



TRAFFORD
COUNCIL



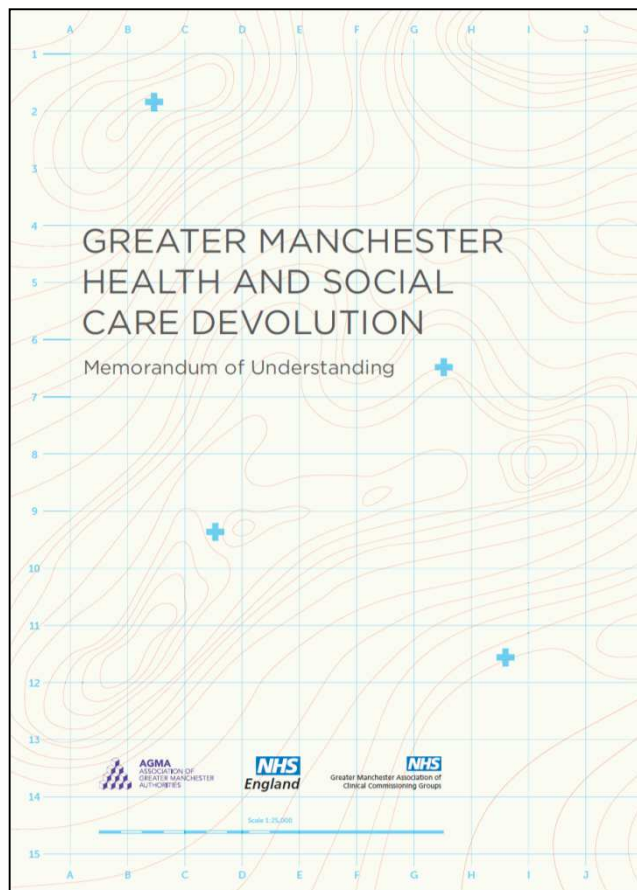
Health & Social Care Devolution: Progress Update

Health and Wellbeing Board

Sept 2015



The background to GM Devolution



- **Greater Manchester Devolution Agreement** settled with Government in November 2014, building on GM Strategy development.
- Powers over areas such as transport, planning and housing – and a new elected mayor.
- Ambition for £22 billion handed to GM.
- **MoU Health and Social Care devolution** signed February 2015: NHS England plus the 10 GM councils, 12 Clinical Commissioning Groups and NHS and Foundation Trusts
- MoU covers acute care, primary care, community services, mental health services, social care and public health.
- To take control of estimated budget of £6 billion each year from April 2016.
- Commitment in July 2015 budget to align the Spending Review process for health and social care to our Strategic Sustainability Plan

The vision for GM Devolution

To ensure the greatest and fastest possible improvement to the health and wellbeing of the 2.8 million citizens of Greater Manchester



Devolution isn't just about health & social care

The roots of poor health are found across society and the public service – we need to do more than just respond at the point of crisis. This requires integration of not just health and care, but contributing wider public services focussing on health, wealth and wellbeing

Worklessness & Low Skills	Children & Young People	Crime & Offending	Health & Social Care
<p>Long-term JSA claimants</p> <p>ESA claimants (WRAG)</p> <p>'Low pay no pay' cycles</p> <ul style="list-style-type: none"> Working Tax Credit claimants Low skill levels (vocational or academic) Insecure employment <p>NEET (Young People)</p> <p>Compounding factors:</p> <ul style="list-style-type: none"> Lone parents with children 0-4 Poor literacy and numeracy Poor social skills Low aspirations Living alone 	<p>Child in Need Status (CIN) / known to Children's Social Care</p> <p>Child not school ready</p> <p>Low school attendance & exclusions</p> <p>Young parents</p> <p>Missing from home</p> <p>Compounding factors:</p> <ul style="list-style-type: none"> Repeat involvement with social care LAC with risk of offending Poor parenting skills SEN Frequent school moves Single parents 	<p>Repeat offenders</p> <p>Family member in prison</p> <p>Anti-social behaviour</p> <p>Youth Offending</p> <p>Domestic Abuse</p> <p>Organised Crime</p> <p>Compounding factors:</p> <ul style="list-style-type: none"> Lost accommodation Dependent on service Vulnerability to sexual exploitation Missing from home Violent crime 	<p>Mental Health (including mild to moderate)</p> <p>Alcohol Misuse</p> <p>Drug Misuse</p> <p>Chronic Ill-health (including long-term illness / disability)</p> <p>Compounding factors:</p> <ul style="list-style-type: none"> Unhealthy lifestyle Social isolation Relationship breakdown / loss or bereavement Obesity Repeat self-harm Living alone Adult learning difficulties

What have we said we'll do in the MoU?

- Improve the health and wellbeing of all Greater Manchester people – of all ages
- Close the health inequalities gap faster within GM, and between GM and the rest of the UK
- Integrate physical health, mental health and social care services across GM
- Build on the Healthier Together programme
- Continue to shift the focus of care closer to homes and communities where possible
- Strengthen the focus on wellbeing, including a greater focus on prevention and public health
- Contribute to growth and connect people to growth, eg helping people get in to and stay in work
- Forge a partnership between the NHS, social care, universities and science and knowledge industries for the benefit of the population
- Make significant progress on closing the financial gap

Why do devolution?

- Devolving powers to GM will enable us to have a bigger impact, more quickly, on the health, wealth and wellbeing of GM people
- It will allow us to respond to the needs of local people by using their experience to help change the way we spend the money
- It will allow us to better co-ordinate services to tackle some of the major challenges supporting physical, mental and social wellbeing

How will we do this?

- By integrating our governance: being binding on all the partners, decisive and bold
- By integrating planning: working across CCGs, local authorities and trusts in our 10 areas to create aligned local plans feeding one GM strategic plan
- By integrating delivery: by doing best practice at pace and scale

Strategic plan

1. Strategic Direction

The Strategic Plan will set out the vision for the delivery of services within GM and what a sustainable approach would look like.

2. Locality & Sector Plans

The Strategic Plan will provide a framework to ensure the overall level of ambition is achieved and for the development of Locality Plans. Each area in GM will produce their own five year Strategic Plan for the five years from 2016/17.

3. GM Transformation Proposals

A key component of the Strategic Plan will be to identify new models of care/strategies and where transformation is needed

4. Financial Plan & Enablers

A GM Model will be developed enabling scenario planning for the significant changes of services that will be required. It will be capable of predicting the impact of new models of care and of locality and sector plans.

Outline GM Strategy to secure stability across our health and care system for the long term

Element	Description
Radical upgrade in prevention and public health	<ul style="list-style-type: none"> Galvanising GM and local work on the determinants of poor health Reducing variation in approaches for risk factors for early death and disease Developing a new social contract for GM improved self care and the contribution of people to support their communities
Building capacity in community assets	<ul style="list-style-type: none"> Supporting service users to connect with community resources and make their own contributions Building community capacity to respond to and meet these needs through enterprise development, volunteering, and community hubs Establishing a GM New Society Hub to provide focus, drive and coordination for the development of a new relationship across GM between citizen, state and society.
Transforming integrated community based care and support	<ul style="list-style-type: none"> Developing proactive, joined up care based in communities for patients with one or more long term condition Improving access to Primary Care services, seven days a week Developing new provider models blending assets across acute, primary, community and social care provision Wider Public Service Reform improving school readiness, tackling worklessness and addressing wider dependency
Safe transition to new models of hospital care	<ul style="list-style-type: none"> Adoption of over 500 quality and safety standards to secure reliable and effective care every time Combining medical teams from separate hospitals into Single Shared Services operating across Acute Medicine, Urgent & Emergency Care and General Surgery New models to manage variation in Specialist Care
Radical acceleration of discovery, innovation and spread	<ul style="list-style-type: none"> Establishing Health Innovation Manchester as our Academic Health Science System to accelerate the pace of innovation, and the ability to ensure reliable implementation of evidence based practice into the daily care of patients. Shortening and enriching the journey from ideas to adoption and thereby increasing the value GM brings to the health of our citizens and beyond, our economy, the impact of our research, our reputation and social value.

The Investment Fund

- The Greater Manchester Health and Social Care MoU signed on 27 February 2015 states that “We commit to the production, during 2015/16, of a comprehensive GM Strategic Sustainability Plan for health and social care. This aligned with the Five Year Forward View will describe how a clinically and financially sustainable landscape of commissioning and provision could be achieved over the subsequent five years, subject to the resource expectations set out in the Five Year Forward View appropriate transition funding being available and the full involvement and support of national and other partners.”
- It is important that this outline plan also demonstrates how fiscal neutrality can be achieved during the CSR period. The GM health and social care economy is not in financial balance and the gap is projected to widen. What this work will need to demonstrate is how additional one-off investment in the early years of the CSR period will enable the gap to be closed and financial balance to be achieved. By neutrality it is important that the ultimate saving between the projected deficit and achieving financial balance outweighs the level of one-off investment required.

Governance Structures

- It is widely recognised that key to achieving the scale and pace of reform that is required is the development of robust and inclusive governance.
- The governance that is being developed at GM level will be supplemented by increasingly integrated arrangements at a locality/district level.
- The pan GM governance that is being developed will be the first of its kind in the country.
- The MoU committed GM to have governance in place in shadow form from October 2015, with formal structures being in place from April 2016 that ensures all decisions about health and social in GM will be taken with GM.
- The governance that is being developed will focus on the creation of an inclusive GM Strategic Partnership Board, and a Joint Commissioning Board.

GM Strategic Partnership Board

- The Strategic Partnership Board will encompass the whole of the Greater Manchester health and social care economy. Its membership will include:
 - Greater Manchester Combined Authority
 - 10 AGMA local authorities
 - 12 CCGs
 - 15 NHS Trusts, Foundation Trusts, and NWAS
 - Greater Manchester Fire and Rescue Service
 - Greater Manchester Police and Crime Commissioner
 - NHS England
- It will also actively engage:
 - Monitor
 - Care Quality Commission (CQC)
 - Public Health England
 - Health Education England
 - Primary care, Third Sector, and patient voice representation (and discussions are ongoing to identify how they can be effectively and appropriately engaged).
- Its principle function will be to set the overarching strategic vision and priorities for the Greater Manchester health and social care economy.
- Uniquely, it is anticipated that it will provide a platform for decision making that includes all of the key stakeholders in Greater Manchester.

GM Joint Commissioning Board

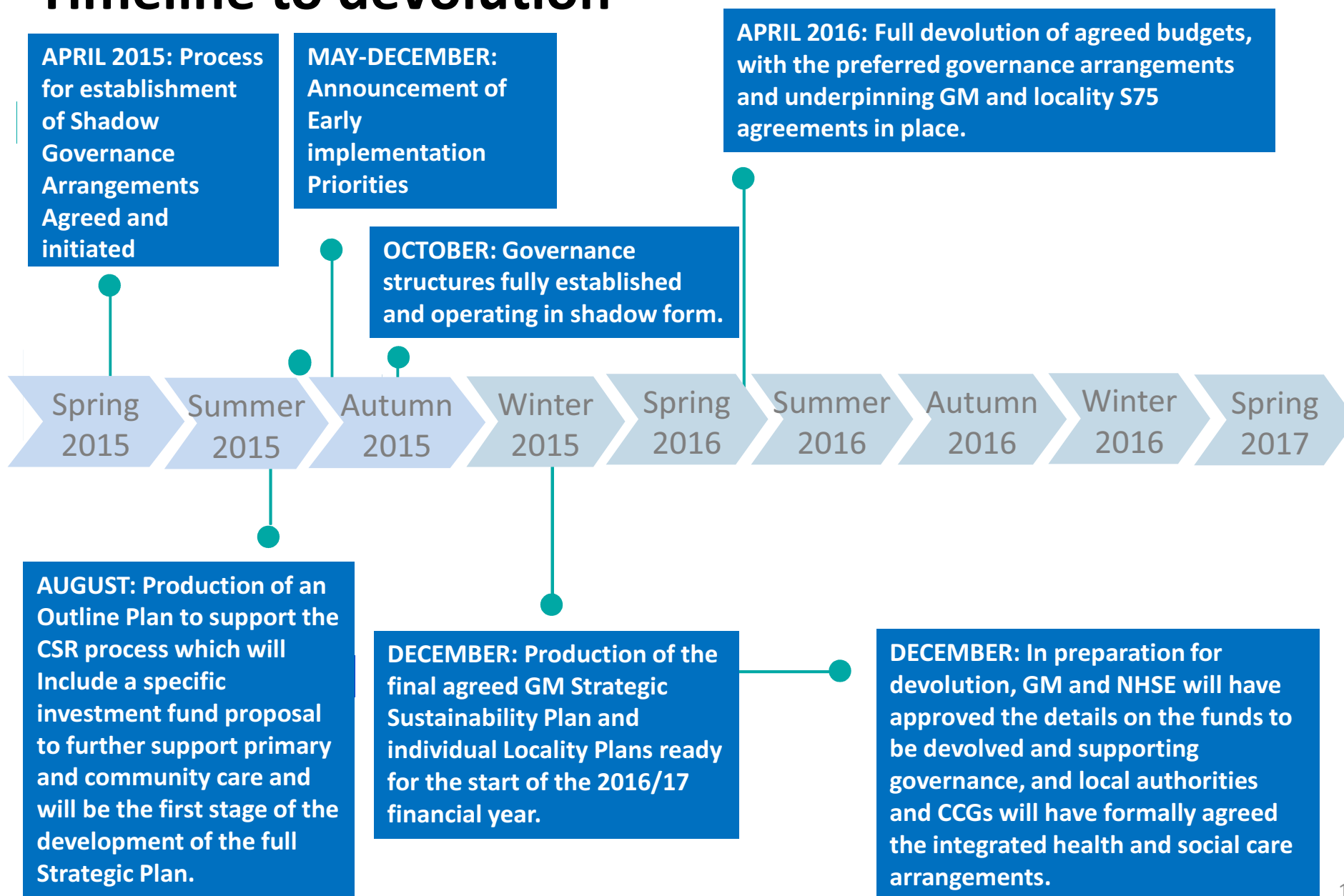
- The Joint Commissioning Board will potentially be the largest single commissioning vehicle in GM.
- It will not be responsible for the commissioning of those services that are delivered at a locality level. That function will remain at a local level, and be commissioned in a way that the locality best sees fit (this could be via an increasingly integrated arrangement.)
- It will be responsible for the commissioning of all services that fall within its scope on a GM footprint.
- It will be responsible for delivering those parts of the Strategic Plan that are to be delivered on a pan Greater Manchester footprint.
- The membership of the Joint Commissioning Board will include:
 - Greater Manchester Combined Authority
 - 10 AGMA local authorities
 - 12 CCGs
 - NHS England

Achieving Binding Provider Decision Making

Significant progress in the provider discussions on achieving sustainable agreements. The discussions involve all hospital, Mental Health, Community and Ambulance Trusts operating within GM. The discussions are developing approaches to:

- Collective decision making through “locked Gateways” with the alignment of regulators
- Incentives and penalties to underpin the operation of such joint arrangements
- Transparency of relevant planning information to inform agreements
- Overall governance through a Federation Board
- OD and Leadership development to help shape the culture and behaviours needed to make this work

Timeline to devolution

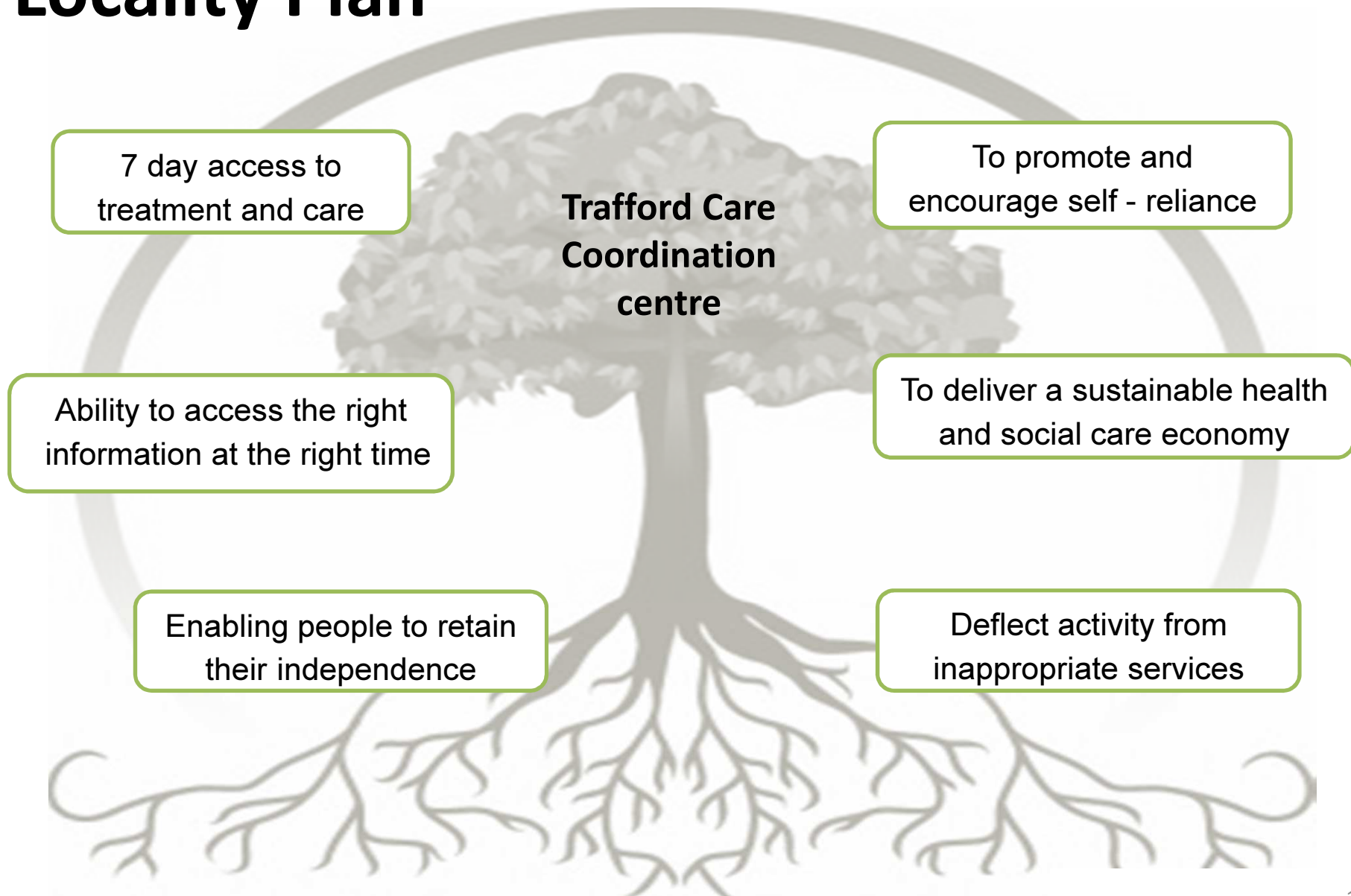


Trafford's Locality Plan for 2020 – progress to date

- Trafford Council and Trafford Clinical Commissioning Group have accountability for the delivery of Trafford's Locality Plan.
- A working group has been established to draft the Locality Plan and this is chaired by John Pearce, Acting Corporate Director for Children, Families & Wellbeing, as Trafford's nominated Senior Responsible Officer (SRO) for the delivery of the Plan.
- It is intended that the final plan will be creatively designed and engaging for the widest audience.
- The plan will articulate the health and social care vision for 2020 and how we will deliver our financial gap in funding.
- The Trafford Care Coordination Centre will be positioned as the 'big idea' and from this all other transformational developments will be positioned.



Locality Plan



Health and Social Care Transformation

The Locality Plan will set out the main areas for transformation across the health social care system and how it will change by 2020. The Trafford Care Co-ordination Centre will be the catalyst for system wide change will all other projects linking to it including;

- Primary Care access
- Healthier Together
- Integrated Locality Health and Social Care delivery
- Reshaping Care Programme
- Learning Disabilities
- Mental Health

Any further areas will be considered through the engagement process as the plan develops

Place Based Opportunities

It is important that the plan is able to explore the broader place based opportunities to improve health and well being outcomes for Trafford's population. The follow areas have been identified to date;

- Leisure and Physical Activity
- Housing
- Education and Skills
- Economic Growth
- Environment
- Asset Based Community models

Any further areas will be considered through the engagement process as the plan develops

Enablers

Whilst the plan is focused on the vision for Trafford in 2020 clearly there a number of key enablers that will underpin the plan;

- Finance
- Estates
- Information governance
- Workforce
- Patient and Service User Engagement
- Governance
- Public Sector Reform

It is proposed that the plan gives headline information across each of these areas with links to more detail

Locality Plan – Next Steps

- It is important that Strategic Partners contribute to the shape and content of the Locality Plan, in particular the *placed based opportunities*
- Engagement events are being planned in October 2015
- Strategic Partners and their representatives from the Trafford Partnership Executive, Health and Well Being Board and Children’s Trust will be invited.

