

**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee - 4 February 2020

Subject: Update on the work of health and social care staff in the Manchester Integrated Neighbourhood Teams

Report of: The Executive Director of Adult Services and The Chief Operating Officer, Manchester Local Care Organisation

Summary

This paper updates the Health Scrutiny Committee on the work of health and social care staff in the Manchester Integrated Neighbourhood Teams (INTs).

It describes the work that has been taking place across all 12 neighbourhoods during 2019/2020 in Manchester to integrate the services delivered by our health and social care staff, along with the plans for 2020/2021 to continue to develop and optimise our neighbourhood model.

The report also includes case studies that demonstrate the impact that our teams have been having in our neighbourhoods.

The report will be accompanied by a video that has been developed by our neighbourhood team in Didsbury East and West, Burnage and Chorlton Park, which demonstrates how the teams are working together in each neighbourhood and the impact this is starting to have for our teams and residents.

Recommendations

The Committee is asked to note the content of the report, progress made to date and the emerging priorities for 2020/2021.

Wards Affected: All

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

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	

A highly skilled city: world class and home grown talent sustaining the city's economic success	MLCO/MCC are actively engaging communities in the Bringing Services Together programme, which promotes community involvement in contributing the economic growth of the city.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	The underpinning principle of planning at a neighbourhood level is to ensure that services and strategic responses are aligned to the needs of local communities. One of the principal reasons for adopting this approach is to reduce the level of inequity that is present across city.
A liveable and low carbon city: a destination of choice to live, visit, work	One of the features of MLCO planning in 2020/21 will be to ensure that MLCO makes a positive contribution to the delivery of the city's low carbon strategy. Some of the neighbourhood plans have already referenced this.
A connected city: world class infrastructure and connectivity to drive growth	

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Background documents (available for public inspection): None

1 Introduction

- 1.1 This paper updates the Health Scrutiny Committee on the work of health and social care staff in the Manchester Integrated Neighbourhood Teams (INTs).
- 1.2 It describes the work that has taken place across all 12 neighbourhoods during 2019/2020 in Manchester to integrate the services delivered by our health and social care staff, along with the plans for 2020/2021 to continue to develop and optimise our neighbourhood model.
- 1.3 The report also includes case studies that demonstrate the impact that our teams have been having in our neighbourhoods.
- 1.4 The report will be accompanied by a video that has been developed by our neighbourhood team in Didsbury East and West, Burnage and Chorlton Park, which demonstrates how the teams are working together in each neighbourhood and the impact this is starting to have for our teams and residents.
- 1.5 A number of additional appendices are attached to this report:
 - MLCO Neighbourhood Plans on a page (2019/20);
 - MLCO in action; and
 - Neighbourhood stories.

2 Background and context

- 2.1 Manchester Local Care Organisation (MLCO) was established in April 2018 as a partnership organisation driven by the four strategic partners in Manchester; Manchester City Council, Manchester Foundation Trust, Manchester Primary Care Partnership and Greater Manchester Mental Health Trust.
- 2.2 The MLCO runs NHS community services for adults and children (district nursing, health visiting, school nursing, intermediate care and other teams) and Adult Social Care services in the city. As a result of the establishment of the MLCO in April 2018, these health and care teams are now working together as one team for the first time – working with mental health services and GPs as well to better plan and coordinate care.
- 2.3 Alongside our day to day work we are also responsible for redesigning how services work and providing the very best in community health and care for Manchester; that means supporting health and care colleagues to design services with local people.
- 2.4 Key to MLCO's key delivery model is 12 Integrated Neighbourhood Teams (INTs) across the 12 neighbourhoods in Manchester to focus on what's needed locally. Health and care staff are co-locating and work together in neighbourhood hubs in these neighbourhoods.

2.5 Our services are delivered as close to resident’s homes as possible through our neighbourhood model, but it is also necessary to organise our service delivery and planning on a locality (North, Central and South) and Citywide basis.

2.6 This paper focuses on the progress made to mobilise 12 INTs in Manchester, how they have impacted on our staff and residents and what our work will be in the coming year.

3 Progress to date (2019/2020)

3.1 The focus of our work to develop integrated neighbourhood teams in 2019/20 was to build on and optimise the foundations that had been built during 2018/19.

3.2 This has included the formal recruitment of the INT leadership teams, continuing to co-locate our health and social care teams in 12 neighbourhood hubs, the formalisation of governance and agreement of 12 neighbourhood plans, the roll out of the NESTA 100 day challenge programme in each neighbourhood, developing our approach to support the delivery of the Bringing Services Together for People in Places programme and the delivery of the ASC Improvement Plan.

3.3 In regards to their development a small number of high level indicators have been utilised to oversee their development. An overview of progress against the 12 is set out below:

Descriptor	Rationale
Neighbourhood Leadership quintet in place	A measure of whether leadership structures are being aligned to support integrated working.
Neighbourhood governance model in place	A measure of whether decision making is aligned across organisations and the conditions are in place for a culture of integrated neighbourhood working to grow.
Teams co-located in a hub	A measure of whether the infrastructure is in place for INTs (given co-location can only happen if estates and IM&T solutions have been delivered)
Neighbourhood plan in place	A measure of whether INTs are responding to the needs of the local population

Neighbourhood	Quintet in place	Governance in place	Co-located	Neighbourhood plan
Ancoats, Clayton and Bradford	Yes	Yes	Cornerstone Centre	Yes
Miles Platting, Newton Heath, Moston and City Centre	Yes	Yes	Victoria Mill	Yes
City Centre	Yes	Yes	Yes (as part of MP,NH & M Neighbourhood)	Yes
Cheetham and Crumpsall	Yes	Yes	Cheetham PCC	Yes
Higher Blackley, Harpurhey and Charlestown	Yes	February 2020	Harpurhey DO	Yes
Ardwick and Longsight	Yes	Yes	MAVallance Centre	Yes
Gorton and Levenshulme	Yes	Yes	Gorton South DO	Yes
Chorlton, Whalley Range and Fallowfield	Yes	Yes	Chorlton HC	Yes
Hulme, Moss Side and Rusholme	Yes	Yes	Moss Side HC	Yes
Fallowfield (Old Moat) and Withington	Yes	Yes	Burnage HC	Yes
Didsbury East and West, Burnage and Chorlton Park	Yes	Yes	Withington Hospital	Yes
Wythenshawe (Baguley, Sharston, Woodhouse Park)	Yes	Yes	Parkway Green	Yes
Wythenshawe (Brooklands) and Northenden.	Yes	Yes	Etrop Court	Yes

3.4 As can be seen significant progress has been made to optimise our neighbourhood model during 2019/2020 and this is demonstrated by:

- 12 Integrated Neighbourhood Teams (INTs) established, each with a leadership team comprising an INT lead, a lead GP, a lead social worker, a lead nurse, a mental health lead and a Health Development Coordinator;
- 8 out of 12 INTs are now co-located;
- Monthly Multi-Disciplinary Team meetings (MDT)s established in GP practices and will be fully rolled out by March 2020;
- The Coordinated Care Pathway developed and rolled out by March 2020 in each neighbourhood;
- Weekly Multi-agency meetings (MAMs) are being established in each neighbourhood and the extension of the model will start on 29th January in Old Moat & Withington for a 12-week test period with a citywide roll out plan to be developed;
- Each neighbourhood has a bi-monthly Partnership meeting; this forum engages stakeholders & supports the development & delivery of the things that matter to the local communities. This is the place where partners from the VCSE engage with our INT leadership teams;

- Each neighbourhood has a delivery plan for 2019/2020 focused on the delivery of a population health driven approach and optimisation of the foundations of neighbourhood working, built from the needs of the local population;
- Health Development Coordinators (HDC) connect services to wider community assets and drive a population health focus in our neighbourhoods, whilst Care Navigators connect residents to key services and support flow through our community services;
- Mobilised the NESTA challenges in all 12 neighbourhoods in 3 phases; phases one and two are complete and the whole programme will be delivered by March 2020; and
- The 12 INT leads have worked to develop closer working alignment with the MCC neighbourhood and ward teams and we have engaged with elected members through specific briefing sessions and through their ward meetings.

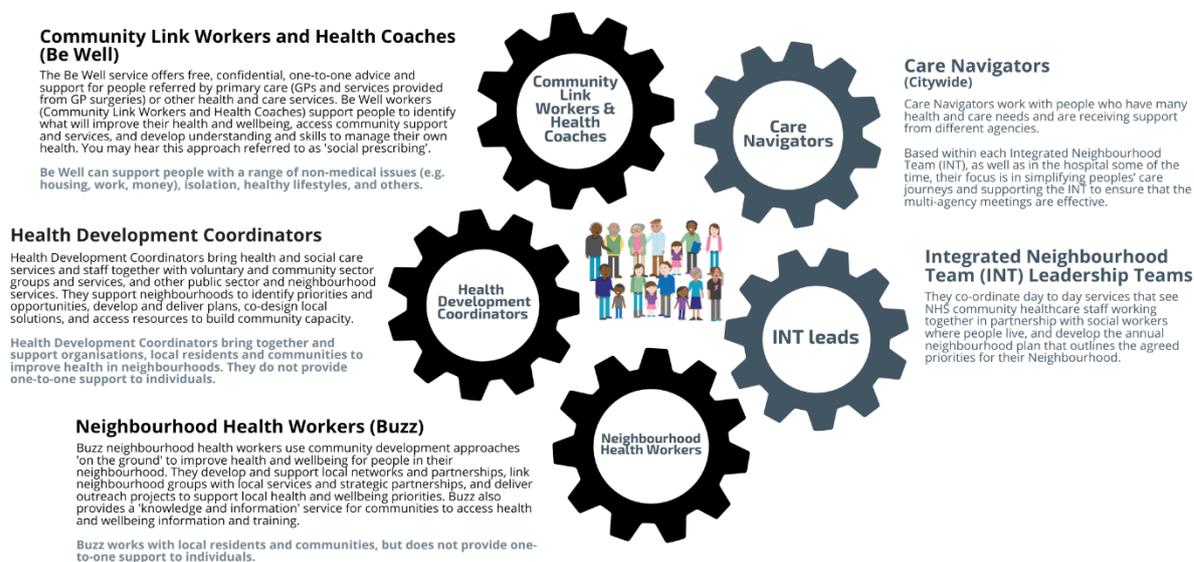
3.5 An overview of the progress that is being made in regards to integrated working is set out below. As can be seen significant progress has been made or is planned, with the team expected to be meeting as a collective or with partners during Quarter Four 2019/20.

Neighbourhood	Neighbourhood Partnerships in place	Multi-Agency Meetings taking place	MDTs taking place
Ancoats, Clayton and Bradford	YES	By March	YES
Miles Platting, Newton Heath, Moston and City Centre	YES	By March	YES
City Centre	In development	tbc	Yes (as part of MP, NH & M Neighbourhood)
Cheetham and Crumpsall	YES	By March	YES
Higher Blackley, Harpurhey and Charlestown	In development	By March	YES
Ardwick and Longsight	YES	Dec	MARCH 2020
Gorton and Levenshulme	YES	Dec	MARCH 2020
Chorlton, Whalley Range and Fallowfield	YES	Dec	MARCH 2020
Hulme, Moss Side and Rusholme	YES	Yes	MARCH 2020
Fallowfield (Old Moat) and Withington	YES	Yes	5/6
Didsbury East and West, Burnage and Chorlton Park	YES	Yes	6/6
Wythenshawe (Baguley, Sharston, Woodhouse Park)	YES	Yes	6/7
Wythenshawe (Brooklands) and Northenden.	YES	Yes	5/5

3.6 Wider work has also taken place in our neighbourhoods delivered by the Prevention Programme, which has supported the INTs to design and deliver services with a population health focused approach. Each neighbourhood has

a Health Development Coordinator, who are experienced in community development and engagement. They support neighbourhoods to identify priorities and opportunities, co-design local solutions and access resources to build community capacity.

- 3.7 The HDCs have access to a neighbourhood health and wellbeing development fund, which can be accessed to support the delivery of priorities as agreed by the neighbourhoods through the neighbourhood partnerships. The HDCs also work with a range of other leads in the neighbourhood; Community Link workers, Neighbourhood health workers, and Care navigators to ensure all services and assets in our communities are aligned to service delivery and can provide the support that our residents need.
- 3.8 Whilst the teams described at 3.7 work collaboratively they each have a unique albeit complementary offer, which is set out below:



- 3.9 Some examples of the good work of the teams are set out at Appendix Two and Three.
- 3.10 During 2019/2020 Manchester has supported its GP practices to mobilise a key priority in the NHS Long Term Plan and establish 14 Primary Care Networks (PCNs). The PCNs in Manchester are aligned to the neighbourhood footprints and services and they connect to the neighbourhood model through the GP neighbourhood leads.
- 3.11 Through the ASC Improvement Plan, an increase in the social work workforce has been secured. This plan has enabled a focus on the delivery of a core improvement programme for adult social care, as well as a range of service development / transformation programmes to enhance our operating model. Key deliverables in 2019/20 include:

- New strength based Care Act assessment and support planning process in place;
- Delivered phase one of technology enabled care programme and transferred c.150 citizens to new medication provider;
- Joint working group established to tackle domestic abuse in communities;
- Four new Extra Care schemes across the city opening in 2020, to complement the existing seven schemes; and
- The roll out of new neighbourhood based model of Home Care has continued.

3.12 Through Bringing Services Together for People in Places, INT leads are part of the wider team around the neighbourhood and have taken part in multi-agency neighbourhood sessions to identify common priorities in each place. The MLCO has also been able to develop a range of strategic partnerships with key stakeholders including VCSE, Housing through the Manchester Housing Provider Partnership (MHPP), MCRAActive and Health Innovation Manchester. These partnerships recognise the impact of the wider social determinants the health and wellbeing of people in Manchester and we have a number of work programmes in train through these partnerships:

- R U Matchfit; a partnership with MCRAActive and Manchester City Football Club to encourage physical activity alongside health advice for a defined cohort of residents;
- Development of Multi-Agency Meetings (MAMs) in each neighbourhood that builds on the Wythenshawe Community Housing Group WINS model; bringing a range of partners together to deliver a joined up service for an agreed group of residents; and
- Work between housing providers and GP practices to support direct access to appropriate services.

3.13 In order to develop our neighbourhood model to include children's services, MLCO has been working in partnership with colleagues in children's social care services to align our service delivery and how the services connect to the neighbourhood model.

3.14 The MLCO has incorporated the Our Manchester approach into our model and this can be demonstrated by:

Better Lives: 'Its about people'	<ul style="list-style-type: none"> North Manchester Fitness: proposal to keep providing low cost physical activity sessions to North Manchester residents. Nesta 'Asylum Seekers and Refugees aged 18+', support by connecting to services /opportunities in the neighbourhood
Listening: 'We listen, learn and respond'	<ul style="list-style-type: none"> Café Neuro (Sept): attracted attendance from over 60 people from a wide range of services, VCSE and community members. Developed a information booklet on malnutrition that was Cheetham and Crumpsall specific
Strengths of individuals and communities: 'we start from strengths'	<p><u>Street Party in Cheetham</u> https://www.youtube.com/watch?v=dRla57J_jLk&t=30s</p> <p>Mental Wealth matters - gives people who live and work in the community access to training which would lead to them becoming qualified as a Mental Health First Aider.</p>
Working together: 'We build relationships and create conversations'	<ul style="list-style-type: none"> Drop in session to support better connection between stakeholders, with HDC and BUZZ workers Gusuntem, a local dementia charity (connects to smart speakers, delivers music therapy directly to people's homes) now connected to a variety of individuals and leaders & with access to public health data relating to the prevalence of dementia

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4 The approach to develop the neighbourhood model in 2020/21

- 4.1 MLCO will continue to optimise and develop our neighbourhood model in partnership with the health and social care teams, our partners, stakeholders and residents during 2020/21. In recognition of the importance placed on this way of working, one of our priorities for the year is to consolidate and strengthen our neighbourhood approach supporting our 12 INTs to make an impact in their communities.
- 4.2 MLCO is in the process of finalising its Operating plan for 2020/21 and this will include our deliverables for the next 12 months. The plan has been developed through and from our community health and social care services working with the neighbourhood partnerships and will be published in March 2020.
- 4.3 As part of this process, MLCO has been reviewing the work that has been delivered across the neighbourhoods to inform the work that needs to be taken forward during 2020/21. The current plans on a page can be found at Appendix One.
- 4.4 Each of the neighbourhoods has reviewed and refreshed their neighbourhood plan and this refresh has taken into account relevant ward and PCN plans. The plans outline what has been delivered to date in each place and their planned priorities for 2020/21. The priorities are based on an increasing understanding of the demographics and needs of each place as evidenced through MHCC and MCC intelligence and data sources, but also what partners and stakeholders in place are sharing as priority areas for the residents.
- 4.5 As part of their development the INT leads are engaging with elected members on the development of the plans through the ward coordination teams across

the city to identify opportunities for joined up approaches and sharing of information.

4.6 As such, there are some work areas that will be taken forward in all neighbourhoods and these include:

- Contribute toward the delivery of the citywide population health prevention programme;
- Contribute toward the delivery of the citywide childhood obesity strategy;
- Establish and embed INT through CCP and MCM in INT, INT OD plan, co-locate remaining INTs, strengths-based assessment, ASC improvement plan, systematic review of neighbourhood flow and gaps across neighbourhood organisations, inc VSC sector;
- Support residents in care homes;
- Consolidate connections to PCNs and Digital First and support delivery of PCN contractual requirements through mobilisation of social prescribing and support to deliver integrated and urgent primary care;
- MH and primary care links and commissioning of service;
- Increased follow up for people at risk of avoidable presentation at / admission to hospital; and
- Develop, enhance and standardise existing community services and continued community engagement events.

4.7 However, each of the plans have priorities and deliverables that are specific to that place. To understand the detail in the plans, it is advised that each of the neighbourhood plans is reviewed on publication.

4.8 Key to the work of the neighbourhood model is the ability of MLCO and its partners to measure the efficacy of the interventions that they make. Significant work has been undertaken in 2019/20 with the information team at MHCC to both develop information and data at a neighbourhood level to inform the planning process. Again, with colleagues at MHCC, significant work has been undertaken to identify outcome measures, utilising the MLCO outcomes framework that was developed in 2017. This work will form the basis of a suite of measures that will be used to understand how effective the plans are especially in the context of supporting a shift in population health outcomes and big system measures including activity metrics.

5 Recommendations

5.1 The Committee is asked to note the content of the report, progress made to date and the emerging priorities for 2020/2021.