence-based interventions to inform new delivery models integration with partners where appropriate.
A liveable and low carbon city: a destination of choice to live, visit, work	Development of integrated health and social care models and local commissioning arrangements that connect services and evidence-based interventions to local people and enable families and their workers to influence commissioning decisions aligned to locally identified needs. Schools as community hubs playing an essential role in reaching out to communities and leading early intervention and prevention approaches at a local level
A connected city: world class infrastructure and connectivity to drive growth	N/a

Full details are in the body of the report, along with implications for:

- Equal Opportunities
- Risk Management
- Legal Considerations

Financial Consequences for the Capital and Revenue Budgets

The proposals set out in this report forms part of the preparation of the Council's draft revenue and capital budget for 2019/20 and revenue contribution to the Manchester Health and Care Commissioning Pooled Budget for Adult Social Care for approval by the Executive in February 2019.

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Background documents (available for public inspection):

Adult Social Care Budget and Business Plan 2018-20 and Manchester Health and Care Commissioning Joint Financial Plan 2018 - 2020 - Executive – 7 February 2018

1. Introduction

- 1.1 Manchester Health and Care Commissioning (MHCC) is a partnership between the City Council and Clinical Commissioning Group (CCG) responsible for commissioning health, adult social care and public health services for the city of Manchester. Building upon its establishment in April 2017, MHCC has operated a single planning, delivery and assurance process since April 2018. This has overseen all of MHCC's commissioning responsibilities and includes single budget arrangements.
- 1.2 The Adult Social Care Business Plan for the period 2017-2020 reflected the Manchester Health and Care Locality Plan. This report sets out in broad terms the key priorities, key activities and draft revenue and capital strategy for 2019/20 for adult social care and public health as part of MHCC. It is a refresh for adult social care and public health of the joint financial plan for MHCC for 2018-20 in the context of changing resources, challenges and opportunities. The report sets out both the progress made to date in delivering savings and the focus over the next year of the three year plan.
- 1.3 Taken together with the other Directorate plans, the plan will show how the MHCC partnership will work together and with other partners to progress towards the vision set out in the Our Manchester Strategy.

2. The Business Plan

- 2.1 The Locality Plan, 'Our Healthier Manchester', represents the first five years of ambitious, transformational change needed to deliver this vision. The MHCC Operational Plan for 2019/20 incorporates the plan for adult social care and public health which is set out from paragraph 4 below and includes:
 - Contribution to delivery of our Corporate Plan priorities
 - The vision and objectives
 - A self-assessment of key challenges for 2019/20
 - The revenue strategy
 - The capital strategy/programme
 - Other considerations
- 2.2 A more detailed plan will be submitted to Scrutiny Committees and Executive in February which will update the position and take into account the comments of this Committee.

3. Delivering Our Plan

- 3.1 A key priority of the Our Manchester Strategy is to radically improve health and care outcomes in the city. Manchester has some of the poorest health outcomes in the country, and there are very significant health inequalities within the city.
- 3.2 The Locality Plan, 'Our Healthier Manchester', represents the first five years of ambitious, transformational change needed to deliver this vision.

- 3.3 The Locality Plan is fully aligned with the Our Manchester approach. 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.
- 3.4 The strategic aims of Our Healthier Manchester are to:
- Improve health and well-being in Manchester
 - Strengthen the social determinants of health and improve healthy lifestyles
 - Ensure services are safe, equitable, and of a high standard, with less variation
 - Enable people and communities to be active partners in health and well-being
 - Achieve a sustainable system
- 3.5 The Locality Plan will be the main driver of the priorities within the MCC Corporate Plan regarding healthy, cared-for people, which are:
- Support Mancunians to be healthy, well and safe
 - Improve health and reduce demand, by integrating neighbourhood teams that are connected to other services and assets locally, and delivering new models of care
- 3.6 Strengthening the social determinants of health is central to the Locality Plan, and will be influential in delivering other MCC Corporate Plan priorities, such as:
- Reduce the number of people becoming homeless, and enable better housing and better outcomes for those who are homeless
 - Reduce the number of children needing a statutory service
 - Support more Manchester children to have the best possible start in life and be ready for school and adulthood
 - Support good quality job creation for residents and effective pathways into these jobs
 - Balance our budget, including delivering savings, reducing demand through reform, and generating income
- 3.7 The Manchester Locality Plan describes a clear ambition for a healthier city, underpinned by integration, including the establishment of a 'Single Commissioning Function' in the form of the MHCC Partnership. The Partnership was established on 1 April 2017, enabled by a pooled budget of over £1.1 billion between the City Council and CCG.
- 3.8 The Partnership is currently planning for its third year of operation as an integrated health and care commissioner; seeking to strengthen MHCC's joint arrangements through improved business and financial planning, to ensure that the pooled budget is directed towards joint priorities that will improve the health and wellbeing of Manchester's residents and wider healthcare population.
- 3.9 This paper articulates the approach to date and work remaining, to support Council and CCG budget and service plan approvals by March 2019.

4. Vision and Objectives

Health and Social Care integration

- 4.1 The MHCC Operational Plan for 2019/20 sets out five key priorities for the health and social care system. Delivering these five priorities will drive the strategic aims of the Locality Plan set out above. These are:
1. Key enabling programmes, including – embedding the Our Manchester approach, demonstrating impact through effective evaluation, organisational development, full use of Manchester Care Record
 2. Tackle health inequalities, including – delivering the Population Health Plan, inclusion health, and the wider determinants of health and well-being
 3. Transforming community based care, including – delivering health and care in neighbourhoods, embedding new models of care, primary care, residential, nursing and homecare, cancer, mental health, learning disabilities, and children's health transformation
 4. Hospital based care transformation – Single Hospital Service, link with GM hospital improvements, and performance improvements
 5. System transformation – delivering financial balance, provider changes

Manchester Local Care Organisation (MLCO)

- 4.2 MLCO went live on 1 April 2018 and is in the process of integrating health and care in communities, and embedding new models of care. MLCO mainly fits within priority number three above, but has important links to all five priorities. The current MLCO priority areas of work are:
1. Integrated neighbourhood teams for 12 neighbourhoods in Manchester, integrating social care, primary care, mental health and community care – and connecting outwards to the wider assets and services in neighbourhoods
 2. Manchester Community Response, as an integrated set of services for people who need short-term support – including Crisis Response, expanding the Reablement service, and Discharge to Assess. This approach is established in North Manchester, now live in Central Manchester, and will go live in South Manchester in 2019
 3. High Impact Primary Care, which is an multi-disciplinary intensive support service for people with the most complex care needs who place the highest demand on the system as a whole

Adult Social Care Priorities

- 4.3 Adult Social Care is a core part of the integrated set of services in the Local Care Organisation. It is primarily located within priority number three of the MHCC plan, but has links across all five priorities. The priorities for adult social care in 2019/20 are:
1. Continuing to improve the delivery of business as usual – our statutory

duties under the Care Act (individual well-being, prevention, integration, information advice and advocacy, care markets, safeguarding, assessment, charging, care planning and personal budgets)

2. Adult social care improvement work to put the right foundations in place through work to embed streamlined process, effective practice, and an enabled workforce with the right resources in place to manage demand. This work is focused on strengthening our:
 - Assessment function including social work and primary assessment team
 - Provider services including our supported accommodation, reablement and supporting independence services
 - Safeguarding and Quality Assurance functions
3. System-wide work on integration and transformation, through
 - New models of care (e.g. reablement expansion, assistive technology, extra care housing, Our Manchester homecare, development of new approaches to residential and nursing care)
 - Effectively meeting need - implementing strengths based approaches, expanding shared lives, mental health improvement
 - Transformation workstreams (e.g. expansion of reablement, assistive technology, integrated front door, learning disabilities)
 - Integrating adult social care into the MLCO (e.g. social work practice and processes within the Integrated Neighbourhood Teams)

- 4.4 The adult social care improvement work will identify issues with the current services, work with the service to make improvements and plan for the future as well as ensure that the service is strengthened and integrated within the MLCO.

Manchester Population Health Priorities

- 4.5 The Directorate of Population Health and Wellbeing is an integral part of MHCC and incorporates the statutory functions and mandated responsibilities for Public Health at the City Council. The Director of Public Health retains a reporting and accountability link back to the City Council. The mandated responsibilities include delivery of the Healthy Child Programme and National Child Measurement Programme, Health Protection, NHS Health Checks, Open Access Sexual Health Services
- 4.6 The MHCC Operational Plan for 2019/20 reflects the five priorities contained in the Manchester Population Health Plan agreed by the Health and Wellbeing Board in March 2018. The implementation of programmes relating to these priorities is led by the Population Health and Wellbeing Team. The priorities are:
 - Priority 1 – Improving outcomes in the first 1,000 days of a child's life
 - Priority 2 – Strengthening the positive impact of work on health
 - Priority 3 – Supporting people, households and communities to be socially connected and make changes that matter to them
 - Priority 4 – Creating an age-friendly city that promotes good health and

- wellbeing for people in mid & later life
- Priority 5 – Taking action on preventable early deaths

4.7 Successes during 2018/19:

- The Manchester Local Care Organisation went live on 1 April 2018
- Extra Care – additional investment has enabled 20 new Neighbourhood Apartments to be operational, providing short term accommodation to help stabilise and re-able people with longer-term housing needs
- Re-ablement – expansion of the existing service in order to help more people stay safe in their homes for longer – 59/62 new staff have been recruited and 42 have started in post by November 2018. A new Discharge to Assess service and Complex Reablement service have also been developed
- Prevention – Community Links for Health service has commenced in Central and South, 8/12 Health Development Coordinators are now in place
- A new approach to delivering homecare – Our Manchester Homecare – is now out to tender, to go live in April 2019. This is built around the strengths of each person cared for, the outcomes that matter to them, continuity of care, a place-based approach, and with higher pay and increased skills for staff
- Over 270 people have now been enrolled into the High Impact Primary Care programme by October 2018, which is now live in North, Central and South
- All of the above should impact by reducing demand for acute and secondary care including A&E attendances, non-elective admissions to hospital, and the costs of residential and nursing care

5. Self-assessment of key challenges 2019/20

Health and Social Care integration

- 5.1 The MHCC priorities for 2019/20 set out in section 2 above have been informed by an assessment of key information and data, and by engaging partners, the workforces and the Patient and Public Advisory Group. Information sources included:

- Development of an 'evidence funnel' which provides consistent processes for how information is collated and utilised by MHCC to generate intelligence and Joint Strategic Needs Assessment
- Engagement with Senior Leadership Team
- Review of progress against the 2018/19 Operational Plan and assessment of progress made by key workstreams
- Commissioning Intentions
- Review of the requirements for delivering the Locality Plan
- Review of Greater Manchester plans and programmes

Health and Social Care system-wide performance

- 5.2 MHCC Board receives a monthly report summarising the quality and performance highlights for the whole health and social care system. The report covers key national, regional and local key performance indicators. The November 2018 report is available to read here:

https://www.mhcc.nhs.uk/wp-content/uploads/2018/11/3.1-PQI-One-Report_Nov-2018_RPdraftv0.3_19.11.2018-1.pdf

- 5.3 Some of the key measures of quarterly performance across the system and on new models of care are as follows:

- Delayed Transfers of Care increased 1.4% in the first two quarters of the year in comparison with same period in the previous year.
- In the first quarter of 2018/19 there was 8.5% increase in the number of A&E attendances for individuals within the target cohort compared with the same period in the previous year.
- In the first quarter of 2018/19 there was 22.4% increase in the number of non elective admissions for individuals within the target cohort compared with the same period in the previous year.

5.4 Adult Social Care performance

- Admissions to Nursing Care improved (reduced) by 6% (4 admissions) in the first 5 months of the year in comparison with the same period in the previous year while admissions to Residential Care didn't change.
- After two consecutive months of decreases in the number of hours of homecare there has been an increase of 1.9% (428 hours) in comparison with the previous month and 5.7% (1998 hours) in comparison with same period in 2017.
- Targeted work by the Acting Director of Adult Social Services (DASS) will be required to address improvements in performance including backlogs in assessments, reassessments and reviews.
- In the first 7 months of the financial year 51.8% (494 out of 953 people) left reablement with no further care commitments, this is under the 54% target, but 4.1% better than the previous year.
- 977 citizens have been accepted in reablement between April and October 2018, the target for the same period was 1610 citizens.
- 8 out of 11 (72.7%) services provided directly by MCC currently have Good CQC rating and 3 are rated as 'Requires Improvement'
- Social care-related quality of life score, based on results of the statutory annual Adult Social Care Survey, decreased from 18.4 in 2017 to 18.3 in 2018.

5.5 Finance and value for money

- The financial position at the end of October 2018 is an overspend of £3.415m for Adult Social Care with £3.537m relating to the MHCC Pooled Budget for ASC and an underspend of £122k on the Adults

- Safeguarding budget with is out of the scope of the pooled budget
- The reason for the pressure on the pooled budget in 2018/19 is largely from the delayed implementation of the new care models and the non delivery of other savings. Demography funding of £3.766m has been applied to support the reported budget position based on estimated growth in demand since the start of the year.
- There is a budget pressure of c£1.1m on Agency staff for in-house services which is now part of MLCO. A recovery plan for this pressure is in development by MLCO.
- The reported budget position is supported by significant non-recurrent resource from the Adult Social Care grant.

5.6 Workforce

- Enabling the workforce to be resilient, effective, creative, ambitious and innovative through embedding Our Manchester and developing a culture of trust, honesty and empowerment is critical and we are committed to plan for the future workforce. There is a commitment to ensure staff are equipped with the skills and knowledge needed to be able to work in an Our Manchester way. We are supporting our managers through Our Manchester Leadership and Raising the Bar training.
- It is essential that we continue to embed the Our Manchester approach and behaviours throughout the workforce and in the services approach to delivery. A key enabler in delivering the priorities set out in this plan is enabling staff to understand, buy in to and have tools and techniques to start to work in an Our Manchester strengths based way. A system-wide programme for all staff across all parts of the system is under development, building on the existing Our Manchester experience and expanding it's remit so that it is more more reflective of partnership working and that there is a stronger focus on enabling staff to develop practical tools and techniques to apply the approach in their workplace. The programme comprises a range of inter-connected parts including building rapport, Our Manchester context, introduction to strengths, hearts and minds and the Our Manchester behaviours, practical tools and techniques for working in a strengths based way, connecting people and place and moving to activation. The programme has been co-designed with broad input from staff across the system and is subject to testing in December and January before being rolled out from February with an initial priority focus on the MLCO workforce.
- Average of 14 days per FTE employee lost to sickness over the last 12 months, 14% decrease in comparison with the previous year and about 2 days higher than MCC average. There is a projected overspend of £969k in Adults when including recruitment assumptions. Overspends of c.£1.500m continue to relate overwhelmingly to agency usage within In-house Services. Work continues to reduce agency usage, including the flexible deployment of staff cover pressure areas, continued close scrutiny of the staffing rota system, addressing sickness levels and

ongoing planned recruitment to vacant roles.

5.7 Governance and assurance

- Manchester's health and social care governance arrangements sit within MHCC and be led through MHCC's Executive committee, reporting to the Board. City Council representation includes at least one Executive Member and another position nominated by an Executive Member, currently the City Council Chief Executive, with the City Treasurer in attendance.
- The City Council has entered into a partnership to formally establish the Local Care Organisation (LCO) and to ensure the delivery of integrated health and social care services. The partnership comprises four provider organisations Manchester City Council, Manchester Foundation Trust, Manchester Primary Care Partnership and Greater Manchester Mental Health. Each of the four partners have two places on the LCO Board and one vote. For Manchester the LCO Board is represented by an Executive Member and another position nominated by the Executive Member, currently the Deputy Chief Executive.
- Manchester City Council and NHS Manchester CCG have agreed a pooled single commissioning budget for health, adult social care and public health from April 2018 with a Section 75 Partnership Agreement and Financial Framework. There is the Manchester Agreement, which sets the overall financial context for health and social care, including detailed financial and activity assumptions.

6. Revenue Strategy

- 6.1 The 2018 budget at the end of October confirmed the Government's commitment to growth for the NHS of £20.5 billion across the next five years. Funding is expected to be front loaded in the first two years of the spending settlement at 3.6%, resulting in an estimated additional £4.1 billion extra national funding in 2019/20. Organisational level funding remains to be confirmed. It is expected that the first priority in terms of the use of this funding will be towards provider and commissioner sustainability funding, and transformation funding.
- 6.2 The 2018 budget also announced a Social Care Support Grant for adults and children's social care £650m. Within this is a continuation in 2019/20 of £240m winter pressure funding provided in 2018/19 to ensure that adult social care pressures do not create additional demand on the NHS. The Winter Pressures grant for Manchester is £2.666m in both 2018/19 and 2019/20 and is required to be pooled and reported on as part of the Better Care Fund. The proposals for the City Council funding have been endorsed by the MLCO Executive Committee and will be presented to MHCC Executive later in November and then for approval to the Council's Executive in December. This leaves £410m nationally of which £4.555m is for Manchester to improve the social care offer for adults and children's social care in 2019/20.

- 6.3 The Government's Green Paper regarding care and support for older people was expected later this year linked to the 10 year NHS plan. It is hoped that the paper will set out plans to improve care and support for older people and tackle the challenge of an ageing population. The Ministry of Housing, Communities and Local Government (MHCLG) has also consulted on proposed changes to the Adult Social Care Relative Needs Formula. The present formula has been in place since 2005/06, with some elements using the 2001 Census information. It is likely that it will be 2020/21 before any changes are now concluded.
- 6.4 The Council's element of the Manchester Health and Care Commissioning (MHCC) Pooled Budget relates to Adult Social Care services, excluding Homelessness, Voluntary and Community Sector grants and the Adults Safeguarding service. Table 1 sets out the base budget for Adult Social Care in 2018/19 of £180.290m of which £4.213m is out of scope of the pooled budget and £176.077m is in the scope of the pooled budget.

Table 1: 2018/19 Base budget

Adult Social Care Budget	2018/19 Gross Budget £'000	2018/19 Net Budget £'000	2018/19 Budgeted Posts (FTE) £'000
Asylum	2,911	57	8.00
Commissioning	2,040	1,819	-
Safeguarding	2,544	2,337	40.50
ASC budget outside of pool	7,495	4,213	48.50
Assessment / Support	8,559	6,140	223.86
Care	66,536	41,122	335.59
Commissioning	9,515	8,979	32.20
Business Units	5,444	5,129	468.80
Learning Disability	59,297	51,989	46.65
Mental Health	25,219	23,192	7.00
Public Health	39,428	37,275	44.36
Back Office	10,392	2,250	-
ASC budget in MHCC pool	224,389	176,077	1,158.46
Total ASC cashlimit budget	231,884	180,290	1,206.96

- 6.5 The approved 2018/19 baseline position for the MHCC pooled budget was £186.475m. After taking account of adjustments and changes to allocations during 2018/19 the revised baseline pooled budget contribution for 2018/19 is £176.077m.

Table 2: 2018/19 Pooled Budget

Reconciliation of cashlimit to approved pooled budget contribution	2018/19 Net Budget £000
Proposed Pooled Budget	186,475
Less changes in 2018/19:	
Inflation applied to Homelessness	1,265
Reduction in estimated inflation for ASC	1,525
National Living Wage not required from 2017/18	383
MHCC Pooled Budget Contribution not in cashlimit	4,000
Business Support (pending trf from Children's)	2,957
Corporate savings/adjustments	268
	10,398
MHCC Cashlimit Total	176,077

- 6.6 The new care models and savings schemes approved for the 2018-20 budget remain as planned but the delivery of benefits and cost of models have changed to reflect phasing and mobilisation. A re-assessment of the estimated costs and benefits from new care models based on the business cases has changed the gross savings and investment relating to individual care models.
- 6.7 For new care models most of the Adult Social Care saving will fall to Homecare and Residential and Nursing budgets. The latest position is as follows:
- **Assistive Technology Scheme** - Medicines support pathway which could include automated medication dispenser and Comprehensive 'Front Door' Assistive Technology offer, which will provide support to elderly people and those with long term health conditions. For 2018/19 gross savings from the Homecare budget of £2.399m were estimated. Both elements of Assistive Technology are in the very early stages of development and as a result no cost savings are expected to be delivered for 2018/19. For 2019/20 gross savings of £1.422m are estimated.
 - **Extracare** – In 2018/19 this involved the introduction of Village 135 scheme and the provision of 20 new Neighbourhood Apartments within Extra Care or Retirement Housing to allow older people to benefit from a short stay at a time when their needs are changing and their full potential or recovery level is unclear. The original estimate of savings was £2.254m for 2018-20. Due to delays in further schemes starting as a result of previous uncertainties over government funding, most of the savings and investment for 2019/20 are expected to be delayed to 2020/21. There are projected financial savings from Residential and Nursing budgets of £1.281m. The current forecast is that all of these savings will be delivered in 2018/19.
 - **High Impact Primary Care** - This work programme provides primary care-led, proactive, intensive person-centred support for the 2% of people living

with the most complex medical and social needs and those who are the most frequent users of acute care services. There are financial savings in 2018/19 of £504k from Homecare and Residential and Nursing budgets which will have not been delivered in 2018/19. For 2019/20 the gross savings of £446k are estimated.

- **Reablement** – The service aims to provide up to 6 weeks of reablement support to people with the aim of stabilising their situation and making them safe. Complex re-ablement is a new complex pathway service model to support citizens to remain in the community for as long as is feasible. For 2018-20 there were estimated savings of £3.374m from Homecare and Residential and Nursing budgets. The current forecast is that £661k of these savings will be delivered in the last six months of 2018/19. For 2018-20 gross savings of £3.588m are now estimated.
- **Prevention** programme has three elements - Community Links for Health, Health Development Coordinators and Community Capacity Fund. There are financial savings in 2018-20 of £1.369m from Residential and Nursing budgets. The current forecast is that none of these savings will be delivered in 2018/19. For 2019/20 the gross savings are estimated at £356k.

6.8 There are other planned savings from adult social care, most of which are unchanged for 2018-20 although there have been some delays in delivery.

- **Contract Review** - There is a savings target for ASC of £500k in 2018/19 this involves a review of contracts related to commissioned services. The aim was to achieve £500k of savings by identifying a number of contract related efficiencies. The current forecast is that none of these savings will be delivered in 2018/19 and are delayed until 2019/20.
- **High Cost Placements** - Savings of £950k for 2018/19 and further savings of £500k for 2019/20, following savings of £1.2m achieved in 2017/18. A full analysis has been undertaken of the 1,099 people with Learning Disabilities, which includes reviewing the type of provision that they are receiving. These savings are on track to be delivered.
- **Public Health** - 545k of savings achieved has been identified against activity contracts.
- **Recommissioning of low value packages** - There is a savings target for ASC of £250k in 2018/19 and further £250k in 2019/20. This work programme intended to review the individual adult social care support packages of individual who have a support package value less than £100. A sample review of 60 individuals which identified that there was very limited scope for any potential cost savings as most people were actually receiving statutory support. As a result the work programme is no longer being pursued as a separate saving and where it is identified that savings may be deliverable from low value packages of care the

process of reviewing these packages of care will now take place as part of the new Strengths Based Assessment work programme (below).

- **Strengths based support planning** - The 2018-20 budget included a savings target of £775k in 2018/19 from a review of the Resource Allocation System particularly with use around Learning Disability packages of care. The intention was to move towards a strengths based approach as a model for reform and identifying opportunities for applying the approach in the short, medium and long term. The proposed approach is based on a 'creative, whole life care and support journey' with individually designed outcomes based on 'personalisation', a Resource Allocation Approach (RAA) that links to need and complexity and development of a community asset approach. This project is being developed with a focus in two areas:
 - A strengths based review of Mental Health adult social care individuals is being developed by Greater Manchester Mental Health. This is expected to provide reductions in the overall cost of packages of care.
 - A workforce development exercise which involves training all social care staff in the strengths based assessment approach which encourages a more holistic way to reviewing individuals. This part of the work programme may also involve reviewing the current RAS process to reflect the strengths based approach.
- **Homecare** - Savings of £750k are estimated for 2019/20 based on financial models that supported the approved proposal. Bids are currently being reviewed by MCC Corporate Procurement and MHCC is determining the mobilisation plan to ensure that reviews are up to date and to ensure a smooth hand over of services between existing providers and new providers from April 2019.

6.9 The 2018-20 the financial plan has been updated to reflect revised estimated savings, this has led to a reduction in planned gross savings of £2.8m to £7.1m. Some of the gross savings were intended to fund the ongoing cost of the models, this shortfall is mitigated in part by a reduction in estimated costs of £1.4m. To mitigate the remaining shortfall in savings of £1.4m, unspent ASC grant earmarked for Reablement in 2018/19 will be carried forward to 2018/19 to part fund the Reablement model in 2019/20. From 2020/21 care models will be funded from savings.

6.10 Budget planning for the City Council proposes a further savings requirement for directorates which includes an additional £200k from Adult Social Care which would mean increased planned savings to £8.737m for the 2018-20 period. It is proposed that the additional savings are identified from the Learning Disability budget from an expansion of the existing Shared Lives programme (£150k) and further new care model investment (£50k). Appendix 3 provides the savings schedule showing the original planned savings for 2018-20 and the proposed revised savings.

6.11 In addition to savings a proposed £4m risk share contribution from the pooled budget (subject to approval by MHCC Board) is reflected in the recovery proposals for the adult social care budget for 2019/20.

6.12 The table below shows the revised position on the budget reflecting the changes set out above.

Table 3: 2019/20 proposed changes and revised budget

Service Area	Approved MTFP				2019/20 Identified pressures £'000	2019/20 Recovery proposals £'000	Proposed 2019/20 Net Budget £'000
	2018/19 Net Budget £'000	Approved savings £'000	Investment and other changes £'000	2019/20 Net Budget £'000			
Assessment/Support	6,140	(37)	(192)	5,911	0	0	5,911
Care	41,122	(3,963)	(2,004)	35,155	1,735	(500)	36,391
Commissioning	10,798	0	0	10,798	0	0	10,798
Business Units	5,129	0	0	5,129	0	0	5,129
Learning Disability	51,989	(375)	(585)	51,029	0	(150)	50,879
Mental Health	23,192	(125)	217	23,284	0	(775)	22,509
Public Health	37,275	10	0	37,285	0	0	37,285
Safeguarding	2,337	0	0	2,337	0	0	2,337
Asylum	57	0	0	57	0	0	57
Back Office	2,250	4,472	6,404	13,126	1,071	(5,582)	8,615
Total	180,290	(18)	3,840	184,112	2,807	(7,007)	179,912

6.13 For 2019/20 the budget approved in February 2018, included an investment requirement of £15.115m for adult social care, in addition to funding the national living wage, inflation and demography. After taking account of delivery of planned savings and reduction in the Adult Social Care Grant, this led to a pooled budget contribution of £194.796m in 2019/20.

6.14 The pooled budget contribution for adult social care in the cash-limit budget for 2019/20 is £175.699m. The reconciliation of this budget back to the proposed pooled budget for 2019/20 of £194.796m is shown in the table below.

Table 4: Proposed Pooled Budget

Proposed Pooled Budget Contribution for Adult Social Care 2019/20	2019/20 Net Budget £000
Proposed Pooled Budget	194,796
Less:	
Changes in 2018 (see Table 2)	10,398
19/20 inflation (est) to be allocated	4,241
19/20 National Living Wage (est) to be allocated	4,258
Additional Savings Target	200
MHCC Cashlimit Total	175,699

**Subject to approval by City Treasurer in consultation with Executive Member for Finance and Human Resources*

- 6.15 The revised MHCC Pooled Budget contribution for 2019/20 will be proposed to the Executive for approval as part of the final budget proposals in early 2019.

7. Capital Strategy / Programme

- 7.1 The capital programme for Adult Social Care totals £25.3m over the period 2018/19 -2021/22, this includes the creation of a health hub in Gorton. A summary of the current capital budget is shown in the table below, with the detailed projects shown in Appendix 2:

	2018/19 £m's	2019/20 £m's	2020/21 £m's	2021/22 £m's	Total £m's
Gorton Health Hub	1.4	10.2	8.6	2.6	22.8
Other	1.2	0.4	0.4	0.4	2.4
Total	2.6	10.6	9.0	3.0	25.2

- 7.2 Work is progressing on the design and tenancy framework for the Health Hub, which will bring together key organisations responsible for tackling worklessness and low skills.
- 7.3 The ongoing budget for capitalising community equipment, which previously has been funded from a revenue contribution, will be removed as this is now being funded through Disabled Facilities Grant.

8. Other Considerations

- 8.1 It should be noted that any changes proposed from business plans may require public consultation depending on their nature and impact on services. There remains a statutory requirement to consult business rate payers each year as part of the budget setting process.
- 8.2 The business plans submitted to Executive and Scrutiny Committees in February will include a full description of consultation and conversation with partners and other stakeholders that have taken place to develop the budget proposals, as well as the potential impact of proposals on different communities in Manchester and outcomes of equality analysis carried out and future Equality Impact Assessments required. Workforce implications will also be considered, including any required reduction in budgeted posts as well as strategic workforce development objectives for the service.

Appendix 1 - Revenue Financial Plan

Table showing an overall summary of financial position

Subjective Heading	2018-2019 Budget £'000	2019-2020 Indicative Budget £'000
Expenditure:		
Employees	43,102	43,102
Running Expenses	183,448	183,070
Capital Financing Costs	171	171
Contribution to reserves		
Total Subjective Expenditure	226,721	226,343
Less:		
Other Internal sales	0	0
Gross Expenditure	226,721	226,343
Income:		
Government Grants	(5,158)	(5,158)
Contributions from Reserves	0	0
Other Grants Reimbursements and Contributions	(22,304)	(22,304)
Customer and Client Receipts	(18,959)	(18,959)
Other Income	(11)	(11)
Total Net Budget	180,290	179,912

Appendix 2 - Capital Strategy / Programme table

Project Name	2018/19 £000's	2019/20 £000's	2020/21 £000's	2021/22 £000's	Total £000's
Adult Social Care Programme					
Capitalisation of Community Equipment	368	386	405	425	1,584
Phase 1 Implementation - Locality Plan Programme Office	874	0	0	0	874
Integrated Working - Gorton Health Hub	1,400	10,150	8,627	2,619	22,796
Total Adult Social Care Programme	2,642	10,536	9,032	3,044	25,254

Appendix 3 Adult Social Care Savings 2018-20		Approved Budget 2018-20 Cumulative Savings £,000	Proposed Budget 2018-20 Savings £,000	Change £,000
New Care Models Gross Savings				
Extra Care	Green	-2,254	-1,281	973
Assistive Technology	Red	-2,399	-1,422	977
Reablement Core / Complex	Red	-3,374	-3,588	-214
High Impact Primary Care	Red	-504	-446	58
Prevention	Red	-1,369	-356	1,013
Gross NCM savings		-9,900	-7,093	2,807
New Care Models Investment				
Extra Care		1,605	963	-642
Assistive Technology		1,079	469	-610
Reablement		2,531	949	-1,582
Carers		23	0	-23
Total Investment		5,238	2,381	-2,857
New Care Models - Net Savings		-4,662	-4,712	-50
Other ASC Savings				
Public Health	Green	-545	-545	0
High Cost Placements (Learning Disability)	Amber	-1,450	-1,450	0
Strengths Based Support - Mental Health	Red	-775	-775	0
Homecare outcomes based commissioning	Amber	-750	-750	0
Re-commissioning of low value packages	Red	-500	0	500
Contract Review	Red	-500	-500	0
Prepaid Cards for Cash	Amber	-200	-200	0
Individual Budgets				
Strengths Based Support Planning - All ASC Packages	Red		-500	-500
Shared Lives (net of £150k investment)	Red		-150	-150
Other ASC Savings		-4,720	-4,870	-150
Reversal of non-recurrent savings in 2017/18				
Minor Schemes		595	595	0
Adult Social Care Grant - non-recurrent		250	250	0
Total		845	845	0
Total		-8,537	-8,737	-200

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Manchester City Council Report for Resolution

Report to: Health Scrutiny Committee – 4 December 2018

Subject: Homelessness Business Planning: 2019/20

Report of: Eddie Smith - Strategic Director, Development

Purpose of the Report

This report sets out in broad terms the directorate's key priorities, key activities and revenue and capital strategy for 2019-20.

In the Business Plan for the period 2017-2020, directorates set out their proposed savings in the context of their objectives. This report sets out both the progress made to date in delivering these savings and the directorate's focus over the final year of the three year plan. This report is a refresh of the directorate's Business Plan for 2018-20 in the context of changing resources, challenges and opportunities.

Taken together, the directorate business plans show how the directorates will work together and with partners to deliver our Corporate Plan and progress towards the vision set out in the Our Manchester Strategy.

Recommendations

The Committee is invited to review and comment on the initial Homelessness Business Plan. The plan will be developed further taking the Committee's comments into account, and a revised plan will be submitted to the Committee's meeting on 5 February 2019.

Wards Affected: All

Manchester Strategy Outcomes	Summary of the Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Helping people to stay in their accommodation through prevention work will help them to thrive. Reducing the number of people who are homeless, or placing them in appropriate accommodation with help to access employment and learning opportunities will contribute to Manchester become a thriving and sustainable city.
A highly skilled city: world class and home grown talent sustaining the city's economic success	Having public, private and voluntary sector organisations working together to help people who have personal insight into homelessness

	into volunteering and employment will contribute to the objective of having a highly skilled city. Employment breaks the cycle of generational benefit dependency and will encourage children to access school and employment in later life.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	Supporting people who are homeless to access employment and accommodation will unlock their potential to help them become independent citizens who contribute to our city. Working with the Homelessness Partnership to ensure that the views of people with personal insight into homelessness influence ways of working.
A liveable and low carbon city: a destination of choice to live, visit, work	Encouraging commissioned and inhouse services to reduce CO2 emissions and reduce their use of plastics will contribute to a low carbon city. Introducing climate change conversations with homeless people will support them in adopting a low carbon lifestyle.
A connected city: world class infrastructure and connectivity to drive growth	n/a

Full details are in the body of the report, along with implications for

- Equal Opportunities
- Risk Management
- Legal Considerations

Financial Consequences for the Capital and Revenue Budgets

The proposals set out in this report forms part of the preparation of the Council's draft revenue and capital budget for 2019/20 to be reported to the Executive for approval in February 2019.

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Background documents (available for public inspection):

Adult Social Care Directorate Budget and Business Plan 2018 - 2020 -
Homelessness Part 2 - Executive - 7th February 2018

Update on the work to tackle homelessness and rough sleeping and the
Manchester Homeless Strategy - Neighbourhoods and the Environment Scrutiny
Committee – Wednesday 5th September 2018

1. Introduction

- 1.1 This report sets out in broad terms the directorate's key priorities, key activities and draft revenue and capital strategy for 2019/20. It is a refresh of the directorate's Business Plan for 2018-20 in the context of changing resources, challenges and opportunities.
- 1.2 In the Business Plan for the period 2017-2020, directorates set out their proposed savings in the context of their objectives. This report sets out both the progress made to date in delivering these savings and the directorate's focus over the final year of the three year plan.
- 1.3 Taken together, the directorate business plans show how the different parts of the Council will work together and with partners to progress towards the vision set out in the Our Manchester Strategy.

2. The Directorate Business Plan

- 2.1 The Directorate Business Plan is set out from paragraph three below and includes:
 - A description of the contribution that the directorate makes to delivery of our Corporate Plan priorities
 - The directorate's vision and objectives
 - A self-assessment of the directorate's key challenges for 2019/20
 - The revenue strategy
 - The capital strategy/programme
 - Other considerations
- 2.2 This represents the initial draft business plan for the Directorate. A more detailed plan will be submitted to Scrutiny Committees and Executive in February which will update the position and take into account the comments of this Committee.

3. Delivering Our Plan

- 3.1 The Homeless Service primarily aligns with the Corporate Plan theme of **Healthy, Cared-for People**. The objective for the service is to reduce the number of people becoming homeless and enable better housing and better outcomes for those people who are homeless. This is reflected in the three key aims of the new Homeless Strategy for the city.
- 3.2 The Service also contributes more widely to other themes in the Corporate Plan:
 - The Service will support **young people** experiencing or at risk of homelessness to have the best possible start in life and reduce the number of children needing a statutory service through early intervention and linking young people with early help hubs
 - The Service will establish a Private Rented Sector (PRS) team referring people to **housing** in a more timely way and to ensure it is of good

- quality
 - The Service will work with families and individuals to ensure they are supported to be good neighbours and tenants to maintain clean and vibrant **neighbourhoods** that Mancunians can be proud of
 - The Service will work closely with partners to help people who are homeless into volunteering and subsequently employment therefore contributing to sustained economic growth that benefits everyone
- 3.3 The Homeless Service will achieve these objectives by embracing the Our People strategy and Our Manchester behaviours. The Homeless Service knows that people are more important than processes, procedures or organisational boundaries. The Manchester Homelessness Partnership, consisting of people with personal insight into homelessness, and organisations working to reduce homelessness, have led the development of the Manchester Homelessness Charter and Homeless Strategy. The Our Manchester approach has been taken to significantly change ways of working and what is delivered. People with insight into homelessness have actively shaped the agenda and co-designed new approaches. We are committed to working together more, by building long term relationships and having honest conversations which give a say and role to both those who need services and those who provide them.
- 3.4 For our workforce, we will ensure our workforce can be the best they can be, through training, development and ensuring a work / life balance. Due to the pressure and demand in our service, balancing the budget and reducing demand through reform is essential.

4. **Vision and Objectives**

- 4.1 The vision for Homelessness within the city has been co-produced with the Manchester Homelessness Partnership, through development of the Homelessness Charter. The vision is to end homelessness and the Manchester Homelessness Partnership calls on the citizens of Manchester, the city council, healthcare and other public services, charities, faith groups, businesses, institutions and other organisations to adopt the values of the Charter and to implement it through improved working practices and working together in new way.
- 4.2 However, while homelessness remains, this charter provides guiding principles concerning the rights of people who are homeless or at risk of homelessness. We believe that everyone who is homeless should have a right to:
- A safe, secure home along with an appropriate level of support to create a good quality of life
 - Safety from violence, abuse, theft and discrimination, and the full protection of the law
 - Respect and a good standard of service everywhere
 - Equality of access to information and services

- Equality of opportunity to employment, training, volunteering, leisure and creative activities
- 4.3 We believe that those who work with homeless people have a collective responsibility to ensure that:
- Good communication, coordination and a consistent approach is delivered across all services
 - People with personal insight into homelessness have a voice and involvement in determining the solutions to their own issues, to homelessness, and in wider society
- 4.4 The Objectives that were agreed in 2017 in the three year business plan for the Council were:
- To continue with the focus on co-production with the Homelessness Partnership to ensure that we have listened to the views of people who have insight into homelessness and formulate policies, procedures and services with them at the heart of all we do. This is in line with Manchester City Council's pledge to the Charter and the Our Manchester approach. This will need to expand to include other households affected by homelessness, including families living in temporary accommodation.
 - To continue to work in partnership to support people who are living on the street to ensure they have access to accommodation and appropriate support.
 - To focus on early intervention and prevention to stop families and individuals from becoming homeless, preventing disruption to the lives of adults and children
 - To reduce the use of temporary accommodation for families by focusing on prevention.
 - To improve access to settled homes for families and individuals who are in temporary accommodation.
- 4.5 These objectives have been further refined over the past year, due to the development of Our Corporate Plan and the city's Homelessness Strategy. Within the strategy the most appropriate organisation for each objective within the partnership is held accountable for its delivery.
- 4.6 The Homeless Partnership co-produced the Homelessness Strategy for the City (2018-23). The vision for the Homeless Service mirrors the Homelessness Charter vision and values, and the Homelessness Strategy. The objectives listed above have been refined into the following three key priorities. This is to make:
- **Homelessness a rare occurrence:** increasing prevention and early intervention
 - **Homelessness as brief as possible:** improving temporary and supported accommodation to be a positive experience

- **Experience of homelessness to be a one-off occurrence:**
increasing access to settled homes

4.7 Each organisation within the partnership has developed their own response to the strategy and the partnership holds organisations accountable to each other. An outcomes framework is being developed to ensure the actions of the Partnership meet these three objectives.

5. Self-Assessment

5.1 The Homeless Service has made progress towards its objectives over the past 12 months. Some of the key activities are mentioned below.

Progress towards the objectives and performance targets defined in the 2018-19 to 2019-20 Business Plan.

- 5.2 To continue with the focus on co-production with the Homelessness Partnership.
- The Rough Sleeping Initiative bid was co-produced, resulting in £418k income for services for people who sleep rough.
 - The Homeless Strategy for the city was co-produced.
 - The review of commissioned services was undertaken with people who have insight into homelessness
 - People with insight into homelessness sit on all interview panels and commissioning panels as standard
 - People who have previously been homeless are actively encouraged to apply for employment within the homeless service and there are many people previously homeless working for our team.
 - New methods of working at the customer service centre have been developed with the preventing homelessness action group
 - The Longford Centre service delivery model was jointly developed with the Homelessness Partnership. People with insight into homelessness helped to shape the centre offer, sat on all staff recruitment panels and 25% of the workforce at the Longford Centre is made up of staff with personal insight into homelessness.
- 5.3 To continue to work in partnership to support people who are living on the street to ensure they have access to accommodation and appropriate support.
- By the beginning of December additional accommodation for 103 people who sleep rough will have been developed over the winter period to support the “A bed every night” initiative.
 - The rough sleeping initiative bid has prevented 53 individuals and relieved 78 individuals from sleeping rough. This is through the creation of a number of additional services including:
 - Centrepont providing a homelessness prevention service to young people rough sleeping or at risk of rough sleeping.

- On The Out have expanded and developed their intensive peer led support service for people leaving prison who are homeless and with ex-offenders who are sleeping rough.
- Barnabus has recruited a new Resettlement worker to help rough sleepers directly access accommodation in the PRS, and to support people to move on from temporary accommodation.
- A new Resettlement worker at Great Place's Docherty Project helps people move-on into settled accommodation.
- A new Resettlement worker employed by Stop, Start, Go helps people move-on from Kashmir House into 8 additional units of step-down accommodation, creating vacancies for people currently rough sleeping.
- The Council's Rough Sleeper Team has recruited two additional Outreach Workers to work with people sleeping rough, with one focusing on reconnection.
- A winter night shelter has been opened. This will run from October 2018 to March 2019, with paid staff providing move-on support for people using the night shelter into temporary or settled accommodation.
- Office space at Victoria House is being converted into 8 emergency bed spaces for people sleeping rough or at risk of sleeping.
- The Rough Sleeper Outreach team has increased from 4 members of staff to 8 members of staff, a team leader and coordinator.
- New IT systems, policies and procedures have been put in place to improve recording, analytics and services to people who sleep rough.
- Work with health has resulted in improved access to drug and alcohol services at day centres and in accommodation; and increased funding into mental health outreach services for people who sleep rough.
- Close partnership working with health colleagues has led to the development of a shared Hospital Discharge Protocol to ensure a planned approach to discharge from hospital for people who are rough sleepers or at risk of homelessness.
- The Greater Manchester entrenched rough sleeper service (also known as the social impact bond (SIB)) has commenced, with 234 people with complex and entrenched behaviour patterns referred into the service.
- The Greater Manchester Housing First programme has been put out to tender; bids are currently being assessed with the service due to commence in spring 2019.
- Big Change, the Alternative Giving campaign that the Homeless Partnership has developed, and the Council supports, has raised over £220k; of this £140k has been spent supporting 1,500 people who have slept rough

5.4 To focus on early intervention and prevention to stop families and individuals from becoming homeless, preventing disruption to the lives of adults and children and to reduce the use of temporary accommodation for families by focusing on prevention.

- Citizens Advice, Shelter and Cheetham Hill Advice Centre have been funded to provide additional support to prevent families and individuals from becoming homeless.
- Work at the customer support centre has been reviewed and four additional Housing Solutions Officers have been recruited. 25% of demand through the door is people who have received a Section 21 notice, and this additional resource will focus upon this cohort and preventing them from becoming homeless.
- Referrals to Early Help Hubs are being made to ensure families are being given support as early as possible.
- Officers from the PRS team are now based in the customer support centre. They have identified properties in the PRS that are available and are offering planned moves for families into permanent accommodation, thereby avoiding B&B and temporary accommodation. Between April - Sept 2018, 148 direct offers were made to avoid homeless accommodation.
- A volunteer programme commissioned through MIND specialist mental health charity is providing support for families and individuals at the front door.
- The Duty to Refer has now come into force. This is encouraging organisations to refer people who they think are at risk of becoming homeless into the service as early as possible. Work with Registered Providers (RPs) is also ongoing to prevent homelessness.

5.5 To improve access to settled homes for families and individuals who are in temporary accommodation.

- Officers are progressing the review and update of the social allocations policy. This is to ensure wherever possible improved access for homeless households who require it the most to social housing.
- The buying of larger houses is progressing in order to accommodate those families who will never be accommodated otherwise. A small number of properties have been bought and families have moved in. RPs are identifying additional further larger properties across the city to purchase. Legal discussions are still being progressed, in order to ensure the programme is scalable in the future.
- The PRS team is being increased. Officers have managed to accommodate over 228 applicants into the PRS since April 2018.
- In addition the Longford Centre has accommodated 146 single people into their own PRS properties since opening in January of 2018 through the development and deployment of Move On Support worker roles.
- Adopting the Longford model we are implementing move on support worker roles within our in-house Shared Houses to increase the flow of move on for singles in temporary accommodation.
- Automated bidding on Manchester Move has been introduced for homeless households in temporary accommodation. This is to ensure everyone is maximising their bids on Manchester Move.
- The ALMO, and RPs, are working hard to increase the numbers of homeless people accommodated, and to continue to support them in

their tenancies. This partnership working is having a beneficial impact on moving people into settled accommodation.

Challenges to achieving the identified objectives and performance targets.

- 5.6 There have been significant challenges to achieving the identified objectives. There has been a significant increase in the numbers of households who are homeless in Manchester in recent years, including families, single people, young people, and people who are rough sleeping. This trend is reflected nationally. The roll-out of Universal Credit and the Homelessness Reduction Act have made this even more challenging. The Act has placed new duties on the Council to prevent homelessness in all circumstances, has widened the application of the assistance and support that the Council is required to give to households, and has significantly increased the bureaucracy. The response to the Act has, and will continue to, require an ongoing and evolving process, which will include investment in prevention services. Universal Credit will also impact upon unsupported temporary accommodation, making this form of accommodation financially unviable for the owners. This may increase the numbers of people who will be homeless or rough sleeping.
- 5.7 A driving factor of the increase in homelessness nationally has been attributed to welfare reform. The capping and freezing of Local Housing Allowance (LHA) has had a significant impact. This has been compounded by other welfare reforms such as the 'bedroom tax', the benefit cap, application of the shared room rate to single households under 35 years, and stricter sanction regimes. There has been an 89% increase in larger families presenting with 3 or more children from 117 in 2015/16 to 221 in 2017/18. It is possible this is as a direct result of welfare reform changes, such as the benefit cap. Of the families recorded as living in temporary accommodation, the largest proportion is single mothers (70% in 2017/18).
- 5.8 Alongside this, PRS rents have increased three times faster than wages nationally: homes in this tenure are increasingly unaffordable for families on low incomes, particularly to households in receipt of LHA. In Manchester our success in sustaining economic growth has led to supply failing to keep pace with demand and as a consequence, increases in average rents in the private sector. The loss of a private rented tenancy has recently become the prime reason for people being owed a statutory homelessness duty in Manchester. The National Audit Office reports a similar picture nationally.
- 5.9 There has, and will continue to be, a significant increase in demand. Figures for the first two quarters of 2018/19, since the Homelessness Reduction Act came into force, show that a total of 3,866 households presented as homeless, an 18% increase compared with the same period in the previous year. In the same period, 2,021 statutory homeless applications were taken, a 29% increase when compared with the same two quarters in the previous financial year.
- 5.10 Whilst demand into the service increases, the flow out of the service

continues to reduce. The following table shows the number of social lettings to people who have previously lived in hostel or temporary accommodation. This hostel or temporary accommodation category includes all those applying from commissioned and step down accommodation as well as statutory homeless accommodation.

	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	2017/18 totals	Q1 2018/19	Q2 2018/19
Hostel/other temporary accommodation	157	150	143	166	616	160	113

- 5.11 This has led to the number of dispersed properties where families are placed on a temporary basis continuing to grow from 929 in August 2017 to 1,387 in October 2018.

Challenges for the future when delivering the new objectives aligned to the corporate plan.

- 5.12 There are a number of challenges in the next year which will impact on our ability to meet our objectives. Many of these are outside of the Council's ability to control. They include the following:

1. **Homelessness a rare occurrence:** increasing prevention and early intervention
 - The capping of Local Housing Allowance Rates and other welfare benefit reforms are leading to private sector rents being unaffordable and adding to greater pressure both through the front door, and being unable to discharge duty at the end of the process.
 - The roll-out of Universal Credit across Manchester has resulted in an increase in rent arrears, and people struggling to maintain their accommodation. A situation that reflects the rollout of universal credit nationally.
 - Austerity has meant a number of organisations that would have previously provided a safety net for families and individuals are no longer able to manage the demand.
 - Changes in Homeless legislation has led to increased demand through the Council's front door and an increased need to accommodate people. Changes in legislation has also led to increased bureaucracy on staff time.
 - The duty to refer has increased the numbers being referred to the Housing Solutions Service (199 referrals since it came into force on the 1st October). Whilst this is good for identifying people at an early opportunity, it is having an impact on staff time.
2. **Homelessness as brief as possible:** improving temporary and supported accommodation to be a positive experience
 - The DWP rules limit the Council's ability to fully fund temporary accommodation through housing benefit. This is resulting in significant resource that could be utilised for prevention, early

intervention and support to people who are homeless or at risk of being homeless being redirected into funding the cost of accommodation.

- The future funding formula for the flexible homelessness support grant could be based upon the number of preventions we achieve by utilising the PRS. The difficulty of accessing the PRS in Manchester may have an impact on the future level of this grant
- The increased demand and additional bureaucracy is resulting in high caseloads affecting staff recruitment and retention rates as well as resilience and wellbeing.
- Unsupported Temporary Accommodation (commonly referred to as B&Bs) are being affected by Universal Credit. This could lead to them potentially closing in the future as their income is no longer sufficient.
- The funding for supported accommodation may be moved from housing benefit to grant funding, or included in Universal Credit. The decision for this has been delayed, but if it moves to Universal Credit this will have a significant impact on the viability of supported housing schemes across the city.

3. Experience of homelessness to be a one-off occurrence: increasing access to settled homes

- The buoyant housing market resulting in fewer people being able to access private sector accommodation
- Families and individuals who are assessed as intentionally homeless under the legislation being unable to find their own solution due to the housing market.
- Lower turnover in social housing resulting in low numbers of homeless people getting access to social accommodation, creating a blockage in dispersed accommodation.
- There has been an 89% increase in larger families presenting with 3 or more children from 117 in 2015/16 to 221 in 2017/18, mainly due to the benefit cap. Sufficient properties of a larger size to deal with this demand are needed.

5.13 In the face of these challenges, the service is embracing change and is working with public, private and voluntary sector partners across the city to rise to the challenge in order to meet our vision and objectives. The service is also working closely with GMCA and our partner Local Authorities, as many solutions lie in us working collectively.

5.14 Embedding the Our Manchester Behaviours throughout the service is key to our delivery and the wellbeing of our staff. Working in a high pressured and constantly demanding service has an impact on staff wellbeing and introducing practice and support to develop their resilience is crucial. Staff redesigns have been put in place to prepare the service for the future and reduce caseloads; managers and staff are embracing Our Ways Of Working (OWOW). Training and development needs are being addressed, and all staff are attending the 'Our Manchester' training. The staff engagement

survey results from 2018 revealed that all staff wanted to improve communication, and a staff newsletter has been introduced as well as regular service staff engagement events.

6.0 Revenue Strategy

- 6.1 The current budget for Homelessness (incorporating Asylum Seekers) is summarised in the table below:

Table 1: 2018/19 Base budget

Service Area	2018/19		
	Gross Budget £,000	Net Budget £,000	Budgeted Posts (FTE)
Rough Sleepers/Outreach	359	359	9
Specialist Accommodation	721	249	15
Unsupported Accommodation (B&B)	1,352	1,226	0
Temporary Accommodation	13,830	2,631	100
Homelessness Mgmt	384	384	6
Homelessness Assessment	1,216	1,216	37
Homelessness Prevention	2,104	1,929	65
Tenancy Compliance	194	194	6
Housing Related Support Services	1,398	980	5
Asylum	2,911	57	7
Total	24,469	9,225	250

- 6.2 In 2018/19 the budget for Homelessness Service has £24.5m gross and £9.2m net of external income. The external income is made up of
- Housing Benefit and Discretionary Housing Payment (DHP) funding from Revenues and Benefits of an estimated £10m for temporary accommodation
 - The Flexible Housing Support Grant (FHSG) of £1.3m in 2018/19 which rises to £2.1m in 2019/20
 - Asylum seeker grant funding from Home Office of £2.9m
 - New burdens funding for the Homelessness Reduction Act of £0.509m over two years has been allocated by DCLG
 - Funding via GMCA of £0.745m over two years to tackle entrenched rough sleeping
 - Rough Sleeper Initiative Grant of £418k for 2018/19 and recently announced additional funding of £0.5m, conditional on success criteria from 2018/19
 - Cold Weather funding from the Ministry for Housing, Communities and Local Government (MHCLG) of £35,000 for cold weather winter provision for people who sleep rough
- 6.3 The 2018-20 budget included an additional £2.1m in 2018/19, £250k in 2018/19 and 2019/20 for demographic growth, £895k from the City Centre work and a further £500k for the Longford Centre. During the first six months of 2018/19 there have been consistently more people approaching the

Council for support which is impacting on the budget for temporary accommodation and unsupported accommodation (B&B) provision and the caseloads for the Homelessness Support Service.

- 6.4 During the first six months of 2018/19 there has been an increase in people presenting with a statutory need for whom accommodation is required and the number of dispersed properties where households are placed on a temporary basis continues to grow.
- Unsupported accommodation numbers have increased from 145 in February 2018 to 202 in October 2018, with the recent increase primarily relating to families.
 - Dispersed temporary accommodation placements have increased from 1,266 in February 2018 to 1,387 in October 2018. The Council incurs a shortfall of c£88 per week for each unit of temporary accommodation provided because Local Authorities are not able to access the funding from Department of Work and Pensions for the full cost of accommodation and are limited to 2011 housing benefit rates and excluding any support funding. The Council is exploring arrangements with RP that are able to access housing benefit funding for the full cost of the accommodation in excess of the local housing allowance.
 - Due to the increasing numbers in dispersed temporary accommodation, additional capacity was created within the service through the implementation of a new delivery model. However demand in the service is growing and caseloads are now at 45 each; it is a challenge to ensure the three priorities of safeguarding, income generation and move on are being met. The risk from operating with high caseloads has meant that work to ensure that the housing benefit and rent payments is not able to be prioritised. This includes providing support to people in making claims for direct payments, housing benefit and Universal Credit on a timely basis. There would also be a financial benefit from property types being recorded accurately to attract correct amount of LHA and DHP claims.
- 6.5 For 2019/20 it is estimated that there is a requirement for additional Homelessness budget of £3.840m. This is predicated on:
- The demand for dispersed accommodation continuing to rise at the current rate to 1,500 properties during 2019/20 - £1.3m
 - Unsupported accommodation numbers being stabilised at existing levels from work ongoing to meet need differently. The full year impact of current numbers would be an additional budget requirement of £1.740m
 - Additional capacity for Homelessness support to reduce caseloads - £0.8m
- 6.6 The following measures are proposed which would reduce the additional budget requirement to £2m:
- There remains £400k in the corporate inflation fund which is earmarked for Homelessness

- 2017/18 adult social care inflation rolled forwards of £1m, this was funding in 2018-20 budget estimated for the Pooled Budget which has not been required for inflationary pressures
- £440k of savings relating to additional capacity being funded to reduce the full year effect of the 2018/19 budget pressure linked to unsupported accommodation spend.

Table 2: 2019/20 proposed changes and revised budget

Service Area	Approved MTFP				2019/20 Identified pressures	2019/20 Recovery proposals	Proposed 2019/20 Net Budget
	2018/19 Net Budget	Approved savings	Investment and other changes	2019/20 Net Budget			
	£,000	£,000	£,000	£,000	£,000	£,000	£,000
Rough Sleepers/Outreach	359			359			359
Specialist Accommodation	249			249			249
Unsupported Accommodation (B&B)	1,226		250	1,476	1,740	(440)	2,776
Temporary Accommodation	2,631			2,631	1,300		3,931
Homelessness Mgmt	384			384			384
Homelessness Assessment	1,216			1,216			1,216
Homelessness Prevention	1,929			1,929	800		2,729
Tenancy Compliance	194			194			194
Housing Related Support	980			980	0		980
Asylum	57			57			57
Total	9,225	0	250	9,475	3,840	(440)	12,875

7. Capital Strategy / Programme

- 7.1 Work has begun on a programme to purchase houses to accommodate homeless families. The current proposal is to invest up to £5m alongside RP to jointly purchase around 60 homes. The first three properties are bought, families identified, and have moved in. Another family is in the pipeline to move into a fourth property. RPs are identifying additional 4-bed properties across the city to purchase. Legal agreements with RPs are being progressed to secure the purchase of properties.

8. Other Considerations

- 8.1 It should be noted that any changes proposed from business plans may require public consultation depending on their nature and impact on services.

There remains a statutory requirement to consult business rate payers each year as part of the budget setting process.

- 8.2 The business plans submitted to Executive and Scrutiny Committees in February will include a full description of consultation and conversation with partners and other stakeholders that have taken place to develop the budget proposals, as well as the potential impact of proposals on different communities in Manchester and outcomes of equality analysis carried out and future Equality Impact Assessments required. Workforce implications will also be considered, including any required reduction in budgeted posts as well as strategic workforce development objectives for the Directorate.

Appendix 1**Revenue Financial Plan****Table showing an overall summary of financial position**

Subjective Heading	2018-2019 Budget £,000	2019-2020 Indicative Budget £,000
Expenditure:		
Employees	8,335	9,968
Running Expenses	16,134	19,830
Capital Financing Costs		
Contribution to reserves		
Total Subjective Expenditure	24,469	29,798
Less:		
Other Internal sales		
Gross Expenditure	24,469	29,798
Income:		
Government Grants	(3,347)	(3,586)
Contributions from Reserves		(1,440)
Other Grants Reimbursements and Contributions	(101)	(101)
Customer and Client Receipts	(11,796)	(11,796)
Other Income		
Total Net Budget	9,225	12,875

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**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee – 4 December 2018

Subject: Young people moving in to adult services

Report of: Strategic Director of Children and Education Services
Executive Director of Nursing and Safeguarding, Manchester
Health and Care Commissioning
Director of Population Health and Wellbeing

Summary

This report provides an overview of work that is being done and work that is planned to improve the experience and outcomes of those young people moving from children and young people services to adult services and to improve the experience for their families and carers too.

Recommendations

The Health Scrutiny Committee is asked to:

- i) Consider the content of this report, the challenges that face children and young people in transition and the planning to improve their experiences and outcomes;
- ii) Identify if there is a specific area the Committee would wish to look at in more detail; and
- iii) Seek a progress report in 6 months that takes account of Committee members findings and planning.

Wards Affected: All

Alignment to the Our Manchester Strategy Outcomes (if applicable):

Manchester Strategy outcomes	Summary of how this report aligns to the OMS
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Young people should receive a good education preparing them for adulthood with further training or employment outcomes as the outcome at the end of this.
A highly skilled city: world class and home grown talent sustaining the city's economic success	Preparing young people for adulthood and ensuring they have the skills and support needed to contribute in meaningful ways will support home grown talent, address inequality issues and demonstrates a commitment to supporting the

	future workforce; people feel valued when they are given the skills and confidence to be as independent as possible.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	The city, private, public, voluntary organisations and communities recognise the importance of supporting young people to develop into the adults they can and want to be.
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

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Background documents (available for public inspection):

None

1.0 Introduction

- 1.1 This report sets out a broad overview of the experiences and challenges facing young people as they move into adults services. Following on from this report, the committee may choose to request a more detailed report to look at a specific service area in more detail, potentially in conjunction with the Children and Young People's Scrutiny Committee.
- 1.2 There can be many challenges for children and young people moving from bespoke services to adult services and it is important that this is managed appropriately. This report provides an overview of the following services in the city:
 - Services for children and young people with and without disabilities;
 - Child and Adolescent Mental Health Services (CAMHS);
 - Young people's specialist substance misuse services; and
 - Reproductive and sexual health services for young people.

2.0 Services for children and young people

- 2.1 Transition processes and practice have been completed via the Transition Planning Team (TPT) for young people with disabilities for some years. Specific teams and roles were created in Manchester circa 2010 following lengthy consultation and redesign. This brought together children and adult social workers under the same management, based in the same team. The cultural change for both sides was immense and eventually the children's practitioners, who had made up part of the team in the redesign, moved on. The transition planning team staff and budget sat, and continues to sit, within adult social care.
- 2.2 The social care aspects of transition are challenging. With the implementation of the Care Act 2014 the eligibility for care act assessments increased. This means that where transition had been an offer for those with learning, physical, sensory or multiple disabilities was now an offer that was available to all of those in transition from children's to adults services.
- 2.3 The Care Act 2014, and the changes this brought about, has become more imbedded. This is in relation to the skill set, knowledge and colleague relationships of those working in this area, within the city. There is now, more than ever, a recognition that transition planning is about the 'system' pulling together to ensure the young people of Manchester get the best opportunities to be the people they can and want to be as adults.
- 2.4 The current statement of purpose agreed between adults and children's social care is reflected in the statutory duties for 'looked after' children/care leavers and defines transition as:

"The transition planning team (TPT) will offer assessment, support and ongoing social care support (where needed) to those eligible, relevant or former relevant young people (and their carers) who are going through the

transition from child to adult; particularly within the context of the SEND reforms, NICE guidance and legislative requirements. Needs assessments, Pathway Plans and arrangements for Personal Advisers will be put in place prior to referral to the TPT, which should take place no later than 16 years and 3 months.”

3.0 The 4 +1 Review relating to social care

- 3.1 A 4+1 review is a person centred tool that can be used to review different situations from an individual person’s good week to a service’s business plan / progress. The headings for a 4+1 review are What have we tried, what have we learned, what are we pleased about, what are we concerned about and what next. The bullet points below provide a summary review of activity under these broad headings to summarise the progress, challenges and planning to date;

What we have tried and what we are pleased about:

- The social workers are gaining in skills and knowledgeable; this is in terms of the support needs of the changing group of young people and in terms of service provision and then also legal frameworks.
- Positive working relationship with the Children with Disabilities team (CwD).
- Relationships with SEN schools are being re-established.
- Parent / carer forum relationships are established.
- Relationships with colleagues in Mental health are positive and are building.
- A system approach to learning has completed 1 part of a 2 part brown paper exercise (were the transition from child to adult has been tracked) for 2 young people who have enduring mental health (one also has autism) and transition.
- Education - Levels of those on work based internship programmes is increasing and are successful.

What we are concerned about:

- Referrals made into the Transition social care team, some are not always picked up in a timely way - this causes pressure for the CWD, or other referrers, and is not the offer for young people and their families / carers that we aspire to.
- Referrals and knowledge of the transition team in children's social care early help, permanence and localities is increasing but more awareness raising is needed.
- Children’s social care and schools understanding of their role in capacity building to support young people in preparing for adulthood needs to be embedded (Mental Capacity Act (MCA) 2005 affects those 16 and over)
- The step down of young people who are able to manage more independently is not always followed through as it could or should be, this is about practitioner skill, positive risk taking and capacity in the team to complete this level of complex case work.

What have we learnt the gaps are:

- Support for those with low level mental health, which includes those who get support as children and young people but who are not eligible to be supported in the adult offer.
- Children and Adolescent Mental Health services (CAMHS) and Adult Mental Health Services (AMHS) - differences in terms of who is eligible for support - this affects those in transition.
- CAMHS and the adult Learning disability health assessments - can differ - which affects which way young people and families can be signposted and supported.
- MCA knowledge within schools and children's social care needs further training and embedding.
- Drug and alcohol support, signposting for those in transition. Service provision for those in transition is limited.
- A number of young people are Not in Education, employment or training (NEET)
- Autism - The diagnostic pathway has a lengthy waiting list; autism knowledge within the 'system' workforce needs improving; commissioning for a service provision that is about social care and building social networks, self resilience that is accessible and value for money is needed.
- Clear pathway for vulnerable and exploited young people who will need a continuing offer of support from Adults Services including trauma informed support.

Knowing what we know now, what next:

- Contact and meeting being arranged with colleagues in the complex safeguarding hub to discuss the pathway into transition planning team
- Part 2 of brown paper exercise to be completed.
- People First (learning disability self advocates group) Consultation on what good transition should look like to be collated.
- 3 workshops with the parent / carer groups to be organised for the new year where transition will be the focus - looking at what parent / carers are worried about, and what for them, good transition for their young person would like.
- Young people's consultation to be planned
- System wide meeting to be arranged
- Discussion on a model of transition across the system, 'preparation for adulthood' and a role overseeing this to be explored further.
- conference in Children's Service in January 2019 to raise awareness and continually strengthen partnership arrangements.
- align commissioning activity and specifications to ensure a positive experience and 'smooth' transition.

4.0 Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services (AMHS) and Complex Placements

- 4.1 As part of the work around the delivery of the National Transition of Commissioning for Quality and Innovation (CQUIN) the two main providers

(Manchester University NHS Foundation Trust and Greater Manchester Mental Health NHS Foundation Trust) and Manchester Health and Care Commissioning (MHCC) have worked together to deliver the following:

- A review of the local transition protocol that has incorporated the Greater Manchester agreed standards;
 - Agreement that all adult services who receive a referral for a young person will not ask them to opt in but maintain a flexible approach in how they access a service;
 - An audit of transition cases during 2017/18 and 2018/19.
- 4.2 It has been recognised that there remain issues on individual cases who are transitioning from our CAMHS teams into adult mental health services as the language used and thresholds worked to are very different. A monthly group has been established where it is expected that those cases that CAMHS would like to transition into adult mental health services are discussed between the two services.
- 4.3 Terms of reference have been drafted and the group has met twice and a small number of cases have been discussed with a view that adult services will assess and agree a care pathway for the patient. This work will also be supported by workshops looking at the following pathways and agreeing access for young people:
- Attention Deficit Hyperactivity Disorder (ADHD)
 - Community mental health teams
 - Eating disorders
- 4.4 In addition, those children and young people with complex needs, who are currently in receipt of a specialist joint funded placement from education, health and care provide an additional challenge. The complexity of the arrangements and the variety of stakeholders involved adds to this and as a partnership we are currently developing a robust system to ensure the appropriate continuity of care for this group of young people.

5.0 Young People's Specialist Substance Misuse Services

- 5.1 The Eclipse service is a prevention oriented, outcome focussed and person centred substance misuse service for young people across the city of Manchester. From June 2017, the Eclipse Service has been delivered by Change, Grow, Live (CGL), a specialist substance misuse service commissioned to deliver integrated community based alcohol and substance misuse support for adults. The service is commissioned by the Population Health and Wellbeing Team at MHCC.
- 5.2 The Eclipse Service is for young people who are using or at increased risk of using any substance. The service provides education and advice to young people and professionals and targeted support to prevent drug or alcohol misuse and early interventions to avoid any escalation of risk and harm when such problems first arise. The service employs assertive outreach and

motivational techniques to work with young people and families who may be reluctant to enter treatment. A peripatetic model operates citywide where young people and their families can receive support in the community, at a location/venue most convenient and comfortable for them. This includes home visits, schools or other facilities frequented by young people.

- 5.3 For those that do enter treatment, a comprehensive assessment which appraises all risk and protective factors is undertaken and actively seeks to involve parents/carers and other professionals involved with the young person (where appropriate). Specialist treatment/interventions such as psychosocial interventions are delivered, under-pinned by a young person led care plan involving family members and professionals. Specialist treatment and support is age appropriate to promote the safeguarding and welfare of children and young people.
- 5.4 Originally commissioned as a service to support the needs of young people aged 19 years and under, the integration of the Eclipse service into the wider integrated adult drug and alcohol service has afforded the opportunity to develop the approach to supporting young adults who may require treatment beyond the age of 18 (and a move into adult treatment services) or people up to and including the age of 24 accessing the service for the first time. Specialist services must deliver age-appropriate interventions and promote the safeguarding and welfare of children and young people however it is good practice that services are based on developmental need rather than age. It is recognised that the needs of 18-24 year olds are different to those of under 18s (as is the legislative framework) however pathways to treatment in adult settings may not always be appropriate for the individual.
- 5.5 CGL have recently undertaken a wide scale re-model of their integrated drug and alcohol service in order to better respond to the needs of the Manchester landscape and population. This has included the development and recruitment of a Young Adult Worker post, a position dedicated to working directly with young adults aged between 18 – 24 years old.
- 5.6 The implementation of the Young Adult Worker post ensures there is a joined up and cohesive approach between young person and adult specialist substance misuse services. The aim is to ensure that young adults at different development stages who may be exposed to heightened health and wellbeing risks receive age appropriate care and support and that where there is a need to support young adults into a specialist adult substance misuse service, that this is a gradual and purposeful process.
- 5.7 Entering adult services can often coincide with other key transitions into adulthood, which can add complexity - a comprehensive care and treatment plan can provide consistency in service, reduce the likelihood of the young person to disengage with services and help prepare a person's understanding of any differences they can expect moving forward.
- 5.8 The Young Adult Worker will ensure support is consistent with NICE Guidance in respect of young people who may require support from an adult service and

in doing so will ensure this support is strengths based, person-centred and developmentally appropriate. In doing so, the Young Adult Worker will take into account the person's: -

- Maturity cognitive abilities
- Psychological status
- needs in respect of long-term conditions
- social and personal circumstances
- Caring responsibilities communication needs.

5.9 Relative to the above, consideration needs to be made on the most appropriate support for anybody accessing support between the ages of 18 and 24 years. Each person can vary in their needs, capabilities, ability to give and understand consent, of the risks posed, and in their independent living. The service will ensure that each person is fully assessed by a worker competent in understanding and managing the differences presenting, and in ensuring that the person is offered the safest, most appropriate, place based support. This is to safeguard the person requiring input; but also relative to other young people/adults accessing services and their access and risk. This is not a one off process; but a fluid and dynamic assessment at every contact to ensure that support is appropriate, constructive, safe and fully informed.

6.0 Reproductive and sexual health services for young people

6.1 The Population Health and Wellbeing Team at MHCC commission two organisations to provide dedicated young people's sexual health services.

6.2 Manchester University Hospital NHS Trust (MFT) provide the Northern Integrated Sexual and Reproductive Health Service for women and men of all ages. However, as part of this they operate Fresh Clinics (Fresh is the brand name) for young women and men aged 25 and under. Fresh Clinics offer routine methods of contraception and screening and treatment of common sexually transmitted infections. Fresh also provide an education outreach service mainly focused on young people up to the age of 19 years.

6.3 Brook is a contraception and sexual health service for women and men aged 19 and under and will also provide a service for young adults aged up to 25 who have been referred due to particular vulnerabilities or with special educational needs and disabilities. Brook is based on Lever Street in the city centre. Brook offers routine and intermediate services including:

- Information, advice and guidance about sexual and reproductive health issues
- Provision of long-acting methods of contraception including the contraceptive implant and the intrauterine device
- Provision of routine methods of contraception including the contraceptive pill
- Provision of emergency hormonal contraception
- HIV testing and counselling
- Screening and treatment of chlamydia

- Screening and treatment of other common sexually transmitted infections
- Provision of free condoms and lubricants
- Provision of pregnancy testing, counselling and referral.

6.4 Both Brook and Fresh support and encourage young people to access all age services. This is because of the specialist nature of some sexual health testing and treatments, which are only available in an all age clinic. However, in such situations young people will be supported in a number of ways such as ensuring fast track appointments or by additional outreach and educational support.

7.0 Conclusion

7.1 There has been sustained progress in the work around and understanding of the transition for young people from child to adult. This has been a system wide recognition of the breadth of young people this can affect and the wide range of partners across the system who can positively impact on this experience for young people.

7.2 There is more work to do.

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