



# Taking charge of our Health and Social Care

in Greater Manchester



Summary FINAL DRAFT v11.3 • Dec 2015

# Greater Manchester Health and Social Care Devolution

In February 2015 the 37 NHS organisations and local authorities in Greater Manchester signed a landmark agreement with the government to take charge of health and social care spending and decisions in our city region.

We wanted to do this, building on the other devolved powers we have been given, because we believe having the freedom and flexibility to make our own decisions over some of the most important things in our lives is a huge opportunity, as well as a great responsibility.

Greater Manchester has the fastest growing economy in the country and yet people here die younger than people in other parts of England. Cardiovascular and respiratory illnesses mean people become ill at a younger age and live with their illness longer than in other parts of the country. Our growing number of older people often have many long term health issues to manage.

Thousands of people are treated in hospital when their needs could be better met elsewhere, care is not joined up between teams and not always of a consistent quality. We also spend millions of pounds dealing with illnesses caused by poverty, stress, air quality, debt, loneliness, smoking, drinking, unhealthy eating and physical inactivity.



The £6 billion we currently spend on health and social care – and the way we spend it - has not improved this picture.

The challenge is significant; if we do not start to act now to radically change the way we do things, by 2021 more people will be suffering from poor health and we will be facing a £2 billion shortfall in funding for health and social care services.

But like the challenge the opportunity is huge. Our goal is to see the greatest and fastest improvement to the health, wealth and wellbeing of the 2.8 million people in the towns and cities of Greater Manchester.

In order to achieve this, we know we need radical change in how we provide health and social care, as well as a new deal with people in Greater Manchester.

Our focus must be on people and place, not organisations. There will be a responsibility for everyone to work together, from individuals, families and communities to the approximately 100,000 staff working in the NHS and social care, the voluntary sector and the public bodies.

We want our city region to become a place which sits at the heart of the Northern Powerhouse, with the size, economic influence and, above all, skilled and healthy people to rival any global city.



Put simply, skilled, healthy and independent people are crucial to bring jobs, investment and therefore prosperity to Greater Manchester. We know that people who have jobs, good housing and are connected to families and community feel, and stay, healthier.

So we need to take action not just in health and social care, but across the whole range of public services so the people here can start well, live well and age well.

### Our Plan

The final draft of our Strategic Plan: Taking Charge of Health and Social Care in Greater Manchester (the Plan), sets out our collective ambition for Greater Manchester over the next five years and complements work we've been doing over the last ten years on reforming and growing our city region.

It is the culmination of years of conversations about improving health, wealth and wellbeing between the people who live here and the organisations which run our public services.

It's also the result of some very new conversations between the public services here – and between us and the government and national bodies.

It has been built from ten plans created by the local authorities and NHS in each part of Greater Manchester, as well as the hospitals and other providers of NHS services. It also includes new and refreshed Greater Manchester wide plans.

It covers the next five years. But devolution is a long term deal where we'll need to take charge and responsibility for looking after ourselves and each other over many years.

The Plan focusses on four big areas. During January to March 2016 we will develop more detail about how and when these changes might happen:

- A fundamental change in the way people and our communities take charge of and responsibility for managing their own health and wellbeing, whether they are well or ill. This will include exploring the development of new relationships between NHS and social care staff and the public who use services; finding the thousands of people who are currently living with life changing health issues and do not even know about them and investing far more in preventing ill health. We want people to start well, live well and age well
- The development of local care organisations where GPs, hospital doctors, nurses and other health professionals come together with social care, the voluntary sector and others looking after people's physical and mental health, as well as managers, to plan and deliver care so when people do need support from public services it's largely in their community, with hospitals only needed for specialist care
- Hospitals across Greater Manchester working together across a range of clinical services, to make sure expertise, experience and efficiencies can be shared widely so that everyone in Greater Manchester can benefit equally from the same high standards of specialist care
- Other changes which will make sure standards are consistent and high across Greater Manchester, as well as saving money.
   This will include exploring sharing some clinical and non-clinical

support functions across lots of organisations; giving people greater access and control over their health records and ensuring they are available in hospitals, GP practices and with social care so people can tell their story once; investing in Greater Manchester wide workforce development; sharing and consolidating public sector buildings; investing in new technology, research and development, innovation and the spreading of great ideas

We are aiming for some big benefits for the people of Greater Manchester by 2021, including the following (and more will be developed in the coming months):

- 1,300 fewer people dying from cancer
- 600 fewer people dying from cardiovascular disease

- 580 fewer people dying from respiratory disease
- 270 more babies being over 2,500g which makes a significant difference to their long term health
- More children reaching a good level of social and emotional development with 3,250 more children ready for the start of school aged 5
- Supporting people to stay well and live at home for as long as possible, with 2,750 fewer people suffering serious falls

There are very few detailed changes proposed at the moment – when this does happen we will formally consult with all those who might be affected – including our staff and the public.



## **Progress to date**

Over the last ten months we have focussed on creating arrangements where the Greater Manchester bodies will be able to come together to make joint decisions, based on joint planning and with joint delivery in mind. They must also be able to take on functions carried out by national bodies at present.

Following our agreement to work together, a Programme Board was created in March 2015. It oversees the delivery of the actions set out in the February agreement and is steering us towards the devolution of powers and responsibilities in April 2016.

From April 2016 health and social care will be overseen by the new Health and Social Care Partnership Board, which has been running in shadow form since October 2015. Every NHS organisation and local authority in Greater Manchester is a member of this, as well as other key stakeholders including the voluntary sector, patient groups and regulatory bodies.

It is supported by a smaller Strategic Partnership Board Executive. Greater Manchester is also creating a single Joint Commissioning Board to ensure that we can commission services without fragmentation.

A small core team will be created in the coming months to ensure that Greater Manchester is able to deliver the Strategic Plan.

There are no extra bodies or layers of management but rather structures that allow the existing organisations to come together to work far more closely and effectively than ever before.

This final draft of our plan has been endorsed by all those in our health and social care partnership, via the Partnership Board on December 18th, 2015.

Our decision making to date has been shaped by following a number of principles.

### We will:

- Focus on people and places rather than organisations, pulling services together and integrating them around people's homes, neighbourhoods and towns
- Design things together and collaborate, agreeing how we do things once collectively, to make our current and future services work better

- Be financially sustainable and this must be secured through our plans and service reform
- Join our budgets together so we can buy health, care and support services once for a place in a joined up way
- Be fair to ensure that all the people of Greater Manchester can have timely access to the support they require
- Be innovative, using international evidence and proven best practice to shape our services to achieve the best outcomes for people in the most cost effective way
- Strive for the best quality services based on the outcomes we want within the resource available

We set out in February to demonstrate our ability to work formally together. We chose a number of areas, including a number already underway, where we thought the new impetus under devolution could help move things more quickly and effectively and where we believed rapid improvement would benefit Greater Manchester. Several more have since been included:

- Our ambition to deliver same day access to primary care, supported by diagnostic tests, seven days a week by the end of this year
- A new leadership of public health, placing more emphasis on preventing ill health and tackling issues early
- Launching Health Innovation Manchester, an innovative partnership between academia, health, research and businesses to adopt and spread innovative ideas and practice quickly and widely
- The unanimous decision by 12 Greater Manchester CCGs to move to four single services to provide acute general surgery in Greater Manchester
- Launching a Greater Manchester vision for Learning Disability Services which has been developed with and by service users and families

- The creation of a new partnership, Dementia United, set to make the whole of Greater Manchester more dementia-friendly over the coming five years
- Developing a skills and employment 'passport' to enable a more flexible movement of our workforce
- Extending our Working Well pilot to support 15,000 more people back to work
- Developing a Greater Manchester Mental Health Strategy, with hundreds of service users, family members and professionals over the last four months
- Forming a Greater Manchester Cancer Strategy and Vanguard pilot: The Christie NHS Foundation Trust has been chosen to join a collaborative cancer care vanguard partnership, working with organisations across Greater Manchester and with other leading cancer centres nationally, with the potential to save hundreds of lives each year

### The money

In order to achieve our ambitions, we need the  $\mathfrak{L}6$  billion invested in health and social care to flow differently around our system. We are producing a detailed Greater Manchester financial plan – the first of its kind - which shows how we see the  $\mathfrak{L}2$  billion gap emerging over the next five years and the actions we need to take across our health and care systems and with the people of Greater Manchester, to change that scenario.

Central to the delivery of the Plan is our Transformation Fund. This money, from NHS England, will allow us to keep our services safe for people while we develop the new ways of working.





# Next steps – implementation of the plans

This Plan is a final draft based on our combined experience and the tens of thousands of conversations, formal and informal, between the people of Greater Manchester and our public sector organisations over recent years. It also builds in work which is already underway here and has been developed with patient, carer and public input.

A critical part of our work between January and March 2016 will be to continue to engage with people across Greater Manchester and staff working in the health and care system. We want to have conversations about the direction of travel and how we might work together better in future. As our plans develop we will also talk about the specific changes which might be proposed. We want everyone in Greater Manchester to be part of building our plans for the future and designing the ways in which we can work together more effectively.

This is a strategic plan and as such there are very few detailed changes proposed at the moment. We are developing our implementation plans now, which describe what we think will need to happen over the next five years; these will contain more details. If and when there are changes which may affect the way services are provided we will of course formally consult with all those who might be affected – including our staff and the public.

We will publish a refreshed Plan in March 2016 which will include details about the changes being proposed in the next five years.



To find out more or get in touch with us please go to:

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