



Health Scrutiny Committee

Date: Tuesday, 7 January 2020

Time: 2.00 pm

Venue: Council Antechamber, Level 2, Town Hall Extension

Everyone is welcome to attend this committee meeting.

There will be a private meeting for Members only at 1.30pm in Committee Room 6 (Room 2006), 2nd Floor of Town Hall Extension

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

Meetings of the Health Scrutiny Committee are 'webcast'. These meetings are filmed and broadcast live on the Internet. If you attend this meeting you should be aware that you might be filmed and included in that transmission.

Membership of the Health Scrutiny Committee

Councillors - Farrell (Chair), Clay, Curley, Holt, Mary Monaghan, Newman, O'Neil, Riasat, Wills and Nasrin Ali

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 allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.
- 4. Minutes** 5 - 8
To approve as a correct record the minutes of the meeting held on 3 December 2019.
- 5. The Councils Updated Financial Strategy and Budget Reports 2020/21** 9 - 22
Report of the Chief Executive and the Deputy Chief Executive and City Treasurer

This report provides an update on the Council's overall financial position and sets out the next steps in the budget process, including scrutiny of the draft Budget proposals and Budget report by this Committee. Each Scrutiny Committee will receive a budget report aligned to its remit, showing the main changes proposed to delivery and funding. The services to be considered by each scrutiny committee are shown at table four. The report also outlines the officer proposals for how the Council could deliver a balanced budget for 2020/21, the details of which will be discussed at the relevant scrutiny committees.
- 5a Council Business Plan 2020/21** 23 - 58
Report of The Chief Executive

This report presents the draft Council Business Plan for 2020/21.
- 5b Adult Social Care and Population Health Budget 2020/21** 59 - 132
Report of The Executive Director of Adult Social Care

This report summarises the budget proposals for Adult Social Care (ASC) and Population Health (PH) to determine the Council's contribution into the MHCC pooled budget for 2020/21. The budget reflects that 2020/21 is a one year spending round and deferral of the planned local authority funding reforms including the revision of the funding formula and the business rates revaluation and reset. The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Finance Settlement.

6. Discussion item: Health improvement interventions for LGBT communities in Manchester

The Committee have invited representatives from the LGBT (lesbian, gay, bisexual and transgender) Foundation to discuss specific health improvement interventions for LGBT communities in Manchester, including the Greater Manchester Trans Health Service and Pride in Ageing.

7. Overview Report

Report of the Governance and Scrutiny Support Unit

133 - 144

The monthly report includes the recommendations monitor, relevant key decisions, the Committee's work programme and items for information. The report also contains additional information including details of those organisations that have been inspected by the Care Quality Commission.

Information about the Committee

Scrutiny Committees represent the interests of local people about important issues that affect them. They look at how the decisions, policies and services of the Council and other key public agencies impact on the city and its residents. Scrutiny Committees do not take decisions but can make recommendations to decision-makers about how they are delivering the Manchester Strategy, an agreed vision for a better Manchester that is shared by public agencies across the city.

The Health Scrutiny Committee has responsibility for reviewing how the Council and its partners in the NHS deliver health and social care services to improve the health and wellbeing of Manchester residents.

The Council wants to consult people as fully as possible before making decisions that affect them. Members of the public do not have a right to speak at meetings but may do so if invited by the Chair. If you have a special interest in an item on the agenda and want to speak, tell the Committee Officer, who will pass on your request to the Chair. Groups of people will usually be asked to nominate a spokesperson. The Council wants its meetings to be as open as possible but occasionally there will be some confidential business. Brief reasons for confidentiality will be shown on the agenda sheet.

The Council welcomes the filming, recording, public broadcast and use of social media to report on the Committee's meetings by members of the public.

Agenda, reports and minutes of all Council Committees can be found on the Council's website www.manchester.gov.uk

Smoking is not allowed in Council buildings.

Joanne Roney OBE
Chief Executive
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Further Information

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

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This agenda was issued on **Monday, 23 December 2019** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension , Manchester M60 2LA

Health Scrutiny Committee

Minutes of the meeting held on 3 December 2019

Present:

Councillor Farrell – in the Chair
Councillors N. Ali, Clay, Holt, Newman, O’Neil, Riasat and Wills

Apologies: Councillor Mary Monaghan

Also present:

Councillor Craig, Executive Member for Adults, Health and Wellbeing
Councillor Ilyas, Deputy Executive Member for Adults, Health and Wellbeing
Nick Gomm, Director of Corporate Affairs, Manchester Health and Care Commissioning (MHCC)
Stephen Gardner, Deputy Director, Single Hospital Service
Ed Dyson, Executive Director, Planning and Operations, MHCC

HSC/19/44 Minutes

Decision

To approve the minutes of the meeting held on 5 November 2019 as a correct record.

HSC/19/45 Discussion item: Health improvement interventions for LGBT communities in Manchester

This item of business was withdrawn.

HSC/19/46 Single Hospital Service Progress Report

The Committee considered the report of the Executive Director, Planning and Operations, Manchester Health and Care Commissioning and the Group Executive Director of Workforce and Corporate Business, Manchester University NHS Foundation Trust that provided an update on the latest position for the Single Hospital Service (SHS) programme since the creation of Manchester University NHS Foundation Trust (MFT) on 1 October 2017, and specifically references progress with the proposed acquisition of North Manchester General Hospital. It also provided an update on work that has taken place in the development of a proposition for the regeneration of the North Manchester site.

The Deputy Director, Single Hospital Service referred to the main points of the report which were: -

- Providing an introduction and background to the SHS;
- An update on the Integration Programme;

- An update on the North Manchester General Hospital site and progress to date;
- Information on the recent capital funding announcement; and
- Next steps.

The Committee also received an accompanying presentation entitled 'The future of the North Manchester General Hospital site - A healthcare led approach to civic regeneration'. The presentation: -

- Provided a context for the site in terms of area and population;
- Presented the case for change and a summary of the proposition to deliver a modern health and care offer;
- Described the opportunity for health to deliver wider economic and social benefits to the area;
- Outlined the financial investment required; and
- Described the approach to partnership working.

Members stated that they welcomed and fully supported the incorporation of North Manchester General Hospital (NMGH) into the Single Hospital Service. Members welcomed the proposals for the North Manchester site, noting the wider economic and social benefits that would be realised.

Members sought an assurance that the term "rationalising" of the site did not amount to a reduction of services. The Deputy Director, Single Hospital Service confirmed that the term "rationalising" referred to the better reconfiguration of the site, commenting that the current configuration of buildings were sprawling across the foot print and was not fit for purpose and this was an opportunity to rebuild a modern, coherently designed hospital. He further commented that this new hospital would also allow for consideration to be given to locate specialist services at this site, such as ophthalmology and maternity services. He added that by rationalising the hospitals' footprint would release land to develop other opportunities at the site for the benefit of residents and stimulate economic activity. He stated that the delivery of a modern build hospital would be of benefit to patients and staff, and would also deliver environmental benefits.

The Executive Director, Planning and Operations, MHCC responded to a question regarding anticipated timescales for the delivery of the new hospital by advising that it would be 8 to 10 years to complete this project. He stated that the commitment to the funding of this project had been given and this was contained within the NHS Plan.

The Deputy Director, Single Hospital Service further commented that a modern hospital would also help reduce the number of unnecessary outpatient appointments, stating that technology would be used, where appropriate to provide consultations and advice for patients in line with the NHS Long Term Plan. He further commented that this would reduce the number of journeys to the site that would impact on emissions. He further advised that discussion would be ongoing with TfGM to discuss public transport to the location.

A Member commented upon the Healthier Together Programme that had informed the redesign of specialist A&E care and emergency general surgery and requested

that an update report on this area of activity be submitted for consideration by the Committee at an appropriate time.

A Member commented that following the introduction of the Single Hospital Service the perception amongst local ward Councillors in the Wythenshawe area was that communications and dialogue between the local hospital site and Members had deteriorated. The Executive Director, Planning and Operations, MHCC acknowledged this comment and said that he would relay this to the site.

In response to a comment from a Member regarding Wythenshawe Hospital being the 'poor relation' in the Single Hospital Service model, the Deputy Director, Single Hospital Service replied that this was not the case and Wythenshawe was a major acute hospital that provided a number of specialist services at the site.

In response to a question from a Member regarding the financial savings achieved in management salaries following the introduction of the Single Hospital Service, the Deputy Director, Single Hospital Service stated that 5.1% of savings had been achieved in management salaries. He further replied to a question regarding the use of mobile units to deliver services by stating that these were used to manage capacity.

A Member commented that the public perception of NMGH had been very poor and more needed to be done to publicise the positive proposals for the area. The Executive Director, Planning and Operations, MHCC acknowledged this comment, he further added that improvements had been realised at the site and this had been recognised by the Care Quality Commission, and it was anticipated that the latest inspection report that was due would reflect this. He added that information gathered from staff feedback had indicated that staff morale at the NMGH site had continued to improve over recent years. In response to a specific question regarding comparative performance data for the site, the Deputy Director, Single Hospital Service confirmed that this was recorded and reported.

In response to a question regarding staffing and retention at North Manchester General Hospital the Deputy Director, Single Hospital Service informed the Committee that this information would be circulated following the meeting.

The Executive Member for Adults, Health and Wellbeing stated that the approach to reforming NMGH was an example of an innovative Manchester approach to delivering improved services for Manchester residents. She paid tribute to all of the staff working at the site and commented that the site had suffered from inadequate funding and poor planning by central government, adding that this had resulted in cuts to services for residents and cuts to student nurses training bursaries.

Decisions

1. To note the report and presentation.
2. To receive an update report at an appropriate time.

HSC/19/47 Overview Report

A report of the Governance and Scrutiny Support Unit which contained key decisions within the Committee's remit and responses to previous recommendations was submitted for comment. Members were also invited to agree the Committee's future work programme.

A Member requested that following discussion of the previous agenda item an update report on the Healthier Together Programme be included on the Committee's work programme.

The Chair informed the Members that a session would be held following the close of the meeting to discuss the work programme.

Decision

To note the report and approve the work programme subject to the above comments.

**Manchester City Council
Report for Information**

Report to: Resources and Governance Scrutiny Committee –
7 January 2020
Health Scrutiny Committee - 7 January 2020
Children and Young People Scrutiny Committee –
8 January 2020
Neighbourhoods and Environment Scrutiny Committee –
8 January 2020
Economy Scrutiny Committee - 9 January 2020
Communities and Equalities Scrutiny Committee –
9 January 2020

Subject: Updated Financial Strategy and Budget Reports 2020/21

Report of: The Chief Executive and the Deputy Chief Executive and City
Treasurer

Summary

This report provides an update on the Council's overall financial position and sets out the next steps in the budget process, including scrutiny of the draft Budget proposals and Budget report by this Committee. Each Scrutiny Committee will receive a budget report aligned to its remit, showing the main changes proposed to delivery and funding. The services to be considered by each scrutiny committee are shown at table four. The report also outlines the officer proposals for how the Council could deliver a balanced budget for 2020/21, the details 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 Budget Reports 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.

Wards Affected: All

Environmental Impact Assessment - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

The proposed 2020/21 budget will reflect the fact the council has declared a climate emergency by making carbon reduction a key consideration in the Council's planning and budget proposals.

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	This report provides an update on the Council's overall financial position for 2020/21 which will underpin all of the Council's priorities as determined through the Our Manchester Strategy.
A highly skilled city: world class and home grown talent sustaining the city's economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	
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):

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, 13 February 2019-
<https://democracy.manchester.gov.uk/ieListDocuments.aspx?CIId=147&MIId=292&Ve r=4>
 Spending Round Announcement 2019 report to Resources and Governance Scrutiny Committee – 8 October 2019

<https://democracy.manchester.gov.uk/documents/s10560/Spending%20Round%20Announcement%202019.pdf>

1 Overview

- 1.1 At its meeting on 13 February 2019 Executive agreed the 2019/20 budget, which was the final year in the three year budget strategy for 2017-20. It was envisioned that there would be a spending review in 2019, resulting in a new multi-year settlement from 2020/21. Due to national priorities this has not happened and a one year spending round was announced on 4 September 2019 instead.
- 1.2 The provisional settlement was originally expected 5 December however due to the dissolution of parliament on 6 November, following the general election announcement, this was not possible. The technical consultation for the provisional settlement was published 3 October and contained more information than usual, this has been used as the basis for the government funding expectations in the 2020/21 budget. Further details have been released on the budget, however there remain a number of areas which require clarification, these will all be picked up in the report to February committees.
- 1.3 The proposed 2020/21 budget will reflect the fact we have declared a climate emergency and will also continue to reflect the priorities identified in the three-year budget strategy. These were developed following consultation with Manchester people on what they 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 2020/21 budget will be a one year roll over budget. The strategic framework remains the Our Manchester Strategy, the Corporate Plan and the Locality Plan. Whilst the Council is publishing a one year budget in line with the one year spending round there is a need to plan for a three year position. This is critical to demonstrate forward planning and resilience, ensuring the Council is in a strong position to respond to the national funding changes. Work has begun on the budget requirements for 2021/22 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 future of Adult Social Care funding.

2 Budget Context

Our Corporate Plan

- 2.1 Our Corporate Plan sets out the Council's priorities for the next 2-3 years which will deliver the three-way push and contribute to the council's vision for

the city. A number of key activities will support delivery of a number of our corporate plan priorities including:

- Delivery of our approach to place-based reform in Manchester - Bringing Services Together for People in Places
- Integration of Health and Social Care through partnership arrangements with the NHS
- Delivery of the Local Industrial Strategy which will deliver inclusive and green growth for the city of Manchester
- Delivery of Our Transformation - a new Council-wide portfolio of programmes which has been set up with a view to changing how we work as an organisation to ensure we can deliver our corporate priorities and specifically ensure that we are a 'well managed council'
- Continuing to ensure that the 'Our Manchester' approach is the way we do things here, rather than a thing we do

2.2 As such, our Corporate Plan priorities have been refreshed for 2020/21 to reflect the city's zero carbon ambitions and declaration of the climate emergency, the launch of the local industrial strategy for the city, the headlines from the 2019 State of the City report, and the planning for internal transformation. The eight Corporate Plan priorities, in no order of importance, are shown below:

- Zero carbon Manchester: Deliver the ambition for Manchester to become a zero carbon city by 2038 at the latest, achieving the science-based carbon budget for the city
- Young people: From day one, support Manchester's children to be safe, happy, healthy and successful, fulfil their potential, and make 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 chance of quality homes. Accelerate and sustain the delivery of more housing, ensuring the provision of enough safe, secure and affordable housing for those on low and average incomes.
- 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: Boost the city's productivity and create a more inclusive economy that all residents can participate in and benefit from, and contributing to reductions in family poverty, as set out in the Our Manchester Industrial Strategy
- Well managed Council: Support our people to be the best and make the most of our resources

Our Business Plan

2.3 Our Council Business Plan 2020-21 describes in more detail the action being taken to deliver the corporate plan this year. The plan is structured around the

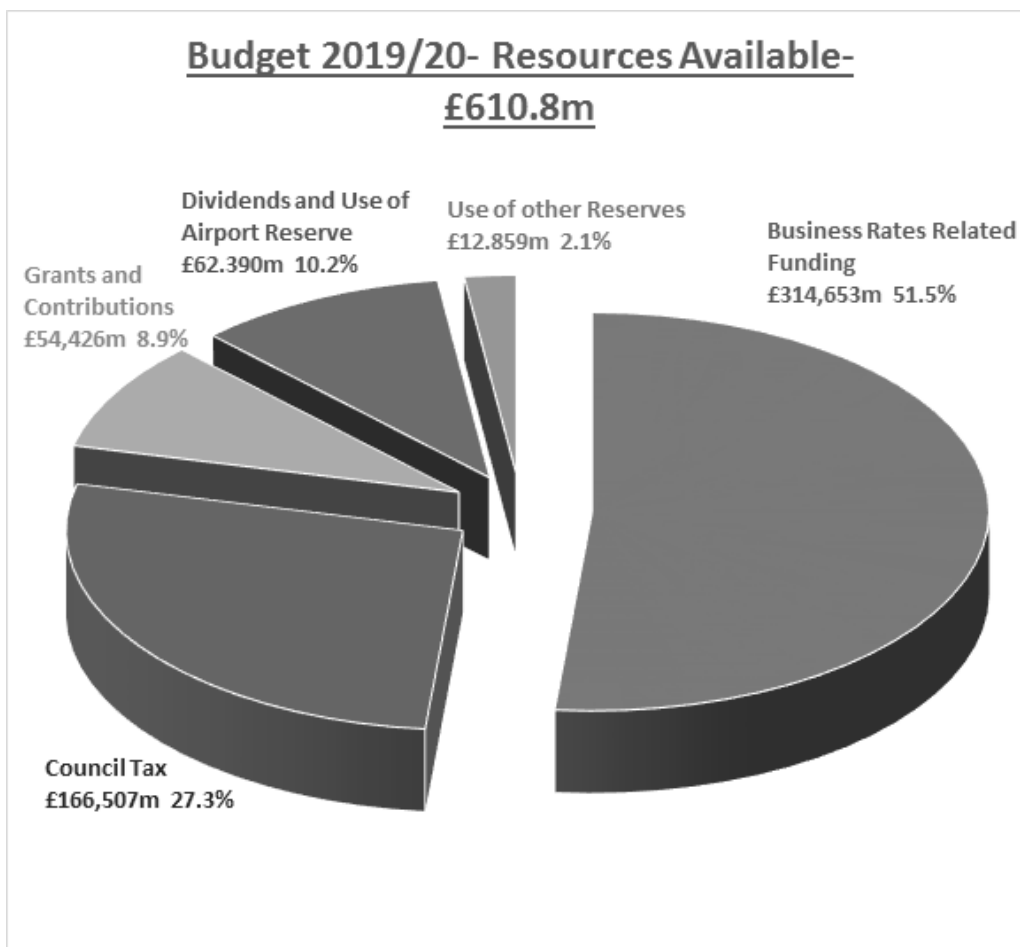
eight priority themes and has been produced following the development of 41 service plans which describe in more detail the achievements, priorities and activities of the 41 services which collectively make up Manchester City Council. The plan also describes the Council's key workforce and technology considerations for 2020-21 as key enablers to delivering our Corporate Plan. Equalities implications are also described as well as our approach to risk management.

National Context

- 2.4 The budget for 2020/21 is being set in a period of austerity which began with the 2011/12 Budget. The Local Government Association (LGA) have calculated that by 2020 Local Government will have delivered £16bn in savings to the Treasury, whilst also absorbing inflationary increases, maintaining the delivery of services to communities and facing increasing Social Care demands. Public health grant funding will have reduced by £531m between April 2015 and April 2020. Between 2010/11 to 2019/20 the City Council's Spending Power (as defined by government) has reduced by £179m (29%) compared to an England average reduction of 16%. This has resulted in required budget cuts of £372m from 2010/11 to 2019/20 inclusive, after taking into account inflation and rising demand, and a reduction of almost 4,000 FTE (around 40% of the workforce). Recent years cuts have been less severe but local government spending is still much lower in real-terms than it was in 2010.
- 2.5 The need to make budget cuts is expected to continue over the next four years. The LGA is estimating that by 2025 Local Government Services face a funding gap of at least £7.8bn, just to stand still, much of this relating to social care.

2019/20 Baseline Budget

- 2.6 The Council's net revenue budget is funded from five main sources which are Council Tax, Business Rates, government grants, dividends and use of reserves. In recent years as central government funding has reduced and business rates retention has been introduced the ability to grow the amount of resources raised locally has become even more important for financial sustainability and planning.
- 2.7 The Council has been part of the Greater Manchester Business Rates pilot since 2017/18 which has enabled retention of 100% of business rates growth (rather than sharing 50/50 with the government). Continuation of the pilot has been confirmed for 2020/21, however from 2021/22 it is currently anticipated that arrangement will be in line with the rest of the country, which is expected to move to 75% retention.



2.8 As reported to Executive 19 December an in-year overspend of £4.2m is forecast for 2019/20 of which £6.8m relates to Adults services and £2.6m to Children's, offset by underspends in the remaining directorates. The full-year effect of the position in 2019/20 has been reflected in the 2020/21 proposals.

2.9 Other important elements of the council's budget include:

- The level of usable reserves which need to be appropriate to the amount of risk faced. The majority are earmarked for specific purposes; the only unallocated reserve is the General Fund Reserve of £22m. This is held to meet costs arising from unplanned events, acts as a buffer to help mitigate against the financial risks the Council faces and is used to smooth expenditure across years.
- The Capital budget totals £356m in 2019/20, including projects totalling £70m on behalf of the GMCA
- The Treasury Management Strategy ensures effective management of the council's cash and determines the required levels of borrowing to fund capital spend and the most effective method of borrowing.

3 The Revenue Budget Position 2020/21

3.1 This report sets out the main assumptions used to build up the City Council's budget options for 2020/21. These underpin the budget reports which will be presented to all Scrutiny Committees in January, before going to January

Executive for consideration, taking into account the comments from Scrutiny. The full details of the assumptions supporting the final budget proposals will be set out in the budget report to Executive on 12 February 2020 and will form part of the suite of budget reports presented to Committee. However, it should be noted that this timeline is subject to the timing of the Finance Settlement from the Government.

- 3.2 The Spending Round announcements were reported to the Resources and Governance Scrutiny Committee on 16 October 2019. The technical provisional settlement consultation released early October gave confirmation of a 'roll forward' settlement for 2020/21 and set out more detail on the Government's plans for allocating resources to local authorities.
- 3.3 The government funding announcements impacting on the budget available to the Council are as follows:-
- Increase in Settlement Funding Assessment for inflation (c1.7% - CPI as at September) which equates to £3.9m for the council.
 - Continuation of existing social care funding at 2019/20 levels, using the same methodology as 2019/20. The Council receives £35m, including improved Better Care Fund (iBCF) of £24.4m, additional iBCF £3.8m, winter pressures £2.7m and social care grant £4.6m.
 - Indicative allocation of the £1bn additional Social Care Grant for adult and children's services using Adults Relative Needs formula plus an element of equalisation for the relative ability to increase Council Tax income. There are no ring fencing or reporting requirements relating to this funding. The Council's indicative allocation is £13m of which £7m is expected to support Adults services and £6m for Children's as set out in more detail in the respective reports.
 - The NHS contribution to adult social care, through the Better Care Fund, will increase by 3.4% in real terms in 2020/21. For the Council this is an estimated c£0.8m in 2020/21 in addition to £0.9m additional in 2019/20.
 - The Spending Round announced a real terms increase to the Public Health Grant budget, expected to be 2.7%, an increase of £1.363m. For the City Council Public Health expenditure is not currently grant funded but is now met from retained business rates. The Councils business rates tariff payment to government should be reduced accordingly. The funding announcements made assume that the city council will fund this out of the devolved budget, which is a council decision. Without this increase inflationary increases for NHS and non-NHS contracts will not be affordable and there will be insufficient capacity for sexual health, drug and alcohol and school nursing.
 - This additional grant will be recognised through an adjustment to the business rates top-up/tariff as the Council continues to be in the Greater Manchester 100% Business Rates pilot.
 - The proposed referendum principles for council tax are a core increase of 2% and an adult social care precept of 2%. For the Council each 2% equates to around £3.2m additional income.
 - It is expected that there will be a redistribution of the surplus held in the national levy account in 2019/20, which should be confirmed in the provisional settlement. The national amount has been estimated at £45m

which would equate to £675k for Manchester. This included in the budget a year in arrears to recognise the risk as the final amount is dependent on the national position in relation to safety net and levy payments and receipts.

- 3.4 Where indicative City Council amounts are quoted these are based on an assumption that the distribution will be in line with current methodologies, therefore are subject to change when the settlement is received.
- 3.5 In relation to expenditure budgets there have been updates relating to the impact of expected increases to the National Living Wage (on both Council Staff and commissioned contracts), pension contribution costs, the waste levy and other pressures outlined in the budget reports. The Council's budget position has been updated for known changes and likely changes based on the best information available to date. The main underlying assumptions are as follows:
- Council Tax - 1.99% general precept increase, collection rate c95.5%, base growth c2.4%.
 - The council has agreed to consult on the 2% Adult Social Care precept increase, which would raise an additional £3.3m. If agreed it is proposed to prioritise this to support adults with Learning Disabilities to meet increased need and complexity of citizens.
 - Business Rates - growth assumed in line with the most recent data and developments; the final budget for 2020/21 will be based on the December 2019 business rates figures
 - Additional commercial income of £8m - this has a one-year time lag which will assist with the 2021/22 position
 - GMCA return/refund relating to Business Rates and Waste Disposal of £7.2m. This is a non-recurring payment spread equally across 2020-22.
 - Allowance for continued increase in need based on detailed external advisory work carried out for Children's Services, review of the Adults Social Care budget including the application of the DAS demographic model; and the current upward trend in the demand for Homelessness Services.
 - Pay award assumed to be in line with the Chancellor's commitment of national living wage of £10.50 by 2024/25 - aligned to the Local Government pay scale
 - Increase to reflect national living wage (statutory) increases related to Adult Social Care (note move to the real living wage will continue to be phased).
 - c£4m (or c2%) for non pay inflation to offset pressures in this area, notably utilities and care costs
 - Change in the Employer Pension Contribution rate following completion of the Pensions Actuarial Review. Notification has recently been received that the City Council's contribution rate will decrease slightly, reducing by 0.4% from 19.1% to 18.7%, which is estimated to save c£0.8m per year.
 - The Waste Levy estimate for disposal costs has been updated in line with the latest information from the Greater Manchester Combined Authority.

- 3.6 All existing savings targets are assumed to be delivered in 2020/21 unless they have been identified as not achievable in which case alternative options and/or funding arrangements are being proposed. All directorates have been working to identify new savings proposals and/or efficiencies to support the position including meeting current budget pressures through the realignment of budgets. In recognition of the challenges faced by Adults and Children's Social Care and the Homelessness Service, any savings identified in these areas will be used to achieve a breakeven position in 2020/21, with a focus on stabilising the position and preparing for savings in 2021/22 onwards. In total savings and efficiency options of £2.9m have been identified, as summarised in the table below; these are further detailed in the relevant Directorate reports to Scrutiny.

Table 1: Net Savings Options 2020/21

	2020 / 21 Savings Options Identified	2020 / 21 Pressures/ Priorities Identified	Net savings options supporting bottom line
	£'000	£'000	£'000
Homelessness	1,000	(1,000)	0
Corporate Core	3,450	(2,873)	577
Neighbourhood Services	2,324	(754)	1,570
Growth and Development	690	0	690
Total Savings Options	7,464	(4,627)	2,837

- 3.7 The changes outlined above would enable a balanced budget to be achieved for 2020/21, with a small contribution to the General Fund reserve of £0.3m as shown in the table below.

Table 2: Budget Position 2019/20 (Latest) and 2020/21 (Proposed)

	Latest Budget 2019/20	Proposed Budget 2020/21
	£'000	£'000
Resources Available:		
Business Rates Related Funding	314,653	328,067
Council Tax	166,507	169,852
Other non-ring fenced Grants	65,077	65,398
Dividends and Use of Airport Reserve	62,390	62,890
Use of other Reserves	12,859	21,481

Total Resources Available	621,486	647,688
Resources Required:		
Corporate Costs:		
Levies/Charges	69,990	71,327
Contingency	850	994
Capital Financing	44,507	46,907
Transfer to Reserves	17,718	920
Sub-Total Corporate Costs	133,065	120,148
Directorate Costs:		
Additional Allowances and other pension costs	10,030	9,580
Insurance Costs	2,004	2,004
Directorate Budgets	474,124	505,180
Inflationary Pressures and budgets to be allocated	2,263	10,520
Total Directorate Costs	488,421	527,284
Total Resources Required	621,486	647,432
Transfer from / (to) general fund	0	(256)

- 3.8 The provisional cash limit budget for each directorate is shown in the table below.

Table 3: Cash Limit budgets 2019-21

	2019/20	2020/21
	£'000	£'000
Children's	119,933	128,120
Adults	197,907	220,703
Homelessness	13,933	15,285
Corporate Core	69,554	69,960
Neighbourhood Services	66,981	63,468
Growth and Development	5,816	7,644
Total	474,124	505,180

- 3.9 There remains volatility in the final position for 2020/21 and further changes are anticipated following the publication of the provisional Local Government Finance Settlement (delayed from 5 December), the updated council tax and

business rates position based on the latest information, and formal notifications of any contributions or rebates from the Greater Manchester Combined Authority.

4 Risks and Mitigation

- 4.1 All savings options have been risk rated and each Directorate will maintain their own monitoring arrangements alongside the corporate assurance process. The detailed savings tracker is sent to Senior Management Team on a monthly basis and reported to Executive Members.
- 4.2 Reporting has developed over the last three years and the council has now integrated finance, performance, workforce and risk information into one report supporting a move to advising leaders of the organisations challenges and successes in a single regular summary.
- 4.3 The Council needs to be satisfied that it can continue to meet its statutory duties and meet the needs of vulnerable young people and adults. Options have been drawn up on the basis that Strategic Directors are satisfied that this requirement will be met.

5 Scrutiny of the Draft Budget Proposals and Budget reports

- 5.1 The service budget reports and Council Business Plan are attached for the Committee's consideration. These reports contain details of how services will support the delivery of the Council's priorities as set out in the Corporate Plan. The reports have been tailored to the remit of each scrutiny as shown in the table below.
- 5.2 The Committee is invited to consider the options which are within its remit, alongside the draft business plan and to make recommendations to the Executive before it agrees the final budget proposals.

Table 4: Scrutiny Reports

Date	Meeting	Budget Paper
7 Jan 2020	Resources and Governance Scrutiny Committee	Report covering the Corporate Core and the relevant parts of Growth and Development Directorate (Operational and Investment estate and facilities management)
7 Jan 2020	Health Scrutiny Committee	Adult Social Care and Population Health This is supplemented by: <ul style="list-style-type: none"> ● Draft MHCC Plan on Page, Joint Budget Report 2020/21 and

		refreshed Manchester Locality Plan <ul style="list-style-type: none"> • Summary of draft MLCO Operating Plan 2020/21
8 Jan 2020	Children and Young People Scrutiny Committee	Children and Education Services
8 Jan 2020	Neighbourhoods and Environment Scrutiny Committee	Report covering Neighbourhoods and Relevant services from Growth and Development (Housing and Residential growth)
		Homelessness report
9 Jan 2020	Economy Scrutiny Committee	Report covering Growth and Development and the relevant parts of Neighbourhoods (Business Units)
9 Jan 2020	Communities and Equalities Scrutiny Committee	Report covering relevant services from Neighbourhoods

6 Next Steps

- 6.1 Recommendations from the Scrutiny Committees will be considered by the Executive at its meeting in January 2020 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 January.
- 6.2 The Executive will agree its final budget recommendations on 12 February 2020. These recommendations will be considered by the Resources and Governance Scrutiny Committee at its special budget meeting on 24 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 6 March 2020.
- 6.3 There are no formal consultation requirements identified from the options put forward however there is a statutory requirement to consult with business rates payers. A public consultation on proposed council tax increases is planned from 6 January to 2 February 2020.
- 6.4 The timeline is detailed below.

Table 5: Budget Timeline

Date	Event
4 - 6 February 2020	Scrutiny Committees receive budget reports and associated savings proposals
12 February 2020	Executive - proposes budget - suite of budget reports (revenue and capital) Final Corporate Plan
24 February 2020	Budget Resources and Governance Scrutiny - Revenue and Capital
6 March 2020	Budget Council

7 Conclusions

- 7.1 The Council remains committed to the priorities within the Our Manchester strategy and the Council's corporate plan. The proposed 2020/21 budget reflects changes arising from the Spending Round announcements, forecast pay awards, notifications from GMCA and a robust review of all council service spend to realign budgets and identify savings options.
- 7.2 The draft budget is based on the best information available to date, however there will be changes arising from the outcome of the Local Government Finance Settlement, changes to Council Tax or Business Rates (when figures are finalised in January), and final notifications from the GMCA of the allocations to Districts.
- 7.3 Whilst the additional funding from the Government announced in the Spending Round is welcomed, it is not considered sufficient to address the underlying need, particularly following the austerity measures implemented since 2010/11. There remains no clear longer term national funding plan beyond 2020/21, with uncertainty in a number of key funding areas. Most notably, the outcome of the 2020 Spending Review (delayed from this year), the distribution of funding across local government (through the Fair Funding Review) and the impact of the anticipated business rates reforms and reset. Whilst the Council is publishing a one-year budget for 2020/21 in line with the single year spending round announcement from Government, work is ongoing to plan for a three year position based on the latest information available. This is critical to demonstrate the financial resilience of the Council and assist services in their future planning, ensuring the council is in a good position to respond to national funding changes.

**Manchester City Council
Report for Information**

Report to: Resources and Governance Scrutiny Committee – 7 January 2020
 Health Scrutiny Committee – 7 January 2020
 Children and Young People Scrutiny Committee – 8 January 2020
 Neighbourhoods and Environment Scrutiny Committee – 8 January 2020
 Economy Scrutiny Committee – 9 January 2020
 Communities and Equalities Scrutiny Committee – 9 January 2020

Subject: Council Business Plan 2020/21

Report of: Chief Executive

Summary

This report presents the draft Council Business Plan for 2020/21.

Recommendations

It is recommended that Scrutiny Committee members consider the content of this report and comment on challenges, priorities and opportunities. The plan will be considered by Executive in February.

Wards Affected: All

Environmental Impact Assessment - the impact of the issues addressed in this report on achieving the zero-carbon target for the city
This paper proposes the inclusion of an additional Corporate Plan priority - 'Zero Carbon Manchester' to reflect the city's zero carbon ambitions and declaration of the climate emergency. The plan therefore ensures specific organisational focus on activity driving this priority and therefore achieving the zero-carbon target for the city.

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	Our Corporate Plan describes the Council's contribution over the next 2-3 years to delivering. Our Council Business Plan 2020-21 describes in more detail the action we are taking to deliver our Corporate Plan in 2020-21 and as such makes contributions to all of the Our Manchester Strategy outcomes
A highly skilled city: world class and home grown talent sustaining the city's economic success	

A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	
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	

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 are to be read in conjunction with papers forming part of the preparation of the Council's draft revenue and capital budget for 2020/21 to be reported to the Executive for approval in February 2020.

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1. Introduction

- 1.1. The purpose of this report is to present the draft Council Business Plan 2020-21 to Scrutiny Committees for comment. The Plan is attached to this report at Appendix 1.
- 1.2. Our Corporate Plan sets out the Council's priorities for the next 2-3 years which will deliver the three-way push and contribute to our vision for the city. Our Council Business Plan 2020-21 describes in more detail the action we are taking to deliver our corporate plan this year. It is supported by our wider strategic framework including our People Strategy and our ICT Strategy.
- 1.3. The document is currently in draft and will be updated following feedback from Scrutiny Committee. Any substantive changes made to the budget will also be reflected in the final version of this plan
- 1.4. In addition, further work on alignment with the refresh of the Our People Strategy and ICT Strategy will take place once those strategies are drafted and presented to Resources and Governance Overview and Scrutiny Committee in February.

2. Background

- 2.1. Our Council Business Plan replaces individual directorate business plans produced previously. This plan is structured around the eight priority themes and has been produced following the development of 41 service plans which describe in more detail the achievements, priorities and activities of the 41 services which collectively make up Manchester City Council.
- 2.2. Each priority theme section describes:
 - The priority theme, including key strategies and plans which are helping to drive deliver
 - Our key achievements driving delivery of this priority theme in the last year
 - Our planned activities and initiatives across council services which will drive delivery of the priority theme in 2020-21
 - The key measures which will help us to understand if we have been successful
- 2.3. This plan does not refer in detail to the Council's budget position for 2020-21 which is described in individual budget plans for each of the Council's directorates.
- 2.4. The plan also describes the Council's key workforce and technology considerations for 2020-21 as key enablers to delivering our Corporate Plan. Equalities implications are also described as well as our approach to risk management.

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Appendix 1: Council Business Plan 2020-21

Our Corporate Plan

Our Corporate Plan describes the Council's contribution over the next 2-3 years to delivering the Our Manchester Strategy 2015-2025. Our Manchester is the vision that the whole city - not just the Council - is working towards.

Our vision is for Manchester to be in the top flight of world-class cities by 2025 and to be somewhere that is:

- Thriving
- Full of talent
- Fair
- A great place to live
- Connected

The transformed Manchester that the vision aims for is so ambitious that business-as-usual approaches will not get us there.

To make that vision happen for everyone by 2025, as resources shrink and demand grows, the Our Manchester approach involves a three-way push to:

- Keep the basics on track
- Prevent problems down the line
- Tackle complex problems together

Our Corporate Plan sets out the Council's priorities for the next 2-3 years which will deliver the three-way push and contribute to our vision for the city. Our Council Business Plan 2020-21 describes in more detail the action we are taking to deliver our corporate plan this year. It is supported by our wider strategic framework including our People Strategy and our ICT Strategy.

A number of key activities will support delivery of a number of our corporate plan priorities including:

- Delivery of our approach to place-based reform in Manchester - Bringing Services Together for People in Places
- Integration of Health and Social Care through partnership arrangements with the NHS
- Delivery of the Local Industrial Strategy which will deliver inclusive and green growth for the city of Manchester
- Delivery of Our Transformation - a new Council-wide portfolio of programmes which has been set up with a view to changing how we work as an organisation to ensure we can deliver our corporate priorities and specifically ensure that we are a 'well managed council'
- Continuing to ensure that the 'Our Manchester' approach is the way we do things here, rather than a thing we do

Our Corporate Plan priorities have been refreshed for 2020-21 to reflect the city's

zero carbon ambitions and declaration of the climate emergency, the launch of the local industrial strategy for the city, the headlines from the 2019 State of the City report, and the planning for internal transformation.

Our Corporate Plan priorities going forward are, in no particular order of importance:

Zero carbon Manchester

Lead delivery of the target for Manchester to become a zero carbon city by 2038 at the latest, with the city's future emissions limited to 15 million tonnes of carbon dioxide:

- Work with the Manchester Climate Change Agency to develop a full action plan for the city by March 2020, setting out how the ambition will be met
- Ensure activities are delivered to reduce the Council's own direct emissions as part of this plan
- Contribute to improvements in air quality across Manchester required in the Clean Air Plan

Young People

From day one, support Manchester's children to be safe, happy, healthy and successful, fulfil their potential, and make sure they attend a school graded 'good' or better:

- 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 number of children needing a statutory service
- Reduce the number of children growing up in family poverty

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:

- 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

Ensure delivery of the right mix of good-quality housing so that Mancunians have a good chance of quality homes:

- Accelerate and sustain the delivery of more housing
- Ensure the provision of enough safe, secure and affordable housing for those

on low and average incomes

Neighbourhoods

Work with our city's communities to create and maintain clean and vibrant neighbourhoods that Mancunians can be proud of:

- Enable clean, safe, vibrant neighbourhoods

Connections

Connect Manchester people and places through good-quality roads, sustainable transport and better digital networks:

- 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 economy

Growth that benefits everyone

Boost the city's productivity and create a more inclusive economy that all residents can participate in and benefit from, and contributing to reductions in family poverty, as set out in the Our Manchester Industrial Strategy:

- Support good-quality job creation for residents, and effective pathways into those jobs
- Facilitate economic growth of the city

Well-managed Council

Support our people to be the best and make the most of our resources:

- Enable our workforce to be the best they can be through the Our People Strategy and Our Manchester behaviours
- Effectively plan our future budgets and balance our current budget, delivering savings, transformation of the organisation, reductions in demand through reform, and generating income

Our Council Business Plan for 2020-21

This plan is structured around the eight priority themes and has been produced following the development of 41 service plans which describe in more detail the achievements, priorities and activities of the 41 services which collectively make up Manchester City Council.

Each priority theme section describes:

- The priority theme, including key strategies and plans which are helping to drive deliver
- Our key achievements driving delivery of this priority theme in the last year
- Our planned activities and initiatives across council services which will drive delivery of the priority theme in 2020-21
- The key measures which will help us to understand if we have been successful

This plan does not refer in detail to the Council's budget position for 2020-21 which is described in individual budget plans for each of the Council's directorates.

The plan also describes the Council's key workforce and technology considerations for 2020-21 as key enablers to delivering our Corporate Plan. Equalities implications are also described as well as our approach to risk management.

Our Corporate Priorities

Zero Carbon Manchester

Lead delivery of the target for Manchester to become a zero carbon city by 2038 at the latest, with the city's future emissions limited to 15 million tonnes of carbon dioxide:

- Work with the Manchester Climate Change Agency to develop a full action plan for the city by March 2020, setting out how the ambition will be met
- Ensure activities are delivered to reduce the Council's own direct emissions as part of this plan
- Contribute to improvements in air quality across Manchester required in the Clean Air Plan

The Our Manchester Strategy sets out the vision for Manchester to 'be in the top flight of world-class cities by 2025' and commits the city to 'playing its full part in limiting the impacts of climate change'.

The Council declared a climate emergency in July 2019. Manchester has committed to emit only 15m tonnes CO₂ during 2018-2100, become a zero carbon city by 2038, which means reducing emissions by at least 13% every year.

Manchester City Council's Zero Carbon 2038 Action Plan will be finalised by end March 2020, detailing how the city's zero carbon ambitions will be delivered. The action plan will include workstreams to address:

- Internal direct emissions
- External influence and policy
- Quantifiable carbon savings
- Achieving approximately 50% reduction in 4 - 5 years

Poor air quality is the largest environmental risk to the public's health. Taking action to improve air quality is crucial to improve population health. The ten GM authorities, supported by Transport for Greater Manchester, have now developed a draft package of co-ordinated and robust measures. **The GM Clean Air Plan** is anticipated to contribute to the Our Manchester Strategy by:

- Improving air quality across Greater Manchester,
- Ensuring that residents can access job opportunities and other services in a safe and clean environment,
- Reducing congestion and air pollution, improving perceptions of the city, and reducing carbon emissions,
- Investing in and maintaining the city's transport infrastructure, helping to drive growth.

Every council service is responsible for working together to deliver this priority with some services (City Policy, Neighbourhoods, Financial Management, Growth and Development) taking a lead role in the development of the Zero Carbon 2038 Action Plan.

As of July 2019 the city had achieved a 5% reduction in carbon emissions since 2017. In 2018 the city achieved a 40% reduction in emissions since 2005 and is now projected to achieve the 41% reduction in carbon emissions by 2020.

Data for the 2018/19 financial year shows that the Council's direct emissions have reduced by 48.1% since the 2009/10 baseline meaning that the 41% target has been achieved and surpassed a year ahead of schedule.

Data derived from Manchester's two permanent air quality monitoring stations shows that recent concentrations of NO₂ have fallen at both the Oxford Road and Manchester Piccadilly sites since the 2015 baseline (from 66 ug/m³ to 62ug/m³ and from 39ug/m³ to 35ug/m³ respectively).

Activities supporting delivery of this priority

- Drive progress in transitioning to a Zero Carbon Council and city by 2038 at the latest through changing our decision-making, policies, standards and external influencing
- Support delivery of the Zero Carbon 2038 target for Manchester by:
 - Moving to a position where new homes (and other buildings) generate zero emissions when occupied and have significantly less emissions embodied in their materials and the construction phase;
 - Delivering a comprehensive approach to existing homes (and other buildings)

<p>through the application of retrofit schemes that improve their energy efficiency;</p> <ul style="list-style-type: none"> ➤ Working towards all new development being zero carbon by 2028 as per the ambition set out in the draft Greater Manchester Spatial Framework ● Embed the Council's climate change priority across communication services, providing leadership, supporting effective communications and taking practical steps to reduce our impact ● Deliver the Corporate Estates Carbon Reduction Programme phase 1 by focusing on reducing energy in 13 of the highest energy consuming buildings ● Review waste collection fleet in line with the aims of Clean Air Plan and Zero Carbon Strategy ● Deliver high quality green & blue infrastructure, including: <ul style="list-style-type: none"> ➤ Protecting and enhancing open spaces and biodiversity ➤ Maximising the role of green spaces to sequester carbon, contributing to a reduction in atmospheric CO2 concentration. ➤ Establishing the Carbon Reduction Plan for the Parks service and bring forward investment cases for CO2 reduction and CO2 sequestration measures ● Ensure Manchester's next Local Plan fully embeds our climate change commitments into the next phase of development of the city, promoting residential development which is in line with the Council's targets to be Zero Carbon by 2038 ● Commit to reducing carbon throughout all programmes of work and raise awareness of carbon usage and looking for 'greener' alternatives ● Progress delivery of the Civic Quarter Heat Network, which will provide a highly efficient, environmentally-friendly heat and power solution for some of Manchester's most iconic buildings, making significant carbon reductions. ● Drive forward the introduction of electric fueling infrastructure, plant and equipment for all MCC services and ensure all fleet vehicles, including the waste fleet, meet the required emissions standards in preparation of the introduction of the Greater Manchester Clean Air Zone. ● Develop a plan for external influence at a city, city region and national level 		
Key measures of success	17/18	18/19
% reduction in MCC Direct CO ² Emissions against 2009/10 baseline	33.8% (2017/18)	48.1% (2018/19)
Projected CO ² % reduction against 2005 baseline by 2020	38% (2018)	40% (2019)
<i>Reduce the city's and the council's carbon emissions by on average 13% year on year to 2038, representing a 50% reduction in the next 4-5 years</i>		
<i>Reach the net zero carbon emissions target by 2038, or earlier if possible</i>		

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:

- Support more Manchester children to have the best possible start in life and be ready for school and adulthood
- Ensure all children have high-quality education
- Reduce number of children needing a statutory service

The Children and Young People's Plan – Our Manchester, Our Children (2016–2020) – describes a vision for 'building a safe, happy, healthy and successful future for children and young people'.

In 2019-20 there has been a focus on developing and delivering a model for delivering this vision, through our Children's and Education services which strengthens partnerships and delivers local, place-based services on a city-wide, locality and neighbourhood footprint, with a greater focus on prevention and early support. This locality delivery model includes collaboration with Manchester Local Care Organisation (MLCO) and aligns to Bringing Services Together for People in Places and Manchester's Multi Agency Safeguarding Arrangements (MMASA).

Together with our Children's and Education services; Parks, Leisure, Youth & Events, Libraries and Work and Skills, in partnership with key external partners, play a significant role in delivering the Young People priority. Recent achievements include:

- Improved attainment outcomes for Manchester's children at all key stages from the levels achieved in the 2016-17 academic year to those achieved in the 2017-18 academic year, with improvements for looked after children (LAC) achieving grade 5 or above in both English and Maths at KS4 over this period being greater for Manchester's LAC than LAC in England as a whole.
- Implementation of a redesigned 'front door' - the Advice and Guidance Service - to deliver a more coordinated and efficient Children's Social Care service as part of the implementation of the wider locality programme. These improvements were evidenced by the number of referrals made into the service dropping from 13,228 in 2017/18 11,174 in 2018/19.
- Reduced the number of children and young people subject to child protection plans from 982 at the end of 2017/18 to 787 at the end of 2018/19 and increased the percentage of child protection conferences held within 15 days of the start of the Section 47 enquiry from 78.4% in 2017/18 to 95.2% in 2018/19.
- Throughout 2017/18, 19,000 children and young people participated in youth and play provision through our commissioned activity, 7,000 engaged in social action projects and 28,000 voted in the Make Your Mark ballot.
- Reduction in the number of 16-17 year olds who were not in education, employment or training in 2018/19 from the levels seen in 2017/18.
- Delivery of Adverse Childhood Experience (ACE) Pilot in Harpurhey from July 2018 to July 2019, with 600+ staff trained in Trauma Awareness.
- Received an award for the 'Food for Life Served Here' initiative demonstrating

Manchester's children and young people are provided with fresh, local and honest food and recognises our corporate social responsibility and good teamwork.

- Launch of Manchester's Inclusion Strategy, developed with multi-agency partners to help us work together in supporting children and young people to good attendance, and to reduce the risk of all types of exclusion.
- Development of Our Manchester Youth Offer Strategy (2019-25) to ensure that young people have access to high quality youth offer that addresses both universal and targeted needs in order to foster high aspirations and independence.
- Attracted 18,000 school participants at Manchester Art Gallery in 2018/19.

Activities supporting delivery of this priority

Support Manchester's children to be safe, happy and healthy and reduce the number of children needing a statutory service;

- Deliver children's services through the integrated locality based delivery model
- Drive high quality safeguarding practice and robust and effective child protection plans by providing a high challenge and high support environment through the delivery of a coordinated quality assurance framework.
- Safely reduce the number of children looked after and/or in need of a statutory service including exploration of the implementation of the Strengthening Families Programme, a multi-agency 'think family' approach using motivational interviewing
- Deliver the sufficiency strategy, ensuring there is the right provision available locally to meet the needs of Manchester's children that are looked after by the council.
- Support children and young people to influence the decisions that impact on them by enabling their voice and feedback to be heard.
- Refresh and launch of the Children and Young People's Plan 2020 - 2024. This will be informed by consultation with partners and young people, with shared ownership of the priorities - supporting Manchester's children to be safe, happy, healthy and successful.
- Work in partnership with the NHS to promote and support healthy food choices by providing educational sessions and offering an inclusive range of food.
- Implement the new 3 year strategy for young people - Manchester Youth Offer which will focus on ensuring young people are thriving, are skilled, resilient, and healthy.
- Support the 'Young Manchester' charity to fairly distribute funding to the city's youth and play providers so that they can increase the provision of services.
- Maximise young people's awareness of the city's wider youth offer and relaunch the Manchester Youth Council to ensure young people are connected, valued and heard in all we do.
- Help prevent and reduce young people presenting with homelessness, becoming and remaining homeless and being supported in temporary accommodation. One specific way we will support this is through developing wider housing options for young people.

Ensure Manchester's children are ready for and receive a high-quality education and support them to be successful and fulfil their potential;

- Improve outcomes for all children and reduce the gap to national levels with a particular focus on reading, improving school readiness and improving outcomes for children and young people with special education needs or disabilities.
- Develop and implement new partnership arrangements with early years providers.
- Develop a self improving schools system through the Manchester Schools Alliance and other partnerships, including a model for teams around the school and school clusters
- Increase the percentage of Manchester's schools which are rated as good or better, and develop a coordinated approach to quality assurance of 'education other than at school'.
- Provide high class education facilities in accordance with the Council's Basic Needs requirements and ensure there are a sufficient number of school places available for the city's children.
- Provide services in Early Years services including 55 Sure Start Centres
- Implement the Inclusion Strategy to promote inclusion and prevent exclusion (including exclusion from schools).
- Increase the number of schools and colleges in the City achieving the Gatsby benchmarks which demonstrate young people are ready for adulthood
- Work with schools & youth organisations to build on Careers Education, Information, Advice and Guidance (CEIAG) and the Skills 4 Life offer.
- Coordinate a coherent and comprehensive post 16 offer and implement a Not in Education Employment or Training (NEET) reduction plan, to capitalise on new opportunities in the City and reduce the proportion of Manchester children who are NEET.
- Improve literacy and educational attainment through the provision of activities in libraries and galleries and cultural activities, for example, through supporting the Read Manchester campaign.

All of the activities outlined will be enabled by corporate and supporting functions including repair and maintenance services to our 55 Sure Start and Children's centres and our 94 school kitchens, dedicated programme and project support, provision of intelligence, evaluation and performance information and the delivery of a new Early Years & Education ICT system.

Key measures of success	17/18	18/19
Percentage of Manchester's children achieving expected standard in Reading, Writing and Maths at Key Stage 2	60% (2017)	62% (2018)
Percentage of Manchester's children achieving grade 5 or above in both English and Maths at Key Stage 4	34.9% (2017)	35.6% (2018)
Percentage of Manchester's Looked After Children achieving grade 5 or above in both English and Maths at Key Stage 4	8.3% (2017)	9.1% (2018)

The percentage of Manchester's children achieving a good level of development in the Early Years Foundation Stage	66.2% (2017)	66.9% (2018)
The number of Looked After Children in Manchester and the rate per 10,000 children	1,258 (104 per 10,000)	1,290 (106 per 10,000)
The number of Children In Need in Manchester	5,634 (465 per 10,000)	5279 (433 per 10,000)

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:

- 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

Our work to ensure our people are healthy and cared for is primarily delivered through two health and social care partnership organisations - Manchester Health and Care Commissioning (MHCC) and Manchester Local Care Organisation (MLCO). Our population health services form part of MHCC, whilst the delivery and commissioning of adult social care services is managed by the Manchester Local Care Organisation.

Further detail on the delivery of these services is described in Manchester's Locality Plan, the MHCC Plan on a Page for 2020/21, and MLCO's operating plan for 2020/21.

Our adult social care services play a key role in integrated neighbourhood teams and are part of the delivery of new models of care. A number of other council services make key contributions to ensure that Mancunians are healthy and well including our leisure service, libraries and cultural offer.

The original Locality Plan: Our Healthier Manchester, produced in 2016, set out the ambition to improve health and care outcomes for the people of Manchester within a financially sustainable health and social care system. The initial focus led to a rationalisation of the Manchester system, through the creation of a single commissioning function (SCF), a single hospital service (SHS), and a local care organisation (LCO). Greater Manchester Mental Health (GMMH) Trust replaced the previous provider as the lead for delivering mental health services in Manchester.

The updated Locality Plan (April 2018), set within the context of the city's Our Manchester strategy, shifted the emphasis away from structural change to a focus on Our People, Our Services and Our Outcomes. The Locality Plan is now being refreshed again (November 2019), to reflect the place-based approach to public

services across Greater Manchester (Bringing Services Together for People in Places in Manchester) and the requirements of the NHS Long Term Plan.

Recent system-wide achievements set out in the Locality Plan include:

- An increase in new cases of cancer diagnosed at stage 1 or 2.
- A sustained decrease in smoking prevalence.
- An upward trend in CQC good or above rated Nursing and Care Homes.
- An increase in uptake of Personal Health Budgets.
- A sustained reduction in avoidable prescribing.

Recent achievements within MLCO the Adults Improvement Plan and the wider health and social care system include:

- 12 Integrated Neighbourhood Teams established with leadership 'quintets' in place
- Primary care leadership in place at locality and neighbourhood level and 14 Primary Care Networks across the city
- Major recruitment campaign delivered with 61.5 additional social workers in place as of November 2019
- Development of new strengths based approach to assessment and support planning, delivering improved outcomes and a more streamlined process
- Delivery of phase 1 of technology-enabled care programme transferring c.150 citizens from legacy provider
- Some reductions in social care waiting lists including (between May and July 2019) a reduction of 43% in ongoing work waiting and 8% in reviews
- A statistically significant reduction in A&E attendances from the impact of Manchester Care Management (High Impact Primary Care);
- The expanded Reablement service has achieved 26% fewer homecare visits and 22% fewer homecare hours than people who had been referred to Reablement but not supported; and
- Extra Care accommodation has enabled improved quality of care for residents and approximately 1,200 fewer days of residential care.
- Investment in North Manchester Hospital from government

Homelessness is not just about people who sleep rough on our streets, but also consists of the much larger number of single people in hostel accommodation, families in dispersed temporary accommodation, as well as those who are hidden homeless. Across Manchester an increasing number of individuals and families are becoming homeless and are at greater risk of homelessness. The Homelessness Strategy aims to make:

1. Homelessness a rare occurrence: increasing prevention and early intervention
2. Homelessness as brief as possible: improving temporary and supported accommodation so it becomes a positive experience
3. Experience of homelessness a one-off occurrence: increasing access to settled homes

Organisations across the city all have a contribution to make and a role to play towards these aims in order to reduce homelessness.

Our Homelessness services leads on the objective of reducing the number of people becoming homeless, and better outcomes for those who are homeless. The objective is also delivered by a range of services across the council including Housing, Health, Children's Services and Adults Services within MLCO.

Homelessness services achievements in the last year include:

- Successfully ensured that the Council met all it's legal duties in challenging circumstances.
- Developed a specialist service to tackle evictions from the private rented sector which successfully prevented homelessness.
- Delivered a comprehensive response to rough sleeping through the provision of over 45,000 bed-nights for people who sleep rough in the city.
- Increased the level of access to affordable property in the private rented sector.

Activities supporting delivery of this priority

In 2019/20 the Homelessness Service will

- Provide high quality services in all that we do through delivery of the Homelessness Service Transformation Programme, forming the core of the approach to tackling and reducing homelessness over the next three years
- Reduce the use of temporary accommodation, including through the continuation of a new team focused on Section 21 presentations (no fault evictions), providing support to prevent or delay the use of temporary accommodation
- Reduce the cost of temporary accommodation including through enhanced incentives for private landlords and aiming to move people directly from their current property into dispersed accommodation, avoiding the use of bed and breakfast accommodation
- Increase the level of homelessness prevention through a multi-agency response and development of a city-wide 'Prevention Compact', informed by two locality based prevention pilots in Moss Side and Clayton & Openshaw
- Reduce the numbers of people who sleep rough through providing targeted support
- Increase the profile of homelessness prevention and broaden the range of partners who help us to achieve this.
- Play a positive role in the Manchester Homelessness Partnership, to build the partnership and maximise contributions from all sectors, including in the co-production of services.
- Ensure that the Council meets all of its legal duties to homeless people and people at risk of homelessness.

These activities will be supported by the development of temporary and permanent housing solutions and the development of a new commissioning strategy for homelessness services.

All of the activities outlined will be supported by dedicated programme and project support and provision of intelligence, evaluation and performance information.

Key measures of success	17/18	18/19
The number of households who presented as being homeless or being threatened with homelessness and were owed a duty. N.B. The introduction of the Homelessness Reduction Act 2018 means that 2017/18 and 2018/19 results are not comparable.	1,222	4,336
The number of households, (who had presented as being homeless or being threatened with homelessness), who were being supported as a 'prevention case' and were subsequently prevented from becoming homeless via being able to stay in their existing property or securing alternative accommodation (and staying in this accommodation for 6+months)	313	375
Number of households who moved on into settled accommodation provided by Registered Housing Providers.	387	479
Number of households who moved on into settled accommodation provided by the Private Rented Sector	187	404

Housing

Ensure delivery of the right mix of good-quality housing so that Mancunians have a good chance of quality homes:

- Accelerate and sustain the delivery of more housing
- Ensure the provision of enough safe, secure and affordable housing for those on low and average incomes

The Residential Growth Strategy (2015–2025) sets out the city's approach to providing the right housing mix of safe, secure and affordable homes for a growing and increasingly diverse population.

The Strategy was updated in 2019 increasing the overall target of new homes from 25,000 to 32,000 and committing the city to deliver 20% of all new homes as affordable tenures, representing a minimum of 6,400 new homes by March 2025 (up from 5,000).

Multiple services and directorates work together to deliver this priority. The services with a lead role include Strategic Housing and Residential Growth, City Centre Growth & Regeneration, Development Team, Planning, Building Control and Licensing. Corporate services such as City Policy and PRI provide strategic and analytical support to help deliver the objectives.

It is forecast that c.5,200 new homes will be delivered in Manchester by the end of

2019/20 of which 521 will be affordable homes and 36 Extra Care units. This year there have been more cranes across the skyline than ever recorded, including the previous pre-recession construction peak in August 2005. There are currently over 11,000 new homes under construction in Manchester, including 9,000 in the city centre, more than in any other Core City or individual London borough. A total of 14,000 new homes are forecast to be completed by March 2022. Other achievements in the last year include:

- Delivered 53 new Council homes in Brunswick
- Delivered 61 new homes for sale in the Miles Platting and Brunswick PFI contracts
- Commenced the final phase of 330 new homes for sale in West Gorton
- Delivered 1,500 new homes for rent and sale in New Islington and Ancoats via the Manchester Life JV Partnership
- Delivered 70 apartments for people with a Learning Disability
- Acquired 20 large homes for homeless families
- Begun sprinkler installation in 25 Council tower blocks
- Completed the review of the Allocations Scheme, which is used to assess the eligibility and priority of applicants for the social housing the Council has available
- Created and approved a number of strategic regeneration frameworks to guide a comprehensive and holistic approach towards regeneration across the extended city centre. Examples include Northern Gateway, Great Ducie Street and Knott Mill.

Activities supporting delivery of this priority

- Deliver a minimum of 6,400 affordable homes between 2015 - 2025 including 7 new Extra Care and 3 Community-Led Housing schemes by:
 - Working closely with Registered Providers to deliver housing on Council-owned land, and
 - Working with developers to deliver housing on privately-owned land
- Provide the conditions that enable the building of 32,000 new homes in Manchester between 2015 and 2025
- Deliver a range of major projects that include:
 - Northern Gateway - A joint venture between the Council and Far East Consortium which has the potential to contribute up to 15,000 new homes over a 15 to 20-year period.
 - Eastern Gateway - Identify and start work on new phases of the Manchester Life Joint Venture Partnership, and identify opportunities for the delivery of new homes in ongoing regeneration around the Etihad Campus
- Great Jackson Street – Work has rapidly progressed on the delivery of significant new residential development at Great Jackson Street, contributing up to 6,000 new homes. Construction is nearing completion on the four residential developments that comprise Deansgate Square
- Develop the new Local Plan for Manchester, setting out how the city will meet the need for development over the years to 2038
- Deliver a quality, efficient, inclusive and proactive Planning service, acting as enablers for new homes, creation of neighbourhoods where people want to live and engaging meaningfully with all stakeholders

- Create a refreshed City Centre Strategic Plan. This will set out the current position of the city centre and the plans and aspirations over the next period. The document will provide Local and Central Government colleagues with this shared insight.
- Ensure fire safety improvements are delivered especially in high rise buildings in line with the Hackett Review of Building Regulations and Fire Safety, of which Manchester is an early adopter
- Continue to work collaboratively with neighbourhood teams to develop and deliver new areas for Selective Licensing across the city.
- Provide specialist property advice to colleagues and politicians in respect of all development opportunities. Taking a lead role in the delivery of transformational regeneration projects across the City.
- Identify long term empty homes and work with owners and developers to bring them back into use
- Utilise the GM Housing Fund for development finance to help unlock mainstream institutional finance to fund new homes in Manchester.

All of the activities outlined above will be supported by the Policy and Performance, Research Intelligence teams through delivery of appropriate and up to date planning policy and strategic frameworks including the new Manchester Local Plan and production of credible and relevant intelligence that supports decision making, evidences change and supports the development of key strategic documents

Key measures of success	17/18	18/19
The number of new homes built in Manchester	2,865	2,897
Affordable homes delivered according to government definition	297	338
Percentage of properties empty for 6 months or longer	0.61%	0.56%

Neighbourhoods

Work with our city's communities to create and maintain clean and vibrant neighbourhoods that Mancunians can be proud of:

- Enable clean, safe, vibrant neighbourhoods

Multiple services and directorates work together to deliver the Neighbourhoods corporate plan priority.

The three Neighbourhood Teams (North, Central, and South) manage and develop the city's neighbourhoods and work with services delivered locally to respond to the needs of different places and play a significant role in the delivery of Bringing Services Together for People in Places.

A number of citywide teams take a lead role in delivering specific elements of the neighbourhoods priority.

Together, Waste, Recycling and Street Cleansing, Compliance and Enforcement and Community Safety play a significant role in ensuring our neighbourhoods are clean and safe. Libraries, Galleries and Culture, Markets, Parks, Leisure, Youth and Events work together to make sure our neighbourhoods are vibrant places where people want to live, work and visit. Some of the recent achievements include;

- Increased the number of library visits by over 270,000 from 2017/18 to reach 3.2million in 2018/19, and increasing the number of visits to Manchester Art Gallery over the same period by over 20% to reach 731,003 in 2018/19.
- Voted as within the top 3 Christmas Markets in Europe in 2019 and consistently being voted in the top ten.
- Partnered with 37 organisations to facilitate or deliver a programme of 60 calendar events that attracted over 1.3 million people over 168 days of live events, raising the profile of the city on the regional, national and international stage.
- Ensured 1,491 littering prosecutions and 241 prosecutions for waste offences
- Made 3,130 visits to inspect food businesses and seizing 8,555 unsafe items from other trade premises.
- Attracted over 7,000 volunteers to support more than 200 events during the Great British Spring Clean campaign in 2019 - the city's best performance yet.
- Improved the cleanliness of the city's streets from 2018 levels and having cleaner streets than the national average according to an independent survey in 2019.

Strategic Communications, Reform and Innovation, Performance, Research and Intelligence (PRI), Legal Services, Corporate Estates and Facilities Management all play an enabling role in delivering this priority.

Activities supporting delivery of this priority

Ensure our neighbourhoods are vibrant places where people want to live, work and visit

- Deliver the city's cultural strategy agenda. This will be supported through the effective management of the Council's strategic cultural investments and grants, the development of partnerships in the city and internationally (including with Denmark, China and Music Cities) and the delivery of the Cultural Impact Survey.
- Develop and maintain a strong cultural offer at a neighbourhood level through the city's libraries, galleries and cultural attractions. This will be supported through working with our local communities and partners (such as artists, Cultural Leaders Group, Arts Council England and Manchester International Festival) to widen access to and participation at libraries, galleries and cultural attractions.
- Continue to develop Manchester's libraries so that they offer creative spaces and, as a UNESCO City of Literature, promote literacy and reading for pleasure through the Read Manchester programme and a range of cultural events and community writing projects.
- Commission and deliver a comprehensive programme of activities and volunteering opportunities to engage all residents and target under-representation. This will include improving the offer for young people and

enhancing holiday activities available to them, launching accessible physical activity sessions as part of the Local Delivery Pilot and running initiatives targeted at women and girls to promote their use of and their volunteering at parks and leisure facilities.

- Implement the Events Strategy, establish the Events Commission and deliver a vibrant events programme including civic and community events which promote citizenship, participation and feedback across the city's diverse communities. This will be achieved through working together with stakeholders such as Marketing Manchester, Manchester Business Improvement District and various accommodation providers.
- Manage our parks and leisure facilities to ensure they are great places to visit, get active and enjoy.
- Deliver a range of enhancements and new public realm schemes such as the Medieval Quarter, Lincoln Square and Piccadilly Gardens.
- Manage, revitalise and maintain the Council's heritage estate and provide specialist advice on key heritage projects (e.g. Our Town Hall, Crossley House, Varna Street and Victoria Baths).
- Take a lead role in transforming and regenerating local district and town centres (such as Harpurhey, Newton Heath and Wythenshawe).
- Provide diverse, accessible, exciting and contemporary markets in order to enhance the experience in the City Centre and across new sites.
- Engage with residents and local businesses to increase their participation in neighbourhoods, build their resilience, celebrate their strengths and reduce demand on key services.
- Work with key stakeholders from a neighbourhood perspective to ensure that city wide service development and delivery plans take account of local needs and emerging priorities.

Ensure our neighbourhoods are clean and safe

- Make Manchester the country's first 'Tidy City' by 2020 through the council's partnership with the Keep Britain Tidy charity.
- Deliver the fly-tipping intervention project to reduce fly-tipping of both domestic and commercial waste and invest in 'target hardening' solutions for fly-tipping hotspots.
- Ensure effective waste collection, increased recycling and street cleansing through our contract with Biffa and the Greater Manchester disposal contract with Suez.
- Increase compliance of food businesses with regulations and implement the food safety intervention programme.
- Reduce the supply of unsafe consumer products, illicit tobacco and the sale of age restricted products to those under age.
- Support outreach teams in the City Centre and Neighbourhoods to address rough sleeping and begging.
- Use appropriate tools and powers to reduce crime and antisocial behaviour (ASB).
- Work with partners and voluntary and community sector organisations to strengthen community cohesion and challenge hate, prejudice and extremism across the city's diverse communities.
- Tackle Domestic Violence and Abuse through initiatives such as Cut It Out

<p>campaign and a pilot approach to address child/adolescent to parent violence.</p> <p>All of the activities outlined support the delivery of integrated services in neighbourhoods, Bringing Services Together for People in Places, and will be enabled by corporate and supporting functions including the provision of specialist property advice, dedicated policy and project support and provision of intelligence, evaluation and performance information.</p>		
Key measures of success	17/18	18/19
Antisocial behaviour incidents per 1,000 people	9	9
Number of flytipping incidents per 1,000 people	32.1	34.8
% of residents attending a cultural event N.B. It is unknown whether data for years after 2017/18 will be available.	50.8%	N/A
% of residents using a public library service N.B. It is unknown whether data for years after 2017/18 will be available.	40.7%	N/A
Percentage of household waste recycled	38.6%	40.1%
Piccadilly/Oxford Rd NO ² annual hourly mean concentration (µg/m ³)	36% / 65% (2017)	35% / 62% (2018)
Total number of visits to Manchester's libraries, galleries and sports and leisure facilities	7,011,414	7,274,428

Connections

Connect Manchester people and places through good-quality roads, sustainable transport and better digital networks:

- 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 economy

For a city to be successful it needs to be well connected – internationally, nationally and locally. Residents and businesses have helped develop a number of relevant strategies including the Greater Manchester 2040 Transport Strategy, which was adopted in 2017, and a refreshed City Centre Transport Strategy will be published in 2020. We have also been working with our partners to support the city's digital aspirations and ensure that Manchester has the digital infrastructure and digital skills to access global opportunities

Together, Highways, Operational Services (Highways Maintenance, Grounds Maintenance and Fleet), City Policy, City Centre Growth and Regeneration, the Development Team and Parking Services, play a significant role in **connecting the city through good quality roads and sustainable transport systems**. Recent achievements include:

- National Transport Award for 'Excellence in Cycling and Walking' in recognition of the Oxford Road Scheme, and scored highly on the 2019 National Highways and Transport Network (NHT) Public Satisfaction Survey.
- Repaired over 15,000 recorded highway defects in 2018/19.

In addition to transport connections, there is also a pressing need to increase broadband coverage in Manchester at a faster pace to secure the city's status as a leading digital centre.

Together, ICT, City Policy, Libraries, Galleries and Culture, Corporate Estates, Customer Service Organisation and Strategic Communications play a significant role in **connecting the city, transforming public services and growing the city's digital economy via digital infrastructure**. Recent achievements include:

- Increased the availability and take up of superfast broadband (>30Mbits/s) to residential and SME premises throughout the city in 2018:
 - Residential from 88% in 2015 to 95%.
 - SME from 34% in 2015 to 52%.
- Increased the percentage of financial and non financial transactions which were made via the council's website from 45% in 2017/18 to 50% in 2018/19, supporting our users to shift channels to digital services.
- Utilised Department for Digital, Culture, Media & Sport (DCMS) grant funding to launch the first phase of Manchester Tech Hub, providing flexible work space for Technology and Digital start-ups.
- Supported the transformation of public service delivery through the implementation of digital initiatives and solutions. Examples of these include Tell Us Once, Liquidlogic - the social care case management, charging and payment software and a data sharing pilot with HMRC which was successful in improving Council Tax Collection.

Activities supporting delivery of this priority

Connecting the city through good quality roads and sustainable transport systems

- Deliver year four of the agreed 2017-2022 Highways Network Investment Programme (including a small patching programme and drainage works).
- Implement projects and schemes to improve the highways network's journey time reliability, accessibility, connectivity and user satisfaction.
- Continue to create, design and deliver sustainable and active transport through increased cycling and walking routes.
- Deliver the planned airport improvement works.
- Coordinate Manchester's and Greater Manchester's input into HS2 & Northern Powerhouse Rail scheme development.
- Undertake strategic land acquisitions and lead regeneration projects to connect the city, facilitate growth and housing delivery.

- Effectively enforce parking and bus lane restrictions to keep the city's roads moving and safe.
- Lead the city's work on the Clean Air Plan, City Centre Transport Plan and the promotion of cycling and walking.
- Ensure all fleet vehicles meet the required emissions standards in preparation of the introduction of the Greater Manchester Clean Air Zone.

Connecting the city, transforming public services and growing the city's digital economy via digital infrastructure

- Develop and deliver effective online systems which enhance the customer experience and support channel shift towards digital services.
- Deliver the Resident and Business Digital Experience Programme which aims to make the Council a leading digital public services organisation that provides our residents, businesses, members and partners an easy to use, fully integrated set of digital public services which reduce our internal demand costs and increase customer satisfaction.
- Implement text messaging for debt recovery and other digital initiatives such as the implementation of new social care computer systems.
- Implement the government's 'Making Tax Digital' requirements working with ICT and other services to ensure systems are compatible.
- Develop consistently engaging digital content to ensure the council is a trusted and influential service provider at the heart of existing local community networks.
- Produce a new three-year communications strategy which will continue to embed the use of digital communications to reach people at the right time in the way that works best for them to support an ongoing increase in participation and engagement.
- Invest in technology to support targeted digital delivery such as Granicus - software which supports the creation of engaging digital communication campaigns.
- Introduce the MCRactive digital platform to provide robust and effective data analysis and to measure impact.
- Complete the Arbata redevelopment at One Central Park to deliver employment opportunities in the digital and creative content sector.
- Deliver Smart Cities projects and develop a Digital framework for the city.
- Improve digital access, inclusion, participation and literacy through work led by Libraries, Galleries and Culture.

Activities supporting delivery of this priority	17/18	18/19
Road network beyond mid-life grading (A, B, C, U roads - excluding footways)	27.14%	19.2%
Number of people Killed or seriously injured on Manchester's roads (per 1,000,000 population)	349 (2017)	345 (2018)
Number of cyclists killed or seriously injured on Manchester's roads (per 1,000,000 population)	85 (2017)	75 (2018)
Percentage of journeys into Manchester city centre by bicycle	1.85%	2.03%

Percentage of residents with access to high-speed broadband >30Mbits/s	92%	95%
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Growth that Benefits Everyone

Boost the city's productivity and create a more inclusive economy that all residents can participate in and benefit from, and contributing to reductions in family poverty, as set out in **Developing a More Inclusive Economy - Our Manchester Industrial Strategy**:

- Support good-quality job creation for residents, and effective pathways into those jobs
- Facilitate economic growth of the city

Connecting all Manchester residents to the opportunities of economic growth in the city is a core aim of the **Our Manchester Strategy 2016 -2025**.

Manchester's overall success and resilience during the past decade has been underpinned by the strength of its economy. A thriving economy is essential for the creation of jobs, attracting further investment, and driving population and residential growth. The city centre is the economic growth engine for both the city and wider region. With a £6billion economy, the city centre employs more than 140,000 people, predicted to rise to more than 150,000 over the next decade. This figure accounts for 40% of employment within the city and 10% of Greater Manchester's total employment (**Greater Manchester Forecasting Model 2018**). Total employment in Manchester has continued to increase, with our fastest growing sectors including business, financial and professional services, and cultural, creative and digital. Manchester continues to be a major international city, with Manchester Airport acting as the gateway into the North of the UK; we recently became the most popular inbound tourist destination in the UK outside of the capital.

However, despite economic growth, Manchester has the highest concentration of highly deprived neighbourhoods in the city region. Poor health outcomes, poor skills levels, and a significant gap between resident and workplace wages present a significant challenge to achieving more inclusive growth.

The next step of Manchester's economic journey is to ensure that the economy is as inclusive as possible, connecting the city's residents to high quality opportunities.

Developing a More Inclusive Economy - Our Manchester Industrial Strategy

was published in autumn 2019 and sets out how this objective will be achieved. In addition, the **Adult Education & Skills Plan** aims to develop a work and skills system which meets the growth needs of all businesses and enables residents from all backgrounds to obtain the skills and attributes employers require.

The city's Zero Carbon ambition will be a driver of economic growth and will facilitate job creation, recognising that good growth is green growth.

This priority is delivered by services across the Council but certain services,

particularly those within the Growth and Development directorate, take a lead role.

Achievements in the last year include:

- Creation and approval of a number of strategic regeneration and development frameworks to guide a comprehensive and holistic approach towards regeneration across the city centre.
- Construction start on site of The Factory, a nationally unique, flexible arts and performance facility which will strengthen our creative industries.
- The percentage of the working age population skilled to level 4 and above has increased to 44.1%, up from 39.9% in 2017
- Fewer residents out of work and claiming a health-related out of work benefit (Employment and Support Allowance) - down from 7.7% in February 2018 to 6.7% in February 2018
- Fewer residents with no formal qualifications - 10.5% of the working age population in 2018 compared to 11.1% in 2017, and 25% in 2004
- 400,000 people in employment (2018), up from 395,000 in 2017
- The Oxford Road Corridor Enterprise Zone has continued to attract new occupants to the cohesive cluster of science and technology businesses, academics, clinicians and world leading health institutions. The Works in its new location in Ardwick supports local residents access jobs in the universities and with the construction companies working on site
- Manchester remains the largest office market of any city outside London, with headline prime rents of £35 per square foot reflecting high demand
- Raised the profile of social value significantly within the Council and externally with our partners and commissioned providers / businesses to drive a more inclusive economy through supply chains

Activities supporting delivery of this priority

- Support effective pathways into jobs for Manchester residents through a range of actions including:
 - Engaging employers in the provision of post-16 /adult education to support their current and future needs
 - Making learning more accessible for adults in low skilled, low paid jobs and provide career progression
 - Working with employers to promote the Living Wage and the GM Good Employment Charter
 - Co-designing courses and providing work experience opportunities to develop job readiness in our growth sectors for young people & adults
 - Work with anchor institutions to maximise employment & supply chain opportunities for families living in poverty
- Work closely with public and private sector partners to identify opportunities to stimulate regeneration initiatives across the city to drive our inclusive economic, social and environmental ambitions. This includes:
 - Driving delivery of commercial development, particularly office and employment accommodation, to support inclusive growth across the city.
 - Identifying development opportunities to promote growth across the city, in particular around the Etihad Campus and through Joint Venture partnerships at Mayfield and St. Johns

- Development of industrial and commercial space for both existing companies who may need to relocate from city centre fringe and for organisations who need to expand or want to move into the area.
- Deliver a range of major projects that position Manchester as a leading international city. Some of these transformational initiatives include:
 - The Factory - a new arts and cultural centre of international importance, it is set to add £1.1billion to the city's economy and create 1,500 jobs. It will be located in the city's emerging St John's neighbourhood and be the new permanent home of Manchester International Festival (MIF)
 - Piccadilly - a five year programme to develop a major new district for Manchester with a world class transport hub at its heart through the arrival of High Speed 2 and Northern Powerhouse Rail
 - Circle Square - development of a commercially led mixed-use neighbourhood that will house some 2,000 new city centre jobs.
- Deliver a quality, efficient, inclusive and proactive Planning service, acting as enablers for growth and providing a platform for investment in the city to support growth
- Support the creation of new jobs in the city by attracting new employers and inward investment, alongside increasing residents' access to the jobs created; specific focus on our growth sectors and future strengths, including the green economy
- Deliver a vibrant events programme which promotes Manchester as a world class city, as well as a fair and equitable city, where everyone can contribute and share in the success.
- Promote the city on a national and international stage to help attract investment and funding (e.g. Cultural Grants and European Projects)
- Develop, promote and embed corporate priorities in relation to commissioning and procurement, including social value, ethical procurement, and living wage. In particular, in the supply chain of the following services:
 - Operational Services
 - Parks, Leisure, Youth and Events
 - Highways
- Ensure highways infrastructure delivers the Council's Transport 2040 vision and the growth aspirations of the city.
- Increase reading, digital access and literacy through the city's libraries
- Employ Manchester residents for our entry level jobs in School Catering
- Provide Market facilities to support the retail and social economy across the city
- Administer Business Rate reliefs to support businesses and reduce evasion.

All of the activities outlined will be enabled by corporate and supporting functions including City Policy support to the implementation of the Our Manchester Industrial Strategy, production of relevant and responsive intelligence, evaluation and performance information through PRI and wider work across Performance, Policy and Reform on developing social and economic metrics to measuring the inclusivity of Manchester's economy.

Key measures of success	17/18	18/19
Percentage of 50-64 year olds claiming an out of work	24.2%	24.1%

benefit	(May 2018)	(May 2019)
Apprenticeship achievements and rate per 1,000 16-64 year olds	3,720 / 9.7	3,690 / 9.6
Percentage of the Council's procurement spend with local suppliers	71.7% (2016/17)	71.3% (2017/18)
Floorspace of office development granted planning permission (square metres, Class B1)	N/A	562,736 (April to Sept 2019)
Office take-up ('000s of square feet)	751.5	739
Enrolment on foundation courses including Literacy/Numeracy/ESOL	3,151 (Aug to July)	3,026 (Aug to July)
Businesses assisted to improve (min. 12 hours support provided)	190 (2017/18)	343 (2018/19)

Well-Managed Council

Support our people to be the best and make the most of our resources:

- Enable our workforce to be the best they can be through the Our People Strategy and Our Manchester behaviours
- Effectively plan our future budgets and balance our current budget, delivering savings, transformation of the organisation, reductions in demand through reform, and generating income

Our Transformation is a new Council-wide portfolio of programmes which has been set up to look at our existing business processes and organisational approach with a view to changing how we work as an organisation to ensure we can deliver our corporate priorities and specifically ensure that we are a 'well managed council'. This aligned with the **Our People Strategy** and **ICT Strategy** sets out a compelling vision for a future workforce and workplace where systems, processes and cultures are fully aligned with Our Manchester behaviours and where people have the skills, opportunity and support to perform at their best.

Although this is a priority for the whole organisation, the Corporate Core has a key leadership and direct delivery role in delivering the well-managed council priority through diverse services.

Achievements in the last year include:

- Set a balanced budget for 2019/20 and won the national CIPFA award for Achievement in Financial Reporting and Accountability

- Answered 729,818 calls and handled 110,307 email, web, social media and written contacts. 99.2% of callers surveyed were either satisfied or very satisfied with the level of service received.
- Successfully delivered Local Elections, European Parliamentary Election at short notice and a General Election.
- Delivered new social care case management and payment/charging systems across adults and children's services
- Dealt with more than 60,000 live benefit claims across housing benefit and council tax support and collected
 - £181.1m in Council Tax
 - £373.5m in Business rates
 - £19m adult social care charges
 - £3.6m housing benefit overpayments
 - £633m miscellaneous income
- Delivered the Our Manchester Grants Programme
- Over 3,000 staff attended the Our Manchester Experience
- Developed an Employee Health and Wellbeing strategy recognised as best-practice in the field, including a comprehensive offer around mental health
- 431 apprentices started across the last two and a half years and the graduate scheme was relaunched

Activities supporting delivery of this priority

- Continue to deliver Our Transformation through strengthening accountability and the role of our managers, improving our ways of working including the introduction of key new ICT infrastructure, improving our processes and developing a longer term model for the core, leading to efficiencies
- Continue to deliver the strategic vision for the city by collaborating with internal and external partners to: create new strategies and policies; attract funding and resources; implement complex projects and programmes; and create effective strategic partnerships.
- Drive service reform across the Council and with partners and residents
- Provide financial support, insight and intelligence to maximise budgets and deliver on the Council's priorities
- Promote information as an asset working with stakeholders to recognise the importance of data and intelligence in decision making and development of service provision.
- Drive the Our People Delivery Plan, in particular work to:
 - Reduce sickness absence levels
 - Develop a more diverse workforce, at all levels, particularly in relation to BAME and Disability representation
 - Support health and social care workforce integration and the Manchester Locality Workforce Plan
 - Create a strengthened approach to development, talent management and succession planning
- Support and enhance the reputation of the Council, through effective strategic communications, professional executive support for the Chief Executive and Senior Management Team and successful civic and ceremonial events and programmes.

<ul style="list-style-type: none"> ● Provide stable, scalable, secure and resilient ICT services, including migration to the new data centre ● Deliver innovation and excellence in public sector legal services that provides value for money ● Provide a first class procurement service to the council and its partners, from supporting services in the upfront design to delivering successful contract awards. ● Deliver key Corporate Estates projects and programmes including the refurbishment at Alex House, the refurbishment of Hammerstone Road, the Gorton Hub, the Asset Management Programme and support the Town Hall Project 19/20 ● Deliver all statutory services related to the registration of births, deaths and marriages and Coroner Services, and to meet the required statutory and non-statutory targets. ● Deliver effective and efficient customer services and develop effective online systems which enhance the customer experience and support channel shift towards digital services ● Maximise the collection of money owed to the Council and manage the expected reduction in new claims and caseload driven by Universal Credit 		
Key measures of success	17/18	18/19
Best Companies Index Score (B-Heard Staff Survey)	630 (2018)	644 (2019)
Average days lost due to sickness absence per employee (i.e per Full Time Equivalent) (12 month rolling total)	12.23	12.41
Financial year to date agency spend (£'000)	£15,974,000	£15,097,000
The number of staff who were provided with an OM Experience in the year	613 (Sept 17 - Mar 18)	1,787
Year end % budget overspend / underspend	2.27% (over-spend)	1.03% (over-spend)
Percentage of the council's targeted savings in the year which were realised	73.6%	45.10%
Percentage of annual due Council Tax collected	93.01%	92.81%
Percentage of annual due Business Rates collected	96.6%	96.91%
Stage 1& 2 corporate complaints & response within target	85.9%	79.2%

How we will deliver the plan

Our People

Our Council Business Plan for 2020-21 is ambitious. We will only deliver on our ambition with the right resources in place - the most important of which are our people.

Our People Strategy is being refreshed for 2020-21 - the final draft of this plan will refer in more detail to the objectives of this strategy and how it aligns to our priorities.

In order to deliver the practical actions described in this plan there are a number of immediate priorities for delivery to support our workforce:

- Improve the health and well being of our staff including a reduction in absence levels across the organisation. Currently the average employee loses c.13 days per year which is well above the national average and the highest levels within Greater Manchester. Through a continued focus on health and well being, especially mental health and more targeted work with our workforce linked to the strategy for our residents.
- Reduce reliance on temporary staff including overall reduction in agency spend, including recruitment campaigns across some areas of over reliance including Highways, Legal and Adult Social Care.
- Refresh and relaunch of our management and leadership development to develop our managers in the context of Our Manchester and Our Transformation whilst ensuring we get the basics right in terms of training and development with a particular focus on people and financial management
- Reaffirm our commitment to ensure our workforce reflects our communities with a particular focus on the development of our BAME staff and staff with disabilities ensuring they have access to development opportunities
- Continue our commitment to staff engagement, building effective plans against our most recent Staff Survey ('BHeard') but continuing our programme of listening in action and Directorate based engagement. Through the work of Our Transformation there will be greater engagement with a range of staff from across the organisation to ensure our systems, processes and decision making are clear and to make both staff and managers more efficient in their roles.
- Commitment to develop the digital skills of our staff to ensure they are able to access and benefit from the full range of support, rewards and benefits of being an employee of MCC but also in their everyday lives. The ambition for our workforce will mirror that for our residents.

Our Technology

The importance of technology, systems and data should not be underestimated if the City Council is to achieve the aspirations of growth, reform and health and social care

integration from both a Council and GM perspective. ICT investment is critical to enabling the delivery of the Directorate's priorities and budget strategies as it acts as a key enabler to service transformation, efficiencies and operational delivery. It is important that ICT investment is aligned to the Directorate, ICT and wider City strategies and focuses on where it can provide the most value.

During 2019/20 ICT investment and progress has been made across the portfolio and examples are provided below where the initiatives have been a mixture of systems to underpin transformational agendas, the implementation of fit for purpose systems or to establish compliance in line with the ICT strategy.

- A new Coroners system has been implemented.
- The Treasury Management solution was migrated to the Cloud
- All laptops and desktops were upgraded to windows 10
- Migration of virtual server environment to new, up to date resilient hardware
- Various critical application upgrades e.g. SAP Netweaver, Academy
- Implementation of the new Children's and Adult Social Care case management system; and a new Social Care payments system
- Completed district Libraries technology refresh
- Implementation of the new Rent Accounting System.

During 2020/21 ICT will continue to work closely with Directorates in order to identify solutions that comply with the information and ICT design principles and to help to develop robust business cases to support their development, including:

- Embarking on the Resident and Business Digital Experience Transformation programme to improve the Council's current digital services and transactions placing our resident/business journey at the heart of this transformation by designing an integrated set of digital public services which are supported by an organisation that can deliver a consistently positive experience.
- The deployment of new functionality within the Liquidlogic Social Care system, which will better enable the council to do business both with providers and partners.
- Continue to support the deployment of the Manchester Care Record (CareCentric provided by Graphnet) across Adults service; as well as looking at how this might support children's services in the future.
- Implementation of the Liquidlogic Early Years and Education System (EYES), which will provide an integrated EYES and Social Care system.
- Continue to support the Technology Enabled Care (TEC) programme; with ICT focusing on the design of a digital platform which will aggregate data from TEC devices, providing both proactive and reactive alerts, which will support Manchester residents to live independently
- Continue and complete the new Information Governance and Complaints platform to manage complaints and information governance requests in line with the new GDPR regulation.
- Complete the migration of all ICT services out of the current data centre to a new secure and resilient data centre
- Procuring, planning and designing a new, resilient, flexible and cost effective local and wide area network and introduce a consistent and reliable wireless infrastructure.

- Implement a new up to date, reliable telephony solution with contact centre capability
- Reviewing SAP and assessing the way forward
- Delivering the Microsoft 365 platform aimed at transforming the way the organisation works, including the rollout of new devices.
- Procure, design, deliver and test a replacement to the FLARE neighbourhoods enforcement application. The biggest application in Neighbourhoods this project will enable improved service delivery, more agile and mobile workforce and increased application resilience.
- Review of FM from an ICT perspective with a view to developing a stable and supported platforms for CCTV, access control and Building Management Systems.

Equality, Diversity and Inclusion

We will continue to ensure that the Council meets its obligations under the Public Sector Equality Duty, building on our successes at fostering good relations between Manchester's communities of identity and maintaining fair and equal access to Council functions. Through ongoing customer monitoring, satisfaction and engagement approaches, we will strengthen and utilise our growing evidence bases at both Corporate and Directorate levels to identify the differential experiences of individual identity groups in Manchester accessing Council services, and proactively respond to make these as fair and equitable as possible.

Based on our evidence and engagement, we will publish and promote a refreshed set of equality objectives for the Council, that reflect our stakeholders' voices. We will communicate these to our residents and workforce to give assurance and clarity about the Council's key areas of focus on equality, diversity and inclusion (EDI) in the coming years.

We will strengthen the methodology and governance around our approach to undertaking Equality Impact Assessments (EIAs), ensuring that all Council functions are engaging with, and assessing the impact of their services for Manchester's communities of identity as appropriate. We will extend the range of identity groups considered by the EIA framework to be more reflective of Manchester's key stakeholder groups.

Building on extensive evidence-gathering in 2019-20, we will undertake a series of workforce equality initiatives, in particular work to improve the representation, progression and workplace experience of our BAME and disabled employees. These initiatives will be supported by adaptations to our EDI learning and development offer and continuing our work on promoting EDI through our communication channels. We aim to mainstream EDI considerations in the workforce, making our role as an inclusive employer every employee's business as usual.

We will continue to work in partnership with and in support of Manchester's Voluntary, Community and Social Enterprise (VCSE) sector organisations. Recognising the vital role that the sector plays in meeting the needs of Manchester's diverse communities in an accessible and culturally competent way, we will maintain our support through the Our Manchester Funds Programme.

We will continue to work with Manchester's communities to deliver or support events and celebrations that promote the City's diversity of identities, cultures, traditions and languages. Building on an already established programme of events, we will seek to support new initiatives to ensure that the broadest range of identities is celebrated in the City.

The Council has begun to establish good partnership working relationships with its public sector partners on the EDI agenda, which will be strengthened going forwards. In particular, joint working across health and social care has opened up opportunities for EDI practitioners across organisations to collaborate and share, with a schedule of joint EDI deliverables being developed and delivered in 2020-21.

Our Corporate Risk Register

We will continue to evaluate and respond to those risks that could impact the achievement of Corporate Plan priorities. We will do this through delivery of our risk management strategy including the regular review, refresh and reporting of risk exposures.

The latest refresh of the Corporate Risk Register confirmed the following key risks that are being overseen by Strategic Management Team.

Theme	Risk Description	Risk Impact x Likelihood
Our Finances and Resources	Planned savings are not achieved resulting in increased pressure on reserves and requirement for unplanned savings and cuts to services to made to achieve a balanced budget.	4x4=16 High
Our Performance	Consequences of Brexit impact negatively on a range of budget and other assumptions for the Council, partners and residents of the City. These include impacts on business rates, care and health budgets, airport revenues and welfare budgets; as well as wider impacts on recruitment and retention, economic development, housing and infrastructure projects.	4x4=16 High
Our People	Capability of the workforce is not aligned effectively to key priorities and organisational requirements. This includes: <ul style="list-style-type: none"> ● capacity in core managerial and technical disciplines; ● leadership capacity and capability to drive change and transformation; and ● workforce motivation and engagement. 	4x4=16 High
Our Partnerships	Failure to achieve the desired and intended outcomes of health and social care integration increases further pressure on Council and health budgets; and	4x4=16 High

	impacts on the ability to achieve improved health outcomes for Manchester residents.	
Manchester People	Loss of required <u>access to ICT</u> systems impacts on the ability to operate services and deliver to Manchester residents. This could arise from risks relating to core infrastructure (network and applications), hardware obsolescence (WYSE terminals), system availability (unsupported systems, insufficient licenses) or cyber-attack.	4x4=16 High
Our Performance	Lack of understanding or buy-in to <u>organisational vision and priorities</u> or alignment with partners means overall efforts are not focused efficiently and effectively in key areas and impacts the ability to deliver Corporate Plan Priorities and goals linked to Our Manchester and GM Strategy.	4x3=12 Medium
Our Partnerships	Key <u>suppliers</u> of goods and services or other partners fail to develop or deliver required services, due to lack of financial resilience or other factors, impacting the onward ability of the Council to secure required services to Manchester residents. A key risk given inflationary pressures, Brexit and lack of competition in some markets.	3x4=12 Medium
Legal and Regulatory	<u>Information governance and information technology security</u> arrangements, including behaviours of the workforce, partners and suppliers, are insufficient to prevent serious avoidable data losses, breaches or authorised access to systems or data.	3x4=12 Medium
Our Performance	Current or proposed <u>ICT systems</u> essential to business operations and legal compliance are not implemented or maintained (due to being out of support or lack inherent resilience) due to limitations in availability of financial and ICT resources.	4x4=16 High
Our People	Changes in <u>senior leadership</u> impact adversely on the capability required to promote and sustain positive organisational change and transformation.	4x3=12 Medium
Manchester People	Inability to maintain and demonstrate organisation-wide arrangements to <u>safeguard children and vulnerable adults</u> result in harm to those most in need with associated impact on families as well as financial and reputational damage to the Council.	4x3=12 Medium

Our Performance	<u>Implementation of new case management system</u> (Liquid Logic) does not have the anticipated impact and fails to deliver the necessary improvements in practice, recording, reporting, management oversight and performance.	3x4 = 12 Medium
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**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee – 7 January 2020

Subject: Adult Social Care and Population Health Budget 2020/21

Report of: The Executive Director of Adult Social Care

Summary

Manchester Health and Care Commissioning (MHCC), a partnership between Manchester City Council and Manchester Clinical Commissioning Group, was formed as the single commissioner for health, public health and adult social care in April 2017. MHCC has operated a single pooled budget, planning, delivery and assurance process since April 2018. This has overseen all of MHCC's commissioning responsibilities and includes single pooled budget arrangements.

It is now moving into the second phase of its development, focusing on its role as a strategic commissioner, working with key system delivery partners: MLCO as an integrated provider of out of hospital care; MFT; federated models of primary care and more latterly Primary Care Networks; and Greater Manchester Mental Health Foundation Trust (GMMH) as the mental health provider for the City.

For 2020/21 the business and budget plan for Adult Social Care and Population Health will be part of the MHCC Plan which reflects the refreshed Manchester Locality Plan and is supported by the Manchester Local Care Organisation (MLCO) Operational Plan for 2020/21. Summary draft reports are provided for Health Scrutiny Committee for information and comment. Whilst the Council determines the scale of its contribution into the pooled budget, to reflect the partnership arrangements in place with partners, this has been developed with the Chief Finance Officer MHCC and the Director of Finance MLCO.

This report summarises the budget proposals made to determine the Council's contribution to the MHCC pooled budget for 2020/21. The budget proposals reflect the September Spending Round commitment for a continuation of the Better Care Fund grants which include the £2.667m ASC Winter Pressures grant and the £4.555m Social Care grant announced in December 2018. The recently announced additional Social Care grant funding (£1 billion nationally), 2% ASC Precept and estimated additional funding for Public Health in 2020/21 are included as part of the proposals.

In aggregate the proposals reflect additional investment for Adult Social Care and Population Health of £22.8m to sustain services at the same levels as 2019/20, support the statutory functions of the Council, deliver the Corporate priorities and to continue to support the integration of health and social to improve outcomes for citizens. This would bring the total 2020/21 budget for ASC and Population Health to £220.7m and the contribution to the MHCC Pooled Budget from the City Council to £216.3m.

The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Finance Settlement which has been delayed from 5th December as a result of the decision to call a General Election. At this point an indicative date has not been provided for the likely publication of the Settlement. Final budget proposals will be made to Scrutiny and Executive in February 2020.

Recommendations

The Committee is invited to review and comment on the proposals being made to the Executive in February 2020.

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	Aligns to inclusive growth priority by supporting more residents to become independent and resilient, and better connected to the assets and networks in places and communities.
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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 2020/21 and revenue contribution to the Manchester Health and Care Commissioning Pooled Budget for Adult Social Care for approval by the Executive in February 2020.

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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.

Manchester Health and Care Commissioning - Adult Social Care Business Plan 2019/20, Executive 13th February 2019

1. Introduction

- 1.1 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.
- 1.2 The Locality Plan, 'Our Healthier Manchester', represents the first five years of ambitious, transformational change needed to deliver this vision. 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. The Locality Plan is aligned to the Council's Corporate Plan priority - 'Healthy, Cared for People'.
- 1.3 This paper describes the arrangements that are in place to deliver on these ambitions and improve outcomes for our residents. This includes the proposed resources that are required to ensure that the work to improve adult social care services can continue, as part of the delivery of new models of care and the development of the Integrated Neighbourhood Teams.
- 1.4 Ultimately, the proposed investment and the plans associated with that investment will ensure continuation of the important work to support our most vulnerable residents. From the perspective of Adult Social Care in particular this will be both through delivering our statutory duties safely and effectively, and through working effectively with the wider care market to ensure a sustainable local offer is in place.
- 1.5 Manchester Health & Care Commissioning (MHCC), a partnership between Manchester City Council and Manchester Clinical Commissioning Group, was formed as the single commissioner for health, public health and adult social care in April 2017. MHCC has operated a single pooled budget, planning, delivery and assurance process since April 2018. This has overseen all of MHCC's commissioning responsibilities and includes single pooled budget arrangements.
- 1.6 This report summarises the budget proposals for Adult Social Care (ASC) and Population Health (PH) to determine the Council's contribution into the MHCC pooled budget for 2020/21. The budget reflects that 2020/21 is a one year spending round and deferral of the planned local authority funding reforms including the revision of the funding formula and the business rates revaluation and reset. The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Finance Settlement.
- 1.7 The proposals in this report will seek approval from Council's Executive in February 2020 to:

- Continue the permanent improvement plan and system resilience funding agreed by the Executive in February 2019 which includes further £1.366m for 2020/21 (para 3.3)
 - Make permanent further £1.210m resilience funding for ASC following confirmation of the ASC Winter Pressures grant for 2020/21 (paras 3.5 / 3.6)
 - Allocate further investment for pay and prices, National Living Wage and increased need of £9.808m (paras 3.8 / 3.9)
 - Approve further funding proposals following the Spending Round to sustain services at the same levels as 2019/20 and new investment for Extra Care schemes and Population Health priorities in 2020/21 (paras 3.11 - 3.24):
 - Additional social care grant allocation of £7m
 - Estimated additional Public Health grant funding of £1.363m
 - Consultation on 2% Adult Social Care precept estimated to generate additional £3.259m of resources
 - Contribute a non-recurrent £1m towards MLCO overheads from Adult Social Care reserve in 2020/21
- 1.8 For 2020/21 the majority of the ASC and PH budget within the remit of the MHCC Pooled Budget will be managed by MLCO and will form part of its integrated budget and business plan. MLCO will work closely with MHCC to ensure continued alignment to delivery of the Manchester Locality Plan and MHCC Operational Plan priorities.
- 1.9 There will be a single health and social care partnership budget report from MHCC, including the refreshed Manchester Locality Plan and supported by the Manchester Local Care Organisation (MLCO) Operational and Financial Plan for 2020/21. As the Council's budget timeline is ahead of national NHS contracting and budget timescales, the reports which make up the single health and social care partnership budget are in summary and draft at this stage. A further updated version of the reports will be provided for February Health Scrutiny Committee.
- 1.10 This report is supplemented by:
- Annex 1 – Draft MHCC Budget Report 2020/21 for the MHCC Pooled Budget including MHCC Operational Plan on Page and Refreshed Manchester Locality Plan
 - Annex 2 - Draft summary of MLCO 2020/21 Operational Plan including draft budget MLCO for community health and social care.

2. Budget priorities

- 2.1 The Adult Social Care and Population Health budget priorities relate to the Corporate Plan priority theme of 'Healthy, Cared for People'. This is to work with partners to enable people to be healthy and well and support those who need it most, working with them to improve their lives:
- 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
- 2.2 The Council's work to ensure our people are healthy and cared for is primarily delivered through MHCC and MLCO. Population Health services form part of MHCC, whilst the delivery and commissioning of adult social care services is managed by MLCO. Adult social care services play a key role in Integrated Neighbourhood Teams (INTs) and are part of the delivery of new models of care (NCMs)
- 2.3 Manchester's Adult Social Care Improvement Programme is driving significant change and longer term sustainability through investment in workforce, a shift of focus to 'our people in place' via the mobilisation of INTs and transformation to new ways of working underpinned by 'our culture' and the Our Manchester strategy. Significant investment has been made within the programme to deliver safe, effective and sustainable services that take a 'strengths based' approach to assessment and care and support planning. Mobilised INTs are beginning to realise tangible outcomes relating to joint visits with improved communication between health and social care (i.e. district nurses, social workers, GPs, care navigators, community mental health teams), streamlined referral processes and multi-agency meetings.
- 2.4 The programme will also transform how services are delivered at our 'Front Door' by supporting integrated responses, access to a wider range of system informatics and linking our people to innovation in care and support through a mainstreamed Technology Enabled Care offer.
- 2.5 The Homecare market has been re-procured and is being mobilised to integrate at place level with INTs and to better collaborate in care and support to enable better outcomes. Investment has been made in new and existing care models for example, the expansion of the Reablement Service to reach more people and to better support timely hospital discharge pressures alongside the development of a new Complex Reablement Service to support people who require a specialised, longer term approach to enablement. Plans around housing support options continue to mature with new capacity of Extra Care accommodation from 2020/21. These housing options create longer term sustainable responses to care and support, reduce pressures and cost in the system and improve personal choice and independence.
- 2.6 The Care Market is a vital component of the Adult Social Care system supporting Manchester to meet statutory responsibilities and supporting Mancunians to live as independently as possible. Focussed work during 2020/21 will evaluate our current and future needs and the capacity, quality and sustainability of our independent care market. There is potentially a need for capital investment to allow market intervention, enabling a response should market failure occur to ensure continuity of service. This may be short-term in nature, but could be of vital importance to limit the impact of such market issues on residents. Linked to collaboration work with partners, investment

may also be needed to build capacity, and in particular creating capacity for specific care needs to ensure that there is appropriate provision for vulnerable residents. This may require new build facilities, or the acquisition of existing buildings which can be tailored to care models.

- 2.7 The 2020/21 budget plan reflects that progress is being made to implement integrated health and social care that improves outcomes for residents. The new ways of working in the INTs are starting to deliver changes and the new care models are starting to demonstrate improvements in outcomes and reductions in demand for acute or long term care. The budget proposals reflect the need for investment to stabilise and sustain the service and continue the investment to support the integration of health and care.
- 2.8 The framework for how the Council supports its workforce is set out in the People Strategy. This is currently being updated and the revised version will form part of the suite of budget reports. Building on the budget plan for 2019/20, the proposals in this report have put in place further funding to enable greater permanent capacity to support system resilience and integration as a result of the improvement plan, new models of care and the number of additional posts being created.

3. 2020/21 Budget Proposals

- 3.1 The Adult Social Care net budget in 2019/20 is £197.9m of which £193.6m is in the scope of the MHCC Pooled Budget. Table 1 below provides a breakdown of how the budget is allocated both within and outside of the Pooled Budget.

Table 1: 2019/20 Base budget

Adult Social Care and Population Health Service Area	2019/20 Gross Budget	2019/20 Net Budget	2019/20 Budgeted Posts (FTE)
	£'000	£'000	£'000
Localities including social work	10,938	7,979	313.1
Reablement	8,742	4,820	269.2
Learning Disability including social work	62,696	56,551	530.8
Mental Health including social work	25,853	23,650	7.0
Other Care – Homecare, Res & Nursing	66,470	42,737	101.5
Public Health	39,633	37,452	47.4
Commissioning	10,405	9,808	39.2
Back Office	10,515	5,078	106.5
Inflation & National Living Wage	8,172	5,172	0.0

Demography	356	356	0.0
MHCC Pooled Budget	243,780	193,604	1,414.7
Asylum	2,911	57	6.0
Voluntary & Community Sector (Adults)	2,080	2,080	0.0
Safeguarding	2,166	2,166	46.5
ASC Services Out of Scope	7,157	4,303	52.5
Total	250,937	197,907	1,467.2

- 3.2 The 2020/21 proposed ASC budget, the majority of which will be the contribution to the MHCC pooled budget, reflects a continuation of the 2019/20 net budget of **£197.907m**. This includes continuation of existing Social Care Grants of £35m, including improved Better Care Fund (iBCF), additional iBCF, ASC Winter Pressures grant and share of 2019/20 Social Care grant.

Adult Social Care Improvement Plan

- 3.3 The 2020/21 proposed pooled budget contribution includes continuation of the investment for the ASC Improvement Programme agreed by the Executive in February 2019. This has enabled the recruitment to c50 FTE additional posts. For 2020/21 the ASC improvement investment has increased by an additional **£1.366m** to reflect the full year effect of the programme. This also included funding of £490k for nine social work managers for the INTs funded from GMTF in 2019/20 and 2020/21 with future funding to be reflected within the new INT structures.
- 3.4 The key deliverables for the ASC Improvement Programme in 2020/21 include:
- Full recruitment of social work and other workforce capacity provided as part of the investment;
 - Assessment and support planning standards embedded with a significant reduction in waiting lists and return to business as usual;
 - Liquid Logic phase one fully implemented;
 - Full implementation of Strengths-Based Development Programme and quality assurance framework;
 - Full mobilisation of Integrated Neighbourhood Teams including realisation of benefits of integration;
 - Roll-out of all new Homecare contracts;
 - Full mobilisation of all new care models with assessment of scope for further expansion for schemes such as technology enabled care and extra care accommodation;
 - Progressing a detailed programme on the integration of Learning Disability Services;
 - Procurement completed for priority contracts;

- Market demand and capacity assessment to support the development of a sufficiency and stabilisation plan.

System resilience to support transfers of care

- 3.5 The 2020/21 budget reflects continuation of the £2.667m ASC Winter Pressures grant. For 2019/20 the Executive approved £1.456m of funding from the grant on a permanent basis which provided funding for 35 fte additional posts. In addition funding of £0.7m was provided by the CCG to make permanent 18 fte social workers posts specifically for social work capacity in hospitals. The £1.456m was part of a wider permanent investment of £4.225m for adult social care to support improvement and resilience.
- 3.6 In 2019/20 the balance of the ASC Winter Pressures grant of £1.210m was made available for non-recurrent workforce and other schemes, the use of which was reported to Health and Wellbeing Board in October 2019. The budget proposals for 2020/21 includes permanent commitment to the £1.210m which will be used to:
- Continue with the expansion of the Complex Reablement service (14 ftes);
 - Provide additional capacity for assessments of people leaving the Reablement service (6 ftes);
 - Provide greater capacity in Manchester Supported Independent Living service for supporting people with complex needs (5 ftes) and
 - Provide winter planning and urgent care capacity for mental health (8.6 ftes).
- 3.7 The Executive Director of Adult Social Care is the MLCO executive lead for the safe and effective discharge of people from hospital. The CCG, Manchester Foundation Trust and MCC have each agreed £0.5m towards the cost of an Integrated Discharge Team to relieve system pressures resulting from delayed transfers of care. For MCC this is being funded from an increase in 2019/20 of the CCG contribution to the Better Care Fund for ASC of £896k, with £396k being applied to support the expansion of Extra Care schemes in 2020/21.

Demographic and inflationary increases

- 3.8 The ASC proposed cashlimit budget includes an allocation for pay and price inflation of **£7.793m**. To allocate as part of the upfront budget is a different approach to the other Directorate cashlimit budgets, which reflects the pooled budget arrangements with Health. This allocation is made up of:
- £1.530m - pay award for ASC staff employed by MCC of just over 3%. This reflects Council budget assumptions to be in line with potential increase to £10.50 by 2024/25 using Local Government pay scale, subject to confirmation on timing by Government.
 - £3.850m increase to reflect National Living Wage assumptions for ASC for external providers, subject to confirmation on timing by Government. To

uplift NLW to reflect a move to £10.50 by 2024/25 would be a further cost of £275k in 2020/21.

- £2.413m price inflation uplift to support contract uplifts including the capacity to support a move towards the Real Living Wage in the care market.

- 3.9 In order to set a sustainable budget for Adult Social Care resources are required to meet an assessment of prediction of future increase in needs based on population modelling. There is **£2.015m** projected for increased need during 2020/21 which will be included in the pooled budget to be allocated during the year.
- 3.10 It is proposed that for 2020/21 there will no longer be a requirement by MLCO to revert back to MCC for decisions on draw down of pay and price inflation and demographic growth shown. The additional funding must be used as intended to reflect a change to the budget baselines for unit prices and activity levels (to be provided separately). Proposed changes to the planned use of this funding will need to be reported to MLCO Partnership Board, which has representation from all key partners, to be agreed along with identifying whether any more formal approvals are required in line with the Council's key decision thresholds.

Outcome of Spending Round

- 3.11 Following the Spending Round the 2020/21 budget reflects further proposals to increase the ASC budget by **£11.6m** which includes:
- Share of the additional social care grant announced as part of the Spending Round of £7m
 - Additional 2% Adult Social Care precept estimated to generate additional £3.259m of resources
 - Estimated additional Public Health funding of £1.363m
- 3.12 The following paragraphs set out the proposed use of the additional resources of which £8.8m is to sustain services at the same levels as 2019/20 and £2.8m is new investment for Extra Care schemes and Population Health priorities.

New Care Models

- 3.13 MLCO has developed a number of new care models (NCMs) focused on preventing admission to acute settings, improving support for hospital discharge, providing improved community based support and supporting prevention and independence. Time limited investment funding has been made available from the Greater Manchester Transformation Fund (GMTF), adult social care grants and MHCC investment resources. NCMs are fundamental to the system based approach to enable the benefits to be realised and shared across the wider health and care system.
- 3.14 There is emerging evidence of reduced demand in high cost services, evaluations to date have shown:

- Manchester Case Management (previously known as High Impact Primary Care) has shown, through a quantitative analysis of hospital activity, a statistically significant reduction in Accident and Emergency attendances post service start
 - Reablement has shown that for the cohort of people who have had Reablement service during 2018/19 financial year and went on to have a home care package after leaving Reablement had, on average, 26% fewer homecare visits and 22% fewer homecare hours during the 6 months post reablement
 - ExtraCare has shown that neighbourhood apartments have likely necessitated upto 1,200 fewer days of residential / nursing care to the wider health and care system
- 3.15 For 2020/21 the schemes remain as planned but the delivery of benefits have changed to reflect phasing and mobilisation of models during 2019/20. This has resulted in original planned savings from new care models reducing by **£1.925m** (42%). The would result in savings being delivered in 2020/21 of £500k in respect of Reablement.
- 3.16 Investment is required for the ongoing costs of neighbourhood apartments and to expand the Extra Care programme to deliver an additional four schemes in 2020/21. This is £132k for 20 neighbourhood apartments and £1.232m for the care costs for 223 new Extra Care apartments. Of this £396k will be funded from 2019/20 additional BCF (para 3.7), £200k from GMTF and **£767k** required as new investment.
- 3.17 Non-recurrent resource ends in 2020/21 for the ongoing costs of Core and Complex Reablement of £0.8m. It is proposed this will be funded from the estimated Additional Better Care Fund contribution towards from the CCG for 2020/21. The budget also includes continued funding for the Council to meet ongoing cost of existing new care models Discharge to Assess of £0.706m and Crisis Response of £88k which the CCG have committed to fund in 2020/21.
- 3.18 Funding for NHS long term planning priorities and commitments for 2020 - 2025 have not yet been allocated by NHS England to Greater Manchester or CCGs. Once this is confirmed there is a need to review impact and evidence from evaluation of all NCMs and determine longer term costs and benefits. This will need to be reflected in the medium term financial planning assumptions for the Manchester Locality Plan and risk share arrangements between partners for 2020-2025.

Integration of Learning Disability Services

- 3.19 Adults with Learning Disabilities (LD) are now more likely to enjoy longer, better quality lives. This is positive progress but the pressure on local authority and health services has increased in terms of support based on a combination of increasing demand, a growing and ageing population with greater complexity of conditions and the cost implications of national living wage. In order to meet increased need and complexity of citizens with LD, additional

budget of £5.034m is needed in the following areas of ASC LD services. Of this **£4.545m** from Council and estimated £489k from CCG for additional Continuing Healthcare needs:

- The most significant area of increased need is for the in-house Learning Disability Supported Accommodation (LDSA) budget in relation to the workforce requirements to meet the needs of people being supported by the service. Whilst the c140 people supported by the service is relatively static, their needs are increasing with age and it has been determined that there is an additional resource requirement of £3,450m. The service has taken action to put in place a dedicated team of social workers to assess needs and develop improved rota management practice. The CCG has committed to assess the impact of people meeting the continuing health care eligibility, where it is estimated that £0.5m of the rising costs are care relate to this which would reduce the additional resource requirement to **£2.950m**.
- The transitional costs of moving residents from LDSA to new build accommodation between October 2019 and July 2020 will be met from the Adult Social Care reserve with any ongoing additional costs to be met from within the service budget.
- Care for people with Learning Disabilities which is externally commissioned has increased by 41 people (3.5%) during this year for which 2019/20 demographic growth funding has been applied of £1.416m. Further increases in the cost of care have also arisen from greater complexity of need of **£685k**.
- The Shared Lives service has expanded in 2019/20 following recruitment of additional adult carers. This service delivers better outcomes and is more cost effective than external placements. Whilst it was expected that the cost of this could be met from a reduction in demand for other LD services, this has not been possible due to rising numbers of people requiring support and **£360k** of funding is required for the Shared Lives service.
- The in-house service which provides short breaks support for people with LD and their families is also experiencing increased need with additional resource requirements of **£550k**.

3.20 One of the key priorities for MLCO in 2020/21 will be the integration of Learning Disabilities. To inform the medium term financial plan this will include:

- Understanding need and provision requirements over a medium term period and reflecting this in a system based commissioning strategy with a much stronger approach to market management at a Locality and GM level;
- Fully implementing a strength based approach into LD arrangements;
- Integration arrangements between health and social care including the locality arrangements in respect of citizens under the arrangements for the NHS Transforming Care Programme;

- Striking the right balance between in-house provision within MLCO and commissioned provision; and
- Ensuring successful schemes within Shared Lives continue to grow.

Population Health

- 3.21 The Spending Round in September indicated a real terms increase to the Public Health Grant to ensure local authorities can continue to provide prevention and public health interventions. It has been estimated that the public health grant will be 'flat real' increase of £1.363m in line with inflation. It is expected that the cost of the Agenda for Change uplift met by Department of Health in 2019/20 (funded directly to NHS providers) and new burdens for drug costs relating to Pre-exposure prophylaxis (PrEP) HIV trial will be met separately by the NHS.
- 3.22 The Population Health services were all redesigned and recommissioned in 2014/15. The redesigned services have delivered better outcomes and real value for money and Manchester is no longer an outlier in relation to spend per head on these services. The Population Health budget has not overspent in any of the past five years and for 2019/20 is projected to breakeven. However, during 2019/20 providers have highlighted pressures in delivering the services contracted within the current contract price. The proposed budget for 2020/21 includes additional budget of **£2.005m** as follows:
- Sexual Health services increased capacity for tests, screening and appointments;
 - Drug and Alcohol services relating to homelessness outreach, Youth Justice service engagement, dispensing costs and detox capacity;
 - Children's Population Health increased capacity for school nursing and child weight management programme to reflect increase in number of schools. The funding for a further ten funding trainee Health Visitor places in addition to the places provided by Health Education England;
 - Continuation of the Population Health partial contribution towards the Adverse Childhood Experience programme;
 - Inflationary uplift on NHS and non-NHS contracts.

Other budget requirements

- 3.23 There are other budget proposals to provide a sustainable budget relating to the following areas of the ASC service within the pooled budget which total **£1.830m**:
- The number of people requiring mental health services remains fairly consistent but it has not been possible to achieve expected reductions following a recent focus on reviews of care packages. This is due to new demand for care and the need for available suitable provision for changes in care. As such there is a requirement for additional budget of **£330k**.
 - Homecare savings of **£377k** (50%) are not yet delivered due to the revised timescales to implement the move to the new homecare contracts, including

recommissioning of some contracts which means savings for 2020/21 are at risk.

- Shortfall on a savings target of **£500k** relating to expected contract related efficiencies which it has not been possible to realise following re-commissioning.
- Strengths based support planning for other Adult Social Care savings of **£198k** (40%) are not yet delivered. The changes to practice and training are now being rolled out but there is likely delay in full implementation in 2020/21.
- The cost of the community alarms service is £950k. When people are unable to contribute towards the cost of the monitoring and response service, the cost to the Council cannot be reduced to reflect this. There is a shortfall of income to cover the cost of the service by **£150k**
- To provide an uplift for NLW for external providers to reflect a move to £10.50 by 2024/25 would be a further cost of **£275k** in 2020/21.

Manchester Local Care Organisation

- 3.24 Continuation in 2020/21 of programme management transformation capacity to support MLCO of **£0.550m**. It is also proposed that continued non-recurrent funding will be made available in 2020/21 of up to £1m towards the overhead costs of MLCO from the remaining balance within Adult Social Care reserve

Summary

- 3.25 The proposals above would lead an increased ASC budget requirement of £11.6m which together with pay and price inflation of £7.793m, demographic funding of £2.015m and full year effect of ASC Improvement investment of £1.366m would bring the proposed increase to the ASC and Population Budget in 2020/21 to £22.8m. This is a total ASC and Population Health budget of £220.7m of which £216.3m is part of the MHCC Pooled Budget broken down as follows:

Table 2: 2020/21 proposed changes and revised budget

Service Area	2019/20 Net Budget	Investment and other changes	2020/21 Net Budget
	£'000	£'000	£'000
Localities	7,979	1,585	9,564
Reablement	4,820	480	5,299
Learning Disability	56,551	4,060	60,611
Mental Health	23,650	677	24,327
Other Care	42,737	3,535	46,271
Public Health	37,452	2,205	39,656

Commissioning	9,808	1,499	11,307
Back Office	5,078	-1,325	3,753
Inflation & National Living Wage	5,172	7,980	13,152
Demography	356	2,015	2,371
Pooled Budget	193,604	22,711	216,314
Asylum	57	0	57
Voluntary & Community Sector (Adults)	2,080	42	2,122
Safeguarding	2,166	43	2,209
Other ASC	4,303	85	4,389
Total	197,907	22,796	220,703

4. Governance of the MHCC Pooled Budget

- 4.1 The governance of the Council's contribution to the pooled budget is set out in a Financial Framework which accompanies the Partnership Agreement between the Council and Manchester CCG. Decision making for Council statutory functions and financial delegation remains with the Executive Director of Adult Social Services who is part of the MLCO Partnership Board. The Deputy Director of Adult Social Services is part of the MHCC Board with a remit for the joint development of strategic commissioning plans for health and social care, and enable MLCO to develop tactical commissioning activities.
- 4.2 The Council's Deputy Chief Executive & City Treasurer continues to exercise responsibilities under Section 151 of the Local Government Act 1972 in relation to the Council's financial contribution the pooled budget. The Deputy Chief Executive & City Treasurer has authorised to the MHCC Chief Finance Officer (CFO) some statutory functions to provide flexibility to sign off spend for the Council within the limits of the Pooled Budget. Key decisions which are not in the delegated authority of Council officers, will continue to require the approval of the Council's Executive.
- 4.3 Whilst both the CCG and Council are still responsible for their own financial position within the pool, the arrangements are designed to give flexibility for partners to ensure total resources are available to support priorities. There are responsibilities under the Partnership Agreement and Financial Framework for the MHCC Board to monitor the budget and deliver a balanced position. The MHCC Finance Committee provides an assurance role on behalf of the MHCC Board and City Council. This allows Lay Members for the CCG and Council Executive Members to review the overall financial position, delivery of savings plans as well as systems of internal control.

5. Conclusion

- 5.1 This report provides the proposed Council contribution to the MHCC Pooled Budget in respect of Adult Social Care and Population Health for 2020/21 of £220.7m, of which £216.3m is within the MHCC Pooled Budget. This provides additional investment of £22.8m to sustain services at the same levels as 2019/20 to support the statutory functions of the Council, deliver the Corporate priorities and to continue to support the integration of health and social to improve outcomes for citizens.
- 5.2 The proposals reflect that 2020/21 is a one year budget reflecting the commitments made in the Spending Round, reflecting that the Fair Funding review and Business Rates reform and reset has been delayed to 2021/22. Whilst the Council is publishing a one year budget in line with the one year Spending Review there is a need to plan for a three year position. The indicative planning assumptions for 2021/22 and 2022/23 are contained within the single health and care budget reports.
- 5.3 The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Finance Settlement which has been delayed from 5th December as a result of the decision to call a General Election. At this point an indicative date has not been provided for the likely publication of the Settlement. Final budget proposals will be made to Scrutiny and Executive in February 2020.

Annex 1 Manchester Health and Care Commissioning Budget Report 2020/21

1.0 Introduction

- 1.1 This paper is presented to update on the draft joint financial plan for the pooled budget of MHCC, comprising both Health and Adult Social Care and Population Health (PH) budgets. The proposed Council contribution to the MHCC pooled budget for ASC and PH budget in 2020/21 is £216.3m, which includes proposed additional resources of £22.7m to sustain services at current levels and provide investment for four new Extra Care Population Health scheme priorities.
- 1.2 The paper includes respective organisational assumptions and provides an over-view of the pooled budget.
- 1.3 The numbers represent draft planning assumptions at this stage as the total allocations / funding settlements for both organisations are outstanding at the time of writing this paper. Further information and more detailed health planning guidance is expected during December 2019, the impact of which will be assessed and incorporated into final budgets and contracts during January to March 2020.
- 1.4 The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Finance Settlement.
- 1.5 It was agreed that MHCC would take a refreshed joint budget position to the Health Scrutiny Committee in January and February 2020, to incrementally take account of Members' feedback and ongoing contract negotiations to inform the normal suite of Council budget papers in March.
- 1.6 The health planning assumptions for health budgets originate from the month 5 financial position, with ASC based on the month 7 position.
- 1.7 This paper reflects the agreements made in the Manchester Partnership agreement and the Manchester Investment Agreement and supports the delivery of the Manchester Locality Agreement.
- 1.8 The paper reflects the significant additional financial contributions made by Manchester City Council and the Health System to Adult Social Care which mean that a solid foundation of services is being delivered which enable

transformation and integration of care and health services in the City for the future.

- 1.9 These suite of papers have been produced by planning and finance staff working across the Partnership in collaboration, and to tight timetables given the lack of national guidance and their significant contribution is recognised.

2.0 MHCC Plan On a Page

- 2.1 Both the Plan on a Page (attached in Appendix A) and the full Operational Plan are being revised within 2020/21 to reflect the shift of MHCC into a strategic commissioner, exemplified by the time span moving from one to five years. The strategic aims and priorities are consistent with the Locality Plan (attached in Appendix B) and the MHCC Operational Plan, with a change in emphasis to describe the impacts on our population over the next five years.
- 2.2 The MHCC programmes through which delivery will be focused in 2020/21 are shown, including the 'catalyst' programmes, which will significantly transform the relevant part of the health and care system in the long term.
- 2.3 The operational planning process is currently in progress, with the final plan to take account of the planning guidance for 2020/21 and subject to the funding associated with the NHS Long Term Plan. The guidance from NHS England is due to be published in late December / early January.
- 2.4 Work has been ongoing over the past months with the Director of Adult Social Care, Chief Finance Officer MHCC and the Director of Finance MLCO with regard to the development of the operational plan for ASC and the associated budget. This has taken regard of the budget setting principles issued by the MCC Treasurer. An update on the development of the MLCO Operational Plan 2020/21 and a summary financial plan for the MLCO in 2020/21 is attached as Appendix C. This document provides context for the MLCO, describes the overarching priorities for the organisation in 2020/21, the process to develop and a proposed structure for the Operating Plan, along with a summary financial plan for the MLCO.

3.0 Health - High Level Assumptions

- 3.1 High level health five year financial plans were submitted to the Greater Manchester (GM) Health & Social Care Partnership (GMHSCP) in November 2019. All health bodies will be unable to formally publish any financial plans pending receipt of further national and GM guidance, expected from December 2019. The five year plans will likely require a refresh, and will eventually form part of the revised Manchester Locality Plan to 2023/24.
- 3.2 Health allocations reflect the five year allocations published in January 2019. Within these, three years are confirmed allocations, with the last two years (2022/23 and 2023/24) indicative.

- 3.3 The allocations exclude the financial impact of the Long Term Plan Implementation guidance, which will be funded through Targeted and Fair Shares funding; the values of which have been shared nationally, but not at an individual CCG level.
- 3.4 Table 1 highlights the level of recurrent allocation growth between 2019/20 and 2020/21.

Table 1: Allocation Growth

Allocation	2019/20 £000s	2020/21 £000s	Recurrent Increase £000s
Programme	863,762	904,555	40,793
Primary Medical	94,150	98,655	4,505
Running Costs	12,275	10,829	(1,446)
Recurrent Allocation	970,187	1,014,039	43,852
Non Recurrent	30,257		
Total Allocations	1,000,444	1,014,039	43,852

*** 2019/20 allocation is the total allocation at Month 5 included for completeness*

- 3.5 In terms of expenditure, the health budgets use forecast expenditure as reported to NHSE at Month Five (31 August), which is adjusted for non-recurrent allocations, expenditure and benefits. This gives a recurrent opening budgetary position for 2020/21.
- 3.6 A number of growth assumptions have been applied to the recurrent 2019/20 expenditure position in line with national guidance and local knowledge. Some specific examples are outlined below for illustrative purposes :
- national price increases (inflation);
 - national requirement i.e. Clinical Negligence Scheme (insurance contributions); and
 - recurrent local pressures i.e. primary care list size growth, activity growth, prescribing

The detailed expenditure growth assumptions applied per each key budget area is included in Appendix D.

- 3.7 Table 2 summarises the application of the additional allocation based on planning assumptions either defined nationally within the planning guidance or agreed with local providers as part of the five year plan submission to NHS England. These include the ring-fenced allocation growth for mental health services (Mental Health Investment Standard) and primary care etc.

Table 2: Application of Growth

	2020/21 £000s
Allocation Growth	43,852
Utilised on:	
Planning Assumptions	
Gross Provider	
Efficiency	(6,623)
Inflation	22,032
Net Tariff	15,409
Cost Pressures	
Acute	5,060
Mental Health	4,372
Community	2,216
Primary Care	4,505
Reserves	12,290
Total Funding	43,852

- 3.8 The required 'NHS Business Rules' have been reflected in the plan, which are to:
- Maintain a 1% historic surplus (i.e. 1% of allocations remain unspent in each of the five years);
 - Maintain a 0.5% contingency; and
 - Ensure that investment in mental health services is equivalent to investment in physical health, which means that expenditure increases in line with or above allocation growth (i.e. 6.1% for 2020/21 and reducing over the 5 year period).
- 3.9 In order to deliver a balanced financial plan, Health will need to deliver £15m of Financial Sustainability Plans in 2020/21. These plans are currently in development but include prescribing savings and transformational savings from the new care models.

4.0 High Level Adult Social Care Assumptions

- 4.1 The Council budget proposals will be reported to the Council's Executive Committee for approval in February 2020, in order to set a budget by early March, on which the Council Tax will be based. The Council's budget proposals for 2020/21 will be subject to further refinement following feedback from public consultation and scrutiny committees. The figures may be subject to change following the contents of the provisional Local Government Financial Settlement, which has been delayed from 5th December as a result of the decision to call a General Election.
- 4.2 The proposals reflect that 2020/21 is a one year budget reflecting the commitments made in the Spending Round, reflecting that the Fair Funding review and Business Rates reform and reset has been delayed to 2021/22.

Whilst it is a one year budget, there is a need to plan for a three year position and planning assumptions for 2021/22 and 2022/23 are contained within the MLCO Operational Plan (Annex C).

- 4.3 The plan for ASC is to sustain current services with a focus on stabilisation and improvement, ensuring a strong foundation for the service moving forward, which will enable wider integration and transformation. The ASC pooled budget reflects the following proposals to the Council' Executive to:
- Continue the permanent improvement plan and system resilience funding agreed by the Executive in February 2019, which includes £1.366m for 2020/21;
 - Make permanent a further £1.210m resilience funding for ASC following confirmation of the ASC Winter Pressures grant for 2020/21;
 - Allocate further investment for pay and prices, National Living Wage and increased need of £9.722m;
 - Approve further funding proposals following the Spending Round to sustain services at the same levels as 2019/20 and the new investment for Extra Care schemes and Population Health priorities in 2020/21
 - Additional social care grant allocation of £7m
 - Estimated additional Public Health grant funding of £1.363m
 - Consultation on 2% Adult Social Care precept, estimated to generate additional £3.259m of resources
 - Contribute a non-recurrent £1m towards MLCO overheads from Adult Social Care reserve in 2020/21
- 4.4 The proposed Council pooled budget contribution for ASC and PH is £216.3m, of which £204.3m will be aligned to the MLCO Community Health and Care budget. The source and applications for the ASC and PH element of the pooled budget is included in Table 3, which provides information on proposed additional resources into the pool.

Table 3: Adult Social Care and Population Health Source & Application of Funds 2020/21.

	MLCO Aligned Budget	MHCC Retained Budget	2020/21 Proposed Pool Budget
	£000	£000	£000
Source of Funds			
Base Budget	178,507	15,097	193,603
Inflation (Pay, Price, National Living Wage)	7,558	149	7,707
Demography	2,015		2,015
ASC Improvement Plan	1,366		1,366
Share of additional social care grant	6,300	700	7,000
Estimated additional Public Health Funding	1,363		1,363
2% Adult Social Care Precept (subject to consultation)	3,259		3,259
Total Cash limit Funds	200,368	15,946	216,313
ASC Reserve: MLCO Corporate Costs	1,000		1,000
MCCG: Better Care Fund - ASC Contribution	1,696		1,696
MCCG: funding for New Care Models	794		794
MCCG: Additional CHC Contribution	489		489
Total Funds	204,347	15,946	220,292
Application of Funds			
Base Budget 2019/20	178,507	15,097	193,603
Inflation (Pay, Price, National Living Wage) 2020/21	7,558	149	7,707
Demography 2020/21	2,015		2,015
ASC Improvement Plan increase for 2020/21	1,366		1,366
System Resilience	500		500
MLCO corporate costs contribution	1,000		1,000
New Care Models : Reduction in savings	1,925		1,925
New Care Models : Crisis, Reablement & D2A	1,594		1,594
Extra Care Expansion	1,163		1,163
Learning Disabilities	5,034		5,034
Population Health	2,004		2,005
Other Budget Requirements	1,681	700	2,380
Total Application	204,347	15,946	220,292

4.6 The MHCC plan for ASC and PH, as part of the pooled budget proposed, includes the following:

- Inflationary increase of **£7.707m** relating to pay award, price inflation and national living wage assumptions;
- Estimated **£2.015m** for increased need during 2020/21;
- **£1.366m** Full year effect of the ASC improvement plan;
- New investment to sustain services at current levels, including:
 - ASC one third share of System Resilience capacity agreed in 2019/20 of **£0.5m**;
 - New Care Models:
 - Reablement schemes of **£0.8m**;
 - Crisis and Discharge to Assess **£0.794m**; and
 - Rephased New Care Model savings **£1.925m**.
- Continued non-recurrent funding will be made available in 2020/21 of up to **£1m** towards the overhead costs of MLCO from the remaining balance within Adult Social Care reserve.

- Neighbourhood apartments and expansion of the Extra Care programme to deliver an additional four schemes in 2020/21. This provides 20 neighbourhood apartments and 223 new Extra Care apartments, with a cost of **£1.163m**. This will be funded by £0.4m from 2019/20 additional BCF funding and £0.8m required as new investment.
- Learning disabilities of **£5.034m**, which relate to:
 - In house supported accommodation budget in relation to the workforce requirement to meet the needs of people being supported of £2.95m plus £0.5m, which is estimated to be continuing healthcare;
 - £0.7m for care for people which is externally commissioned due to a greater complexity of need;
 - £0.4m shared lives service; and
 - £0.55m for increased need for short breaks support for people and families.
- Population Health priorities of **£2.005m** for inflation and activity increases across the services provided, including sexual health services, drug and alcohol services, increased capacity for school nursing and children's weight management, contributions to adverse childhood experience programme and inflationary uplift;
- There are other budget proposals totalling **£1.830m** to provide a sustainable budget relating to the following areas of the ASC service within the pooled budget:
 - £0.3m mental health care package changes;
 - £0.4m homecare savings are at risk of delivery due to revised timescales to implement new homecare contracts;
 - £0.5m savings target shortfall on expected contract related efficiencies;
 - £0.2m strengths based support planning for ASC savings delay in implementation;
 - £0.1m community alarms income shortfall due to individuals who are unable to contribute;
 - £0.3m to provide an uplift for National Living Wage for external providers to reflect a move to £10.50 by 2024/25.
- Continuation in 2020/21 of programme management transformation capacity to support the MCLO of **£0.550m**

5.0 Draft MHCC Income and Expenditure Summary

- 5.1 A high level draft 2020/21 income and expenditure summary for the pooled budget is shown below in table four. This summary excludes the other ASC services not included within the pool (Asylum, Voluntary & Community Sector – adults and Safeguarding).

Table Four: MHCC Draft Income and Expenditure Summary

	Health £000s	ASC £000s	Total £000s
Programme	904,555		904,555
Delegated Primary Care	98,655		98,655
Running Costs	10,829		10,829
Pooled Budget		216,313	216,313
Total Income	1,014,039	216,314	1,230,353
Expenditure	£000s	£000s	£000s
Acute	485,609		485,609
Adult Social Care	23,902	46,270	70,172
Commissioning (homelessness commissioned services, extra care, sheltered housing and other commissioning)		11,307	11,307
Localities inc social work		9,564	9,564
Reablement		5,299	5,299
Mental Health	130,146	24,327	154,473
Community	77,926		77,926
Learning Disabilities	6,716	60,611	67,327
Continuing Health care	37,206		37,206
Primary Care	205,715		205,715
Other Programme	25,001		25,001
Public Health		39,656	39,656
Running Costs / Back Office	10,829	3,753	14,582
Reserves **	10,989	15,526	26,515
Total Pooled Expenditure Budget	1,014,039	216,313	1,230,353
In Year Position	0	0	0

** The reserves number includes business rules for Health (0.5% contingency, GM Strategic Levy and Payment by Results Risk Reserve. ASC reserves include demography, inflation and national living wage

6.0 Risks and Issues

- 6.1 The financial plan is draft and does not include allocations associated with the Long Term Plan guidance. It also applies a set of agreed planning assumptions to areas of expenditure i.e. Acute, which have been agreed with providers. These have been based on projected activity levels which need to be reviewed in light of the delivery of New Care Models, winter growth and in year pressures. It has been highlighted that these are planning assumptions and do not set a precedent for the contracting round, which will no doubt produce a different set of numbers than the ones referenced within this report.
- 6.2 Although work has been undertaken with partners to align income / expenditure assumptions, there is still a financial risk that plans may not be aligned. These will be agreed as the planning round progresses, with final agreements being reflected in subsequent financial updates.
- 6.3 The MHCC financial plan is balanced as it assumes that the precept funding of £3.2m is agreed, if this is not the case, then plans will need to be revised to reflect any reduced funding envelope.
- 6.4 The financial impact of GM led 5 Year Forward View and Long Term plan schemes needs to be understood and the impact on the financial position of MHCC assessed i.e. Children's and Young People service investments etc.
- 6.5 The development of the MLCO is seen as one of the major drivers for MHCC to achieve financial sustainability over the planning timeframe, with the longer term strategy to move funding into primary and community services and keep patients out of hospital based services.
- 6.6 Beyond 2020/21 the local authority still faces considerable risks, particularly with the funding formula and business rate reforms. Therefore, whilst the published budget will only be for one year the local authority will have a draft three year strategy, which will include all parts of the Council having to identify areas for potential savings.
- 6.7 NHS England requires all health systems to prepare five year plans, and a draft plan was submitted in November. Until further guidance is produced in December / January with regard to allocations, MHCC are unable to produce longer term plans.
- 6.8 In order to close the financial gap over the planning timeframe, there are a number of work programmes / financial sustainability programmes in development which include:
- Continue to build foundations of 'getting the basics' right through the ASC improvement plan and managing demand effectively;
 - Look to continue mobilisation, 'right size' and optimise care models;
 - Develop MLCO integrated commissioning programme – phase 2 services;

- Building strong relationships with primary care networks through working in neighbourhoods;
- A clear focus on prevention with a strong focus on population health and asset based approaches; and
- Ensure system resilience through a strong interface with acute services and enhanced community provision.

7.0 Conclusion

- 7.1 Although the MHCC plan is a balanced financial plan, it is a challenging plan.
- 7.2 Currently the plan is based on assumptions, with operational guidance for health and local authorities due to be published in December / January. The contracting round will take place from January to March, which although assumptions were agreed with providers for the 5 year planning submission, it has been confirmed that these assumptions do not set a precedent for final contract negotiations for 2020/21.
- 7.3 There are significant work programmes underway based on new care models, and savings programmes / financial sustainability programmes to ensure a robust financial plan for 2020/21 and beyond.
- 7.4 MLCO has significant operational challenges which need to be addressed during 2020/21 and the support of all partners will be critical to this.
- 7.5 The Manchester Agreement describes the approach the system will take to identifying, managing and delivering the performance, benefits and evaluation aspects of the transformational system change.

Appendix A: MHCC Plan on a Page

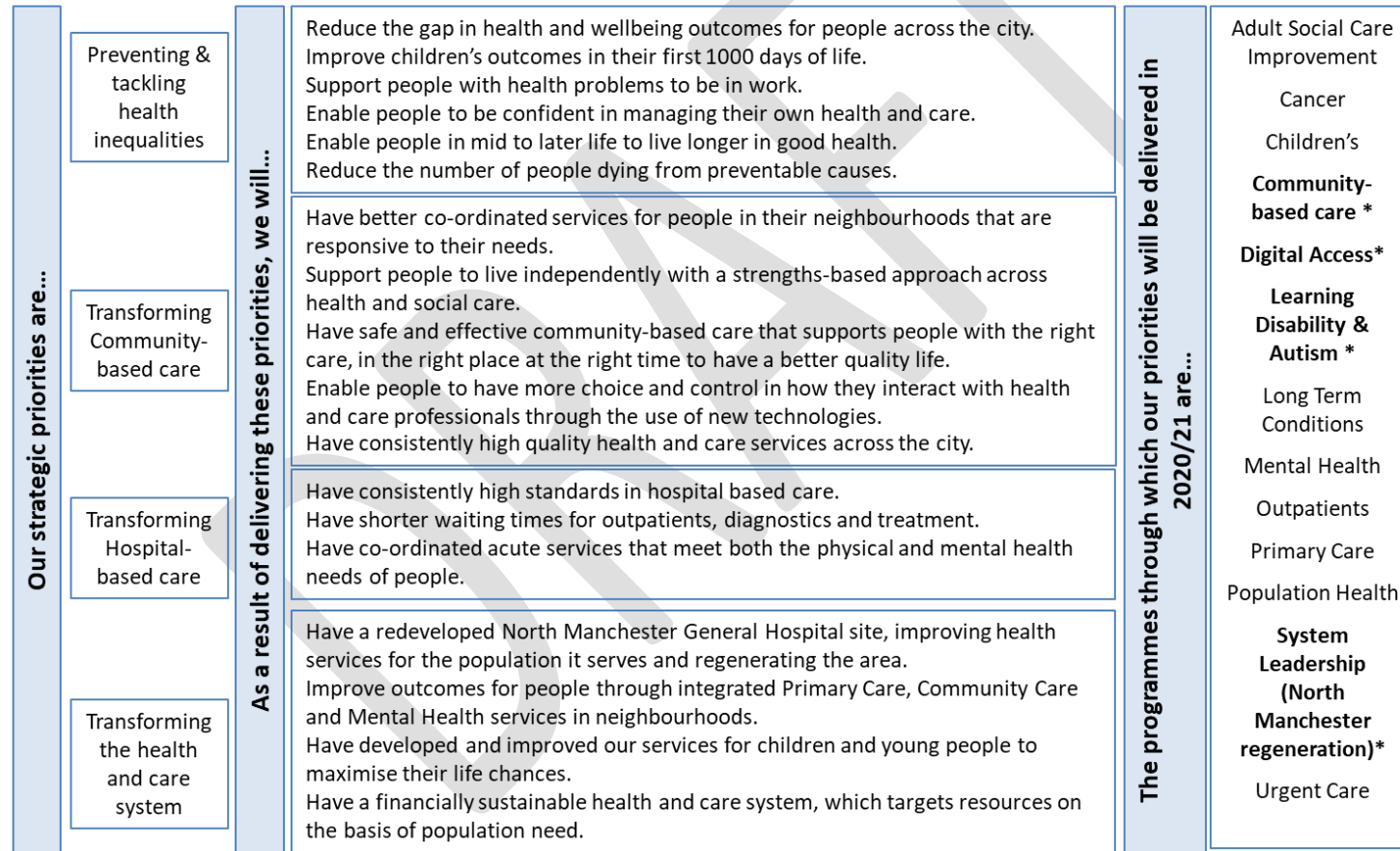


MHCC Plan on a Page: 2020-2025



Our Strategic Aims:

1. Improve the health & wellbeing of people in Manchester
2. Strengthen social determinants of health & promote healthy lifestyles
3. Ensure services are safe, equitable & of a high standard with less variation
4. Enable people & communities to be active partners in their health & wellbeing
5. Achieve a Sustainable system



*our catalyst programmes for 2020-2021

MANCHESTER LOCALITY PLAN

“Our Healthier Manchester”

www.healthiermanchester.org

2019/20 REFRESH
[v2.1]



<p>CONTEXT SETTING</p> <ul style="list-style-type: none"> • Strategic Summary • Vision for Population Health • Delivering the Locality Plan – System Overview 	<p>Page 3 Page 4 Page 5</p>
<p>SYSTEM TRANSFORMATION</p> <ul style="list-style-type: none"> • Achievements • Campaign Summary 	<p>Page 6 Page 7</p>
<p>MANCHESTER’S SYSTEM ARCHITECTURE</p> <ul style="list-style-type: none"> • Manchester Local Care Organisation (MLCO) • Manchester University NHS Foundation Trust (MFT) • Manchester Health & Care Commissioning (MHCC) 	<p>Page 8 Page 9 Page 10</p>
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The original Locality Plan: Our Healthier Manchester, produced in 2016, set out the ambition to improve health and care outcomes for the people of Manchester within a financially sustainable health and social care system. The initial focus led to a rationalisation of the Manchester system, through the creation of a single commissioning function (SCF), a single hospital service (SHS), and a local care organisation (LCO).

The updated Locality Plan (April 2018), set within the context of the city's Our Manchester strategy, shifted the emphasis away from structural change to a focus on Our People, Our Services and Our Outcomes.

This Locality Plan Refresh (November 2019) has been produced within the context of a maturing health and social care system, and in response to both the Greater Manchester Health and Social Care Partnership's (GMHSCP) Prospectus (March 2019) and the requirements of the NHS Long Term Plan. The GMHSCP Prospectus takes stock of the first three years of Taking Charge Together and sets out the future direction for the Partnership. It does so in the context of the development of key Greater Manchester strategies, including the Greater Manchester Unified Model of Public Services and the Local Industrial Strategy – underpinned by the Greater Manchester Independent Prosperity Review.

We recognise, however, that there is still much to do. Manchester continues to face significant challenges in respect of the health and wellbeing outcomes experienced by its residents. It was ranked as the 6th most deprived Local Authority in England in the 2019 Index of Multiple Deprivation¹, which takes into account factors such as income, housing, education and employment, all of which contribute to people's health and wellbeing. Our Healthier Manchester aims to improve health outcomes for the people of Manchester by delivering new models of care and working with people and communities in a more integrated and strengths-based way, reducing health inequalities, supporting people to stay well and enabling them to better manage health conditions. In time, this will reduce the demand for urgent and unplanned care; but our system is not yet experiencing the impact of these changes and the pressure on urgent care remains high. Furthermore, we are operating in the context of a growing and changing population in Manchester. The population is forecast to grow by approximately 16% over the next decade, which is the equivalent of 94,240 people. This presents opportunities for the city, but also some challenges in how we plan for the health and care needs of this expanding population.

In addition, our ability to deliver this place based, person-centred approach is being compromised by significant recruitment challenges related to national skills shortages for key roles such as nurses, therapists, GPs, social workers and hospital-based medical staff. This is a key priority for our Locality Workforce Transformation Group, ensuring that we can attract and retain health and social care staff to Manchester and enable them to move around our system easily so that we have people with the right skills in the right place at the right time.

We are making progress despite these challenges and this refreshed Locality Plan will showcase what has been achieved over the last three years. This includes restructuring the organisational landscape to provide a more cohesive platform for change and the implementation of new care models that are improving people's lives and their health and care outcomes.

This Plan reaffirms our ambition to create a population health system that puts health at the heart of every policy, across the full spectrum of public services, improving health and care outcomes for the people of Manchester, whilst ensuring financial sustainability.

¹ To allow comparison between the 317 English local authorities, the deprivation scores of each small area (LSOA) in a district are averaged and then the districts are ranked based on these averages. Manchester ranks as the 6th most deprived local authority on the index of multiple deprivation.



The Manchester Population Health Plan (2018 – 2027) reflects the Marmot principles, with a place based approach to tackling health inequalities. The five priorities in the plan cover the whole life course and address the social determinants of health:

- Improving outcomes in the first 1,000 days of a child's life
- Strengthening the positive impact of work on health
- Supporting people, households, and communities to be socially connected and make changes that matter to them
- Creating an age-friendly city that promotes good health and wellbeing for people in mid and later life
- Taking action on preventable early deaths.

Whilst our population health challenges remain considerable, we have demonstrated improvements in outcomes for health related behaviours, with smoking prevalence down from 22% to 17.8%, alcohol related hospital admissions falling steadily over the past five years and more residents physically active than ever before. These improvements will contribute to fewer deaths from the big killers such as heart disease and stroke, cancer and lung disease. What is also encouraging is the progress we are making on key wider determinants such as educational attainment, with significant improvements in GCSE and A level results in 2019 and the success of our anchor institutions in recruiting more local residents to entry level jobs.

Our population health system for Manchester will be redesigned in line with the Bringing Services Together for People in Places Programme, which is part of the delivery architecture for the city's Our Manchester strategy. The Local Care Organisation will coordinate delivery at the neighbourhood level.

Infant mortality rates, childhood obesity levels and premature deaths from preventable conditions remain stubbornly high in some of our neighbourhoods and a new approach is needed. We have shown how place based population health can succeed with our long term programme on Teenage Pregnancy (62% reduction in the under 18 conception rate over the past twenty years) and more recently our work on Adverse Childhood Experiences in Harpurhey, which will be rolled out to other areas in 2020.

Manchester has recognised the direct relationship between climate change and health outcomes, with carbon-based activities in Manchester contributing to poor air quality, which in turn exacerbates respiratory problems. Given the poor health of many Manchester residents, there is a real risk that failure to tackle climate change will widen health inequalities and limit the progress of prevention programmes in the city. Consequently, on 10th July 2019 Manchester City Council declared a climate emergency. In response, all public sector partners represented on the Manchester Health and Wellbeing Board have agreed to develop Sustainable Development Management Plans (SDMPs) and Climate Change Action Plans by March 2020. These plans will be informed by the latest thinking and analysis contained in Manchester's Zero Carbon Framework (2020-2038) and the Manchester Public Health Annual Report 2018 on Air Quality.

We know that benefits of the economic success of the city have not been felt equally by all residents. However, we are determined that variations in health and variations in income between different parts of Manchester and between Manchester and the rest of the country are reduced. This accords with the aims of our Family Poverty Strategy.

Finally, we want the people of the city to have more control of their health and wellbeing and build on their strengths. We want to maximise the opportunities for our public services, the voluntary sector, and communities to come together to transform our population health outcomes through the Our Manchester approach.

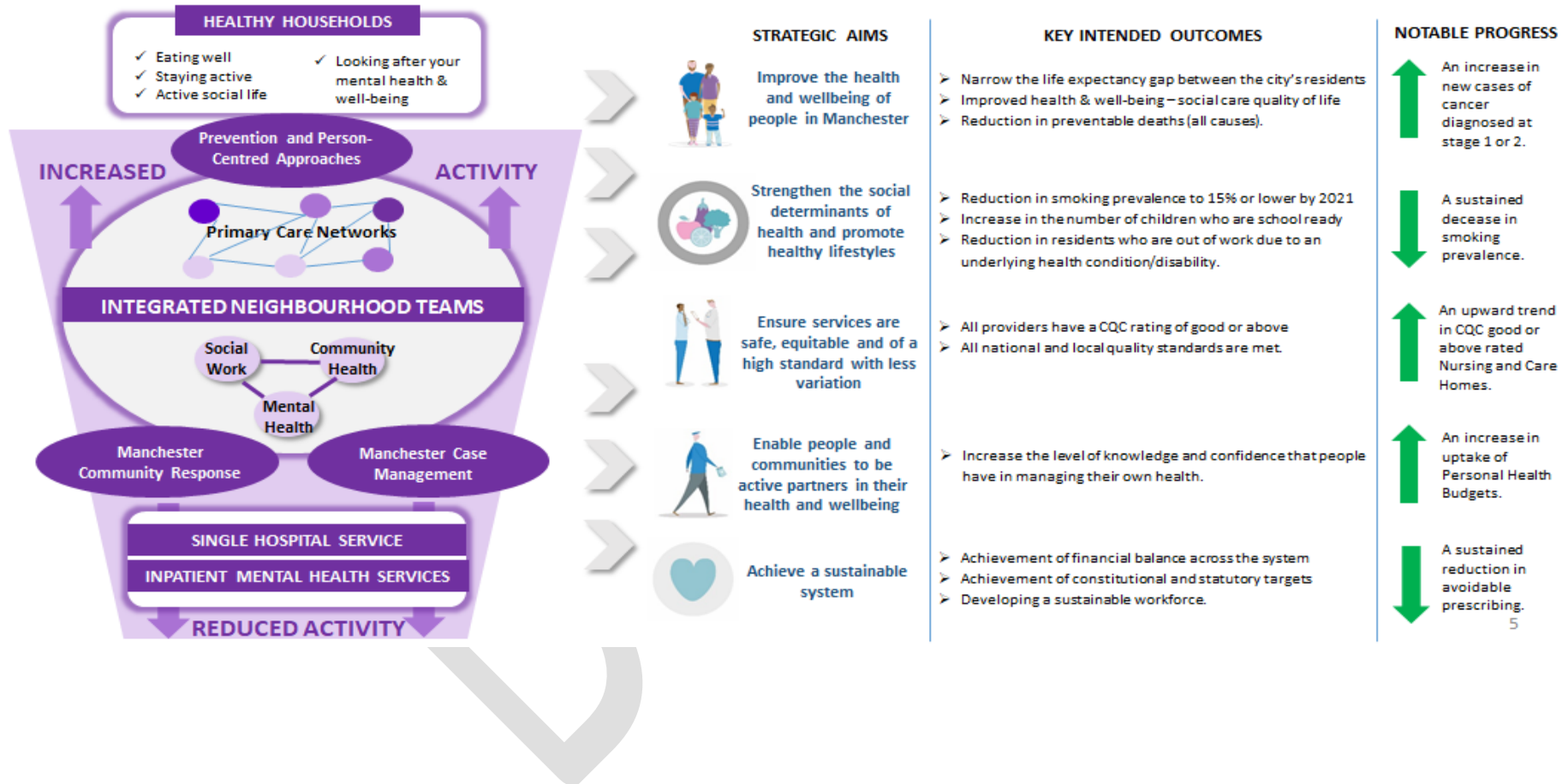
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DELIVERING THE LOCALITY PLAN - SYSTEM OVERVIEW

OUR HEALTHIER MANCHESTER

Manchester has developed an integrated model of neighbourhood working that interfaces with a single hospital service, strategically led by a single commissioner. This new system architecture is contributing to the achievement of the five strategic aims of the Locality Plan. Manchester tracks progress on a larger set of indicators than those identified below in its Locality Plan Outcomes Framework.



SYSTEM TRANSFORMATION - ACHIEVEMENTS

OUR HEALTHIER MANCHESTER

The 2018 update to the Locality Plan identified three new priority themes (Our Services, Our People, Our Outcomes), with the intention of shifting the focus on from institutional change ('the three pillars') to encompass a wider ambition for systemic change. Three development phases were identified: Foundation (2017/18), Performing (2019/20) and Mature (2021/22) with a view to achieving the visions outlined in the three boxes below by 2026/27. This page identifies a selection of achievements to date against the three priority themes.

OUR SERVICES

10 year vision: Establishment of an integrated health and social care system

- ✓ **12 Integrated Neighbourhood Teams (INTs)** established, integrating the delivery of health and social care.
- ✓ **Manchester Community Response** (crisis response and discharge to assess) services mobilised to support system resilience and flow.
- ✓ **Manchester Case Management Service** (GP intensivist model) mobilised to better support community-based care.
- ✓ Alignment of the newly formed **Community Mental Health Teams** to the 12 neighbourhoods, and introduction of 24/7 Home Based Treatment options as an alternative to hospital.
- ✓ **Mental Health Liaison in Acute Hospitals** - Implemented Phase 1 of the GM Transformation Programme establishing Core 24 compliant Liaison Mental Health Service at MRI.
- ✓ **Primary Care leadership** across the MLCO service delivery mobilised and strategy emerging to align the Primary Care Networks (PCN) to neighbourhood and locality service delivery.
- ✓ **MLCO has developed a range of strategic partnerships** with key stakeholders including Housing, MCRActive and Health Innovation Manchester, and has signed an MOU with the VCSE.
- ✓ **Lithotripsy treatment** is now offered to patients **3 days per week** (up from 0.5 days) and patients are treated within **4 weeks**.
- ✓ **Orthopaedic Services** – Improving Neck of Femur services through a dedicated seven day hip fracture unit.
- ✓ **Cardiac Services** – a seven day pacemaker service has been introduced across the Trust meaning patients can be provided with an implant within 24 hours of admission.
- ✓ **Seven day working for Cardiac** physiologists at both Wythenshawe and MRI.
- ✓ **Gynaecology Waiting Times** – Patient waits for urgent gynaecology surgery have been reduced from 4 to 2.5 days.

OUR PEOPLE

10 year vision: Gap closed in preventable mortality between the most and least deprived areas of the city

- ✓ **Our Healthier Manchester** campaign saw 1,107 conversations take place with residents (*see next slide for more information*).
- ✓ A £1.5m investment agreed to improve and extend a **carers' advice & support service**, working in collaboration with the Manchester Carers' Network.
- ✓ **Population health driven service model** development and delivery in MLCO; neighbourhood building blocks mobilised.
- ✓ **MHCC is improving access to health and care for marginalised groups** through the development of locally commissioned services for asylum seekers and refugees in half of GP practices, alongside activity designed to improve the health of homeless people.
- ✓ **VCSE investments:** £2.1m grant fund to support the delivery of the Population Health Plan.
- ✓ **Community Engagement:** GMMH launched the Manchester Wellbeing Fund in 2017 investing £1.5m over three years to support community projects across the 12 neighbourhoods in Manchester. 194 projects supported, with a focus on creative arts, mental health awareness, social connectivity, peer support, horticulture and healthy eating, and physical activity.
- ✓ A **new Homecare specification** has been developed, focusing on wider community support and helping people to stay independent and living at home for longer.
- ✓ **Research and Innovation** – Over 19,000 patients took part in clinical research in 2018/19.
- ✓ **Employee Assistance Programme** introduced across all hospital sites and now available to over **20,000** staff.
- ✓ **Education** – Over **20,000** MFT staff and students now have extended access to books, online journals and study areas through cross site library and education services.

OUR OUTCOMES

10 year vision: Achievement of the health & social care system contribution the city's Our Manchester strategy.

- ✓ Manchester's **evaluation programme** has identified statistically significant reductions in A&E attendance, homecare use and residential and nursing care use in target cohorts following the introduction of new care models.
- ✓ MHCC has established a partnership with the Manchester Growth Company, resulting in **54 positions being offered** to people who had been classed as long-term unemployed.
- ✓ **Improving Access to Psychological Therapies (IAPT)** - referral rates increased by over 25% with significant improvement in the timeliness of access for clients entering services.
- ✓ **Provision of a dedicated Section 136 suite** - Opened a purpose built Section 136 suite which has since delivered 354 mental health assessments, diverting service users from A&E and saving 2090 hours of police time in the first twelve months of operation.
- ✓ **Reducing Out of Area Placements** for Adult Acute Patients – more people treated closer to home, over achieving the target of 33% reduction for 2018/19
- ✓ **Refurbished community sites** delivered to support integrated working at a neighbourhood level, with supporting IT and networks installed.
- ✓ Full business case developed with six partner organisations to build a new purpose built, **health and care hub in Gorton**.
- ✓ **The Manchester Digital Board** has been established to better coordinate investment into, and the delivery of technology enabled care.
- ✓ Contribution to **system financial sustainability** through mobilisation of transformation-funded new care models and cost improvement and savings plans; demonstrated by the over delivery on crisis response business case measures and metrics.

Overview

In late 2018, Manchester delivered a citywide campaign to promote the Locality Plan – 'Our Healthier Manchester'.

The aim of the campaign was to listen to people and understand what matters most to them in terms of their health and wellbeing.



We concentrated on:

- A child's first 1,000 days
- Helping people overcome ill health to return to work
- Improving wellbeing in local communities
- A more age-friendly city
- Preventable early deaths.

How we did it:

- Created an updatable communications toolkit
- Produced a range of films and case studies to highlight real examples of improvements
- Launched a public summary of the Locality Plan.

Our Healthier Manchester: Campaign Summary

Top comms results:

- Local, national and international media coverage for five of our case studies
- Local pick-up for all materials through our networks of health, GP and community channels
- The Local Government Communications Conference used our materials as an example of good practice.



Aimed at all audiences



Engagement

What we did:

- Held over 1,107 face-to-face conversations with residents
- Organised larger community engagement sessions and ran an online survey.



What people told us:

- Feedback showed that public awareness of the following things was low:
 - GP extended access
 - NHS screening programmes
 - Advice and support for carers
 - Advice and support on social care services
 - Accessing help for mental health and wellbeing
 - Which services to use at the right time
 - How to give feedback on health and care services.

How did we use this feedback?

We used it to:

- Develop a public information campaign
- Carry out a dedicated lung-screening campaign
- Engage with black and minority ethnic communities around NHS 111 and self-care
- Develop a dementia-awareness project with South Asian communities
- Inform the development of a mental health safe haven for Manchester
- Develop communications for extended access to healthcare services
- Inform the development of a shared care record and a digital strategy for primary care.





Manchester's Local Care Organisation (MLCO) delivers integrated community services to all residents of Manchester of all ages. The model ensures full population coverage through:

- **Risk stratification:** our model identifies those residents who are in the key priority cohorts and we are working as part of a system-wide group to develop a consistent approach to risk stratification.
- **Aligned data and intelligence:** partners across the city are working together to ensure we share our data and intelligence to support our service planning and delivery.
- **Neighbourhood Partnerships and plans:** enabled the development of 12 integrated health & social care neighbourhood plans documenting the consistent actions in all neighbourhoods and the key actions in each place to address specific inequalities, through the alignment of the data and intelligence across Manchester. In 2020/21 they will be aligned to council wards and Primary Care Network plans and support the understanding of our joined up approach in the place.
- **Locality (North, Central, South) Partnerships and Ops Boards:** support coordination of activity across neighbourhoods to ensure full population coverage and those communities that would identify wider than neighbourhoods.

The overarching MLCO priorities for 2019-2022 are:

- **A population health driven approach** to service planning and delivery; supporting prevention programmes to improve the health of the people of Manchester.
- **Consolidating and strengthening our neighbourhood approach;** supporting our 12 Integrated Neighbourhood Teams (INTs) to make an impact on their communities.
- **Mobilising primary care leadership at the heart of the MLCO;** formalising the governance between primary care and MLCO to ensure joint working with the new Primary Care Networks.
- **Playing a lead role in system resilience;** helping people get the right care in the right place with a community first ethos.
- **Increasing the scope of MLCO** as an integrated health and care organisation; delivering public service reform in the place.

OBJECTIVE
Creation of a single hospital service

Manchester University NHS Foundation Trust (MFT) INTEGRATION PROGRAMME

- Following the creation of Manchester University NHS Foundation Trust in October 2017, the new Trust embarked on a programme to develop a Clinical Services Strategy. This programme took approximately 15 months and commenced in April 2018. Over a series of around 40 workshops the process engaged over 700 clinicians from a number of different specialties. The Strategy was developed at two levels, firstly a Group or Trust level framework and secondly at specialty or combined specialty level.
- Working within the parameters of the agreed organisational vision, the intention is to generate alignment between three key areas of our activities – clinical service delivery, research and innovation and workforce development. The five pillars set out in the Trust level clinical service strategy (below) are intended to set the overall direction of travel for our services whilst recognising the importance of aligning with our research and workforce development aspirations



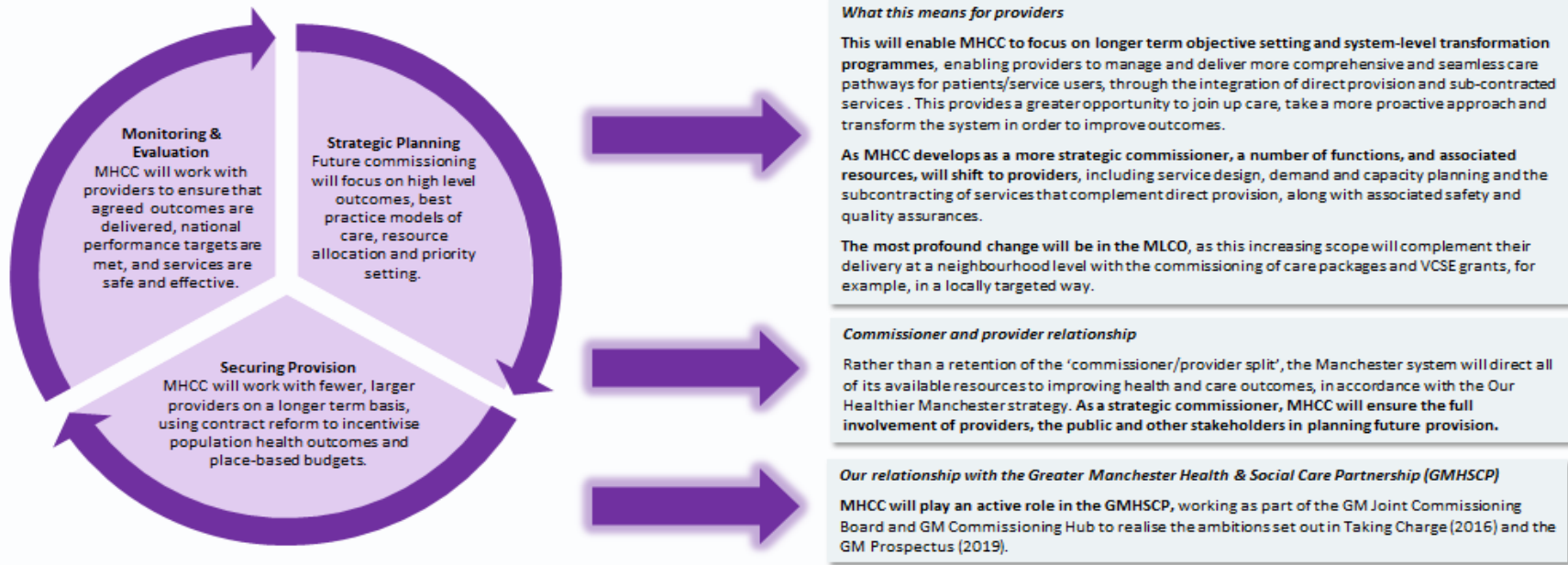
- The Strategy also identified four key areas of focus as the organisation moves forward;
 - Cancer surgical services
 - Cardiac services
 - Lung services
 - Genomics.
- Having developed this overarching framework a programme was initiated to develop individual clinical service strategies. This covered all aspects of the current service portfolio and was undertaken in a series of 'waves'. As a result a number of clinical strategies have been developed which are intended to set an overall direction of travel for a particular clinical area. MFT is actively working with local and regional commissioners on this next stage of the programme.

North Manchester General Hospital (NMGH) SITE DEVELOPMENT

- The Strategic Case for the acquisition of NMGH was submitted in March 2019. Due Diligence processes have identified that there is a very significant investment requirement, and negotiations continue between NHSE/I, MFT and Salford Royal Foundation Trust (SRFT).
- Over summer 2019, a variety of partner organisations in Manchester worked together to develop a more ambitious vision of what could be achieved if the NMGH site could be redeveloped. Proposals are set out in the NMGH Proposition document, *The Future of the North Manchester General Hospital site: a healthcare-led approach to civic regeneration*. This seeks to improve the provision of health and care services on the site and to develop a broader integrated care offer which brings together acute, mental health, primary, community services, and education and training facilities with wider public services and community activities.
- The proposition identifies the need to optimise the impact of NMGH as an anchor institution in its local community and aims to deliver a health-led infrastructure project on the site which will act as a catalyst for wider regeneration. The strategy will contribute to improvements in wider determinants of health and wellbeing, such as employment and housing, and create a focal point for the community which goes beyond health and care services. This work forms part of a broader public sector reform and regeneration agenda for the north of the city and will link with existing developments and those planned for the future such as the Northern Gateway.
- Delivering the NMGH strategy will rely on significant capital investment. Securing this is a priority. £72m funding for the rebuild of Park House (Mental Health services) has been announced and the delivery of the rebuild forms part of the whole-site strategy. The NMGH site more broadly has been included in the national Health Infrastructure Plan, with seed funding to be made available to work up more detailed plans for the site redevelopment. The site proposition includes a hospital rebuild and the development of a health and wellbeing centre and education and learning centre. Partners will work at pace to develop the detailed proposals which will be required to draw down the capital investment, alongside undertaking further work on the plans for regeneration, public sector reform and service transformation.

Commissioning in Manchester – An Evolving Approach

Manchester Health & Care Commissioning (MHCC), a partnership between Manchester City Council and Manchester Clinical Commissioning Group, was formed as the single commissioner for health, public health and adult social care in April 2017. It is now moving into the second phase of its development, focusing on its role as a strategic commissioner, working with key system delivery partners: MLCO as an integrated provider of out of hospital care; MFT; federated models of primary care and more latterly Primary Care Networks; and Greater Manchester Mental Health FT (GMMH) as the mental health provider for the City.



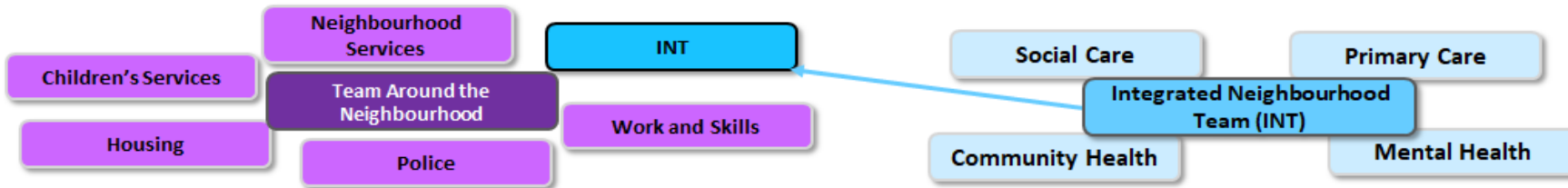
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INTEGRATED NEIGHBOURHOOD WORKING

OUR HEALTHIER MANCHESTER

Bringing Services Together for People in Places is Manchester’s approach to developing a model of integrated neighbourhood working that meets the requirements of the GM Public Service Model. This model represents the next level of integration for the health and social care system, following the achievements outlined earlier in the plan in integrating community, hospital and commissioning organisations. Health and social care will connect with wider services and assets in neighbourhoods in order to deliver joint priorities, and help people with more complex needs.

Manchester has developed shared neighbourhood footprints, largely based on populations of between 50,000 and 60,000 (plus the City Centre which is 28,000)



Public services delivering together

- The 'Team Around the Neighbourhood' - consists of 6 'link lead' operational managers across Health and Social Care, GMP, Children's, Registered Housing Providers, Work and Skills and Neighbourhood Services. Connected to VCSE organisations in the neighbourhood.
- The INT Lead within the MLCO is the connection between health and social care and wider public sector agencies.
- Each 'Team Around the Neighbourhood' will work together on a shared set of joint priorities for the place.
- The ambition is to integrate teams working across neighbourhoods to remove system duplication and start to look and feel like one public service team.

Health and social care connects into wider neighbourhood services

- Integration of health and social care at the neighbourhood level in Manchester is through Integrated Neighbourhood Teams (INTs), comprised of health and social care staff (district nurses, therapists, reablement, social care and mental health staff), and connected to Primary Care Networks (PCNs).
- Each INT has a single leadership team with staff co-located in community hubs working to a shared delivery plan.
- INTs connect to the 'Team Around the Neighbourhood' via the INT Lead and develop joint priorities for the neighbourhood with other partners.

Individuals and families with complex health, care and wider needs will be supported by a multi-agency meeting that mobilises integrated frontline support from different services. These will build on existing multi-disciplinary teams (MDTs) for health and social care in each neighbourhood, and will connect to wider services.

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INTEGRATED NEIGHBOURHOOD WORKING

OUR HEALTHIER MANCHESTER

Manchester's Neighbourhood approach will deliver the six key features of the GM Public Service Model, as set out below.

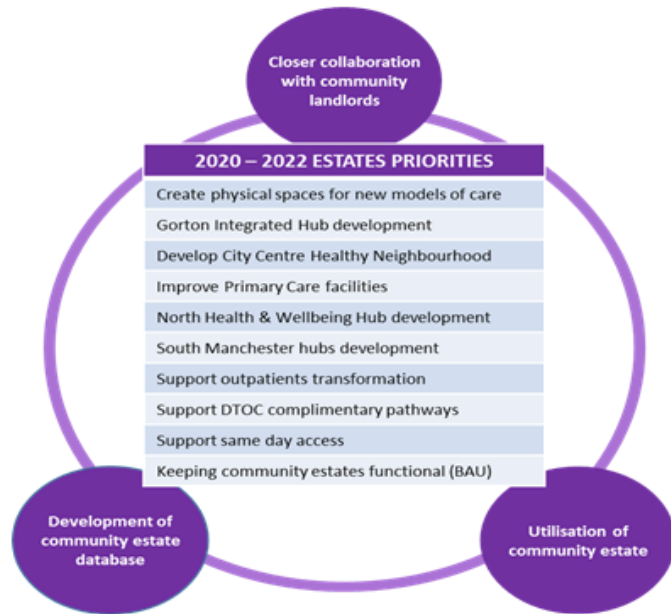
1		Geographic alignment	Thirteen neighbourhood footprints (including the City Centre) have been agreed between Health and Social Care (H&SC), Registered Housing Providers, Police and Children's Services. These are largely co-terminous. There is more work to do to align the frontline on these footprints. There is a clear plan of how these footprints connect to INTs and PCNs. Most neighbourhoods are towards or slightly larger than 50k population size given Manchester population. Each neighbourhood will include focused activity on small geographical areas within it, informed by relevant data.
2		Leadership and accountability	The 'Team around the Neighbourhood' (TatN) will be the integrated leadership team for services in each neighbourhood. It will connect to other H&SC services, the MLCO Leadership Team, and H&SC locality governance through the INT Lead. The TatN will make decisions about joint priorities for each neighbourhood. At the city wide level, the Our Manchester Investment Board (OMIB) is the key forum of Chief Executives from different services to work together on public service reform for Manchester. Progress from the Neighbourhood will be fed directly in to the OMIB.
3		One workforce	The TatN will lead on the development of 'one workforce' at the neighbourhood level. This will be enabled by a joint workforce development programme including strengths-based development and systems leadership. Each TatN will identify one or more practical projects to join up frontline teams on. Case navigation forums will integrate frontline delivery. Evaluation will measure the extent that the TatN look and feel like one team, including workforce and resident engagement.
4		Shared financial resources	MHCC is the single commissioning function for H&SC in the city that has an agreed set of shared strategic aims. Pooled budget arrangements already exist for health and social care in Manchester between MCC and MHCC. Voluntary and community sector funding streams have also been combined between MCC and MHCC. An integrated H&SC neighbourhood budget is in development to support 2020/21 service planning.
5		Programmes, projects and delivery	The common goal of public services in Manchester is to deliver the strategic aims for the city described in the Our Manchester Strategy 2016-25. These aim to improve lives for Manchester residents, improve outcomes, connect more people to economic growth, and reduce demand for services. The Our Manchester approach identifies how these will be delivered through new ways of working. Neighbourhood working will include some consistent elements across the city – in a single neighbourhood delivery model - and some flexibility to deliver priorities and work differently in each neighbourhood. Joint workstreams will be developed to improve shared knowledge of the strengths and issues in the place, including joined up resident engagement, population insight and risk stratification.
6		Tackling barriers and devolution	OMIB is the overarching governance group for public service Chief Executives across Manchester, which is responsible for driving delivery of this approach. Barriers that can be tackled at the neighbourhood level are escalated to OMIB for action for the Chief Executives. Manchester is well represented on all key GM governance groups and provides significant input to GM work with Government on devolution. ¹²

INTEGRATED NEIGHBOURHOOD WORKING

OUR HEALTHIER MANCHESTER

The Manchester Neighbourhood Model will seek to enable change through the optimisation of the public estate, and the use of digital technology, building on success to date. Estates and IM&T enabling programmes have worked together over three years to design 12 new hubs for INTs to co-locate in each neighbourhood. This has involved building refurbishment in most existing community sites, with supporting IT and networks installed. The challenge now is to integrate further across the health & care system, and beyond, to enable the delivery of the Locality Plan's five strategic aims.

The **Manchester Executive Strategic Estates Group** is working with partners across the city to deliver its priorities up to 2022, outlined below.



The **Manchester Digital Board** is developing a new digital strategy and delivery roadmap, working closely with Health Innovation Manchester (HiM) and GMHSCP. The Board will focus on five areas, all underpinned by effective information governance and data sharing agreements:

Digital Architecture (Networks, Security, Support)

The ways in which Manchester develops a more integrated system network architecture

Core Systems Implementation & Optimisation

How core organisational systems are developed with system objectives in mind.

Shared Care Records

Collaborative development of shared care records for both staff and citizens.

Care closer to home

Including self-care technology and patient consultation technology, supporting care closer to home.

Knowledge & Insight

The development of a knowledge system for Manchester that harnesses the wealth of data and evidence to drive better decision making.

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The **Manchester Locality Workforce Transformation Group (LWTG)** is a collaborative of system partners leading on the integration of workforce transformation activity to meet the five strategic aims of the Locality Plan. LWTG's aim is **'To make Health and Care in Manchester the best place to work'**. An integrated system approach is being developed in five priority areas to address the following challenges:

- Health and social care increasingly operates in an emergent, uncertain and ambiguous context with a focus on place-based and person-centred care working across organisational boundaries.
- Changing needs, higher expectations and increasing demand for limited resources places pressure on traditional models of service delivery and ways of working.
- Delivering safe, high quality and compassionate care is compromised by gaps, vacancies and hard to fill roles across Manchester, and the lack of a common workforce operating model across the system.
- Recruiting, retaining and supporting health and social care staff to deliver their best at work.
- Skills shortages both local and national for key roles such as Nurses, Social Workers, Therapists, GP's and hospital based medical staff cause significant financial and service delivery challenges, with reliance on expensive agency workers.
- To make better use of technology and enhance digital skills.
- Developing leadership behaviours across the system to operate in matrix structures and systems.
- Changing attitudes to work by the different generations will need to be responded to by employers – e.g. greater demand work flexibly. Workforce demographics are changing e.g. people working until an older age, by 2030 millennials will make up 75% of the workforce.

FIVE PRIORITIES

Recruitment, Retention and Progression

- 2020**
- Design and application of a bespoke attraction strategy
 - Developing integrated apprenticeships/ maximising use of the apprenticeship levy.
- 2021-23**
- System recruitment strategies that position Manchester's health and care partners as employers of choice for people from diverse backgrounds; and for future generations, who may have different expectations around what they want from their careers and places of work.

Workforce Operating Model

- 2020**
- Options appraisal and implementation of potential employment framework to enable cross-organisational movement of staff within the Manchester locality.
- 2021-23**
- Aligning policies and processes across the system
 - Review potential alignment of staff benefits across the system.

Inclusion, Social Value and Wellbeing

- 2020**
- Bring together workforce race equality strategies and plans into a locality approach to improve BAME representation across the system
 - Our locality approach will be used to inform and support system leaders to be clear on our drive to address and remove unnecessary and harmful disparities in employment
 - Develop a single clear brand or message on our commitments to address inequalities in employment and promote inclusion.
- 2021-23**
- Health and wellbeing baseline assessment indicators in place across all partner organisations
 - Mental Health awareness campaign across the system
 - Shared information about health and well-being resources
 - Enabling recruitment, training and support for disabled staff
 - Commitment to work towards Disability Confident level 3.

Workforce Planning

- 2020**
- Develop and expand the scope of the Virtual Workforce Intelligence System (VWIS) to enable Manchester to undertake strategic workforce planning at a system level.
- 2021-23**
- Improved approach to workforce planning – aligned to population growth, new roles and skills mix, shortages, cross sector and integrated career pathways.

Workforce Development

- 2020**
- Review approaches to talent management
 - Integrated approaches to leadership and development where it supports the system
 - Review opportunities to collaborate on education, training and development.
- 2021-23**
- Further development of person centred and strengths based approaches
 - Implementation of the Primary Care workforce strategy.

RESPONDING TO THE NHS LONG TERM PLAN

OUR HEALTHIER MANCHESTER

Building a sustainable health and care system through the delivery of national and local policy drivers and requirements will be critical to successful implementation of the Locality Plan. Such drivers include the Local Industrial Strategy, the Greater Manchester Model of Public Service Reform, the Health and Social Care Prospectus, and the NHS Long Term Plan (LTP).

A readiness assessment has been completed against the NHS LTP to assess the preparedness of the city to deliver on the LTP, and to understand any areas which will require additional focus. This assessment will be used to support both planning and assurance across the system. Taking account of these policy drivers, Manchester will focus on seven key areas, explained in more detail over the next four pages.

PLANNED CARE

Delivering shorter waits for planned care and ensuring that patients are able to choose where and how they receive their care remains a priority. Through the **Joint Planned Care Board** involving providers and commissioners, reform will be targeted in the right areas by using Getting It Right First Time (GIRFT) and NHS Right Care. This will ensure any unwarranted variation is identified and addressed and will support the delivery of shorter waits for planned care. MHCC continues to work closely with its main provider to manage waiting times in line with national guidance. Specialty level delivery trajectories are in place to reduce waits and there are systems in place to ensure no patients wait over 52 weeks for treatment including review of all patients at 46 weeks. Oversight continues through weekly taskforce meetings between the MFT and MHCC.

The volume of planned care surgery required to deliver the elective standards will be considered annually as part of the NHS planning round and contract negotiations. MHCC will work with providers to undertake a capacity and demand exercise. As part of this, any new guidance (NICE, NHS LTP, choice at 26 weeks) will be considered, along with affordability and deliverability. The Elective Care Board will oversee the implementation of the **Elective Care Reform Programme**. This programme will focus on delivering reform through the use of new technologies with a view to reducing outpatient attendances. Priority areas have been agreed with stakeholders.

URGENT & EMERGENCY CARE

A comprehensive **System Wide Improvement Plan** is in place across Manchester and Trafford through which the delivery of urgent and emergency care priorities will be managed. The plan highlights key transformational workstreams and aligns to national priorities, regional priorities and operational priorities. This includes the overall requirements of the NHS LTP and will incorporate the outcomes of the **Clinical Standards Review**. The Clinical Standards Review is exploring whether an average (mean) time in A&E could be implemented safely, and will provide clinicians with a useful measure of activity and patient experience. The review is also collecting data to examine the feasibility of measuring how fast critically ill or injured patients arriving at A&E receive a package of tests and care (developed with clinical experts) for conditions such as stroke, major trauma, heart attacks and sepsis. Field testing of these standards are currently underway at a small number of hospital sites across England.

Improving performance against key system indicators such as A&E waiting times, Delayed Transfers of Care, and Length of Stay is central to the plans in Manchester. Examples of how improvement will be delivered include developing a single multidisciplinary Clinical Assessment Service (CAS) integrated within NHS 111, implementation of Urgent Treatment Centres (UTC) in each locality and embedding discharge standards to ensure every patient has a plan in place for discharge.

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MENTAL HEALTH

MHCC is committed to ensuring that everyone who needs mental health care has timely and equitable access to high quality, evidenced based provision, as close to home as possible, that has been developed in partnership with all of our providers and people with lived experience. This will be done by ensuring that our system plans for delivering the LTP and Mental Health Implementation Plan are clearly aligned to other work areas such as ageing well, maternity, primary care, personalisation and learning disabilities. Examples include:

- Commissioning **specialist perinatal community services** and supporting partners of women who are using these services.
- Securing **more access for children and young people (CYP) to NHS funded care** including school and/or college based mental health teams.
- Working with providers who deliver 0-25 services to **smooth the transition** from CYP to adult services.
- Securing **better outcomes for people accessing crisis services** by improving adults and CYP crisis pathways.
- Working with our local care organisation to fully align and embed **Improving Access the Psychological Therapies (IAPT) services** within neighbourhood level structures and support closer working with primary care services.
- Improving **primary care mental health support** available in the community, ensuring that people move between the different levels of mental health care with ease.
- Supporting the delivery and provision of mental health rehabilitation services within community settings to **enable people to recover whilst firmly rooted within their communities and lives.**

CHILDREN'S SERVICES

Our vision is for a **safe, healthy, happy and successful future** for all children and young people in the city; a city passionate about children and young people living in stable, safe and nurturing homes; safely reducing the number of looked after children; having the best start in the first years of life; and fulfilling their potential. This will be delivered working in partnership across the system to promote a strengths-based way of working, focused around the child and young person (CYP) and the outcomes that matter to them. Areas of focus will include:

- **Improving health outcomes of CYP with SEND** by ensuring that they receive an integrated response to their health, educational and social needs.
- Implementing M-Thrive to enable **access to emotional health and wellbeing support.**
- Preventing avoidable admissions to hospital through **building community capacity and confidence within local populations to manage minor illness.**
- Having a **robust, local offer in Manchester to those CYP who require longer term care outside of their family home**, which will include Special Guardianship Orders, Foster care, respite and residential offers.
- **Providing pathways of support across education, health and care** for Looked After Children up to the age of 25, both within and outside of the city ensuring they have the right care and support at the right time in the right way.
- **Successfully transitioning young people to adult services**, with full involvement from the young person in a gradual, planned way to ensure that young people have a better experience of moving between support settings, be they in health, care or education.
- Working with the GMHSCP to implement **Better Births.**
- **Taking a 'whole system approach' to reducing childhood obesity**, engaging with partners beyond the field of health and challenging the obesogenic environment in the city. Specifically in health we will be expanding the Infant Feeding Strategy to increase breastfeeding rates, and develop a neighbourhood 'social prescribing' model of Tier Two and Three weight management provision.

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CANCER

An overall Cancer strategy has been developed which covers how partners across Manchester will drive the improvement of cancer outcomes, and achieve the requirements of the NHS Long term Plan. Area of focus will be:

- **Improvement of the one-year survival rates** of people in Manchester through earlier diagnosis by working across primary networks, neighbourhoods, and with the VCSE to increase the uptake of the screening for national and local cancer screening.
- Consistently **achieving the cancer waiting time standards** through the implementation of **Faster Diagnosis Pathways** initially for Colorectal, Lung and Prostate, to be followed by OG, Head and Neck, Gynaecology and Hepatobiliary. This may include the development of one stop clinics, straight to test pathways, and multi-diagnostic/rapid diagnostic clinics.
- **Improving access to high-quality treatment services**, including through roll out of Radiotherapy Networks, strengthening of Children and Young People’s Cancer Networks, and reform of Multi-Disciplinary Team meetings
- **Roll-out of personalised care interventions**, including stratified follow-up pathways, to improve quality of life.
- Working with GM to support **the roll out of Prehab 4 Cancer**, to improve people’s fitness before cancer treatment and therefore improves recovery and reduce post-treatment complications. Initial focus will be on services for colorectal, upper gastrointestinal (GI), lung and hepato-pancreatic-biliary (HPB) patients.
- MFT is one of the seven **genomics hubs** across England. We will engage with the genomics hub to understand how genomics can be used for screening and personalising cancer treatment for second cancers, and how affected relatives can have regular surveillance to ensure early detection of any cancers.



FINANCIAL SUSTAINABILITY

Financial sustainability remains a key priority for Manchester’s health and care system and partners throughout the planning period 2019/20 to 2023/24, embodied in the strategic aim to ‘Achieve a sustainable system’ within both the Locality Plan and ‘Manchester Agreement’:

- Transform the health and care system, moving our focus from hospital to the community.
- Reinvest the savings we make into better care.
- Balance our finances now and in future years.
- Develop our workforce so we have committed, healthy, skilled, people where and when they are needed.

The Locality Plan sets the ambition to radically improve people’s health in the city. Manchester has already commenced an unprecedented set of complex, interdependent reforms to the way services are commissioned and provided, encompassing structural, contractual and service delivery transformation.

Large scale investment was secured to 2021 to support health and care transformation through the ‘GM Transformation Fund’, additional Government funding for Adult Social Care (ASC), and a range of other sources. The GM Investment Agreement included high-level information about what needs to be delivered in return for the investment from the GM Transformation Fund. The Manchester Agreement sits alongside the GM Investment Agreement to provide additional assurance about how investment and reform will reduce demand in the city, including how partners will collaborate to better understand how the investments being made in new models of care will reduce demand for acute health services, and, through decommissioning, release cashable savings for reinvestment.

The next planning period represents a crucial phase in embedding and realising the full benefits of the changes to date, whilst responding to emerging policies within the NHS Long Term Plan. This includes a priority to invest funding growth within primary, community and care services.

The forward five year health and care financial plan is currently being refreshed but it is anticipated that substantial financial challenges will need to be addressed across the health and care system. This will critically depend upon the continued strength of the city’s excellent partnerships and working relationships and in particular, the city’s executive financial leaders in the context of financial sustainability.

All partners will have a role to play in ensuring that recent transformational investment delivers improvements in health and care outcomes for Manchester’s people, as well as long term financial sustainability for Manchester’s health and care partners. This will be enabled via a system-wide focus upon achieving the best possible value from Manchester’s scarce resources, including, where appropriate, designing and delivering further system-wide efficiency programmes.

Within this context, partners are currently considering alternative future funding models and strategies - for example, affordability (rather than National Tariff based acute contracts); reliant upon a key principle of intra-organisational trust and transparency and ongoing reciprocal understanding of the partners’ dynamic organisational financial contexts.

Although not covered explicitly in the NHS Long Term Plan, improvements to adult social care services are necessary to both help stabilise an NHS under increasing demand pressures, and to expand and improve community based health and care services.

ADULT SOCIAL CARE

Manchester's Adult Social Care Improvement Programme is driving significant change and longer term sustainability through investment in workforce, a shift of focus to 'our people in place' via the mobilisation of Integrated Neighbourhood Teams and transformation to new ways of working underpinned by 'our culture' and the Our Manchester strategy. Significant investment has been made within the programme to deliver safe, effective and sustainable services that take a 'strengths based' approach to assessment and care and support planning. Mobilised INTs are beginning to realise tangible outcomes relating to joint visits with improved communication between health and social care (i.e. district nurses, social workers, GPs, care navigators, community mental health teams), streamlined referral processes and multi-agency meetings.

The programme will also transform how services are delivered at our 'Front Door' by supporting integrated responses, access to a wider range of system informatics and linking our people to innovation in care and support through a mainstreamed Technology Enabled Care offer. Our Homecare market has been re-procured and is being mobilised to integrate at place level with INTs and to better collaborate in care and support to enable better outcomes. Investment has been made in new and existing care models for example, the expansion of the Reablement Service to reach more people and to better support timely hospital discharge pressures alongside the development of a new Complex Reablement Service to support people who require a specialised, longer term approach to enablement. Plans around housing support options continue to mature with significant capacity (1000 units) of Extra Care coming on stream through 20/21 in addition to 70 new build properties for Learning Disabilities. These housing options create longer term sustainable responses to care and support, reduce pressures and cost in the system and improve personal choice and independence.

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REFERENCE DOCUMENTS

OUR HEALTHIER MANCHESTER

Document	Web location
Our Manchester: The Manchester Strategy	www.manchester.gov.uk/info/500313/the_manchester_strategy
Our Healthier Manchester	https://healthiermanchester.org/
Greater Manchester Plan - Taking Charge of our Health and Social Care in Greater Manchester	www.gmhsc.org.uk/the-plan/
Greater Manchester Transformation Agreement	www.greatermanchester-ca.gov.uk/homepage/59/devolution
Population Health Plan	www.manchester.gov.uk/downloads/download/6898/manchester_population_health_plan_2018-2027
NHS Long Term Plan	www.longtermplan.nhs.uk/

Further information can also be found at:

Organisation	Web location
Manchester Joint Strategic Needs Assessment (JSNA)	www.manchester.gov.uk/jsna
Greater Manchester Health and Social Care Partnership (GMHSCP)	www.gmhsc.org.uk/
Greater Manchester Combined Authority (GMCA) – for key regional strategies: Greater Manchester Strategy; Local Industrial Strategy; Greater Manchester Independent Prosperity Review	www.greatermanchester-ca.gov.uk/
Organisational Websites: MFT, MHCC, MLCO, MCC and GMMH	www.mft.nhs.uk www.mhcc.nhs.uk www.manchesterlco.org www.gmmh.nhs.uk www.manchester.gov.uk
The Health and Wellbeing Board (HWP) and Health Scrutiny Committee – past papers are publicly available	http://www.manchester.gov.uk/meetings

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Appendix C: MLCO Financial Plan 2020/21

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Appendix D: Health Growth Assumptions

Board Heading	2020/21	2021/22	2022/23	2023/24
Acute	1.55%	1.55%	1.15%	1.15%
MFT Acute	2.65%	2.65%	2.25%	2.25%
Pennine Acute	2.65%	2.65%	2.25%	2.25%
Acute Non NHS	1.55%	1.55%	1.15%	1.15%
NCA's	1.55%	1.55%	1.15%	1.15%
Mental Health	6.01%	4.20%	3.90%	4.34%
Learning Disabilities	6.01%	4.20%	3.90%	4.34%
Continuing Healthcare	3.00%	3.00%	3.90%	4.34%
Community NHS	4.36%	4.17%	3.89%	3.64%
Community Non NHS	4.36%	4.17%	3.89%	3.64%
Prescribing	3.00%	3.00%	5.00%	5.00%
Primary - local enhanced services	1.00%	1.00%	2.00%	2.00%
primary - out of hours	1.00%	1.00%	2.00%	2.00%
Primary - Other	1.00%	1.00%	2.00%	2.00%
Primary care medical services				
Other Programme Spend	0.70%	0.70%	0.70%	0.70%
Propco	0.70%	0.70%	0.70%	0.70%
Overheads programme	0.70%	0.70%	0.70%	0.70%
Admin	-0.08%	-0.12%	-0.12%	-0.12%
Reserves	0.00%	0.00%	0.00%	0.00%

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Annex 2



Manchester Local Care Organisation
Update on our Operational Plan for 2020/21

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THE DEVELOPMENT OF THE MLCO OPERATING PLAN 2020/21 AND THE MLCO BUDGET STRATEGY AND FINANCIAL PLAN 2020/21.

1.0 Purpose

- 1.1. This paper is presented as an appendix to the MHCC Budget Report 2020/21, to update Scrutiny Committee on the development of the Operating Plan and accompanying finance plan for the Manchester Local Care Organisation (LCO) in 2020/21.
- 1.2. This update is presented in anticipation of the presentation of an MLCO Operating Plan and Financial Plan for 2020/21 to the February Scrutiny Committee, following a consideration through the MLCO Partnership Board.
- 1.3. It provides the context for the MLCO, describes the overarching priorities for the organisation in 2020/21, the process we have established to develop the Operating Plan and a proposed structure for the Operating Plan.
- 1.4. A summary financial plan for the MLCO is appended to this paper, which has been developed with partners and should be considered in conjunction with the Adult Social Care and Population Health Budget 2020/21 report and the MHCC Budget report 2020/21.

2.0 MLCO 2020/21: the priorities

The MLCO Prospectus

- 2.1 The MLCO Prospectus written in 2016 describes the agreed Manchester system leadership intent for the MLCO. It outlines a clear objective for the MLCO in terms of the 'neighbourhood model to bring together a range of community based health, care and prevention services organised around general practice within 12 neighbourhoods across the city, to focus on the needs of the local population and individuals more effectively.'
- 2.2 It was envisaged that this would mean 'empowering communities, framing issues at a neighbourhood level and building community confidence and capacity to reduce the gap in health inequalities.'
- 2.3 The MLCO was then established in April 2018 to improve the outcomes and lives of people living in Manchester by focusing on wellbeing and reducing health inequalities. The organisation brought together health and adult social care services from across the City and began working on new care models which helped people stay well at home and wrapped care around their needs.

- 2.4 We are a public sector partnership established by Manchester to deliver primary and community based health and care services. We deliver services to adults and children across the City in partnership with Manchester Primary Care Partnership, Manchester City Council, Manchester University NHS Foundation Trust and Greater Manchester Mental Health NHS Foundation Trust. We also work with many of the 3600 voluntary, community and social enterprise organisations working across Manchester.
- 2.5 Our vision and way of working was developed by our teams and people living locally. The four key ways we work in the MLCO continue to be at the heart of how we plan and deliver our services and partnerships. We are working to play our part in delivering the 10 outcomes described below.

Our vision, our way of working

Manchester Local Care Organisation is a pioneering public sector organisation, bringing together NHS community health and mental health services, primary care and social care services in the city. We have been set up to make a positive contribution to help people in Manchester live longer and enjoy better health than many do now.

Our mission sums up what we do
Leading local care, improving lives in Manchester, with you

Our vision is simple
We believe that, by working together, we can help the people of Manchester to:

- Have equal access to health and social care services
- Receive safe, effective and compassionate care, closer to their homes
- Live healthy, independent, fulfilling lives
- Be part of dynamic, thriving and supportive communities
- Have the same opportunities and life chances - no matter where they're born or live.

There are 4 key ways we will make this happen with our staff and the people of Manchester

- PROMOTING HEALTHY LIVING**
Helping people to stay well through prevention - supporting them to lead healthier lives and tackling health issues before they escalate.
- BUILDING ON VIBRANT COMMUNITIES**
Using all the resources available in the wider communities people live in and identify with in a true neighbourhood approach, improving population health and wellbeing.
- KEEPING PEOPLE WELL IN THE COMMUNITY**
Helping people who have existing health needs and complex health issues to stay as well as possible in their homes through 12 integrated neighbourhood-based teams and our citywide services.
- SUPPORTING PEOPLE IN AND OUT OF HOSPITAL**
Ensuring community-based care helps people to avoid unnecessary hospital admissions, or to discharge them from hospital care, quickly and safely, as soon as they are ready if they do need time in hospital.

10 years, 10 outcomes

How well we know we have made a difference in Manchester? By 2028 there's a number of things that we will have seen by working as one team across the city:

- ✓ We will have improved the number of people supported to stay well
- ✓ We will see fewer people dying early from preventable conditions
- ✓ Avoidable non-elective (unplanned) hospital activity will be reduced
- ✓ The overall costs of care packages will have reduced
- ✓ We will benefit from improved collaborative working in the city
- ✓ The outcomes that matter to local people will have improved
- ✓ We will have reduced variation in outcomes and access by place
- ✓ There will be reduced variation in outcomes and access by communities of identity
- ✓ The number of children who are school ready will have improved
- ✓ There will be more economically active households in Manchester.

How we work with our teams
Our community health and social care staff are part of a team that:

- Break new ground in the delivery of safe, person-centred health and care
- Focus on the wellbeing of everyone living and working in Manchester
- Listen to people and learn from each other by focusing on what's important.

How we work with local people
As an organisation we are committed to:

- Involving the people and communities of Manchester in designing services
- A neighbourhood approach to wellbeing, connecting people to groups and resources around them
- Starting by asking what matters to people, not what is the matter with them.

- 2.6 During 2019, we have used the four ways of working to support our services to come together to plan and change the offers they make to people in neighbourhoods and to build our networks and partnerships.
- 2.7 The 'Our Manchester' approach is embedded in the heart of the MLCO and is used to drive our neighbourhood and staff development programmes.

By the end of its second year (19/20) it was envisaged that the Local Care Organisation would:	
Have embedded its organisational form and operating model	MLCO is a partnership organisation, responsible for the city's children's community and adult health and social care teams; ensuring they have the support they need to improve outcomes and supporting health and care colleagues to design services with local people.
Provide a comprehensive service at neighbourhood level for people across the city;	The key delivery model is the creation of 12 Integrated Neighbourhood Teams (INTs) working with partners and people in the community. Also provides citywide and locality based services – taking best practice and putting it in place across Manchester.
Ensure people receive better coordinated care and achieve improved outcomes;	Neighbourhood teams allow the MLCO to ensure that priorities are based on the needs of the people in that community; with staff working together to provide the best possible coordinated care.
Deliver benefits in line with the Manchester bid for Transformation Funding to the GM Health and Social Care Partnership.	A further key focus of the MLCO in its first year was the mobilisation and delivery of some of the transformation funded new models of care. The LCO has worked to mobilise the programmes in the context of the neighbourhood, locality and citywide approach.

MLCO: Our 2020/21 priorities

- 2.8 During 2019/20, the MLCO agreed 5 priority areas with the Partnership Board that the MLCO would focus on in 2019/20, in order to deliver the requirements set out in the MLCO Prospectus and deliver our vision and outcomes.
- 2.9 The 5 priority areas are:
1. **A population health driven approach** to service planning and delivery; supporting prevention programmes to improve the health of the people of Manchester.
 2. **Consolidating and strengthening our neighbourhood approach;** supporting our 12 Integrated Neighbourhood Teams (INTs) to make an impact on their communities and continuing to integrate the operations of our community health and social care teams.
 3. **Mobilising primary care leadership at the heart of the MLCO;** formalising the governance between primary care and MLCO to ensure joint working with the new Primary Care Networks.
 4. Playing **a lead role in system resilience;** helping people get the right care in the right place with a community first ethos.
 5. Deliver the agreed **phased approach to the increasing scope of the MLCO** as an integrated health and care organisation; delivering public service reform in the place.

- 2.10 In order to support a systematic focus for the MLCO during 2020/21, we are proposing to continue to utilise the 5 priority areas outlined above. We believe that continuing to use these and build on them over the next 3 years to drive our changes to systems and services across the City will enable us to make sustained and sustainable change across health and care.
- 2.11 Design and delivery of these priorities will inform development of the financial plan and also shape our approach to workforce, IT, estates and performance.

3.0 MLCO: The Financial plan

- 3.1 The MLCO has developed a budget strategy and financial plan for 2020/21 in partnership with MCC, MFT and MHCC.
- 3.2 This is appended to this paper.

4.0 The development of our Operating Plan 2020/21

- 4.1 The Manchester Local Care Organisation (MLCO) has worked with partners across the Manchester system to understand the planning approaches and requirements of our key partners to inform the development of our Operating Plan and accompanying Finance Plan for 2020/21.
- 4.2 The process ensures all timescales, assumptions and expectations will be met and to ensure our plan would be aligned to those of our partners.
- 4.3 The process assumes that:
- a final MLCO Operating Plan for 20/21 would be published by March 2020, following development and agreement of the MLCO Partnership Board during January and February 2020;
 - the Operating Plan scope included community health services for children and adults, adult social care services and the mobilisation of new care models, as well as how the MLCO is operating and developing services in collaboration with wider partners to bring services together for people in places;
 - the Operating Plan in draft and final form would also need to move through the relevant partner governance processes;
 - the Operating Plan for the MLCO would be informed by the national and local strategic context (NHS Long Term Plan, MCC corporate planning approach, the refresh of the Manchester locality plan), but would describe an approach to the delivery of the requirements as built from our service teams in the neighbourhoods and across our localities.
- 4.4 Following an agreement with our partners that the Adult Social Care business plan would be described as part of the MLCO Operating Plan and an

understanding across the partners of the process we would take; we initiated an approach across the MLCO services delivered through neighbourhoods, locality or citywide to develop service plans for 2020/21 to be documented in either the neighbourhood, locality or citywide plans.

- 4.5 The approach can be summarised as:
- Three locality planning events (November) attended by staff from across community health, adult social care, primary care and mental health to reflect on the achievements and challenges of 2019/20 and outline service plans for 2020/21.
 - A template and suggested approach was shared with the leads to develop their plans, which included ensuring our neighbourhood plans were aligned to the emerging PCN delivery plans and the existing ward plans in each place.
 - 12 first draft neighbourhood plans, 3 draft locality plans, 1 citywide specialist service plan (adults) and 1 children's community health service plan developed by 3rd December 2019.
 - All the plans have been developed through the neighbourhood and locality partnerships and cover how the MLCO delivers services across our communities and with partners, such as primary care, housing, VCSE and discussions will continue into the final quarter of 2019/20 to further iterate the plans. The neighbourhood plans were built from the plans developed during 2019/20.
 - The plans outline how they were developed and who was involved, as well as detailing achievements in the past 12 months, the work for the next 12 months and what corporate support our teams and services will need to deliver their plans.
 - Detailed financial planning discussions took place at the same time with partners to develop the budget strategy for the MLCO.
- 4.6 The first version of the neighbourhood, locality and citywide plans as submitted on 3rd December 2019, will inform and support the development of the MLCO Operating Plan for 2020/21.
- 4.7 The Operating Plan and the neighbourhood, locality and citywide plans will continue to iterate during the final quarter of 2019/20 to support a final version of each plan by March 2020. This will enable the MLCO to develop the Plan to include the requirements of the NHS Long Term Plan.
- 4.8 The MLCO Partnership Board will receive drafts of the Operating Plan in January and February to inform the final plan. This will enable a more detailed version of the MLCO Operating Plan and Financial Plan for 2020/21 to be presented to Scrutiny in February 2020.
- 4.9 A final MLCO Operating Plan for 2020/21 will be published in March 2020.

5.0 **MLCO Operating Plan 2020/21: proposed structure**

- 5.1 The proposed structure for the MLCO Operating Plan is detailed below, but it is proposed that this overarching document is a navigation document with key supporting appendices.
- 5.2 It will support MLCO staff and the partners with whom they work, to understand the context for the MLCO, share in the achievements and understand the challenges of the previous 12 months and have clarity on our priorities for 2020/21.
- 5.3 The structure of the MLCO Operating Plan will be:
1. **MLCO: In summary**
 2. **CE foreword and introduction**
 3. **The development of our Operating plan**
 4. **Vision, goals and outcomes**
 5. **Strategic context: national, GM and the Manchester Locality Plan**
 6. **Our operating model and service strategy**
 - 6.1 Community services in Manchester
 7. **MLCO: Our progress**
 - 7.1 2019/20 plan and achievements
 8. **2020/21 summary, extended scope and priorities**
 - 8.1 MLCO: Our 2020/21 plans
 - 8.2 Working across our communities – the community services strategy
 - 8.3 MLCO: next phase; how will scope of MLCO change in 20/21
 - 8.4 Quality Improvement
 - 8.5 How we will deliver our plans through our workforce, our service locations and our support infrastructure
 9. **MLCO: Our impact - Financial plan**
 10. **MLCO: Our impact – Performance and delivery**
- 5.4 The appendices to the plan are proposed to be:
- The MLCO budget strategy
 - All of the neighbourhood, locality and citywide plans
 - MLCO 20/21 planning context

Appendix: MLCO Budget Strategy and Finance**1.0 MLCO Budget Strategy 2020/21**Introduction

- 1.1. The MLCO Operating Plan and integral financial plan forms part of single health and social care partnership budget report. The Adult Social Care and Population Health Budget 2020/21 report of the Executive Director of Adult Social Care outlines the budget proposals made to determine the Council's contribution to the MHCC pooled budget for 2020/21 and budget priorities. The MHCC Budget Report 2020/21 then, together with Health financial planning, sets out the finance envelope for the MLCO. This MLCO Operating Plan, including this financial plan, responds by outlining the operating priorities for the forthcoming year, deployment of the funding being made available by partners and the overall impact of the MLCO on improving the outcomes and lives of people living in Manchester.
- 1.2. The budget papers covering Health and Social Care (H&SC) are based on assumptions, with operational guidance for health and local authorities due to be published in December / January. The formal contracting round will take place from January to March. The MLCO Operating Plan will be subject to approval from Partnership Board.

Background and Context

- 1.3. The Manchester Locality Plan 'Our Healthier Manchester', includes a key priority outcome of financial sustainability across H&SC. The ambition for integrated H&SC is that partners will achieve a position whereby more people are supported in their own homes, rather than hospital, and to enable this, to shift investment upstream to MLCO to enable proactive and co-ordinated care within neighbourhoods to reduce demand on high cost, acute or long term institutional care.
- 1.4. For 2020/21, there is a continued need to focus on ensuring the basics for delivering high standard H&SC community based services, predicated on a set of realistic budget assumptions for core and essential services. There is not the capacity to deliver the improvements required, bed in new ways of working, and deliver significant additional savings in 2020/21, however the key programmes of work to impact on future years are required to form and progress swiftly.
- 1.5. The MLCO are putting in place programmes of work to complete the mobilisation of new care models and Integrated Neighbourhood Teams (INTs) and advance the work in 2020 to realise opportunities that phase two of service transfer presents, including the integration of Learning Disability Services and more integrated commissioning programmes.

- 1.6. Whilst the core priorities for MLCO are clearly set out in this operating plan, the underpinning budget strategy is still limited by lack of clarity on Government policy for Adult Social Care (ASC), future funding arrangements for both health and social care, lack of clarity from NHSE on funds to support the delivery of the Long Term Plan and devolution funding arrangements with Greater Manchester.
- 1.7. The financial plan reflects the strategic intentions outlined by commissioners regarding phase 2 service transfer, as detailed in the MHCC Joint Budget Plan, as follows:
- (i) Phases 1-3 from ASC; and
 - (ii) Phase 1 of Community Health.

The inclusion of Phases 1-3 from ASC will complete the deployment to the MLCO of the majority of the ASC budget that is included within the MHCC pooled budget. Any transfer of phase 2 Health budgets will be managed through MHCC's business case approval arrangements and will be an overlay to these plans in both MHCC and MLCO. Current timescales for this are October 2020.

- 1.8. The transfer of all ASC phases to MLCO brings the core commissioning responsibilities for care packages. The Plan provides a brief overview of MLCO intentions and the development of a full commissioning work programme. Care market stabilisation and planning are a key component.
- 1.9. There will be no change to the core financial system arrangements in 2020/21: ASC budgets will remain on the City Council's financial system and health budgets will remain on MFT's financial system. There will be no cross subsidisation within MLCO budgets across the two host organisations.
- 1.10. The NHS has introduced Primary Care Networks nationally and the change in funds flow associated with this newer infrastructure, e.g. 7 day access, care home support, requires an update to neighbourhood financial arrangements.
- 1.11. The priorities of MLCO align to the Corporate Plan priority theme of 'Healthy, Cared for People'. This is to work with partners to enable people to be healthy and well and support those who need it most, working with them to improve their lives. Maintaining safe and resilient service levels, that are Care Act compliant and delivering the improvements through the ASC Improvement plan and through Integrated Neighbourhood Teams and the New Care Models are integral to delivering this ambition.

2020/21 Budget Strategy

- 1.12. The 2020/21 budget strategy for the MLCO, which incorporates the significant additional funding from Partners, is therefore to provide:
- (i) A realistic budget framework for sustaining services at 2019/20 levels, within the available financial envelope, balancing the various pressures and challenges and cognisant of the requirements of partners;
 - (ii) Completion of recruitment to practice and the continued focus on stability and safe core services during the period of ASC improvement in order to manage demand more effectively and address backlogs;
 - (iii) Care Act compliance and meeting the needs of clients with an efficient and effective strength based assessment process and strong underpinning systems including Liquid Logic;
 - (iv) Supporting a fragile care market and through the National Living Wage investment protecting supply by ensuring providers can recruit and retain an effective workforce;
 - (v) Sustaining care models to enable significant activity levels to continue to be supported in the community and building on evaluation work to move to optimising scale. The maturing INT arrangements are a fundamental enabler to fully realising the benefits of care models. The financial assumptions re-phase benefits where necessary to provide the time to fully realise;
 - (vi) Safe, resilient services aimed at maintaining client independence and supporting the City's hospitals with effective discharge;
 - (vii) Strong financial controls, detailed financial reporting and an effective approach to cost improvement plans;
 - (viii) Working closely with partners on activity flows within the H&SC system and financial consequences;
 - (ix) Continued programmes of review to ensure services are optimally configured to operate safely and efficiently and with high quality care outcomes across the city; and
 - (x) Progressing the 2020 programmes aimed at longer term financial sustainability and in particular the integration of Learning Disability Services.
- 1.13. The Manchester Agreement is also a key component to this budget strategy as it details the fundamental intention for how partners will collaborate to better understand how the investments being made in new models of care will reduce demand for acute health services, and, through decommissioning, release cashable savings for reinvestment.

2. Key Financial Planning Assumptions 2020/21

2.1. Source of Funds

The MLCO resource envelope for 2020/21 is shown in the table below and totals £315.151m comprising £204.347m in respect of ASC and £110.804m Community Health. The sub-total reflects the revised Cash Limit for ASC of £200.368m. The core funding of new care models provided or to be commissioned by MLCO is included and separately analysed at Section 6.

Table 1: Source of Funds

	Adult Social Care £'000	Community Health £'000	Total £'000
2019/20 base budget	178,507	98,212	276,719
Inflation (Pay, Price and National Living Wage)	7,558		7,558
Demand forecasts and growth	2,015	4,443	6,458
ASC improvement plan	1,366	0	1,366
Additional social care grant (MLCO share)	6,300	0	6,300
Estimated additional Public Health Funding	1,363	0	1,363
2% Adult Social Care Precept (subject to consultation)	3,259	0	3,259
Sub-total	200,368	102,655	303,023
ASC Reserve: MLCO Corporate Costs	1,000	0	1,000
Recharged costs – MLCO Corporate	0	1,539	1,539
MCCG: Better Care Fund - ASC Contribution	1,696	0	1,696
MCCG: funding for New Care Models	794	6,610	7,404
MCCG: additional CHC Contribution	489	0	489
Total	204,347	110,804	315,151

2.2. The Community Health 2019/20 baseline has been determined as follows:

Table 2: Community Health baseline

	Community Health
	£'000
2019/20 CCG Schedule	90,157
Adjustments to align to MLCO contract income plan	1,151
Non-contract income	6,904
Total	98,212

2.3. The changes from the 2019/20 baseline reflect the funding transfers detailed in the MHCC Joint Budget Plan covering:

- (i) The movement in the ASC 2019/20 base budget to the revised cash limit sub-total of £200.368m reflects uplifts for pay inflation (£1.337m), price inflation (£2.371m), national living wage (£3.850m), demographic funding to meet modelled increased future demand (£2.015m), the approved balance of investment for the ASC Improvement Plan (£1.366m), additional social care grant (£6.3m), estimated funding for population health (£1.363m) and subject to consultation, the social care precept (£3.259m);
- (ii) On Community Health, demand forecasts and growth reflects 2019/20 growth (£1.160m), 2020/21 growth in line with CCG allocations (£2.873m) and recurrent investment for Community Health above the CCG allocation (£0.410m);
- (iii) City Council use of reserves to support MLCO corporate costs (£1m) and MLCO recharge of corporate costs (£1.539m);
- (iv) The Better Care Fund (£1.696m) - 2019/20 transfer to ASC (£0.896m) and an estimate of the expected additional transfer for 2020/21 (£0.800m). The Council have specified that the BCF 2019/20 funding should be set the MRI Integrated Discharge Team contribution and Extracare expansion and 2020/21 funding against the on-going costs of Core and Complex Reablement, which are detailed later in the report;
- (v) Additional MHCC health funding to support new care models within ASC - Discharge to Assess and Crisis (£0.794m); and on Community Health the full new care model cost for Discharge to Assess, Crisis and HIPC/Manchester Case Management (£6.610m); and
- (vi) Other income – an estimate of additional health funding to continuing healthcare (£0.489m).

2.4. Application of Funds

The MLCO net expenditure budget is summarised in the table below and totals £310.119m comprising £204.347m in respect of ASC and £105.772m Community Health, prior to the final confirmation of MFT overheads that will conclude shortly. The deployment of additional resources into the 2020/21 budget is summarised in the table below.

Table 3: Application of Funds

	Adult Social Care £'000	Community Health £'000	Total £'000
2019/20 Base Budget	178,507	88,353	266,860
2020/21 cost uplift to services, demographic modelling and the ASC improvement plan	10,939	3,501	14,440
System resilience to support transfers of care	500	500	1,000
New care models	4,682	6,610	11,292
Population Health	2,004	0	2,004
Learning disabilities	5,034	0	5,034
Other budget requirements	1,681	2,748	4,429
Contribution to MFT Overheads	0	TBC	TBC
MLCO corporate costs	1,000	4,060	5,060
Sub-total	25,840	17,419	43,259
Total	204,347	105,772	310,119
Gap	0	TBC	TBC

The deployment of funding covers:

- (i) Cost uplift to services for 2020/21 (£14.440m) – inflationary increases (£7.558m), demographic increases (£2.015m) and year 2 of the ASC Improvement Plan (£1.366m). The ASC assumptions reflect those set out in the ASC and Population Health Budget 2020/21 report and the Community Health assumptions reflect agreed financial planning pay and price uplifts (£2.615m) and the full year cost of the IV service (£0.886m);
- (ii) System resilience to support transfers of care (£1.000m) - Investment in the MRI IDT as a key component to supporting the hospital with effective discharge arrangements;
- (iii) New Care models (£11.292m) – reflective of the cost basis, including the expansion of Extracare and the phasing of benefits;
- (iv) Population Health (£2.004m) - demand pressures and contract priorities:
 - Sexual Health services increased capacity for tests, screening and appointments;

- Drug and Alcohol services relating to homelessness outreach, Youth Justice service engagement, dispensing costs and detox capacity;
 - Children's Population Health increased capacity for school nursing and child weight management programme to reflect increase in number of schools. The funding for a further ten funding trainee Health Visitor places in addition to the places provided by Health Education England;
 - Continuation of the Population Health partial contribution towards the Adverse Childhood Experience programme; and
 - Inflationary uplift on NHS and non-NHS contracts.
- (v) Learning Disabilities (£5.034m) - Adults with Learning Disabilities (LD) are now more likely to enjoy longer, better quality lives. This is positive progress but the pressure on local authority and health services has increased in terms of support based on a combination of increasing demand, a growing and ageing population with greater complexity of conditions and the cost implications of national living wage. In order to meet increased need and complexity of citizens with LD, additional budget of £5.034m is needed in the following areas of ASC LD services. Of this £4.545m from Council and estimated £0.489m from CCG for additional Continuing Healthcare needs:
- The most significant area of increased need is for the in-house Learning Disability Supported Accommodation (LDSA) budget in relation to the workforce requirements to meet the needs of people being supported by the service. Whilst the c140 people supported by the service is relatively static, their needs are increasing with age and it has been determined that there is an additional resource requirement of £3,450m. The service has taken action to put in place a dedicated team of social workers to assess needs and develop improved rota management practice. The CCG has committed to assess the impact of people meeting the continuing health care eligibility, where it is estimated that £0.5m of the rising costs are care relate to this which would reduce the additional resource requirement to £2.950m;
 - Care for people with Learning Disabilities which is externally commissioned has increased by 41 people (3.5%) during this year for which 2019/20 demographic growth funding has been applied of £1.416m. Further increases in the cost of care have also arisen from greater complexity of need of £0.685m;
 - The Shared Lives service has expanded in 2019/20 following recruitment of additional adult carers. This service delivers better outcomes and is more cost effective than external placements. Whilst it was expected that the cost of this could be met from a reduction in demand for other LD services, this has not been possible due to rising numbers of people requiring support and £0.360m of funding is required for the Shared Lives service; and

- The in-house service which provides short breaks support for people with LD and their families is also experiencing increased need with additional resource requirements of £0.550m.
- (vi) Other budget requirements (£4.429m) – there are other budget proposals to provide a sustainable budget - ASC service totalling (£1.681m):
- The number of people requiring mental health services remains fairly consistent but it has not been possible to achieve expected reductions following a recent focus on reviews of care packages. This is due to new demand for care and the need for available suitable provision for changes in care. As such there is a requirement for additional budget of £0.330m;
 - Homecare savings of £0.377m (50%) are not yet delivered due to the revised timescales to implement the move to the new homecare contracts, including recommissioning of some contracts which means savings for 2020/21 are at risk;
 - Strengths based support planning for other Adult Social Care savings of £0.198m (40%) are not yet delivered. The changes to practice and training are now being rolled out but there is likely delay in full implementation in 2020/21;
 - The cost of the community alarms service is £0.950m. When people are unable to contribute towards the cost of the monitoring and response service, the cost to the Council cannot be reduced to reflect this. There is a shortfall of income to cover the cost of the service by £0.150m;
 - To provide an uplift for NLW for external providers to reflect a move to £10.50 by 2024/25 would be a further cost of £0.275m in 2020/21; and
 - MLCO transformation capacity £0.351m.
- and Community Health totalling (£2.748m).
- (vii) MLCO Corporate Costs (£5.060m). The Council contribution is £1m.

3.0. Modelled Increased Future Demand 2020-23

- 3.1. The modelling of increased future demand assumptions continues to be a challenging element of budget setting. The ASC demand model gives projected activity and financial projections based on annual activity volumes, population change and changes to cost rates such as inflation or one off unit cost changes. The outcome of this work has been used to set the MHCC financial planning assumptions 2020-23 and is also incorporated into the MLCO financial plan on the same basis.

3.2. The financial assumptions are detailed in the following table.

Table 4: Demand Modelling Financial Impact

	2020/21 £'000	2021/22 £'000	2022/23 £'000
Homecare	235	286	147
Nursing Care	182	199	82
Residential Care	611	698	427
Supported Accommodation	572	771	520
Day Care	38	48	35
Personal Budgets for Care	184	226	161
Other services	193	237	147
	2,015	2,465	1,519

3.3. The key activity projections are detailed below

Table 5 – Demand Projections

Service	Unit	2018/19	2019/20	2020/21	2021/22	2022/23
		Actual	Projections			
Homecare	Hours	1,177,472	1,190,084	1,204,466	1,221,816	1,231,007
Nursing Care	Weeks	25,956	26,246	26,532	26,853	27,001
Residential Care	Weeks	62,802	63,670	64,588	65,627	66,218
Supported Accommodation	Weeks	29,068	29,314	29,619	29,889	29,991

* Supported accommodation includes the budget lines for supported accommodation and in-house Learning Disability services.

4.0. Corporate Costs

- 4.1. The MLCO corporate budget for 2020/21 is £5.060m. A provisional cost allocation model has been developed and is subject to the agreement of Partnership Board.
- 4.2. The 2020/21 budget has been developed by uplifting the 2019/20 budget by 2.9% pay and 3.5 % non-pay. The budget requirement may still be influenced by final agreements on service transfer phasing and the deployment of staff from partners, especially to support transformation and commissioning programmes and back office functions.
- 4.3. The 2019-21 costs associated with Neighbourhood leads (£0.755m), GP Leads (£0.175m) and Organisational Development Neighbourhood Budget (£0.112m), a total of £1.042m together with the cost of Social Work Team Managers £0.490m, are now included within GMTF.

5.0. Adult Social Care Improvement Plan

5.1. Further detail on the improvement plan and the future key milestones is provided within the overall MLCO Operating Plan. The accompanying financial plan, approved in 2019/20, is detailed in the table below and is fully incorporated into the MLCO 2020/21 budget baseline.

Table 6: ASC Improvement Plan

Priority	2020/21	2021/22
	£'000	£'000
Additional capacity (c50 FTE) in Social Work, Safeguarding, the Citywide Care Homes Team, the Learning Disability service and other specialist services. Greater internal capacity for Best Interest Assessors supporting Deprivation of Liberty Safeguards	1,400	1,400
35.5 fte posts included in the structure on a permanent basis to enable successful recruitment and retention of staff	1,456	1,456
System resilience to support transfers of care (Note i)	1,211	1,211
Other costs - including the career pathway and capacity for the in-house Learning Disability Accommodation Service	750	750
Make permanent 18 fte social workers posts historically funded by the CCG for social work capacity in hospitals	713	713
9 social worker managers for the Integrated Neighbourhood Teams managers (Note ii)	490	490
	6,020	6,020
ASC reserve/social care grant	2,150	2,150
ASC seasonal resilience grant	2,667	2,667
Health funding	713	713
GMTF/ MLCO INT funding	490	490
	6,020	6,020

- (i) The 2020/21 budget reflects continuation of the £2.667m ASC Winter Pressures grant. For 2019/20 the City Council Executive approved £1.456m of funding from the grant on a permanent basis. The budget proposals for 2020/21 includes permanent commitment to balance of £1.210m which will be used to:
- Continue with the expansion of Complex Reablement (14 fte);
 - Provide additional capacity for assessments of people leaving the Reablement service (6 fte);
 - Provide more capacity in Manchester Supported Independent Living service for supporting people with complex needs (5 ftes); and
 - Provide winter planning and urgent care capacity for mental health (8.6 fte).

- (ii) Social Worker (SW) Team Managers – have been approved for GMTF funding 2019-21 and funding for 2021/22 remains to be identified.

6.0. New Care Models

Investment

- 6.1. The investment in new care models is supported through a number of recurrent and non-recurrent sources, including Greater Manchester Transformation Funding (GMTF). A locality programme is in place for the distribution of funding, monitoring and evaluation of performance. The investment in new care models is anticipated to be as follows.

Table 7: New Care Models Investment

New Care Model	2020/21 Forecast Investment £'000		
	ASC	Health	Total
Crisis	177	2,004	2,181
Extracare	1,947	0	1,947
Home from Hospital	0	0	0
Reablement	2,394	0	2,394
Reablement Complex	409	0	409
Discharge to Assess	1,538	1,847	3,385
Prevention City Wide	0	4,149	4,149
HIPC/MCMS	233	3,381	3,614
Technology Enabled Care	299	0	299
Total	6,997	11,381	18,378
MLCO	6,997	6,610	13,607
MHCC Direct to Other Providers	0	4,771	4,771

6.2. The corresponding funding arrangements are detailed below.

Table 8: New Care Models Funding

New Care Model	2020/21 Funding of Investment £'000		
	ASC	Health	Total
MCC baseline – funded through contra savings applied to Homecare	2,676	0	2,676
Reablement and Extracare expansion	1,841	0	1,841
CCG Baseline	822	2,163	2,985
CCG North Investment	513	2,162	2,675
GMTF	785	5,982	6,767
Public Health	0	690	690
ATT budget for decommissioned service	0	260	260
Integration Reserve	360	124	484
Total	6,997	11,381	18,378

Benefits

- 6.3. The expectation of the new care models is that they will support transformation in the city of Manchester and deliver benefits to both the population in terms of improved health outcomes but also financial benefits as a result of reduced reliance on expensive bed based care and the delivery of efficiency savings. The anticipated financial savings fall mainly outside of the budgets MLCO will be financially responsible for – in particular reductions in activity from secondary care, with the exception of ASC homecare and residential care, for which cashable benefits have been reflected in the base budget. This demonstrates a truly system based approach, with partners working together to deliver transformational change which is not to the benefit of their own organisation but the wider system. This requires activities in community based care to reduce demand for acute care, to make cashable savings or avoid additional fixed costs, which in turn free up resources for reinvestment in community based care.
- 6.4. Benefits are deemed cashable to commissioners where they have been pre-agreed in block contracts or where contractual/budgets are on a cost and volume basis. Non-cashable benefits may be realisable in future years but have yet to be contractually agreed. It is recognised that providers may not be able to reduce their cost base by equivalent values. The total potential locality saving opportunity as a result of the delivery of the new care models is as follows:

Table 9: New Care Models Benefits by Type

Savings Type	2020/21 Total Benefits £'000	2020/21 Cashable Benefits £'000
Reducing A&E Activity	385	385
Reducing avoidable prescribing	194	194
Reducing Acute Non-Elective Length of Stay	3,018	0
Reducing avoidance contacts and referrals	12	0
Reducing Elective Admissions	207	207
Reducing Non-Elective Admissions	5,908	5,908
Reducing NWSA Journeys	299	270
Reducing Outpatient Attendances	96	96
Reducing the cost of care packages	2,306	2,181
Reducing the cost of care packages Res.Nursing	2,080	1,950
	14,505	11,191
Benefits Arising in LCO	4,397	4,131
Benefits Arising Outside of LCO	10,108	7,060
Total	14,505	11,191

- 6.5. Overall the tables outline that cumulative cashable benefits for care models will increase to £11.191m in 2020/21 whilst investment reaches £18.378m. It is important to note:
- (i) Investment in prevention at £4.149m is focused on medium to long term benefits with a positive return on investment (ROI) not expected until 2023/24;
 - (ii) Discharge to Assess benefits are based on the business case assumptions of 4 excess bed days per patient and equate to a total of £2.8m in 2020/21. Work is underway to review benefits in order to determine the full health impact and understand the benefits arising in ASC. As excess bed days are not cashable to the commissioner and relate to system benefits only, the total benefits of £2.8m have been excluded showing a net cost in 2020/21 of £3.4m;
 - (iii) Additional benefits have not been applied linked to the expansion of Extracare provision. At this stage it is assumed the additional capacity will support the resilience of the overall H&SC system rather than assuming direct further targets against the ASC residential and nursing budget; and
 - (iv) Manchester Case Management (MCM) is due to be expanded to a citywide service in 2020/21 and benefits calculated reflect the expected ramp up and impact following lessons learnt from the pilot. The service is expected to make a positive ROI with effect from November 2021 and has a net cost in 2020/21, funded from GMTF of £2m.

7.0. Quality and Cost Improvement Plans

- 7.1. Community health services will continue with the development and implementation of a Quality and Cost Improvement Plan which will maximise the opportunities of bringing services from North, Central and South localities together to delivery safe, effective, efficient services. It will also identify any equality of access issues across the city in line with MLCO's stated corporate objective.
- 7.2. The MLCO health budgets contain a budget challenge of £TBC. This will be delivered through a combination of the Quality and Cost Improvement plan and vacancies.
- 7.3. The Quality and Cost Improvement Plan will benchmark services both internally within the MLCO, and externally across other Community Health Services in order to identify opportunities and areas of focus.
- 7.4. The Quality and Cost Improvement plan has identified key first areas of focus including:
- (i) Podiatry services;
 - (ii) Looking at delivering a consistent offer efficiently across the City from the current 3 separate services; and
 - (iii) District Nursing - capacity and demand analysis is required to ensure that services are most effectively resourced and managed across the city and workforce plans can be developed.
- 7.5. Plans are also being developed in each locality, managed by Locality Associate Directors, around Quality and Cost Improvement projects linked to specific service opportunities. This will be overseen through the MLCO Finance, Performance and Contracting Group.
- 7.6. It is acknowledged that 2020/21 is a one-year budget. Whilst the 2020/21 budget assumptions are focused on stability and completing the mobilisation of care models and INTs, work programmes are developing focused on 2021-23 and unlocking the potential of the MLCO to drive integration in community based services and a strong tactical commissioning approach. Significant progress on driving integration programmes is dependent on reaching agreement on the full Phase 2 transfer of services into MLCO and the supporting establishment infrastructure.
- 7.7. The key work programmes are described in the overarching MLCO narrative and in summary:
- Learning Disability Services integration
 - Integrated Commissioning
 - Continuing Healthcare (CHC)

- Primary Care
- Prevention Wellbeing and Support

8.0. Capital Investment

- 8.1. MLCO has submitted a capital bid into the MFT capital allocation process for £0.350m for period 2020-23, with the immediate priorities for 2020/21 being:
- Bucchleuch Lodge – reception area and staffing areas;
 - Dermot Murphy – significant infection, prevention and control / pharmacy improvement;
 - Sickle Cell – new clinic room to address infection, prevention and control concerns and repurpose old office space; and
 - Northernden Health Centre – creation of audiology suite to address waiting lists for children under 4 years and improve provision to the south of the city.
- 8.2. MFT also operate an equipment replacement programme for replacements up to £5,000. MLCO hold an equipment risk register for each locality and engage in the annual process submitting appropriate bids.
- 8.3. Outside of MFT process potential capital options are through NHS Property Services. There are two on-going funding streams, Landlord Capital which specifically addresses health and safety compliance and CQC adherence, and an Optimisation Pot which is a national fund available for bids but which has significant constraints and criteria to meet, including new Lease adoption. Bid priorities are developed and submitted on notification of arrangements. MLCO maintains a rolling risk log of priorities for when funding opportunities arise.
- 8.4. MLCO submitted a bid in 2019 to the GM Digital Fund for EMIS community Electronic Patient Record System Phase 4 £0.959m which has been approved.
- 8.5. The capital programme for Adult Social Care totals £21.9m over the period 2019/20 -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.

Table 10: ASC Capital

	2019/20 £m's	2020/21 £m's	2021/22 £m's	Total £m's
Gorton Health Hub	3.5	16.3	2.1	21.9
Total	3.5	16.3	2.1	21.9

- 8.6. In addition, the Better Care Fund (BCF) arrangement contains the allocation for Disabled Facilities Grant (DFG) and the DFG must be spent in accordance with

an approved joint BCF plan. DFG is a grant towards capital expenditure. The 2019/20 allocation totals £7.8m. The 2020/21 allocation is expected as part of the 2020/21 settlement announcements. The grant determination states funding must only be used for the specific purpose of providing adaptations for disabled people who qualify under the scheme. The ASC Improvement Plan includes funding for additional capacity to undertake complex equipment assessments and therefore support the effective deployment of DFG. Up to 5,000 complex assessments are completed per year.

8.7. Maximising the impact of DFG spending is a key contributor to MLCO outcomes. The BCF Planning Guidance 2019/20 outlines that Areas should think strategically about the use of home adaptations, the use of technologies to support people to live independently in their own homes for longer, and to take a joined-up approach to improving outcomes across health, social care and housing. Creating a home environment that supports people to live safely and independently can make a significant contribution to health and wellbeing, and should be an integral part of integration plans. DFG is deployed to:

- (i) Make life easier, e.g. simple pieces of equipment like special beds;
- (ii) Minor adaptations, e.g. hand rails and half steps; and
- (iii) Major adaptations, e.g. ramps, walk-in showers and stair lifts.

8.8. The City Council has also highlighted as a priority the potential need for market intervention, specifically on areas such as health and social care including residential and intermediate care, working with partners such as the Health Service to secure capacity. This may be short term in nature, responding to market failure, or long term through increasing capacity via new build or refurbished facilities.

8.9. Similarly, the City Council will also continue to review the potential to invest in primary/community care hubs, similar to the one being developed in Gorton although perhaps on a smaller scale, again working closely with Health partners.

9.0. Conclusion

9.1. The MLCO financial plan sets out the planned deployment of additional funding set out by MHCC in the 2020/21 budget proposals. It is recognised that 2020/21 is a one-year budget and significant work is required on longer term financial sustainability and that the programmes of work led by MLCO are integral to addressing the financial challenges within the H&SC system.

9.2. The additional investment will enable ASC services to be maintained at the same levels as 2019/20 to support the statutory functions of the Council, deliver the Corporate priorities and to continue to support the integration of health and social to improve outcomes for citizens.

- 9.3. Of key importance, at a time of significant demands within the H&SC system, the 2020/21 budget proposals provide the required additional time for new care models to fully mobilise, Integrated Neighbourhood working to mature further, enable the MLCO to support the City's hospitals with effective discharge and for MLCO integration programmes to develop. Overall, the MLCO will commence 2020/21 with optimism on progress to date, despite a challenging landscape, and ability to work within the H&SC system to enable people to be healthy and well and support those who need it most, working with them to improve their lives.

DRAFT

**Manchester City Council
Report for Resolution**

Report to: Health Scrutiny Committee – 7 January 2020
Subject: Overview Report
Report of: Governance and Scrutiny Support Unit

Summary

This report provides the following information:

- Recommendations Monitor
- Key Decisions
- Items for Information
- Work Programme

Recommendation

The Committee is invited to discuss the information provided and agree any changes to the work programme that are necessary.

Wards Affected: All

Contact Officers:

Name: Lee Walker
Position: Scrutiny Support Officer
Telephone: 0161 234 3376
E-mail: l.walker@manchester.gov.uk

Background document (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.

None

1. Monitoring Previous Recommendations

This section of the report contains recommendations made by the Committee and responses to them indicating whether the recommendation will be implemented, and if it will be, how this will be done.

Date	Item	Recommendation	Response	Contact Officer
5 November 2019	HSC/19/41 Healthwatch: Primary Care Access in Manchester	The Committee recommend that the Deputy Director, Primary Care Integration, MHCC ensures that leaflets and posters promoting evening and weekend appointments are prominently displayed in all GP surgery waiting areas, in addition to reception staff informing their patients and online information.	A response to this recommendation has been requested and will be reported back to the Committee via the Overview report.	Tony Ullman Deputy Director, Primary Care Integration, MHCC

2. Key Decisions

The Council is required to publish details of key decisions that will be taken at least 28 days before the decision is due to be taken. Details of key decisions that are due to be taken are published on a monthly basis in the Register of Key Decisions.

A key decision, as defined in the Council's Constitution is an executive decision, which is likely:

- To result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates, or
- To be significant in terms of its effects on communities living or working in an area comprising two or more wards in the area of the city.

The Council Constitution defines 'significant' as being expenditure or savings (including the loss of income or capital receipts) in excess of £500k, providing that is not more than 10% of the gross operating expenditure for any budget heading in the in the Council's Revenue Budget Book, and subject to other defined exceptions.

An extract of the most recent Register of Key Decisions, published on **20 December 2019**, containing details of the decisions under the Committee's remit is included below. This is to keep members informed of what decisions are being taken and, where appropriate, include in the work programme of the Committee.

Decisions that were taken before the publication of this report are marked *

Decision title	What is the decision?	Decision maker	Planned date of decision	Documents to be considered	Contact officer details
Contract for the Provision of Homecare Services - Phase 2 (2019/07/26E)	The appointment of Providers to deliver Homecare Services.	Executive Director of Adult Social Services	Not before 1st Nov 2019	Report and Recommendation	Mike Worsley mike.worsley@manchester.gov.uk
Carers Strategy (2019/08/22A)	Allocation of Our Manchester Funding to support the Our Manchester Carers Strategy over a period of two years.	Executive	16 October 2019	Report to the Executive	Zoe Robertson z.robertson@manchester.gov.uk

Subject Care Quality Commission (CQC) Reports
Contact Officers Lee Walker, Scrutiny Support Unit
 Tel: 0161 234 3376
 Email: l.walker@manchester.gov.uk

Please find below reports provided by the CQC listing those organisations that have been inspected within Manchester since the Health Scrutiny Committee last met:

Provider	Address	Link to CQC report	Published	Types of Services	Rating
Abbotsford Care Home Limited	Abbotsford Nursing Home 8 -10 Carlton Road Whalley Range Manchester M16 8BB	https://www.cqc.org.uk/location/1-128317035	3 December 2019	Nursing Home	Overall: Requires Improvement Safe: Requires Improvement Effective: Requires Improvement Caring: Requires Improvement Responsive: Requires Improvement Well-led: Requires Improvement
Vesta Care (UK) Ltd	Silverdene Residential Home 709 -711 Moston Lane Moston Manchester M40 5QD	https://www.cqc.org.uk/location/1-5833022299	27 November 2019	Residential Home	Overall: Requires Improvement Safe: Requires Improvement Effective: Requires Improvement Caring: Good Responsive: Good Well-led: Requires Improvement
The English Province of The Congregation of Our Lady of Charity of the Good Shepherd CIO	St. Euphrasia's Care Home 116 Chain Road Blackley Manchester M9 6GN	https://www.cqc.org.uk/location/1-2542394334	3 December 2019	Residential Home	Overall: Good Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good

Pro Support Ltd	Pro Support 201 - 203 Moston Lane East New Moston Manchester M40 3HY	https://www.cqc.org.uk /location/1- 1440233330	7 December 2019	Home Care Agency	Overall: Good Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good
Advinia Care Homes Ltd	Gorton Parks Care Home 121 Taylor Street Manchester M18 8DF	https://www.cqc.org.uk /location/1- 4413341048	5 December 2019	Nursing Home	Overall: Requires Improvement Safe: Requires Improvement Effective: Requires Improvement Caring: Good Responsive: Good Well-led: Requires Improvement
Alexandra Lodge Care Centre Ltd	Alexandra Lodge Care Centre 355 - 357 Wilbraham Road Chorlton Manchester M16 8NP	https://www.cqc.org.uk /location/1- 5718173476	7 December 2019	Nursing Home	Overall: Requires Improvement Safe: Requires Improvement Effective: Requires Improvement Caring: Requires Improvement Responsive: Requires Improvement Well-led: Requires Improvement
Making Space	Monet Lodge 67 Cavendish Road Manchester M20 1JG	https://www.cqc.org.uk /location/1- 2008736163	4 December 2019	Hospitals - Mental health/ capacity	Overall: Good Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good
TMB Trading Ltd	Manchester 66 - 68 Bridge Street Manchester M3 2RJ	https://www.cqc.org.uk /location/1- 4083623260	2 December 2019	Doctors/GPs	Overall: Good Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good

Dr G Wilson	The Wilbraham Surgery 515 Wilbraham Road Manchester M21 0UF	https://www.cqc.org.uk/location/1-6825002898	6 December 2019	Doctors/GPs, NHS GP practice	Overall: Requires Improvement Safe: Requires Improvement Effective: Requires Improvement Caring: Good Responsive: Good Well-led: Requires Improvement
Little Sisters of the Poor	St Joseph's - Manchester 52 Plymouth Grove West Longsight Manchester M13 0AR	https://www.cqc.org.uk/location/1-131623904	14 December 2019	Nursing Home	Overall: Outstanding Safe: Good Effective: Good Caring: Outstanding Responsive: Outstanding Well-led: Outstanding
Doves Nest Ltd	Doves Nest Nursing Home 15 - 19 Windsor Road Clayton Bridge Manchester M40 1QQ	https://www.cqc.org.uk/location/1-123434989	10 December 2019	Nursing Home / Residential Home	Overall: Requires Improvement Safe: Requires Improvement Effective: Good Caring: Good Responsive: Good Well-led: Requires Improvement

**Health Scrutiny Committee
Work Programme – January 2020**

Tuesday 7 January 2020, 2pm (Report deadline Friday 20 December 2019)				
Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Discussion item: Health improvement interventions for LGBT communities in Manchester	The Committee have invited representatives from the LGBT (lesbian, gay, bisexual and transgender) Foundation to discuss specific health improvement interventions for LGBT communities in Manchester, including the Greater Manchester Trans Health Service and Pride in Ageing.	Cllr Craig	-	
Budget 2020/21 – Officer proposals	The Committee will receive a report outlining the main changes to delivery and funding arrangements. Savings included as officer options to be debated.	Cllr Ollerhead Cllr Craig	Bernadette Enright David Regan	There will be no detailed business plans for Directorates included in this report
Overview Report	The monthly report includes the recommendations monitor, relevant key decisions, the Committee’s work programme and items for information. The report also contains additional information including details of those organisations that have been inspected by the Care Quality Commission.		Lee Walker	

Tuesday 4 February 2020, 2pm (Report deadline Friday 24 January 2020)				
Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Budget 2020/21 – final proposals	The Committee will consider refreshed budget proposals following consideration of original proposals at its January 2020 meeting.	Cllr Ollerhead Cllr Craig	Bernadette Enright David	

			Regan	
Delivering the Our Manchester Strategy	This report provides an overview of work undertaken and progress towards the delivery of the Council's priorities as set out in the Our Manchester Strategy for those areas within the portfolio of the Executive Member for Adult Services.	Cllr Craig	-	
Prevention and Wellbeing Services - Social Prescribing	To receive a report on social prescribing that includes information on the rationale and theory for this approach, information on the uptake and how this approach is monitored.	Cllr Craig	Dave Regan	
Healthy Weight Strategy	To receive a report on the Healthy Weight Strategy.	Cllr Craig	Dave Regan	
Update on the work of the Health and Social Care staff in the Neighbourhood Teams	To receive an update report describing the work of the Health and Social Care staff in the Neighbourhood Teams. This report will provide information on plans for the coming year and will include case studies / examples.	Cllr Craig	Bernadette Enright	
Overview Report				

Tuesday 3 March 2020, 2pm (Report deadline Friday 21 February 2020)

Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Manchester Autism Plan	To receive a report on the Manchester Autism Plan.	Cllr Craig	Bernadette Enright	
Health Equity: The Marmot Review 10	Published in 2010, The Marmot Review: Fair Society, Healthy Lives was a landmark study of health inequalities in England. The new report, Health Equity in England: The Marmot	Cllr Craig	David Regan	

Years On	Review 10 Years On, will be published in February 2020.			
Residential Care Strategy	To receive a report on the Residential Care Strategy.	Cllr Craig	Bernadette Enright	
Overview Report			Lee Walker	

Items to be Scheduled				
Item	Purpose	Executive Member	Strategic Director/ Lead Officer	Comments
Manchester Health and Care Commissioning Strategy	To receive a report on the Commissioning Strategy for Health and Care in Manchester. The Committee had considered this item at their July 2017 meeting.	Cllr Craig	Bernadette Enright	See minutes of July 2017. Ref: HSC/17/31
Public Health and health outcomes	To receive a report that describes the role of Public Health and the wider determinants of health outcomes.	Cllr Craig	David Regan	
Manchester Macmillan Local Authority Partnership	To receive a report on the Manchester Macmillan Local Authority Partnership. The scope of this report is to be agreed.	Cllr Craig	David Regan	See Health and Wellbeing Update report September 2017. Ref: HSC/17/40
Single Hospital Service progress report	To receive a bi-monthly update report on the delivery of the Single Hospital Service.	Cllr Craig	Peter Blythin, Director, Single Hospital Service	See minutes of 17 July 2018. Ref: HSC/18/32

			Programme	
Workforce Strategy	To receive a report on the Workforce Strategy.	Cllr Craig	Bernadette Enright	
Assistive Technology and Adult Social Care	To receive a report on how assistive technology will be used to support people receiving adult social in their home. The Committee will hear from individuals who have benefited from using assistive technology to learn of their experience.	Cllr Craig	Bernadette Enright	
NHS Dental and prescription charges	To receive a report on NHS Dental and prescription charges.	Cllr Craig	NHS England	
Air Quality and Health	To receive a report on the work being done to address air quality and the effect this has on health.	Cllr Craig	David Regan	To be scheduled for May / June 2020.
Reablement services	To receive a report that describes the activities to improve Hospital discharge rates; the activities to prevent hospital admissions and reablement services	Cllr Craig	Bernadette Enright	
Inclusive Health Care	To receive a report that describes the activities and initiatives to engage with and deliver health care to traditionally hard to reach groups.	Cllr Craig	Nick Gomm	
Estates and the delivery of Primary Care	To receive a report on the estates in which Primary Care is delivered.	Cllr Craig	Nick Gomm	
Manchester Mental Health Transformation Programme	To receive a progress report on the delivery of Manchester Mental Health Services.	Cllr Craig	Nick Gomm	
Falls Prevention	To receive a report on the Falls Collaborative work.	Cllr Craig	Nick Gomm Sue Ward Manisha Kumar	
Supporting People	To receive an update report on the Supporting People	Cllr Craig	Kevin	

Housing Strategy - Update	Housing Strategy (including extra care, dementia friendly and learning disabilities.)	Cllr Richards	Lowry	
Adverse Childhood Experience (ACE)	To receive a report on the Adverse Childhood Experience (ACE) pilot delivered in Harpurhey.	Cllr Craig	David Regan	Invitations to Cllr Bridges and Cllr Stone.
Healthier Together Update	To receive an update report on the Healthier Together Programme.	Cllr Craig	Nick Gomm	

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