

Integrating health and social care – next steps



The last 5 years

There has been significant progress made in integrated working across health and social care in the last 5 years:

- MHCC
- MLCO
- MFT
- GMMH
- Locality Plan
- Population Health plan
- New care models
- NMGH Site redevelopment programme

Rationale for change

There are a number of reasons why this is the right time to reset the way we work as a health and care system in Manchester:

- Building on our successes
- Learning from our approach to COVID
- Health outcomes and inequalities
- Primary Care Networks
- VCSE sector
- Financial sustainability
- GMHSCP review
- Proposed national legislation

Ongoing work

Following a review by Mike Farrar, the work has begun to further strengthen our local arrangements:

- Manchester Partnership Board
- 'Supercharging' MLCO
- Clinical/Professional leadership and influence
- Integrating financial arrangements
- Informing GM developments
- Preparing for April 2022

NHSE proposals

On 26 November, NHS England launched an engagement exercise on their vision for the next steps for integrated care systems. Proposals include:

- Statutory footing for Integrated Care Systems
- Strong place-based arrangements
- Provider collaboratives
- Changes to commissioning arrangements
- Enhanced use of data and digital innovation
- Future financial arrangements

Likely changes

As a result, our overall vision and ambition will stay the same but our ways of delivering it will change:

Remains the same

- Working collaboratively as part of the health and care system
- A focus on place
- Locality and GM as building blocks of governance
- A drive toward integrated and proactive care
- The need to create financial sustainability within the public sector
- Clinical, political and managerial leadership – working together

Changes

- The commissioner / provider split
- More provider collaboration at Locality and GM
- Organisational form i.e ICS and likely disestablishment of some or all GM CCGs.
- Reduction to barriers of integration
- Shift away from competition and toward collaboration
- Clinical leadership shift toward PCN influence

HWBB considerations for 2021

How does the HWBB want to receive assurance from the Manchester Partnership Board?

What will be required for the HWBB to receive assurance from the future Integrated Care System?

Should the proposed changes, and new structures, lead to a change in membership of the HWBB?

What's the best way to come to an answer to the above questions?