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Joint Forward Plan

The Joint Forward Plan sets out how we will deliver the Greater Manchester Integrated Care Strategy and what we will focus on.

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Introduction

The way in which health and care services are organised in every part of England changed on 1st July 2022, as new national legislation came into force. Greater Manchester (GM) is now an Integrated Care System (ICS) – a partnership of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in GM.

There is a requirement for all ICSs to develop a strategy. NHS organisations and local authorities must then have regard to this strategy when making decisions about the use of health and care resources. The five-year Strategy for the GM Integrated Care Partnership (ICP) was approved in March 2023 and can be found [here](#).

National guidance states that each Integrated Care Board (ICB) must publish a five-year Joint Forward Plan setting out how they propose to exercise their functions. This should include the delivery of universal NHS commitments address ICSs' four core purposes and meet legal requirements. The guidance encourages ICSs to develop the Joint Forward Plan as the delivery plan for the ICP Strategy – and this is the approach we have taken in Greater Manchester.

JFP Principles

Principle 1: Fully aligned with the wider system partnership's ambitions

Principle 2: Supporting subsidiarity by building on existing local strategies and plans as well as reflecting the universal NHS commitments

Principle 3: Delivery focused, including specific objectives

This plan describes how GM will achieve the outcomes described in the ICP strategy. Achieving these outcomes involves not only integrated health and care services but also action on the things that determine good lives. The strategy and plan describe a complex system which includes, but is not limited to, the activities under the direct influence (sourcing) of NHS Greater Manchester Integrated Care (NHS GM ICS). Our strategy describes our GM model for health, which builds c



strong partnerships already in place with wider public services, the VCSE and people and communities.

The Strategy was developed through extensive engagement with communities, partner agencies and staff, across all ten localities. Its development adapted to the feedback received and it reflects the needs and expectations of our communities. This Joint Forward Plan is built from the results of that engagement.

The GM Context

Greater Manchester is home to more than 2.8 million people with an economy bigger than that of Wales or Northern Ireland. Our population in the 2021 Census was estimated to be 2,867,800. This is an increase of 185,272 on the 2011 Census and represents a growth of 6.9% in ten years, higher than the growth across England and Wales (6.3%) over the same period.

There are ten councils in Greater Manchester: Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside, Trafford and Wigan. All are unitary authorities, eight are metropolitan borough councils and two, Salford and Manchester are city councils.

The Greater Manchester Combined Authority (GMCA) is made up of the ten Greater Manchester councils and the Mayor, who work with other local services, businesses, communities and other partners to improve the city-region as described in the Greater Manchester Strategy (GMS) [1].

The composition of our Partnership

The **Greater Manchester Integrated Care Partnership** (this is the name of our integrated care system) connects NHS Greater Manchester Integrated Care, the Greater Manchester NHS Trusts and NHS providers across the whole of primary care with the GMCA, councils and partners across the VCSE, Healthwatch and the trades unions.

Greater Manchester Integrated Care Partnership Board is a statutory joint committee made up of NHS Greater Manchester Integrated Care and all ten councils within Greater Manchester. It brings together a broad range of partners to support partnership working and it is the



responsibility of this Board to develop this Integrated Care Strategy – a plan to address the wider health, and care needs of the population.

NHS Greater Manchester Integrated Care, or NHS Greater Manchester (our integrated care board) is a statutory NHS organisation leading integration across the NHS, managing the NHS budget and arranging for the provision of health services in a geographical area. It supports ten place-based integrated care partnerships in Greater Manchester as part of a well-established way of working to meet the diverse needs of our citizens and communities.

Within Greater Manchester we have arrangements for providers to work together effectively at scale, including:

The Greater Manchester Provider Federation Board (PFB): a membership organisation made up of the eleven NHS trusts and foundation trusts who provide NHS funded services across Greater Manchester and East Cheshire. It includes the NHS providers of 111, 999, patient transport services (PTS), community mental health and physical health services and hospital mental health and physical health services.

The Greater Manchester Primary Care Board (PCB) has been supporting collaboration and integration since 2015 and will continue to support the delivery of outcomes at all levels of, and across, the system, through its various programmes and its work with all 67 Primary Care Networks[2] (PCNs) in Greater Manchester.

Greater Manchester Directors of Adults' and Children's Social Care collaborating to support transformation of social care at scale. For adult social care this also includes joint working with the Greater Manchester Independent Care Sector Network.

Voluntary, Community and Social Enterprise (VCSE) sector providers are part of a three-way agreement (the VCSE Accord) between the GMCA, NHS Greater Manchester and the VCSE Sector represented by the Greater Manchester VCSE Leadership Group, based on a relationship of mutual trust, working together, and sharing responsibility, and providing a framework for collaboration. The VCSE Leadership Group has also established an Alternative Provider Federation as a partnership of social enterprise and charitable organisations operating at scale across Greater Manchester. It provides an



infrastructure for alternative providers to engage with NHS Greater Manchester on a Greater Manchester footprint.

What the Data is Telling Us

The Greater Manchester Integrated Care Partnership Strategy gives a comprehensive picture of the data about our system. This includes:

- Demographic information
- Information on inequalities
- Demand on health and care services
- The financial picture
- Workforce pressures

We have also drawn on our locality plans and local Health and Wellbeing Strategies which together identify the needs of our population and the plans in each locality to address these, aligned with our strategy and this plan (see section 10.5)

What residents are telling us

We carried out a major engagement exercise 'The Big Conversation' to inform the development of our ICP Strategy and this plan.

The Big Conversation had two phases. Phase one ran between March and May 2022 with the aim of consulting on the proposed vision and aims that had been suggested by the ICP leaders following a stakeholder engagement event they took part in. 1,332 people gave their views and consensus was most respondents agreed with the proposed aims and visions.

Phase two ran in October 2022 with the aim of ensuring the GM ICP had the insight it needed to be able to understand what matters most to communities across all ten localities – to help shape the priorities and actions for the strategy. Find out more about the Big Conversation.

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Our Strategy

Overview

The Integrated Care Partnership Strategy outlined the key challenges facing the Greater Manchester health and care system:

How to continue the improvements already made in GM's approach to integrated care and population health improvement

The wider influences on health and good lives

Economic inclusion

Access to services, operational pressures and increasing demand

Health outcomes and health inequalities

The challenge of financial sustainability

The Strategy is clear that we must both meet these immediate pressures and continue to address their underlying causes through improving the health of our population. The missions in the strategy were developed to ensure a recognition of these challenges.

This Joint Forward Plan will describe how we will realise these aims over the next five years – with a greater emphasis on years one to three. We will revise and update this plan each year. The Plan covers all ages as we support people to start, live and age well.

Our vision and outcomes

As partners in Greater Manchester, we share the Greater Manchester Strategy (GMS) vision of wanting Greater Manchester to be a place where everyone can live a good life, growing up, getting on and growing old in a greener, fairer more prosperous city region.

For the Greater Manchester Integrated Care Partnership, this means we want to see a Greater Manchester where:

Everyone has an opportunity to live a good life

Everyone experiences high quality care and support where and when they need it



Everyone has improved health and wellbeing

Health and care services are integrated and sustainable



The Greater Manchester Model for Health and Wellbeing

Underpinning all our work is the Greater Manchester Model for Health and Wellbeing. This shows how we work with communities to protect against and prevent poor health and ensure support is available before crises occur to reduce demands on formal NHS and social care services. It is a social model for health and wellbeing with people and communities at its heart. It recognises that Greater Manchester will make the most progress in improving health if steps to tackle the social causes of health complement our clinical interventions.

Our challenge is that this Model is not universally realised across Greater Manchester. Our aim through the strategy and this delivery plan is to confirm the actions and approaches necessary to achieve this and maximise the efficiency and effectiveness of how we work together to improve our outcomes.

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What we will do – our missions

Our missions

Our strategy sets out the following missions in response to the current challenges, within the context of our vision and outcomes

Strengthening our communities

We will help people, families and communities feel more confident in managing their own health and wellbeing. We will act on this with a range of programmes, including working across Greater Manchester to support communities through social prescribing, closer working with the VCSE and co-ordinated approaches for those experiencing multiple disadvantages.

Helping people stay well and detecting illness earlier

We will collaborate to reduce smoking rates, increase physical activity, reduce obesity and drug and alcohol dependency. We also want to c



more to identify and treat high blood pressure, high cholesterol, diabetes, and other conditions which are risk factors for poor health. Working in partnership and with targeted interventions, we will embed a comprehensive approach to reducing health inequalities.

Helping people get into, and stay in, good work

One of the purposes of Integrated Care Systems is to support wider social and economic benefits from NHS investment. We will act on this by expanding our Work and Health programmes, working with employers on employee wellbeing, through the Greater Manchester Good Employment Charter[3] and developing social value through a network of anchor institutions[4].

Recovering core NHS and care services

We will work to improve ambulance response and A&E waiting times, reduce elective long waits and cancer backlogs, improve access to primary care services and core mental health services, improve quality and reduce unwarranted variation for adults and children alike. Consistent delivery of NHS constitutional standards is a priority as our system recovers.

Supporting our workforce and our carers

We will promote integration, better partnership working and good employment practices, as well as supporting our workforce to be well and addressing inequalities faced in the workplace. We want more people choosing health and care as a career and feeling supported to develop and stay in the sector. We will consistently identify and support Greater Manchester's unwaged carers.

Achieving financial sustainability

Financial sustainability – 'living within our means' – requires a focus on financial recovery of the health system to achieve a balanced position. We will identify the main reasons for financial challenges in our system, and implement a system wide programme of cost improvement, productivity, demand reduction and service transformation. Our work needs to address the current significant challenges we face across health and social care as well as taking the steps to make our system



For each of the missions, we have set out the key areas of focus and the actions to deliver our vision and outcomes. These are described in greater detail in the next six chapters of this document. We have set out the accountability for the delivery of the missions. We describe this as:

Delivery Leadership – the board/organisation leading change and improvement in the relevant part of the system. This recognises that the key responsibility for bringing together and driving delivery will sit with Locality Boards, providers, and provider collaboratives

System Leadership – This recognises the board/group accountable for creating the system-wide conditions, frameworks, and standards to enable delivery

The proposals on accountability in this document will be revisited as part of the leadership and governance review that took place in the first quarter of 2023/2024. We expect to complete the process of implementing the recommendations by October 2023.

Our ways of working

The way that we work together will play an important part in achieving our vision through our missions. To transform public services and integrate care we need to change the way we work with communities and fundamentally challenge our approaches to delivery. These ways of working run through all our missions.

Behaviours:

Understand and tackle inequalities

We will take action at individual, team, organisation, and system levels, informed by data, to understand and tackle inequalities.

Share risk and resources

We will set out our expectations of each other, share data effectively, support joint working with shared resource and create a culture of collaboration. This must happen at every level and in every place.

Involve communities and share power

We will consistently take a strengths-based approach with co-design, co-production and lived experience as fundamental ingredients.



Test, adopt, adapt

We will share best practice effectively, test and learn, and celebrate



success, with supportive governance and resources. Adapt and implement best practice locally, in organisations and across systems.

Be open, invite challenge, take action

We will be open, honest, consistent and respectful in working with each other. Work on the boundaries and differences that we have in a constructive way, to support effective change.

Names not numbers

We will ensure we all listen to people, putting them at the centre, and personalising their care.

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Strengthening our communities

We will help people, families and communities feel more confident in managing their own health. Our approach recognises that the organisation of the delivery of health and care services is only one of a range of contributors to the health and well-being of residents. The quality of housing, the availability of quality work, the extent to which residents are connected to their communities, and whether people feel safe also make a significant contribution.

Being deprived of these helps create and exacerbate the persistent health inequalities we see in many communities in Greater Manchester. Tackling these issues will play a key part in securing long term stability for our system – principally through keeping people well and independent in their homes and communities and reducing demand on expensive, acute services.

Our approach to this mission is underpinned by the Greater Manchester People and Communities Framework which defines our strategic approach to public engagement and involvement including key principles and commitments that support our ways of working.



Locality Boards

System Leadership:

Population Health Boards

Areas of focus and actions:

1. Scale up and accelerate delivery of person-centred neighbourhood model

Continue to develop Live Well and Social Prescribing

Continue to Embed Creative Health Approaches

Enhance the role of NHS GM in tackling poverty as a driver of poor health

Expand community-based mental health provision

Living Well at Home

Take an inclusive approach to digital transformation

2. Develop collaborative and integrated working

Embed the VCSE Accord

Deliver a GM-wide consolidated programme for those experiencing multiple disadvantage

Embed the GM Tripartite Housing Agreement

Giving every child and young person the best start in life

Ageing Well

Increase identification and support for victims of violence

3. Develop a sustainable environment for all

Delivering our Green Plan

[5] 2023/24 is the final year of Mental Health Long Term Plan Indicators and we will review the metrics in this plan as the new national indicators are published.



Area of Focus: Scale up and accelerate delivery of person-centred neighbourhood model



Area of Focus: Develop collaborative and integrated working



Area of Focus: Develop a sustainable environment for all



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Helping people stay well and detecting illness earlier

There is a strong rationale for the NHS to increase its focus on prevention and improving population health outcomes. For the past decade, improvements in life expectancy and healthy life expectancy have stalled, and inequalities have widened.

Life expectancy and healthy life expectancy for people born in GM is significantly lower than the England average. Importantly, much of the burden of poor health and early death (borne disproportionately by most deprived and marginalised communities) can be attributed to



conditions that are preventable through coordinated action across the health and care system.

Key details

Delivery Leadership:

Locality Boards

System Leadership:

Clinical Effectiveness and Governance Committee (CEG); Population Health Board

Areas of focus and actions:

1. Tackling inequalities

Implementing a GM Fairer Health for All Framework

Reducing health inequalities through CORE20PLUS5 (adults)

Equity in access to care and improved experience and outcomes for all children and young people (CORE20PLUS5 clinical priorities)

Implementing GM Women's Health Strategy

2. Supporting people to live healthier lives

A renewed Making Smoking History Framework

Reducing Harms from Alcohol

Enabling an Active Population

Promoting Mental Wellbeing

Food and Healthy Weight

Improving Sexual Health Services

Eliminating New Cases of HIV and Hepatitis B and Hepatitis C

Increasing the uptake of vaccination and immunisation

3. Upscaling secondary prevention

Early Cancer Diagnosis

Early detection and prevention of cardiovascular disease

Early diagnosis of Respiratory Conditions through Quality Assured

Spirometry



Early detection of unmet health needs for those living with Learning Disability and those with Severe Mental Illness

4. Living well with long-term conditions

Managing Multimorbidity and Complexity

Optimising Treatment of long-term conditions

Expansion of the Manchester Amputation Reduction Strategy (MARS) across NHS GM

The GM Dementia and Brain Health Delivery Plan

Taking an evidenced based approach to responding to frailty and preventing falls

Anticipatory Care and Management for people with life limiting illness

The complexity and breadth of activity that is required to drive change through prevention and early detection is set out in our GM Framework for Prevention below:

For the purposes of the framework, we have used the broader definition of secondary prevention, used by the UK chief medical officers, to include “evidence based, preventive measures to help stop or delay disease, taken during an interaction between an individual patient and a clinician” [8].

Our framework has four distinct areas of focus:

Tackling inequalities and reducing unwarranted variation through Core20Plus5 and the GM Fairer Health for All Framework

Supporting people to live healthier lives by implementing comprehensive approaches to tackling behavioural risk factors for illness

Upscaling secondary prevention across the NHS (including the early identification of risk and diagnosis of illness, and the effective management to prevent progression).

Supporting people to live well with long term conditions through the e-able, effective, and efficient management of diagnosed health conditions



We need to put in place more upstream models of care and integrated neighbourhood models that better address the needs of those at higher risk of illness, and those not currently in contact with services. This will require increased population health management capability.

Secondary prevention must be an integral part of all patient care pathways. All medical and allied professionals have an opportunity to 'make every contact count'. Prevention activities also need to be extended to population groups with historically low uptake, and those not in contact with NHS services, to ensure delivery within communities and neighbourhoods.

As set out in the GM Prevention Framework, the NHS also has an important role to play in working across the system with partners to address the root causes of ill health (relating to factors such as poverty, education, work, and housing), and to shape GM as a place that is conducive to good mental and physical health.

Area of Focus: Tackling health inequalities



Area of Focus: Supporting People to Live Healthier Lives



Area of Focus: Upscaling Secondary Prevention



Area of Focus: Living Well with long-term conditions



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Helping people get into, and stay in, good work

One of the purposes of Integrated Care Systems is to support wider social and economic benefits from NHS investment. We will act on this by enhancing the Education, Work and Skills system, working with employers on improving the quality of work and employee wellbeing through adoption of the GM Good Employment Charter and developing social value through our network of anchor institutions.

Key details

Delivery Leadership:

Locality Boards

System Leadership:

Population Health Board; GM Good Employment Charter Board, GM Employment and Skills Advisory Board

Areas of focus and actions:

1. Enhance Scale of Work and Health Programmes

Expansion of our Working Well System

2. Develop Good Work



Working with employers to deliver GM Good Employment Charter



3. Increase the contribution of the NHS to the economy

Developing the NHS as an anchor system

Implementing the Greater Manchester Social Value Framework

The Integrated Care Partnership and the Combined Authority have been able to draw from shared evidence generated through publications such as Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives (2021), the GM Independent Prosperity Reviews (2019 and 2022) and the Greater Manchester Local Industrial Strategy (2019) which all reinforce the connection between health and an inclusive economy.

Area of Focus: Enhance scale of work and health programmes



Area of Focus: Develop good work



6.3 Area of Focus: Increase the contribution of the NHS to the economy



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Recovering core NHS and care services

Improving access to high quality, core services and reducing long waits (for both adults and children) is the main issue raised by Greater Manchester residents participating in the Big Conversation and this will be delivered through our approach to the recovery of services. The impact of the COVID-19 pandemic was profound and exacerbated many of the challenges which were already influencing delivery of core health and care services. We will strive to return to consistent delivery of NHS constitutional standards and ensure that our system is well-placed to respond to national strategy and frameworks on core service delivery.

Key details

Delivery Leadership:

Locality Boards and Provider Federation Board

System Leadership:

System Boards; Finance and Performance Recovery Board

Areas of focus and actions:

1. Improving urgent and emergency care and flow

Access to urgent care in the community

Admission/Attendance Avoidance

Improving discharge

Increasing ambulance capacity

Improving emergency department processes


2. Reducing elective long waits and cancer backlogs, and improving performance against the core diagnostic standard

Integrated Elective Care

Improving productivity and efficiency

Improving utilisation of the Independent Sector

Improving how we manage our wait list

 Prioritising children and young people's elective services
Reducing waiting times in cancer



Diagnostics

3. Improving service provision and access

Making it easier for people to access primary care services, particularly general practice

Digital transformation of primary care

Ensuring universal and equitable coverage of core mental health services

Digital transformation of mental health care

4. Improving quality through reducing unwarranted variation in service provision

Improving quality

NHS at Home – including Virtual Wards

5. Using digital and innovation to drive transformation

Implementation of Health and Social Care Digital Strategy

Driving transformation through research and innovation

6. System Resilience and Preparedness

Supporting System Resilience

Area of Focus: Improving urgent and emergency care and flow



Area of Focus: Reducing elective long waits and cancer backlogs, and improving performance against the core diagnostic standard ↓

Area of Focus: Improving service provision and access ↓

Area of Focus: Improving quality through reducing unwarranted variation in service provision ↓

Area of Focus: Using Digital and Innovation to Drive Transformation ↓

Area of Focus: System Resilience and Preparedness ↓

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Supporting our workforce and our carers

We will promote integration, better partnership working and good employment practices, as well as supporting our workforce to be well and addressing inequalities faced in the workplace. We want more people to choose health and care as a career and to feel supported to develop and stay in the sector.

Key details

Delivery Leadership:

NHS GM People & Culture Function, NHS GM, NHS Trusts, Primary Care providers, Local Authorities, Social Care Providers, VCSE

System Leadership:

GM People Board

Areas of focus and actions:

1. Workforce Integration

Enable leaders and staff to work across traditional boundaries to support service integration

Share best practice and develop tools to support a dynamic system culture

2. Good Employment

Increase in Good Employment Charter Membership and payment of Real Living Wage

Improve access to staff benefits and flexible working

Share best practice and resources to support managers

3. Workforce Wellbeing

Take action on the cause of staff sickness and improve wellbeing support

4. Addressing Inequalities



Building a leadership culture committed to addressing health inequalities



Adapt the recruitment process to provide alternative entry routes for diverse talent

5. Growing and Developing

Develop our Greater Manchester careers approach to attract and support career development

Develop and deliver the Greater Manchester retention plan

Embrace digital innovation to improve the way we work – starting with HR digitisation

6. Supporting Carers

Provide more consistent and reliable identification and support for Greater Manchester's unwaged carers

We have set out a shared ambition for the health and care workforce in our People and Culture Strategy 2022-2025. We await the publication of the national, long-term workforce plan (expected summer 2023) and will review our plans against this.

Area of Focus: Workforce integration



Area of Focus: Good Employment



Area of Focus: Workforce Wellbeing



Area of Focus: Addressing Inequalities



Area of Focus: Growing and Developing



Area of Focus: Supporting Carers



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Achieving financial sustainability

Financial sustainability – ‘living within our means’ – requires an initial focus on financial recovery to achieve a balanced position. We will identify the main reasons for financial challenges in Greater Manchester, and implement a system wide programme of cost improvement, productivity, demand reduction and service transformation.

The Greater Manchester system has both an efficiency and a productivity challenge. NHS GM inherited a system structural budget deficit (commitments over revenue) of over £500 million (out of a total budget of £6.5 billion) on its establishment on 1st July 2022. This reflects the ongoing cost of additional resources (mainly workforce) recruited during the COVID-19 pandemic. One of the national requirements of an ICB is to bring the system into balance.



Key details

Delivery Leadership:

Locality Boards; PFB

System Leadership:

Finance and Performance Recovery Board

Areas of focus and actions:

1. Finance and Performance Recovery Programme

System recovery programme based on drivers of operational and financial performance

2. Developing Medium Term Financial Sustainability Plan

Development of three-year financial plan

Area of Focus: Finance and Performance Recovery Programme ↓

Area of Focus: Securing Long-Term Financial Sustainability ↓

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Performance Framework



Assurance and Governance Arrangements



Commissioning



Our Equality Objectives



Locality plans



Implementing this Plan – Next Steps



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How this plan addresses the statutory requirements for a JFP

The legislative requirements for the JFP[17] – which relate to the statutory responsibilities of the ICB – are summarised below, along with how they are covered in this plan.

Legislative requirements

Describing the health services for which the ICB proposes to make arrangements

Covered particularly in our missions for:

- Helping people stay well and detecting illness earlier
- Recovering core NHS and care services
- Supporting our workforce and carers

Duty to promote integration

As part of a mature partnership model in GM, working across sectors, this plan ensures that the ICB develops activities and works in ways which promote and enable integration. Going beyond the legislative requirements, the integrated approaches adopted in GM ensure that health services, social care and health-related services are designed and delivered in ways which align to support attainment of the whole systems shared outcomes and commitments.

Duty to have regard to wider effect of decisions

The outcomes we have defined through the strategy and that will be delivered through this plan, have been developed in ways which ensure we are clear on the impacts of our decisions, and responsive to the 'triple aims' of (a) health and wellbeing of the people of England (including by reducing inequalities with respect to health and wellbeing), (b) quality of healthcare services for the purposes of the NHS (including by reducing inequalities with respect to the benefits obtained by individuals from those services) and (c) sustainable and efficient use of resources by NHS bodies.

Financial duties

Delivered in our mission for Achieving financial sustainability.



Implementing any JLHWS

Our locality (health and care) and Health and Wellbeing Plans are all linked from this plan (How we will deliver) and summarised in Appendix 2. They are aligned with this plan.

Duty to improve quality of services

Covered in our missions for:

- Helping people stay well and detecting illness earlier, and
- Recovering core NHS and care services. Our quality strategy is a specific action in this mission.

Duty to reduce inequalities

The activities we deliver through this plan seek to reduce unwarranted inequalities in outcomes, service experience and access for all people and parts of Greater Manchester, as described throughout. One of our ways of working (Strengthening our communities, Area of focus: Develop collaborative and integrated ways of working) specifically emphasises this duty.

Duty to promote involvement of each patient

In addition to this being one of our ways of working (Strengthening our communities, Area of focus: Develop collaborative and integrated ways of working), it is also a fundamental element of our Model for Health and Wellbeing. It is also a focus of our missions for:

- Strengthening our communities, and
- Helping people stay well and detecting illness earlier.

Duty to involve the public

The strategy was developed through extensive consultation and engagement with communities, partner agencies, practitioners and staff, across all ten localities (section 2.4). The process of development was iterative, developing and adapting to the feedback received and ensuring the strategy and this plan are reflective of the needs and expectations of our communities.

☐ Patient choice

This is implicit in our mission for recovering core NHS and care services.



Duty to obtain appropriate advice

As part of the network of governance which oversees and supports the delivery of this plan the ICB has access to and routinely draws upon appropriate advice and guidance from partners, stakeholders and experts.

Duty to promote innovation

Innovation is a specific action in the mission for Recovering core NHS and care services (Area of focus: Using digital and innovation to drive transformation), and draws on our assets in Health Innovation Manchester.

Duty in respect of research

Utilising the research expertise in our city region, and building on working relationships we already have, we will ensure our responses to these challenges are data driven, drawing on the best possible evidence to support the design and delivery of our actions, as described in "Area of focus: Using digital and innovation to drive transformation".

Duty to promote education and training

Covered in our mission for Supporting our workforce and our carers.

Duty as to climate change, etc.

As partners in Greater Manchester, we share the GMS vision of wanting Greater Manchester to be a place where everyone can live a good life, growing up, getting on and growing old in a greener, fairer more prosperous city region. The NHS contribution to this (Area of Focus: Develop a sustainable environment for all) is an area of focus in our mission for Strengthening our communities.

Addressing the particular needs of children and young persons

This is a specific action in our mission for Strengthening our communities and is also covered in a number of other sections including in the mission, Helping people stay well and detecting illness earlier, Area of Focus: Tackling health inequalities and Area of Focus: Supporting People to Live Healthier Lives.

A specific action in our mission for strengthening our communities, and part of a GM approach to violence reduction.

Engagement with Health and Wellbeing Boards

All our Health & Wellbeing Boards (HWBs) have been consulted on the development of the JFP – a draft version of which was circulated to the 10 HWBs for review at the end of May with a set of key questions

This was followed up with an invitation to attend the respective H&WB meetings to present on the JFP and discuss the process by which local Health and Wellbeing strategies were utilised to support in the development of the JFP

Comments, amendments and additions were received from the ten HWBs – these were fully considered and where appropriate the JFP was revised accordingly.

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Appendix 2

Our locality plans [18]

Bolton



Bury



Manchester



Oldham



Rochdale



Salford



Stockport



Tameside



Trafford



Wigan



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Footnotes

[1] <https://aboutgreatermanchester.com/>

[2] Primary Care Networks involve GP practices working together with community, mental health, social care, pharmacy, hospital and voluntary services in their local areas in groups of practices

[3] <https://www.gmgoodemploymentcharter.co.uk/>

[4] <https://www.health.org.uk/publications/reports/building-healthier-communities-role-of-nhs-as-anchor-institution>

[5] 2023/24 is the final year of Mental Health Long Term Plan Indicators and we will review the metrics in this plan as the new national indicators are published

[6] A GM youth-led survey of young people's wellbeing and experiences

[7] Gender Based Violence Strategy – Greater Manchester Combined Authority (greatermanchester-ca.gov.uk)

[8] Restoring and extending secondary prevention | The BMJ

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C[18] Correct as of 31 May 2023

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