

# Strategic Plan Update to Trafford HWBB Jan 16

## <u>GM level</u>: Devolution – Taking Charge in Greater Manchester

- **Greater Manchester is taking charge** and taking responsibility in a historic first, devolution is handing the power and responsibility over to the people and the 37 local authorities and NHS organisations here
- We are all taking charge of a huge opportunity we will have the freedom and flexibility to focus on our place and our people, making our own decisions in GM over some of the most important things in our lives, not just health.
- At the same time we are all taking responsibility for a huge challenge we have the people who live in parts of GM are out of work longer, die younger and suffer far more illness than in other parts of GM and other parts of the country and we think we can change this, but there will be difficult decisions along the way
- **Our goal** is to see the fastest and biggest improvement to the health, wealth and wellbeing of the 2.8m people of GM so we have skilled, healthy and independent people
- Our vision is that we become a place where we take charge and responsibility to look after ourselves and each other. There's a role for everyone, from the individual to the family, the community, the voluntary sector and the public bodies to work together
- So that by 2021 we have delivered benefits ranging from 600 fewer deaths from cardiovascular disease to1,300 fewer deaths from cancer and 16,000 fewer children in poverty
- But it's also a **long term deal** where we'll need to take charge and responsibility for looking after ourselves and each other over many years

## **Outline Structure of the Plan**



#### Chapter 1 - Ambition for the Strategic Plan

- How health and social care fit into the broader devolution agenda (from SR submission) pulling in PSR team
- Growth & reform leading to a place based, population health approach co designed between health and social care
- MOU description, (include paragraph which covers clinical and final sustainability within 5 years) leading to a 'comprehensive clinical and financial sustainability plan'

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#### Chapter 2 - Work since the MOU

- Principles we have worked to co design with the system/place focus/outcomes based
- Bringing the system together Locality Plans, Provider federation
- Governance
- Early wins published early wins and also early examples of working together i.e. mental health strategy, cancer

#### **Chapter 3 - The transformation themes**

- Radical upgrade in prevention & population health
- Integrated Community based care & support
- Integrated acute & specialist services
- Shared service and back office efficiencies
- Enabling for the new models of care



#### **Chapter 4 - Financial Plan**

• Outputs from the PWC work against the financial plan



#### Chapter 5 – Implementation/delivery

- Key areas of focus for Jan March
- Stakeholders co-design
- Public engagement



## <u>GM level</u>: Strategic Plan

- The Strategic Plan sets out our **collective ambition for GM** over the next five years: it is high level and shows our direction of travel and detailed implementation plans are being worked on between now and March
- It is the **culmination of years of conversations** between the people of GM and the organisations which run our public services about improving health, wealth and wellbeing
- It's also the result of **some very new conversations** between the public services in GM and between us and the government and national bodies

#### • We are looking at four big areas:

- A fundamental change in the way people and our communities take charge of and responsibility for – their own health and wellbeing, whether they are well or ill
- A big focus on local care where doctors, nurses and other health professionals come together with social care in teams – so when people do need support from public services it's largely in their community, with hospitals only needed for more specialist care
- Hospitals across GM working together to make sure expertise and experience can be shared widely so that everyone in GM can benefit equally from the same high standards of care
- Other changes which will make sure standards are consistent and high quality across GM, as well as saving money, for example sharing some functions across lots of organisations, sharing and consolidating public sector buildings, investing in new technology, research, innovation and the spreading of great ideas.

It will describe the application of a radical new landscape of commissioning and provision towards a common purpose to maximise health benefit

RADICAL UPGRADE IN POPULATION HEALTH PREVENTION A shift in focus to population health that supports GM residents to self-manage, innovates the model for prescribers and pharmacies, and tackles the future burden of cardiovascular disease and diabetes.

#### TRANSFORMING COMMUNITY BASED CARE

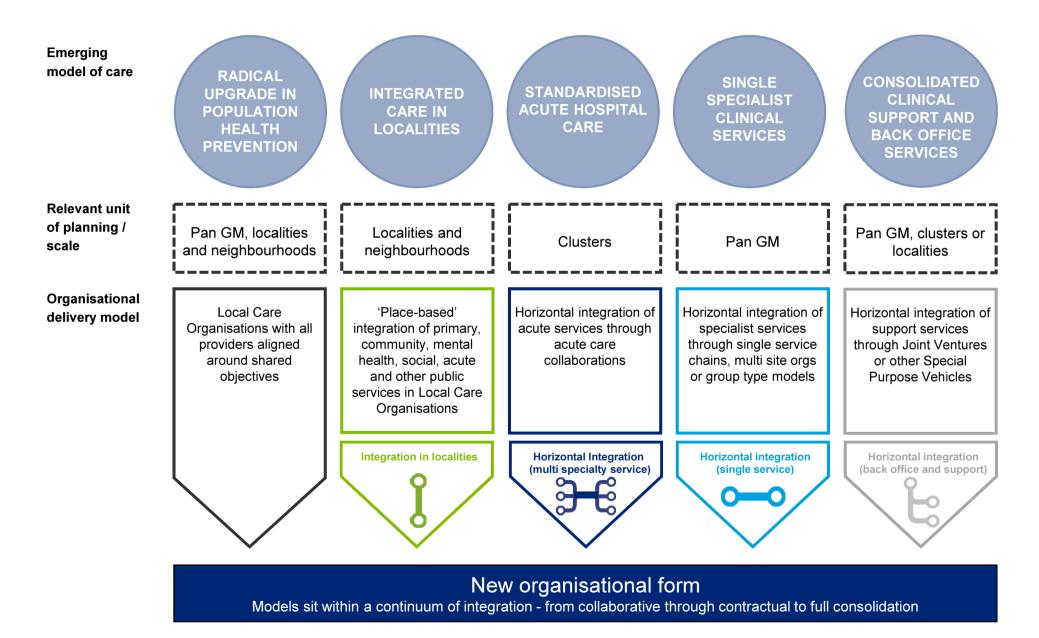
& SUPPORT A new model of care closer to home that includes scalable evidence based models for integrated primary, acute, community, mental health and social care. Key features will be targeted case management of the population most in need delivered by upskilled multidisciplinary teams, together with streamlined discharge planning in order to reduce the demand placed on acute hospitals. STANDARDISING ACUTE HOSPITAL CARE The creation of "single shared services" for acute hospital services and specialist services to deliver improvements in patient outcomes and productivity through the establishment of consistent and best practice specifications that decrease variation in care and enabled by the standardisation of information management and technology.

STANDARDISING CLINICAL SUPPORT AND BACK OFFICE SERVICES The transformational delivery of clinical support and back office services at scale across GM, including the establishment of coordination centres to help navigate GM residents through our complex system to the right services.

#### ENABLING BETTER CARE

The creation of innovative organisation forms, new ways of commissioning, contracting and payment design and standardised information management and technology to incentivise ways of working across GM, so that our ambitious aims can be realised.

### It will be clear how we will work together to ensure we deliver on our potential

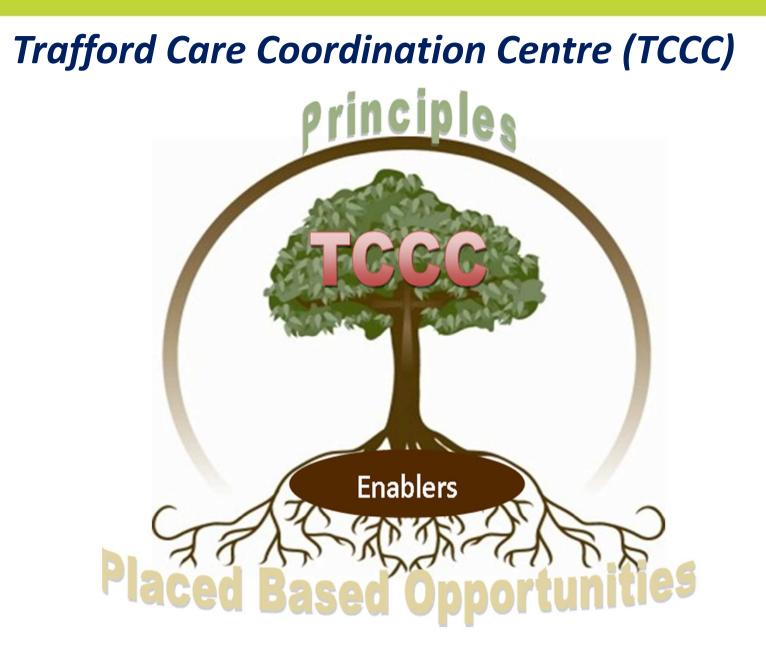


## <u>GM level</u>: Strategic Plan

- We are aiming for some big benefits for the people of GM 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
- We will engage with GM people, health and social care staff, employers and communities in the coming months to talk about how we work together to make these changes happen

## **Trafford Position**

- Financial modelling indicates a gap in funding in Trafford by 2020-21 of approximately £174m
  - Social Care £44.3m, CCG £26.6m and NHS Acute Providers £40m
- Across GM it will be c.£2bn if nothing changes from the current position
- Multiple challenges of austerity, rising population demands and public expectation
- Radical reform the health and social care system up to 2021 is required via:
  - A **new relationship** between Trafford Council and the Trafford Clinical Commissioning Group (CCG)
  - A truly place based, partnership approach to health and social care in Trafford.
- The changes will be driven through the revolutionary development which is the **Trafford Care Coordination Centre**, complemented by a range of other **transformational developments**:
  - Changes in the **primary care** system;
  - An **all age integrated health and social care** service delivery model for community based services;
  - Greater levels of independence for residents through a new model of social care;
  - Improved quality, access and range of support services for people with **learning disabilities**, autism and mental health needs, to support personal resilience;
  - More **effective use of resources** available to support health and social care in Trafford.



## What differences will I see in Trafford?



#### 7 day access to treatment and care



Ability to access the right information at the right time



Enabling people to retain their independence



Promotion & encouragement of selfreliance



Delivery of a financially sustainable and clinically safe health and social care economy

Deflection of activity from inappropriate sources to manage and reduce dependency

#### By 2020, you will be able to:

- Get to see a GP when clinically appropriate and be able to get support from adults or children's social care outside of core working hours
- Be able to find out what is going on in your community that you can join in with and the opportunity to buy services for yourself like equipment and support, through recommended suppliers
- Be able to access to services that keep you well at home, making sure you can still do the things you enjoy doing, with same day access to equipment and adaptations to help you at home and out and about
- Talk to experts once and through one contact point, with information provided through one website and one phone number and from staff trained to talk to people with a whole range of different issues
- See that community services will care for you at home as far as possible
- Be seen and treated in a modern purpose built premises which are welcoming and inviting and provide the opportunity to have all you need in one building
- See that the money available to Trafford is being used well to maintain public services that can last into the future.

## **Trafford Timeline**

- Trafford's initial consultation with stakeholders closed 18 Dec 2015
- GM Strategy published 18<sup>th</sup> December 2015 <u>http://www.gmhealthandsocialcaredevo.org.uk/</u>
- Stage 2 Consultation and revision to Locality Plans: Feb 2016
- Locality Plans signed off March 2016.



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