



## Manchester Partnership Board

<b>Report of:</b>	Tom Hinchliffe, Place Based Lead Manchester, NHS GM Integrated Care  Cordelle Ofori, Strategic Director of Population Health, Manchester City Council
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<b>Date of paper:</b>	22 October 2024
<b>Item number:</b>	3
<b>Subject:</b>	Making Manchester Fairer Employment Kickstarter and WorkWell
<b>Outcome of Impact Assessments completed (e.g. Quality IA or Equality IA). Confirmation that an Equality Impact Assessment has been completed where there is a change to a service, programme or policy:</b>	An Equality Impact Assessment and Data Protection Impact Assessment have been completed.
<b>Outline public engagement – clinical, stakeholder and public/patient in support of NHSE public and</b>	The following engagement has been undertaken with stakeholders, with patient and resident voice incorporated. <ul style="list-style-type: none"> <li>• Manchester stakeholder engagement events 13/6/24 and 28/6/24</li> <li>• Locality Management Team 20/8/24</li> </ul>





<b>patient engagement and consultation requirements:</b>	<ul style="list-style-type: none"><li>• MFT Clinician design workshops 4/9/24 and 25/9/24</li><li>• MFT Health Inequalities Group 18/9/24</li><li>• Senior Management Team 24/9/24</li><li>• MMF Task Force 24/9/24</li></ul>
<b>Recommendations:</b>	<ol style="list-style-type: none"><li>1. Note the creation and positive implementation of the Making Manchester Fairer Employment Kickstarter.</li><li>2. Note and approve the implementation plan to utilise £438k of WorkWell funding to scale the Kickstarter.</li><li>3. Note and approve the wider implementation plan for the total allocation of £1.3m of WorkWell funding.</li></ol>





## 1.0 INTRODUCTION

- 1.1 This report provides an update on the creation and implementation of the Making Manchester Fairer (MMF) Employment Kickstarter. The report sets out how the Kickstarter inter-relates and will be developed into a funded service with the Greater Manchester (GM) WorkWell Vanguard programme of which Manchester is receiving £1.3m between 1 October 2024 and 31 March 2026.
- 1.2 Manchester's WorkWell model has been designed to MMF principles and is aligned to the action plan to reduce health inequalities. It is proposed that Manchester's overall WorkWell approach is our future Kickstarter. WorkWell specifically delivers against the following MMF themes:
- Cutting unemployment and creating good jobs
  - Lifting low-income households out of poverty and debt
  - Fighting systemic and structural discrimination and racism
  - Community power and social connections.
- 1.3 Our approach has been to build on the assets and infrastructure we have to ensure we deliver the best services for Manchester residents and communities aligned with the MMF 5 year action plan, Manchester Partnership Board Priorities, Work and Skills Strategy and Anti Poverty Strategy. The Manchester approach has been designed through learning, consultation and engagement with stakeholders including patient and public voice as part of that process. The programme team have also engaged the GM Race Equality Panel in development of our approach. Our approach aligns to the MCC refreshed equality objectives of (1) inclusive employment, (2) promote community involvement and engagement, (3) deliver inclusive and accessible services. Participation in the Kickstarter and WorkWell programme is voluntary.
- 1.4 It should be noted that the design and implementation of the WorkWell service has been rapidly actioned to ensure an effective service for the city's residents is in place to begin delivery in Year 1 and maximise the external investment. The WorkWell funding has enabled us to design and implement services with greater variation and size.
- 1.5 WorkWell is a national Department for Work and Pensions (DWP) programme to integrate work and health services. There are 19 Vanguards across the country of which GM is the largest and most complex, available Government funding is £6.9m. NHS GM Integrated Care Board are the responsible body for the funding and have worked with the 10 localities to develop bespoke models across GM. WorkWell builds on the GM Working Well programme of work and health integration that began in 2014.
- 1.6 WorkWell is designed to be a light touch, low intensity work and health intervention. GM Localities were encouraged to utilise existing infrastructure to design WorkWell services in their area.





- 1.7 The Manchester model is designed to support participants with physical and/or mental health conditions. The holistic nature of the support will enable the physical and mental health related barriers to work to be understood with actions set out in the participants WorkWell plan. For example with regards to mental health support, participants accessing the Be Well strand of the service would be able to access Cognitive Behavioural Therapy (upto 6 sessions) which is available alongside their 1:1 health and employment coaching. Across all strands we will connect participants with NHS Talking Therapies Manchester, integrate with Living Well Hubs and also other non-clinical services and activities that tackle social isolation and mental health (e.g. Anxiety & Depression Peer Support Groups, Creative Health activities, Social clubs, Green activities).

## **2.0 KICKSTARTER**

- 2.1 The MMF Employment Kickstarter has been developed in partnership by Manchester Foundation Trust (MFT), Manchester City Council (MCC) and the Growth Company to offer an integrated health and employment service to support Manchester residents receiving Musculo-Skeletal (MSK) services to stay in or move into work. The Kickstarter is unfunded and relies on the use of co-ordinating existing resources which brings limitations but has also been an excellent example of collaboration to create a transformational approach. The project design and implementation phase enabled excellent engagement of MFT's clinical team in MSK to ensure the Kickstarter would be robust and add value. Good engagement and service led design has been paramount in the development of the service alongside lived experience and resident feedback.
- 2.2 The Kickstarter is focused in North Manchester. MFT patients with MSK conditions are identified by clinicians as needing support and referred into an online portal (Kickstarter bespoke) developed by the Growth Company. Once referred the MSK patient is assessed by the Growth Company for employability support and is able to access one of several employability programmes. The Growth Company are contracted to deliver these programmes by Greater Manchester Combined Authority (GMCA). This has enabled the Kickstarter to be developed using existing resources at minimal cost, but with the limitation that some of the programmes are due to end by March 2025. Once in a programme the patient receives bespoke employability support sequenced to their needs.
- 2.3 The logic model for delivering this programme is to fill a gap in secondary care pathways into employability services to prevent long term economic inactivity. The Government has identified that many NHS commissioners did not commission MSK services specifically with employment needs in mind, MSK conditions account for 30% of GP consultations in England and 41% of people living in England's most deprived fifth of society report chronic pain. There were 19,000 MSK patient consultations in North Manchester in 2023/24 and high levels of economic inactivity in this part of the city due





to long term sickness or disability. The Kickstarter is predicated on good work being good for health.

- 2.4 Good initial performance of the Kickstarter (see table below - 43 referrals since 22 June 24, and strong stakeholder feedback) has supported the development of an opportunity using GM WorkWell Vanguard funding to expand the Kickstarter from December 2024 to be city wide until 31 March 2026 integrating the employability offer further into MSK clinical pathways including co-location. The Kickstarter has an evaluation approach informed by MMF and this will be developed in line with the Kickstarter transforming into a funded service.

Referrals from MFT	43	
Engaged by The Growth Company	37 (of 43)	51% in-work 33% out of work 16% Unknown
Referred to programme at engagement (call) stage	28 (of 43)	(5 pending engagement)
Referred into Individual Placement Support	25 (of 28)	2 starts 10 pending 1 ineligible 12 unable to contact/no longer wanted support/deferred
Referred into Pioneer or Support to Succeed	3 (of 28)	2 pending 1 ineligible

### 3.0 WORKWELL

- 3.1 The GM WorkWell partnership (GMCA and NHS GM) has provided Manchester with £1.3m of funding to deliver a WorkWell service (to 1,620 participants/residents). WorkWell is a new GM designed integrated work and health service which builds on previous integrated services delivered in the city since 2014. WorkWell will prioritise early intervention, as evidence shows this is the most effective way of helping people to stay in work or go back to work. The GM model is low intensity, light touch and focuses on agreeing a 'move into work' or 'thrive in work' plan before referral into more intensive health and employment support services if required.
- 3.2 WorkWell will prioritise intervening at the earliest possible points. As a result, it is expected that most people who will benefit from WorkWell are those in work with health barriers putting their work at risk, those recently unemployed with health conditions with a focus on racially minoritised communities who experience inequity of access to employment support services which meet their needs and to 'good' work. WorkWell will also sit at the heart of the local work and health system, connecting the wider support and services available to meet participants' needs.
- 3.3 The objectives of the national WorkWell programme are to:
- Deliver a holistic work and health service
  - Inform and support the development of an integrated work and health system





- Deliver inclusive growth by tackling high unemployment rates among people with a health condition or disability
- Be part of a national learning programme

3.4 The Manchester WorkWell Programme is based on the following principles:

- Deliver Making Manchester Fairer
- The need to reduce pressures on the health system
- Intervene early to prevent unemployment and support those furthest away to move closer to work . Manchester's model is flexible aiming for 75% of residents supported to be in-work and 25% out of work.
- Address known inequality of access to good employment for racially minoritised groups
- Integrate health and work services around residents through commissioned programmes to provide joined up solutions
- Engage residents in employability services in community and health settings outside of Jobcentre Plus

3.5 The programme will support delivery across the following three strands:

1. Employment support in Manchester NHS Foundation Trust (MFT) MSK Pathway, upto £438k value, 600 participants (including Trafford contribution of £50k, 60 participants)
2. Enhancement of the Be Well service (Social Prescribing), upto £0.516m value 708 participants
3. Employment and health support for Racially Minoritised Groups (RMG), upto £226k value, 312 participants

3.6 The overall outputs/outcomes expected from our three strands would be:

- £1.1m of commissioned services from social enterprises or other type of VCSE organisations.
- 1,620 residents receiving light touch, low intensity work and health support via a person centred and holistic plan.
- 1,215 residents in-work receiving support to maintain their employment or find good work, providing early intervention and prevention of impact of poverty and mental health conditions.
- 405 residents out of work receiving support to find good work, increasing income levels and reducing poverty with wider benefits to health.
- Minimum of 600 MSK patients receiving a new employability service to support condition management and sustainment of employment, while supporting access to mental health services as appropriate.
- Minimum of 312 residents from racially minoritised communities receiving a new culturally competent employability service which builds trust to access wider services such as mental health.





- Earlier access to Be Well's employment offer for 708 residents and an increase from 32% of participants from racially minoritised communities receiving support under the current Be Well model.

- 3.7 The Kickstarter is proposed to directly evolve into **(1) Employment Support in MFT MSK pathways**. This is natural progression turning the unfunded Kickstart approach in North Manchester into a Citywide (and Trafford) offer. MCC will passport £438k of WorkWell funding via a grant funding agreement to MFT who will commission a provider to deliver the service. Due to the short timescales and type of service MFT propose to use a waiver to obtain their internal procurement approvals. The Manchester service will utilise upto £438k to support 600 participants. We have agreed a proposal with GM NHS Trafford that the service will also cover MFT's Trafford MSK footprint to the value of £50k and supporting 60 Trafford residents and patients. This has increased the value of the service to £438k (from £393k), approvals have been received from NHS GM and NHS GM Trafford. Trafford will fund the extension of the service in their locality. MFT undertook 90,000 MSK patient consultations in 2023/24 and their insight data shows a demand for employability support for patients in the MSK pathway. In this strand of Manchester's model some of the participants will be non Manchester residents due to the geographic areas serviced by MFT and the innovative nature of this reform project. The DWP set eligibility criteria allows only GM residents or those whose GP or Job Centre is in GM to access the service. The service will primarily be for Manchester residents with the provider supporting non-Manchester residents to access other GM WorkWell provision as appropriate to that participants needs.
- 3.8 It is expected the Service will start in December 2024 due to procurement processes and the design and implementation across the entire MFT geographic footprint. The service will integrate Work and Health Coaches into the MSK secondary care pathway. Design sessions have been held with clinicians from MFT to design an effective model that will enable residents to access employability services in a variety of ways including in clinic, in community settings and via telephone and virtual. The service will be offered to patients entering the pathway and those already on waiting lists or receiving an MSK service. The employability service provided will be holistic and take account of the treatment plan for the individual when completing the WorkWell plan also supporting access to mental health and well being services as appropriate. Delivery will be need to be flexible and adapt based on learning and need. The access to the service by racially minoritised communities will also be monitored and developed during delivery.
- 3.9 The MSK pathway could be expanded into other clinical services within MFT if appropriate and required.
- 3.10 The benefit of delivering this service will be to increase MSK patients' access to a good quality employability service to stay in work or move back into work. The service should provide holistic action planning to improve the management of health conditions which may result in reduced demand on the NHS. The service will focus on good work that supports management of health conditions, the preventative nature of this service may





support more patient interaction in community settings. The local outcome measures will reflect the need to reduce inequalities.

- 3.11 The second WorkWell strand of the Manchester model will **(2) enhance the Be Well Service** by adapting, improving and enabling earlier access to employability support and more co-ordinated support for racially minoritised communities. Be Well is a strongly performing primary care pathway for social prescribing. The WorkWell funding will be utilised to adapt, enhance and further improve performance of this pathway through a proposed grant of upto £0.516m supporting 708 participants. The existing Be Well contract held by MCC for 2024-25 will be varied and the 2025-26 contract will incorporate WorkWell. Big Life deliver the Be Well model with Pathways CIC providing the in-work support and One Manchester, MCC and Wythenshawe Housing Group providing the out of work service.
- 3.12 It is expected the Service will begin in November 2024 following variation of existing contracts and implementation period for Big Life to adapt their model. Residents accessing Be Well will receive enhanced assessment for employability on presenting to the service. Eligible residents who require support will be supported by the WorkWell service. The focus will be on in-work (75%) providing a holistic 12 week service to the individual to support them to stay in employment.
- 3.13 Be Well will also be adapted by taking co-ordinated referrals from two VCSE organisations engaging Black and Asian residents (see strand 3 below). Be Well will provide collaborative support to those VCSE organisations and work in partnership to deliver an effective referral and support model. On entering the Be Well model the resident may receive well-being and/or employability support.
- 3.14 The benefits of delivering this service include investing in our VCSE infrastructure to adapt and enhance a quality service and preventing duplication in the service offer. The Be Well employability service will have conversations about 'good work is good for health' sooner and with more participants and also increase its reach into racially minoritised communities. The local outcome measures will reflect the need to reduce inequalities.
- 3.15 The third WorkWell strand will provide **(3) employability support to Racially Minoritised Communities** by implementing a new service delivered by culturally competent VCSE organisations. The Service will be commissioned through grant awards by MCC utilising a total of upto £226k WorkWell funding to provide a service for 312 participants. We plan to commission two organisations who will provide a culturally competent service to either Black or Asian residents which bridges the gap between VCSE and formal employment and skills provision. This model builds on successful pilot activity and learning commissioned by MCC for racially minoritised communities in the last 18 months.







- 3.16 It is expected the service will start in December 2024 to enable the opportunity to be advertised and VCSE organisations to bid for the work and then implement the model. The provider market to deliver this type of service is not fully developed, an advertised opportunity supports market development. Residents accessing this model will be effectively engaged in pre-employability support and a WorkWell plan will be completed by the VCSE provider. The WorkWell plan may identify barriers to employment that are not within the organisational abilities of the VCSE provider to resolve, these could be health or employment related. Using a person centred approach the VCSE provider would identify with the individual the right next stage of structured support. The support may include a co-ordinated referral into Be Well or other high intensity employability programme such as Individual Placement Support in Primary Care (IPSPC). The core element of this strand and model is to effectively engage the resident, build trust and develop a holistic plan which provides the right next step. The VCSE organisation is expected to continue to provide ongoing engagement and support as appropriate to the resident following referral.
- 3.17 The benefits of this service will be to reduce the impacts of structural racism and discrimination by providing a quality 18 month service specifically designed to engage Asian and Black residents in integrated employability and health support thereby addressing the wider determinants of health. The learning and evidence base will inform future services. The service will be part of a wider integrated model with a co-ordinated referral route into Be Well (32% of Be Well clients receiving the employability service are Black (16%) or Asian (16%) ethnicity). The Service will invest in Manchester's VCSE sector enabling development of the provider market for culturally proficient organisations to deliver employability support (this will enable improved sub contractor opportunities in future years, championed by Manchester). The local outcome measures for this programme will focus on the success in engaging residents and sustainable access into other services including employment, skills and health.
- 3.18 Manchester's WorkWell model includes £127k for identified contract management, commissioning and future programme contingency costs. The £127k is drawn from the 60% guaranteed funding Manchester will receive.

#### **4.0 EVALUATION AND OUTCOMES**

- 4.1 The WorkWell programme has a national outcome and evaluation framework which must be adhered to under the terms of the Grant Funding Agreement. The core outcomes from WorkWell are provided below.
- Participant satisfaction
  - Remain in work
  - Entered into work
- 4.2 Local outcomes and evaluation can supplement the national model which will be minimal. The MMF Measuring Inequalities toolkit will inform the development of local





measures as specifications for the strands are finalised in October 2024. Manchester would aim to measure elements such as:

- Participant confidence in managing their condition
- Participant improvement in health
- Participant access to services

## **5.0 GOVERNANCE, FINANCE AND RISK**

- 5.1 NHS GM are the accountable body to DWP for delivery of WorkWell. NHS GM have delegated the agreed WorkWell Partnership Vanguard delivery funding from the NHS GM Operating budget to the NHS GM locality team Manchester setting out key expectations and agreed criteria underpinning the transfer of the funding including ‘The NHS GM Locality Teams will be responsible for transacting onward spend to deliver locality WWP model and activity, and for ensuring compliance with the NHS GM Standing Financial Instructions and adherence to the Financial Scheme of Delegation’.
- 5.2 The Governance route for the Kickstarter and WorkWell is set out below, the programme is overseen by a Steering Group co-chaired by Sharmila Kar (NHS GM (Mcr)/MCC) and Angela Harrington (MCC).
- Manchester stakeholder engagement events 13/6/24 and 28/6/24 (engage)
  - Locality Management Team 20/8/24 (approval)
  - MFT Health Inequalities Group 18/9/24 (approval)
  - Senior Management Team 24/9/24 (approval)
  - MMF Task Force 24/9/24 (engage/inform)
  - Manchester Provider Collaborative TBC (engage/inform)
  - Manchester Partnership Board 20/10/24 (approval)
  - MMF Programme Board 29/10/24 (engage/inform)
  - Health and Wellbeing Board 20/11/24 (engage/inform)
- 5.3 The programme team has prepared an Equality Impact Assessment (EIA) and Data Protection Impact Assessment (DPIA) which will continue to evolve and be updated over the life of the programme. NHS GM (Mcr) finance team are providing advice and support to the programme team alongside MCC legal, procurement and finance. MFT’s procurement and Information governance teams are also providing advice and support.
- 5.4 The programme’s identified risks have been reviewed with mitigations in place. The main programme risk is to go live later than GM date of the 1 October 2024. Our expected Manchester go live date is early December 2024 due to the innovative nature of our model and the short timescales for implementation (July 24 to October 24). This may result in a loss of income if all starts cannot be achieved in year 1. This risk has been built into commissioning to reduce likelihood.
- 5.5 The WorkWell grant payments are spread over 2 financial years (24/25 and 25/26) with eligible expenditure paid quarterly in arrears. The funding is split into guaranteed (60%)





and performance related (40%), the guaranteed payments are made once the support programme is established, whilst the performance payments are paid based upon the number of participants supported. Extensive modelling has taken place and will inform the commissioning of the programme. Providers will manage the financial risk of underperformance. The table below sets out the funding model for the Manchester WorkWell programme.

Strand	Total Participants	Maximum Total Funding
1. Employment support in MFT MSK service	600	£438,048
2. Enhancement to Be Well Service	708	£516,672
3. Employment and health support for Racially Minoritised Groups	312	£228,269
4. Contingency and management	N/A	£127,023
		<b>£1,310,012</b>

## 6.0 NEXT STEPS

6.1 The Programme Team will focus on the following high level activity:

- Planned governance reports - Oct/Dec 24
- Commissioning activity including specification's finalised and procurement taking place – Oct/Nov 24
- Continued stakeholder engagement including patients – Oct/Nov 24
- Communications pre Go live – Nov 24
- Go live – Dec 24

