

Appendix 1 Community Health Transformation Programme Process

Through the establishment of the Manchester Local Care Organisation, the ambition was always to address the variation in community health service offer across Manchester, resulting from 3 historic commissioning arrangements and 3 different approaches to the delivery of community services because of Transforming Community Services (2012).

The Community Health Transformation Programme is a Manchester Local Care Organisation multi-year transformation programme to design and mobilise a core community health offer for the people of Manchester that will function as part of a wider integrated health, care and wellbeing service offer with social care, acute, primary care, and other community providers.

The Community Health Transformation Programme will:

- reduce variation in and between Community Health services in Manchester to ensure equality and equity of access to services; this will lead to a clear core community health service offer for people in Manchester.
- move into delivering our core offer in a targeted way to address health inequalities and make the best use of resources directed to population need using an agreed population modelling tool.
- ensure consistency of service offer in, and across, Manchester.
- ensure that community health services work effectively in partnership with other health, care and wellbeing services in the community and hospitals and that they are sustainable into the future.

The design of the Community Health Transformation Programme has been commissioning-led (by the deployed community health commissioning team) working with frontline teams and Manchester Local Care Organisation core functions (Business Intelligence, Finance, Human Resources, programme, and project management) as per the agreement to embed the deployed commissioning function into the Manchester Local Care Organisation operating model.

This approach has been shared with the NHS Greater Manchester team and they agree with the approach for Manchester community health services.

The Manchester Local Care Organisation in Manchester has seen real benefit from commissioners working with service teams and in the light of the revised Greater Manchester Operating Model (responsibility for the commissioning of community health services to be at Locality).

Programme stages for all in scope services

The Programme has been mobilised through:

1. **Desktop service review:** A commissioner-led desktop review of available information including existing service specifications, business cases and investment reviews coupled with operational finance and activity data to identify opportunities for redesign and reform.

Output: Recommended areas for review in services i.e. differential activity levels across North, Central and South Manchester.

2. **Service opportunities and options:** Services are then tested against several options (clarified on a service-by-service basis as part of the process) which have been agreed by the Manchester Local Care Organisation Executive Team, these include:
 1. Single business delivery model across Manchester Local Care Organisation
 2. Locality / Neighbourhood delivery model
 3. Review clinical delivery model.
 4. Cease provision, no added clinical benefit in its entirety.
 5. Cease provision; activity not best placed in Manchester Local Care Organisation – proposed delivery through another route within NHS Manchester Foundation Trust.
 6. Service is delivering overactivity against commissioned levels.
 7. Requirement to invest to meet new / growing need/ service not currently provided by Manchester Local Care Organisation.

Output: which options to test with service teams for each service.

3. **Comprehensive Impact Assessment:** Commissioners then work with the corporate teams and relevant service leads to stress test the options through the Comprehensive Impact Assessment approach; this includes elements of a traditional commissioning investment review complimented by a Quality Impact Assessment and Equality Impact Analysis of the preferred option. Not all service opportunities will need the full assessment, but this will be determined service by service.

Output: Recommendation for service reform.

The outputs from the Commissioning Impact Assessment (review and recommendation) are presented to and considered by the Commissioning Impact Assessment panel. The Commissioning Impact Assessment panel in Manchester LCO:

- Chief Medical Officer.
- Chief Operating Officer.
- Director of Nursing and Professional Lead (Chair).
- Director of Finance.
- Manchester Local Care Organisation deployed commissioning team representative.
- Associate Director Quality Governance.
- Service team leads / representatives.