

Manchester City Council Report for Information

Report to: Health Scrutiny Committee – 8 November 2023

Subject: Adult Learning Disability Services

Report of: Executive Director of Adult Social Services

Summary

The purpose of this report is to outline key developments across Health and Social Care in Manchester relating to Adult Learning Disability services, as requested by the Health Scrutiny Committee. This includes the following:

- **Policy and Strategy** – Namely developments surrounding the recently approved Manchester Local Care Organisation (MLCO) Commissioning Strategy for Adult's with a Learning Disability (2023 – 2028), and Housing Needs Analysis for Adults with a Learning Disability and Autism (2023 – 2033).
- **Recommissioning and Transformational activity** – Including the developments surrounding the 'My Way, My Life' programme.
- **Health Care** – Includes local developments surrounding the NHS Greater Manchester and Manchester University Hospitals Foundation Trust **Transforming Care agenda** and **NHS Learning Disabilities oversight group**.
- **Preparation for Adulthood** – Also known as Transition.

While it is acknowledged that many of the areas in this report are interrelated and have strong links to the needs of supporting adults with Autism in Manchester, the primary focus of the report is surrounding Learning Disability services. Both Learning Disability and Autism are two significant (and distinct) national agendas. To cover both areas within one report would be significant and through recent engagement, the emerging view of Autistic people is that the Autism agenda should be kept separate from Learning Disability. Therefore, it is recommended (subject to agreement with the scrutiny committee) that a separate report surrounding the national and local Autism agenda is reviewed by scrutiny committee at an appropriate point in 2024.

It is important to highlight, that extensive work has been ongoing over the last twelve months, engaging with citizens, carers/families, and providers surrounding a range of matters, this is reflected in the report.

To accompany this report, a video will be displayed surrounding key developments across Learning Disability Services, including the voices and comments of citizens and other stakeholders.

Recommendations

The Committee is recommended to:

1. Support the ongoing strategic developments relating to Adult Learning Disability services across the Health and Social Care system in Manchester.
 2. Consider and comment on the information contained within the report as well as the accompanying video, including the proposal to bring a separate report around the Autism agenda to Health Scrutiny at an appropriate point in 2024.
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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 focus of this specific report does not pertain to environmental impact or the zero-carbon agenda. Although any specific projects or initiatives encompassed within the various programmes of work, will ensure that environmental impact is considered and factored into planning and delivery where appropriate.

Equality, Diversity, and Inclusion - the impact of the issues addressed in this report in meeting our Public Sector Equality Duty and broader equality commitments.

All core initiatives and developments discussed within this report are focused on maximizing independence, choice, and control for adult citizens with a learning disability who may also have other associated conditions (e.g., mental health conditions, autism) in Manchester. These disabilities are protected characteristics enshrined within the Equality Act 2010. Citizens with a learning disability have a right to live healthy, safe, and fulfilling lives within their local communities.

All statutory bodies involved in the delivery of the key areas outlined within this report are also responsible for ensuring fair and equal access to services in accordance with relevant legislation including (for example) the Care Act (2014) and National Health Services Act (2006).

Any future developments will be subject to the Equality Impact Assessment on an individual programme/project basis.

Manchester Strategy outcomes	Summary of how this report aligns to the OMS/Contribution to the Strategy
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	All programmes of work are focused at supporting a thriving and sustainable city, with a focus on creating stronger communities, and equal opportunities for adults with a learning disability (including citizens transitioning to adulthood), as well as their families/carers. This includes access to Health and Social Care services, employment, skills, and educational opportunities.
A highly skilled city: world class and home-grown talent sustaining the city's economic success	Future developments which relate to the areas discussed within the report, are aligned to the workforce strategies for each organisation. The recruitment of local people is central to planning and focuses on developing the next generation of leaders to ensure a sustainable and prosperous Health and Social Care economy in Manchester, both now and in the future.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	All key areas discussed within this report will ensure that citizen involvement is central to developments through effective engagement, consultation, and co-production. This ensures services are truly designed around the needs of citizens and their families/carers, ensuring equal access to services where eligible.
A liveable and low carbon city: a destination of choice to live, visit, work	The Low Carbon agenda does not directly relate to this report; however, all initiatives will ensure that the principles of delivering a low carbon city are central to plans and developments where appropriate.
A connected city: world class infrastructure and connectivity to drive growth	All future developments will consider infrastructure and connectivity, whether that be the ability to access local services, buildings and/or using assistive technologies to promote and enable independence for citizens aligned with the Better Outcomes, Better Lives programme.

Financial Consequences – Revenue

The approved savings programme for Adult Social Care is contained within the budget report, also on the agenda for this Committee, and this includes specific savings in relation to the services outlined in this report, as agreed in the 2023 budget planning process for implementation 2024-26.

Health Scrutiny Committee will be kept informed of any further developments, with the next key budget report in February 2024.

Financial Consequences – Capital

There are no immediate associated financial capital consequences within the context of this specific report. However, a wider business case relating to the housing needs analysis is being developed and will be presented to the Council's Capital Investment Group in January 2024.

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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 part when 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 the Executive Director of Adult Social Services.

- Commissioning Strategy 'Our Plan for Services for Adults with a Learning Disability (2023-2028)' – Main Document
- Commissioning Strategy 'Our Plan for Services for Adults with a Learning Disability (2023-2028)' – Action Plan
- Commissioning Strategy 'Our Plan for Services for Adults with a Learning Disability (2023-2028)' – Summary Document
- Housing Needs Analysis for Adults with a Learning Disability and Autism (2023 – 2033) summary of needs. The full plan can be made available on request to Scrutiny members.

1.0 Introduction

- 1.1 The purpose of the report is to outline key developments across Health and Social Care in Manchester relating to Adult Learning Disability services (including younger citizens preparing for adulthood), as requested by the Health Scrutiny Committee. Partners representing a range of local statutory health and social care organisations have contributed to this report including, Manchester City Council (MCC), Manchester Local Care Organisation (MLCO), NHS Greater Manchester and Manchester University NHS Foundation Trust (MFT).

2.0 Background

- 2.1 The report discusses a range of issues and developments across the Health and Social Care landscape in Manchester relating to Adult Learning Disability (and Transitional) services.

This includes the following developments in line with the Better Outcomes, Better Lives Programme:

Policy and Strategy

- **Developments surrounding the Commissioning Strategy ‘Our Plan for Services for Adults with a Learning Disability (2023-2028)’**– This is a strategy focused on developing an accessible local Manchester place-based Commissioning Strategy for Adults with a Learning Disability, which sets out the core priorities of Health and Social Care organisations in Manchester from 2023-2028.
- **Developments surrounding the Housing Needs Analysis for Adults with a Learning Disability and Autism (2023 – 2033)** – This analysis has been taken to identify the future supported accommodation needs of adults with Learning Disability/Autistic people.
- **Manchester University NHS Foundation Trust (MFT) policy developments.** The Trust is fully committed to ensuring that adults with a diagnosis of learning disability and/or autism receive appropriate high-quality care through the Learning Disability Strategy “Our plan for people with learning disabilities and/or autism, their families, and carers 2022-2025”, provides focus and priority to this work.

Recommissioning and Transformational Activity

- **Recommissioning of supported accommodation and day services across Adult Learning Disability, Autism and Mental Health Services.** Day services and supported accommodation are key social care services which support people with Learning Disabilities, Autism and Mental Health issues. Both day services and supported accommodation can enable

people to be more independent and can prevent people moving into residential and nursing care.

- **Manchester City Council, “My Life My Way Programme” Transformation Programme (Supported Living, Day Services and Short Breaks)**. These are a range of housing-based social care services, services where citizens undertake meaningful daytime opportunities in the community, and services where citizens and their carers/family members can access a break when required, in line with their needs and circumstances.

Healthcare

- **The NHS Transforming Care agenda** – This agenda resulted from the Winterbourne View independent hospital investigation in 2011. The agenda has a focus on ensuring that vulnerable citizens with a Learning Disability and/or Autism do not remain in hospital under the care of the Mental Health Act for any longer than they need to be. The agenda also focuses on preventing admissions to hospital where appropriate and safe to do so.
- **NHS Learning Disabilities Oversight Group** - The group provides a quality assurance and improvement forum for all health-related priorities and work streams for citizens with Learning Disabilities (and Autistic people) in Manchester. It is a collaborative arrangement that aims to bring local workstreams into one place to help address health inequalities for these communities.

Preparation for Adulthood

- **Preparation for Adulthood** – In Manchester, Adult Social Care have a key role in ensuring the smooth transition to adulthood for young vulnerable people who may require additional support to meet their life goals. A review of how we do this has been completed and from this a transformation program has been developed to better ensure that young people get the right support at the right time, to achieve the life they want.

3.0 Developments

Policy and Strategy

3.1 Developments surrounding the ‘Our Plan for Services for Adults with a Learning Disability (2023-2028)’

- 3.1.1 In order for the Manchester Health and Social Care system to ensure the delivery of good quality services, (and continually improve services), MLCO have produced a place-based commissioning strategy (plan) relating to adults with a Learning Disability. This is formally titled ‘*Our Plan for Services for Adults with a Learning Disability in Manchester 2023 to 2028*’. In addition, a series of core priorities have been developed highlighting the strategic

priorities across the health and social care system over the next five (5) years period.

3.1.2 To inform the development of the plan, an engagement exercise was undertaken during November - January 2023. The objective of the engagement was to obtain an understanding of what good quality services look like for adults with a Learning Disability, as well as understanding what is working well with existing services, and what could be improved. The scope of the exercise was to engage with adult citizens (16+) with a lived experience of a learning disability through the following means:

- An online smart survey based around six themes corresponding to relevant services such as Supported Living/Accommodation, Short Breaks, Step-up Step-Down, etc.
- A paper copy of the survey that was sent out to citizens (upon request) and returned via freepost.
- A dedicated phone line where citizens could be assisted (by Gaddum) in completing the online survey.
- An email inbox where general comments and feedback could be sent directly to MLCO.
- Six Focus Group events were held across the city, where citizens and carers could participate in discussions and activities around services. Citizens were also given the opportunity to complete an online or paper copy survey at the Focus Groups.
- The full engagement report is available on request.

3.1.3 The following plan and structure were developed as a way to set out responses against the outcomes from the engagement and the plan's aims:

- Part 1 - provide an introduction as to why the plan was produced and summarise the background information relating to adults with a learning disability in Manchester. This includes values, the vision, case studies and what is important to Manchester people and their carers/families.
- Part 2 forms an action plan:
 - Making Community Services and Accommodation better - focused on existing priorities such as reviews of MLCO in house services (transformation), independent sector contracts.
 - More independence and more chances to learn, get new skills and have new experiences - focused on areas such as Better Outcomes Better Lives and the Strengths Based Support model.
 - Better Healthcare and the NHS Transforming Care agenda - focused on areas such as primary care and supporting people to leave hospital.
 - Making sure people who use services have a voice in terms of how services are delivered - continuing engagement, consultation, and co-production.
 - Support for unpaid family and friendship carers.

- Gathering better information and carry on working together with partners - obtaining better data and intelligence to inform our strategic approach and continued work at place, sub-regional and regional level.

3.1.4 The strategy also links in with wider work happening across Greater Manchester and aligns with the principles of the wider Greater Manchester Learning Disability Strategy, as well as Manchester University NHS Foundation Trusts' (MFT) Learning Disability Strategy. A key focus of the Manchester Commissioning Strategy is for services to promote a strengths-based approach in accordance with the Better Outcomes, Better Lives agenda, which centres around enabling citizens to have as much independence, choice, and control within their own lives as practically possible.

3.1.5 The Commissioning Strategy describes the priorities of Health and Social care organisations in Manchester from 2023-2028, in a way which is accessible to citizens with a Learning Disability, exclusively in an easy read format. There is an aspiration that as the locality commissioning agenda further develops, Manchester will have a fully integrated commissioning strategy that describes the joint ambitions of all health and care partners.

3.2 Housing Needs Analysis for Adults with Learning Disabilities and Autism

3.2.1 The intention of the Housing Needs analysis was to identify the future supported accommodation needs of people with Learning Disabilities/Autism. The assessment of need for housing and supported accommodation draws on a range of evidence, including:

- Demographic context: current population and projected population of people with Learning Disabilities/Autistic people. This has been derived from a range of technical sources, including the Council's own Performance, Research, and Intelligence systems.
- Current provision of housing and supported accommodation.
- Evidence from people with Learning Disabilities/Autistic people and other local stakeholders, i.e., what people are saying about their housing, care, and support.
- Local policy context.
- Local commissioner perspectives and intelligence.

3.2.2 Based on evidence in relation to the population of people with Learning Disabilities/Autism and evidence from Manchester City Council (MCC), it is assumed that there will be a growth in the adult population of people with a Learning Disability/Autism over the next 10 years. Further evidence from MCC shows that there is likely to be growth in the population of people with Learning Disabilities/Autism as a result of the increasing numbers of young people who 'transition' to become eligible for adult social care. Evidence from MCC shows that the growing Education, Health Care Planning (EHCP) population indicates that there is likely to be an increase in demands for supported accommodation as they young people progress to adulthood.

3.2.3 Evidence from Greater Manchester Integrated Care indicates that between 2021 and 2023 the growth in the 18+ population with Learning Disability was 1% and, in the 18+, population with Learning Disability and Autism it was 4%; a median growth rate of 2% per annum is assumed across both cohorts. Making a relatively conservative assessment of the evidence of population change (growth) in the Learning Disability and Autism population, annual growth of 2% has been assumed to project the population over 10 years to 2033.

3.2.4 Manchester’s Housing and Service Needs for Adults with a Learning Disability and Autism over the next 10 years (2023-2033).

Type of Accommodation/Placement	Net demand (homes and placements) by 2033.
Supported housing (Demographics and future demand/including reduction in residential/nursing) (supported/exempt accommodation.)	c.225
MCC assessment of additional ‘one-off’ need for supported housing (bespoke programme re-purposing existing accommodation or supporting people into better accommodation, including reduction in hospital/residential/nursing) supported /exempt accommodation**	c.90
Total Supported Accommodation	c.315
Mainstream housing (affordable housing)	c. 60
Shared Lives increase in capacity.	c. 60
OVERALL TOTAL	c. 435

3.2.5 The Housing Needs Assessment found the following:

- An additional c.225 units of supported accommodation are estimated to be needed by 2033 based on demographic need.
- An additional 90 units will be needed between 2023-2028 to support the redesign of MCC in house provision (also known as the “My Life, My Way” Programme, which will be discussed in section 4.9 of this report. This is additional to demographic need.
- This totals 315 units of supported accommodation between 2023-2033.
- The aforementioned accommodation will typically be supported housing that falls within the definition of ‘supported exempt accommodation’ (as defined in the Supported Housing (Regulatory Oversight) Act), which means that it’s provided by a social landlord or other not for profit landlord and is eligible for higher levels of funding through housing benefit under the ‘specified accommodation’ regulations.

- 60 additional units of what is classed as “affordable housing” is required.
- 60 additional shared lives placements are required (formerly known as adult placement services).
- Therefore, a net total of 435 accommodation units and placements are required by 2033.
- Evidence from local Manchester citizen engagement, in addition to focus groups and interviews that the Housing LIN has conducted with people with Learning Disabilities/Autistic people in the northwest of England (and elsewhere) is summarised below.
- The majority of people with a Learning Disability are living with their families, which does suit some people, however some people would like to move on from the family home. This position is not sustainable for some people, for example adults with Learning Disabilities who are living with older parents/carers or with carers who have health conditions.
- There is a need for an increased range of good quality supported accommodation for people with a Learning Disabilities/Autistic people.
- The majority of people are seeking self-contained accommodation that enables them to live as independently as possible. For some people this may be a general needs property with an appropriate package of care/support, not necessarily supported housing.
- Some people who are seeking supported accommodation are looking for small-scale supported housing schemes, for example supported housing developments with 8-10 self-contained dwellings.
- Some people would prefer to live in shared accommodation; this often tends to be younger people where living with friends may be a preference and resembles the housing preference/experience of other young people their age living without a disability.
- People with a sole diagnosis of Autism tend to have sensory needs and social needs which make living in shared accommodation challenging. Self-contained accommodation is preferred, and properties may need to be adequately adapted to meet a range of sensory related needs, for example with sound proofing, different types of lighting, careful use of colour schemes.
- We will use this evidence to meaningfully inform our future planning around accommodation for people with Learning Disabilities and/or Autism.

3.2.6 Officers are currently working with a range of partners including strategic housing partners, registered providers, and other key stakeholders to plan a practical approach to developing the required accommodation over the next 10-year period. Officers across various departments are working together to compile a report for the Capital Investment Group in January, to consider potential development opportunities in the future.

3.3 Manchester University NHS Foundation Trust Policy Developments (Learning Disability and Autism Steering Group)

3.3.1 Manchester University NHS Foundation Trust (MFT) is fully committed to ensuring that adults with a diagnosis of learning disability and/or autism receive appropriate high-quality care when accessing healthcare services both in acute and community health care and domiciliary settings. MFT Learning

Disability Strategy “Our plan for people with learning disabilities and/or autism, their families, and carers 2022-2025”, provides focus and priority to this work.

3.3.2 The Trust has working groups on the four strategic priorities of the plan, involving professionals working in consultation with our patient carer hospital and community forums. The four strategic priorities are.

- Respecting and protecting rights.
- Inclusion and engagement.
- Workforce.
- Learning Disability service standards.

3.3.3 Implementation of the Strategy and assurance monitoring of our outcomes are reported to the Chair of the Learning Disability Steering Group (Director of Nursing and Professional Lead Manchester and Trafford Local Care Organisations). Local Learning Disability Delivery Groups at each MFT hospital and managed clinical services (MCS), are responsible for the delivery of the strategy on a day-to-day basis. Our outcomes are reported to the Manchester Learning Disability/Autism Oversight Board chaired by the Director of Nursing at Manchester Integrated Care Board.

3.3.4 This report provides an update on the delivery of the Strategy following the report provided to the scrutiny Committee in December 2022.

3.4 Respecting and protecting patients’ rights, improving access to care

3.4.1 MFT have introduced a number of strategies underpinned by the Care of Inpatients with a Learning Disability and/or Autism in an Acute Hospital Setting Policy, to improve access to care for our patients with a Learning Disability and/or Autism.

3.4.2 The new electric patient record (Hive), implemented across all MFT hospitals and managed clinical services, has significantly improved communication and accessibility for practitioners to access patient information safely and efficiently. MFT have further improved processes to ensure the consistent use of hospital passports, reasonable adjustment assessments and care plans for patients with a Learning Disability and/or Autism are incorporated in the Hive electronic patient record.

3.4.3 There are now systems in place for quality checks and regular matron or senior nurse reviews to ensure point of care reviews are undertaken when patients are admitted to hospitals with a Learning Disability and/or Autism.

3.4.4 Manchester Royal Infirmary (MRI) has piloted a complex patient care pathway that promotes proactive coordination and a clear multi-disciplinary team approach to admission, patient care, and discharge to provide positive outcomes in a timely way. It is planned to implement this pathway to other patient sites.

3.4.5 The Community Learning Disability Teams (CLDT's) have reviewed all their care pathways to provide clear modelling, greater efficiency, and improve outcomes. The community dental team have been delivering sessions in schools and clinics to support the transition to adulthood and provide a seamless handover of care. Transition health days involving acute, and community have been delivered and the services are aligning their care pathways to reduce gaps and avoid any additional stresses. The community team has implemented the first phase of the single point of access by operating a citywide daily referral huddle. Plans are in place with GP's and community partners regarding screening and vaccination programmes.

3.5 Inclusion and Engagement including Communication.

3.5.1 The Trust has a well-established Learning Disabilities and Autism Patient and Carer Forum to hear the voice of patients and their families and is working to strengthen how the patient's voice is heard across all MFT hospitals and working community partners Manchester People First.

3.5.2 MFT's patient experience "What matters to me" and "friends and family feedback" programmes are used to actively listen, manage change, and celebrate the positive care delivered. Learning Disability and Autism champions are in place both in the acute and community sites across the Trust footprint. The staff promote good practice, provide peer support, and attend further training.

3.5.3 MFT is working in unison with our commissioners to deliver the community transformation programme to ensure the needs of local health services are delivered to the right people at right time, in the right place. The interface with acute and other partners is key to effective outcomes.

3.6 Workforce Skills and Development

3.6.1 The delivery of mandatory training, and the provision of support and advice from the specialist Learning Disability nurses and allied health professionals supports frontline staff to have the tools and skills to enable effective communication with patients.

3.6.2 The Trust has commenced the plan to deliver the 'Oliver McGowan' e-learning training. MFT is committed to having a workforce that has the required skills and significant support from human resources business partners has been provided to enable proactive recruitment across the Trust.

3.7 Learning Disability service standards and Patient Safety

3.7.1 The newly revised patient safety incident framework has been rolled out in MFT. This will offer assurance in implementing lessons learnt and promote good practice. We will engage with our patient forums and the Manchester planning with people to ensure our learning is effectively implemented in practice.

4.0 Recommissioning and Transformational activity

4.1 Learning Disability, Autism and Mental Health Independent Sector recommissioning

- 4.1.1 Independent sector day services and supported accommodation are key social care services which support people with Learning Disabilities, Autism, and Mental Health issues. Both day services and supported accommodation can enable people to be more independent and can prevent people moving into residential and nursing care.
- 4.1.2 Our contractual arrangements with independent sector providers have evolved over time and we now need to undertake a procurement exercise for these services, which will not only put arrangements on a sound contractual footing but will also mean we can ensure the work of providers is aligned with our aspirations to build on citizen's strengths and maximize their independence. This is a significant area of spend for MLCO as it accounts for around £37.5m each year (net spend). The services relating to this commission are social care orientated including supported accommodation, outreach/domiciliary care, and day services. This is one of Adult Social Care's biggest contractual arrangements and areas of spending in the portfolio. Approximately £30.5m (net) is attributable to Learning Disability and Autism, with the remainder attributable to Mental Health (circa £7m net).

4.2 Learning Disability Day Services

- 4.2.1 173 people use external day services, and we work with 30 providers. We spent £1.57m (of the £37.5m total) on these services in 2022/3. Some providers have quite high numbers of citizens, and some specialist services support very low numbers.
- 4.2.2 Day services are mostly used by people with learning disabilities. We currently do not have any which supports people with mental health issues. Last year we spent several months reviewing day services, both in-house and external, and undertook a large programme of engagement with citizens, staff, and providers.
- 4.2.3 Our engagement work with citizens told us that people get a huge amount out of day services and families and carers particularly value them. It also told us that people want to do other things, outside of day services and they want to be as independent as possible.

4.3 Supported Accommodation

- 4.3.1 We commission Supported Accommodation for 348 people with Learning Disabilities and for 260 people with Mental Health issues in Manchester (from the independent sector). We also purchase outreach/floating support for 132 people.

4.3.2 Supported living services for people with a Learning Disability and for people with Mental Health issues are, we believe, more similar than they are different. Existing arrangements are complex and have evolved over many years.

4.4 Proposed model and rationale (future business)

4.4.1 Our proposed model is that we move to having a **Framework model** for day services and supported living set out into Lots for low/moderate/ complex service offers and a lot for innovation. This will be for all new business. This model will help us to attract new types of provision and to be responsive to changes in the market or in legislation. This will be for a maximum of four years (as per the current procurement regulations); therefore, the contract length is proposed to run (**indicatively**) from 1 July 2024 – 30 June 2028. Providers will be encouraged to bid, in order to get a place on the framework, and this process will be conducted via a formal process through the CHEST procurement portal.

4.4.2 Underpinning the model will be bands of hourly fee rates aligned to a continuum of care model-low, moderate, and complex services. In this way it will be clear what we will pay, clear to us what we are spending and clear to citizens (who may be contributing to the cost of their care) that rates are fair and equitable. Rates for complex packages of care will be informed using the nationally recognised Care Cubed methodology.

4.5 Existing Business and Packages of Care

4.5.1 Our proposal is that all existing business and placements within day services and supported living will become spot purchases from the contract start date. Our intention is not to cause disruption for citizens, families, or providers within a fragile market. If citizens are satisfied with their existing provision, we do not intend to disrupt packages of care, and will negotiate an approach to maintaining the relationship with providers who have existing provision on a “direct award basis”, subject to agreeing to updated terms and conditions. All proposed actions will be undertaken carefully in conjunction with finance, legal and procurement colleagues in accordance with the relevant governance of Manchester City Council and Manchester Local Care Organisation.

4.6 Communications and Engagement

4.6.1 **Citizens:** In the day services review we carried out extensive engagement with citizens, holding a series of online workshops, as well as surveys and numerous meetings with interest and advocacy groups. We are building our specification on what citizens told us they wanted.

4.6.2 Broad engagement has also been undertaken with LD citizens as part of the process of drawing up a new Learning Disability strategy. 64 citizens responded with a range of comments about supported accommodation. We also supplemented this work by holding 5 focus groups of LD citizens in supported accommodation, involving 16 citizens. No citizens made negative comments; however, the importance of staff being caring and kind and having

a consistent team often came through. Wanting to be more independent and go out in the community as well as wanting to do more activities were also favoured. A feature of the specification will be the expectation that providers will co-design citizen's individual support with them.

4.6.3 Providers: In the day services review we engaged with providers, asking them what was working, not working and what they wanted to see about the future of their services. We have also held extensive face-to-face and online engagements with new and existing providers. We have also engaged with supported living providers regarding the proposals for new and existing business arrangements and indicative costings to ensure rates are commercially viable. A SWOT analysis has been completed by providers to capture their feedback and comments.

4.6.4 Expected Benefits

- Clear articulation of Manchester's commissioning intentions to the market.
- Improved outcomes for citizens (in line with our Strength based approach).
- Improved control on costs of packages of care through clearly specified rates.
- More robust contractual arrangements with providers to enable closer monitoring of outcomes.
- With the expectation of new providers on the framework which will broaden offer of services available.
- Opportunity to refresh the market and invite new providers into the city.

4.7 Other Frameworks

4.7.1 Manchester is currently engaged with other frameworks, such as the Greater Manchester (GM) Ethical Purchasing System for Complex Needs Services (hosted by Trafford Council). Manchester will continue to engage with this framework, for more Greater Manchester-orientated projects. However, the Manchester Place Based Framework for Mental Health, Learning Disability, and Autism will be the primary method of commissioning individual care and support for Manchester people on a day-to-day basis.

4.8 Work with NHS and Integrated Care System Partners

4.8.1 We realise that the Integrated Care System is still experiencing ongoing reform and transformation. The aspiration is that this contract would be able to be used by Health and Social Care collaboratively; however, the system is not at this point yet, but we will have mechanisms in the contract, to enable wider NHS partners to use the framework at a suitable point in time once the wider system is in a position to practically engage with the process.

4.9 In House Provider Transformation – “My Life, My Way” Programme

4.9.1 In April 2023, Adult Social Care launched the My Life, My Way programme. This is a substantial 3–5-year transformation programme

including in-house Supported Accommodation, Day Services and Short Breaks for adults with a learning disability and/or autism. The programme's vision is "to offer a safe, effective and sustainable service within Manchester for Adults with a Learning Disability and/ or Autism who require a complex service response."

4.9.2 The delivery of the vision will transform the in-scope in-house services to provide:

- A specialised supported accommodation offer that supports people who require the most complex service response to achieve their best possible independence outcomes and quality of life.
- An 'inclusive day' services offer which is accessible by all adults that embeds the centres within their local neighbourhoods as community hubs.
- An 'accessible citywide short breaks' service that provides both short breaks and emergency placements within the offer.

4.9.3 Since the launch of the programme, significant work has progressed to establish appropriate governance and deliver baselining and benchmarking activity, with the priority focus on Supported Accommodation. This was agreed as the first phase of the programme due to the scale and complexity of the activity required to achieve the vision. The benchmarking activity collated a wide range of information on adults accessing the service, the workforce, existing property portfolio and potential in-scope adults from cohorts such as Transforming Care. Whilst the benchmarking activity comprised engagement with other local authorities and providers to gather best practice on models of care and delivery models.

4.9.4 Delivery of the programme is strongly contingent on the provision of suitable accommodation and facilities for people with complex needs and the modernisation of the in-scope services existing property portfolios. Accommodation in Manchester for people with Learning Disabilities and/or Autism is in extremely short supply. This is due to a range of factors including land values, higher rent levels for enhanced accommodation and the specifications required to support the needs of this cohort.

4.9.5 Activity completed by the programme aligned with the wider housing needs analysis identified that a minimum of 30 of 'complex' units are required for the programme within the next 3-5 years, this is as well as 60 units suitable for people with low to moderate needs. Opportunities for expansive developments are limited, as smaller concentrations of properties are required for these citizen cohorts which is a challenge due to the availability of land for development in the city.

4.9.6 My Life My Way programme accommodations and facility requirements will require significant capital investment over a 3–5-year period to support the delivery of activity and revenue savings. Local strategic partners (Registered Housing Providers) outline that to develop such accommodation within current market conditions, will need prime investment to support sustainability, and the strategy will require a blend of a short term acquisitional approach and

new purpose-built schemes. Engagement with partners across Greater Manchester have indicated that the current timelines for delivery of the acquisitional approach is a minimum of 18 months, increasing to 2-3 years where new built schemes are concerned.

- 4.9.7 Whilst avenues are being explored to secure appropriate funding, assets, and land to enable development of the required accommodation and facilities, the programme is completing activity with people already accessing the services. This is targeted activity to work with people to review their needs to understand what services, whether in-house or external, are most suited in providing the best possible outcomes and independence opportunities for the individual. This activity is being completed in association with families supported by a full communication and engagement programme that has been developed with Legal support.
- 4.9.8 Priority discussions are underway within the programme governance to agree the next phase of the programme, whether this be Day Services or Short Breaks. This is being undertaken with key partners such as, Community Health to identify options on achieving a future integrated model of care that ensure that a person's choice is at the core of all decision-making. This will especially be achieved by having people with lived experience who could access the services involved within the scoping and development of the future models of care.

5.0 Healthcare

5.1 NHS Transforming Care agenda

- 5.1.1 This agenda resulted from the Winterbourne View hospital investigation (2011). The agenda has a focus on ensuring that vulnerable citizens with a learning disability and/or autism do not remain in hospital under the care of the Mental Health Act for any longer than they need to be. The agenda also focuses on preventing admissions to hospital where appropriate and safe to do so.
- 5.1.2 Manchester is accountable to Greater Manchester's Integrated Care Board (Learning Disability and Autism Team) for delivering the Transforming Care agenda, as part of NHS England and NHS Improvement. This programme reports to Manchester's Transforming Care Oversight Group and includes senior representative across the Integrated Care System within Manchester and from the Greater Manchester (GM) collaborative.

5.2 Transforming Care – Citizens who are in hospital (detained under the Mental Health Act)

- 5.2.1 This means citizens receiving treatment or care in a facility registered by the Care Quality Commission (CQC) as a hospital operated by either an NHS or independent sector provider. This should include patients of:
- Any age.
 - Any level of security (general/low/medium/high).

- Any status under the Mental Health Act (informal or detained).
- Have a learning disability or autism diagnosis.

5.2.2 There are 39 people with either a diagnosis of a learning disability and/or autism supported within inpatient settings. They are identified as:

- Secure Placements (NHS England Specialised Commissioning are responsible for overseeing these placements through the provider collaborative). These citizens generally require longer term treatment programmes, which may include forensic support interventions. Manchester has thirteen (13) people supported in secure settings.
- Non-Secure Placements – These placements are commissioned by the Integrated Care System within Manchester (who are responsible). Most of the citizens are placed in Greater Manchester Mental Health (GMMH) settings. Citizens within these services may require assessment and treatment and/or rehabilitation type support. Manchester has twenty-seven (26) citizens placed in non-secure settings. Sixteen (16) are placed in Manchester (most in GMMH hospitals)

5.3 Assuring Transformation (AT) Programme

5.3.1 All hospital placements are continually monitored via the NHSE Digital National Assuring Transformation (AT) database. NHSE Digital monitor citizens in hospital care closely (specifically around Mental Health). At a minimum, the Assuring Transformation process will ensure all patients have a care coordinator and receive Care and Treatment Reviews (CTR's) and Commissioning Oversight Visits (CoV) at the required intervals, with discharge planning being a central feature of the process. Care and Treatment Reviews are undertaken by NHS Commissioners to ensure that citizens are only admitted to hospital when absolutely necessary, for the shortest amount of time possible and in the least restrictive setting.

5.3.2 There are a number of wider system challenges that we are addressing in Manchester to ensure the Assuring Transformation process runs as smoothly as it can:

- **Delays in admission notification from some mental health wards when they have new admissions.** This is often because learning disability (or autism) diagnoses is not always known at the point of admission, or ward staff are not aware of NHS reporting requirements. Work continues to raise awareness and an admission notification report is being finalised. New National Care Treatment Review and Dynamic Support Register Guidance has been produced.
- **Workforce.** There are considerable challenges recruiting to roles particularly in facilities supporting citizens in hospital, as well as within Social Care services in the community (e.g., Supported Accommodation).

- **Finding suitable homes to enable discharge for Transforming Care Inpatients.** Manchester is supporting the wider Greater Manchester (GM) Complex Care programme, which brings Commissioners, care and support providers and housing providers together across Greater Manchester, with the aim of developing good quality support solutions for citizens with a learning disability and autism. The project has been supported by a Memorandum of Understanding. There are properties being purchased/developed for some of our current citizens who are in hospital (to support discharge), and we continue to have successes.

5.4 Dynamic Support Planning (DSP)

- 5.4.1 The Dynamic Support Plan (DSP) is a record of citizens who are at potential risk of an admission and actively looks at ways to prevent escalation. There are currently 61 people on Manchester's DSP system.
- 5.4.2 As a result of the Dynamic Support Plan process, we have been able to avoid many potential admissions to hospital and have supported a number of citizens to stay safe and well in the community. This has been achieved through a strong integrated assessment approach, and an enhanced multi-disciplinary team that provides highly skilled interventions and follow up.

5.5 NHS Learning Disabilities Oversight Group

- 5.5.1 The Manchester Learning Disability and Autism Health Oversight Group has now been established and is well attended by partners across the health and care system. The group provides a quality assurance and improvement forum for all health-related priorities and work streams for citizens with Learning Disabilities (and Autistic people) in Manchester. It is a collaborative arrangement that aims to bring local workstreams into one place to help address health inequalities for these communities.
- 5.5.2 The group is attended by the Greater Manchester Local Area Contact for the NHS LeDeR (Learning from Lives and Deaths) programme who brings regular updates on reviews that have been undertaken on the health and care experiences of Manchester people. Findings generally mirror what is found across GM and nationally. Weight management, epilepsy and aspiration pneumonia are amongst the issues that are more frequently identified. Discussions are being held to agree GM priorities for action in the next year.
- 5.5.3 Over the last year we have focussed intensively on the Learning Disability Annual Health Check (AHC) which is offered in General Practice to all people with a learning disability aged 14 and over. It provides an opportunity for a holistic overview of the person's health and early identification of any concerns, as well as reviewing carer needs. It should result in a personalised health action plan (HAP). The national target is 75%. In Manchester, 78.5% of eligible people received an AHC and 77% had a recorded HAP during 2022/23. This compares to 61.2% and 39.4% respectively for the 2021/22 year. We know that uptake is lower amongst younger people (aged 14-25) and

are currently undertaking work with schools and school nurses to promote the AHC to them and their parents/ carers.

5.5.4 We continue to promote Winter vaccinations and are currently preparing for 3 “calm” clinics which will take place at weekends at the three MCC resource centres. These will offer a quiet space for COVID-19 and flu vaccinations and will be supported by system partners. Work continues across GM to improve uptake of cancer screening programmes. Locality colleagues are involved in this work to ensure Manchester citizens benefit from any service improvements and support.

5.5.5 We are aware of the additional inequalities that might be experienced by people with learning disabilities from different ethnic communities. In 2022 MHCC (now NHS GM) commissioned a project to engage with citizens from Pakistani and Black African and Black Caribbean communities to find out more about their experiences of healthcare. The project was undertaken by BHA for Equality with Breakthrough UK. The report has now been finalised with the system focussed recommendations being considered across senior leadership teams and interested groups.

6.0 Transitions - Preparing for Adulthood

6.1.1 Since 2014, supporting young people who may have additional needs to prepare for adulthood has been firmly rooted in Childrens and Adults legislation and Statutory Guidance across social care, health, and education. This is everybody’s business and key to getting this right is person centred practices, co-producing with young people and families what this needs to look like, and partnership working across education, health and social care, commissioning, and the voluntary sector. To support this in Manchester the work around supporting young people to prepare for adulthood is governed by the Send and Transition Boards, with the transition Board feeding into the overarching Better Outcomes, Better Lives (BOBL) programme work.

6.1.2 Currently, 32% of the 111 young people we are currently working with are over the age of 21. Around 77% are known to have a learning disability, 16% require social support for social isolation (neurodivergence) and the few remaining have either a physical disability or support for their emotional wellbeing. However, we are actively trying to improve understanding of our transitional cohorts, so we can be more proactive with how we support and plan with the younger people and their families, about their future. In the next financial year, we are predicted to have a cohort of 44 young people who are turning 18 and have already started working with 20% of these young people so can work effectively and plan ahead to achieve the best outcomes.

6.1.3 In Manchester, Adult Social Care have a key role in ensuring the smooth transition to adulthood for young vulnerable people who may require additional support to meet their life goals. A review of how we do this has been completed and from this a transformation program has been developed to better ensure that young people get the right support at the right time, to achieve the life they want.

6.1.4 The plan which will be implemented over the next 18 months will focus on three key workstreams:

- Transition Process in Policy (systems).
- Working with Partners (relationships)
- Working with young people (making an impact)

6.1.5 In order to do this, a leadership team has been created consisting of a Service Manager, (with extensive experience and background in leading operationally and strategically in Transition), a project officer to develop a coordinated preparation to adult hood approach, two (2) team managers and a Senior Social Worker to support the Social Work team transition young people seamlessly from children to adult services ensuring timely assessment and planning and skill development based on the principals of preparing for adulthood outcomes; Employment; Independent Living; Community Inclusion; Health.

6.1.6 Initial work has been going on to develop the infrastructure of the team, and we will be trialling a new service delivery model over the next six months, which will look significantly different to how it looks now. The Transition Service will be split into teams, who will have 4 different key functions:

- **Managing and Processing ALL referral from children's services to adult services**, and ensuring the young person gets the right support at the right time by the right team. (Back-office systems)
- **Preparing for Adulthood Oversight Team**: Increasing visibility with young people and families and working with our partners to focus on enablement, meaning exploring the skills young people need to develop for adulthood to prevent them needing services.
- **Preparing For Adulthood front door**: Transition Social Work team who will work with young people families and their circles of support to ensure timely care act assessment, development, and implementation of preparing for adulthood action plans and where required ensure their social care package is in place as they turn 18.
- **Preparing for Adulthood Long term work**. This team of Social Workers will work with young people who have Care Act Needs and are predominantly looked after, leaving care, or moving on from their family home, to support them to develop the skills and move into their adult home.

6.1.7 This work has made a significant system impact, whereby the team are now working with young people under 18 and beginning to unpick blockages and work better interdisciplinary however in the next 18 months we will be evaluating the impact it has had on the experience of young people and families and looking at how we record and evidence this.

7.0 Recommendations

7.1 The Committee is recommended to:

1. Support the ongoing strategic developments relating to Adult Learning Disability services across the Health and Social Care system in Manchester.
2. Consider and comment on the information contained within the report as well as the accompanying video, including the proposal to bring a separate report around the Autism agenda to Health Scrutiny at an appropriate point in 2024.

8.0 Appendices

- 8.1 Appendix 1 - "Our Plan for Services" A plan for Adults with a Learning Disability in Manchester 2023 to 2028.
- 8.2 Appendix 2 – Indicative need Supported Accommodation and Mainstream Housing.