



Manchester Partnership Board	
Report of:	Tom Hinchcliffe Place Based Lead for Manchester
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Date of paper:	22 nd October 2024
Item number:	8
Subject:	Joint Commissioning Board (JCB) Highlight Report
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:	EIAs to be completed as part of the service delivery redesign process and signed off by the JCB Chair.
Outline public engagement – clinical, stakeholder and public/patient in support of NHSE public and patient engagement and consultation requirements:	Patient feedback has been obtained as part of the service delivery redesign process.
Recommendations:	Manchester Partnership Board is asked to note the report.





1.0. Introduction

- 1.1. The JCB is a sub-group of the Manchester Partnership Board (MPB) and provides a forum in which NHS, Social Care and Public Health can convene and take/recommend joint commissioning decisions relating to health and care spend.
- 1.2. This integrated forum is intended to enable a different approach to commissioning across health and care; to be bold and transform how the needs of the changing population can be met, focusing on driving better outcomes and experiences for people in Manchester.
- 1.3. This report provides a summary of the key discussions and decisions for the two meetings that have taken place over the summer period.

2.0. JCB Highlights

2.1. July Meeting

2.1.1. Home from Hospital Discharge Support Services Update

2.1.1.1. There are currently several disparate services delivering inequitable services across the city.

2.1.1.2. Locality NHS and Local Authority commissioners are working jointly to secure services to meet the identified future commissioning need in time for the new financial year when the current contracts expire.

2.1.1.3. To achieve this, commissioners are:

- Developing and finalising a citywide service model and specification which aligns to service user feedback, system priorities whilst also taking on board learning from the models of care in other systems;
- Confirming the future commissioning intentions for handy person and home improvement services to make clear the interdependencies between services as part of the overall model/pathway;
- Identifying an appropriate budget, using a top down and bottom up approach to costing.
- Undertaking a formal procurement process (supported by MCC Procurement Team) to support the commissioning of an equitable citywide non clinical service which helps to keep people out of hospital and to return home safely after a hospital stay.

2.1.1.4. The Board agreed that the future commissioned model should continue to be joint funded and secured within a reduced financial envelope.





2.1.2. System approach to 2024/25 uplift

- 2.1.2.1. An update on the work underway to align a system approach to 2024/25 uplift was presented.
- 2.1.2.2. The Board considered a range of options to set revised prices for Continuing Healthcare (CHC), Funded Nursing Care (FNC), Personal Health Budgets (PHB), Mental Health (MH) Learning Disabilities (LD) and Neurorehabilitation (NR) package services for Manchester locality patients for financial year 2024/25.
- 2.1.2.3. The Board supported option five which incorporates changes in the real living wage for homecare and care home packages and also reflects the Local Authority uplift for 'other' packages. Most of the 'other' packages are jointly funded with the Local Authority so it is appropriate to adopt their uplift.
- 2.1.2.4. The Board felt further work should be undertaken to explore a potential pooled funding arrangement in future.

2.1.3. Joint Commissioning Board Stocktake

- 2.1.3.1. An intention to undertake a stocktake of the Joint Commissioning Board during August was signalled and supported.
- 2.1.3.2. The findings of the review were agreed to be brought to the September meeting.

2.1.4. Other business

- 2.1.4.1. The Board were made aware of a joint piece of work to review the **Discharge to Assess (D2A)** bedded model. Further updates to be brought to future meetings.
- 2.1.4.2. The Board acknowledged concerns raised in relation to the future funding for the **Winning Hearts and Minds** Programme and the actions being taken to provide clarity of the situation.

2.2. September Meeting

2.2.1. JCB Stocktake

- 2.2.1.1. The outcome of the JCB stocktake review (which took place during August) was presented for the Board's consideration. The report contained a synthesis of all the feedback gathered from JCB members alongside some practical suggestions to improve the Board's effectiveness.
- 2.2.1.2. The Board felt it had made progress since its inception at the end of calendar year 2023 but agreed it needed to play a more prominent role in addressing the system financial challenges.
- 2.2.1.3. The Board also agreed that it needed to better understand how it is sighted and involved in supporting the centrally led GM workstreams.
- 2.2.1.4. A refresh of the membership (and nominated deputies) was welcomed in terms of ensuring appropriate attendance.
- 2.2.1.4. It was suggested to aim for three areas of work to focus on for the remainder of the





year so that our collective resources are working together to address the key system challenges affecting the health and care of the people of Manchester.

- 2.2.1.5. The Board felt there was an opportunity to work more jointly when making commissioning decisions to avoid unintended consequences. In terms of addressing the pressures within the system, the Board needs to jointly understand the impacts of any decommissioning decisions and any mitigations (including alternative provision). Maintaining the quality and safety of services is key.
- 2.2.1.6. The Board agreed it needed to better understand the scope of joint commissioning opportunities and therefore the areas it can make an impact on.
- 2.2.1.7. The Board agreed the proposed actions to improve JCB's effectiveness.

2.2.2. Joint Commissioning Adults Group

- 2.2.2.1. The options appraisal of the joint arrangements for adult commissioned services was presented to the Board.
- 2.2.2.2. A merger of the MLCO Commissioning Board (currently has an adult social care focus) and the MLCO Commissioning and Reform Steering Group (currently has a health focus) was recommended and supported as the preferred option.
- 2.2.2.3. Terms of reference for the merged group will now be developed.
- 2.2.2.4. A discussion to understand and learn from the integrated approach to commissioning in the Rochdale locality was suggested.

2.2.3. Future Commissioning Intentions for the Discharge to Assess (D2A)

- 2.2.3.1. An update on the proposed changes to the current D2A bedded model was presented.
- 2.2.3.2. The paper proposed to review the design and delivery of a new model of care to achieve a reduction in block beds, to re-purpose long term placement capacity and release savings to support system financial recovery plans.
- 2.2.3.3. The board supported this approach and agreed that the review needs to be transparent.
- 2.2.3.4. A fortnightly D2A system working group has been established to take forward the work.
- 2.2.3.5. Provider Collaborative Board and Manchester Partnership Board to receive updates on this work at their upcoming meetings.

2.2.4. Complex Discharge Multidisciplinary Teams (MDTs)

- 2.2.4.1. An update on the development of a complex discharge MDT model was provided - the purpose being to improve patient flow back into community settings.
- 2.2.4.2. The MDT model can be employed to involve high level clinical conversations between hospital and community teams. There are some examples of good practice where patient outcomes have vastly improved through this dialogue.
- 2.2.4.3. Examples are patients being discharged home, into palliative, mental health or other care settings, where appropriate discussions and handover have taken place to





ensure patient care is anticipated thus avoiding re-admission back into hospital.

2.2.4.4. The proposal is currently unfunded but should be considered if any winter discharge funding becomes available.

2.2.4.5. The Board noted the update.

2.2.5. CYP Joint Commissioning Group (CYP JCG)

2.2.5.1. An update on the Healthy Schools work was provided which highlighted the immediate funding pressures within the specialism and advised that a wider system piece of work is being undertaken to look at future sustainability.

2.2.5.2. A progress update on the review of the Speech and Language Team (SALT) was provided however the October CYP JCG would be dedicated to the SALT review and its findings.

3.0. Recommendations

3.1. Manchester Partnership Board is asked to note the report.

