



Taking charge of our health and social care in Greater Manchester

January-March 2016



Our collective ambition for Greater Manchester

- GM has a history of ambition and cooperation
- City region to become a place which sits at the heart of the Northern Powerhouse
- Skilled, healthy and independent people are crucial to bring jobs, investment and prosperity to GM
- We know that people who have jobs, good housing and are connected to families and community stay healthier
- We need to take action not just in health and social care but across the whole range of public services so people can start well, live well and age well

GM Devolution – Background

- Greater Manchester Devolution Agreement settled with Government in November 2014. Powers over areas such as transport, planning and housing – and a new elected mayor
- Ambition for £22 billion to be handed to GM
- MOU Health and Social Care devolution signed February 2015: NHS England plus the 10 GM councils, 12 Clinical Commissioning Groups and 15 NHS and Foundation Trusts
- 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, primary care and other partners
- Local H&SC decision makers take control of estimated budget of £6 billion from April 2016

Devolution – Taking Charge in Greater Manchester

- 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 – 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'll have a £2 billion gap by 2021
- 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

Why do this – some GM facts

- More than two thirds of premature deaths in GM are caused by behaviours which could be changed
- More than a fifth of GM's 50-64 age group are out of work and on benefits, many because of ill health
- Bringing the employment rate for this age group up to the UK average would boost GM earnings by £813m and result in 16,000 fewer GM children living in poverty
- Nearly 25 per cent of the GM population have a mental health or wellbeing issue which can affect everything from health to employment, parenting and housing
- We spend more than £1 billion in GM on long term conditions linked to poor mental health and life expectancy for people with severe mental illness is 10-15 per cent shorter
- On any day there are 2,500 people in a hospital bed who could be treated at home or in the community
- Four out of ten GM children are not ready to start school when they're five-years-old; and four out of ten leave school with less than five GCSEs
- By 2021 there will be 35,000 people in GM living with dementia; more than 10,000 will have severe symptoms and need 24 hour care

Potential benefits

- 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
 - More children reaching a good level of social and emotional development with 3,250 more children ready for the start of school aged five
 - Improvement in school readiness rates by 5% in 5 years
 - A 9% uplift in employment outcomes for the long-term workless in GM
 - Parity of esteem for mental and physical health sufferers
 - Supporting people to stay well and live at home for as long as possible, with 2,750 fewer people suffering serious falls

2015 – much already achieved

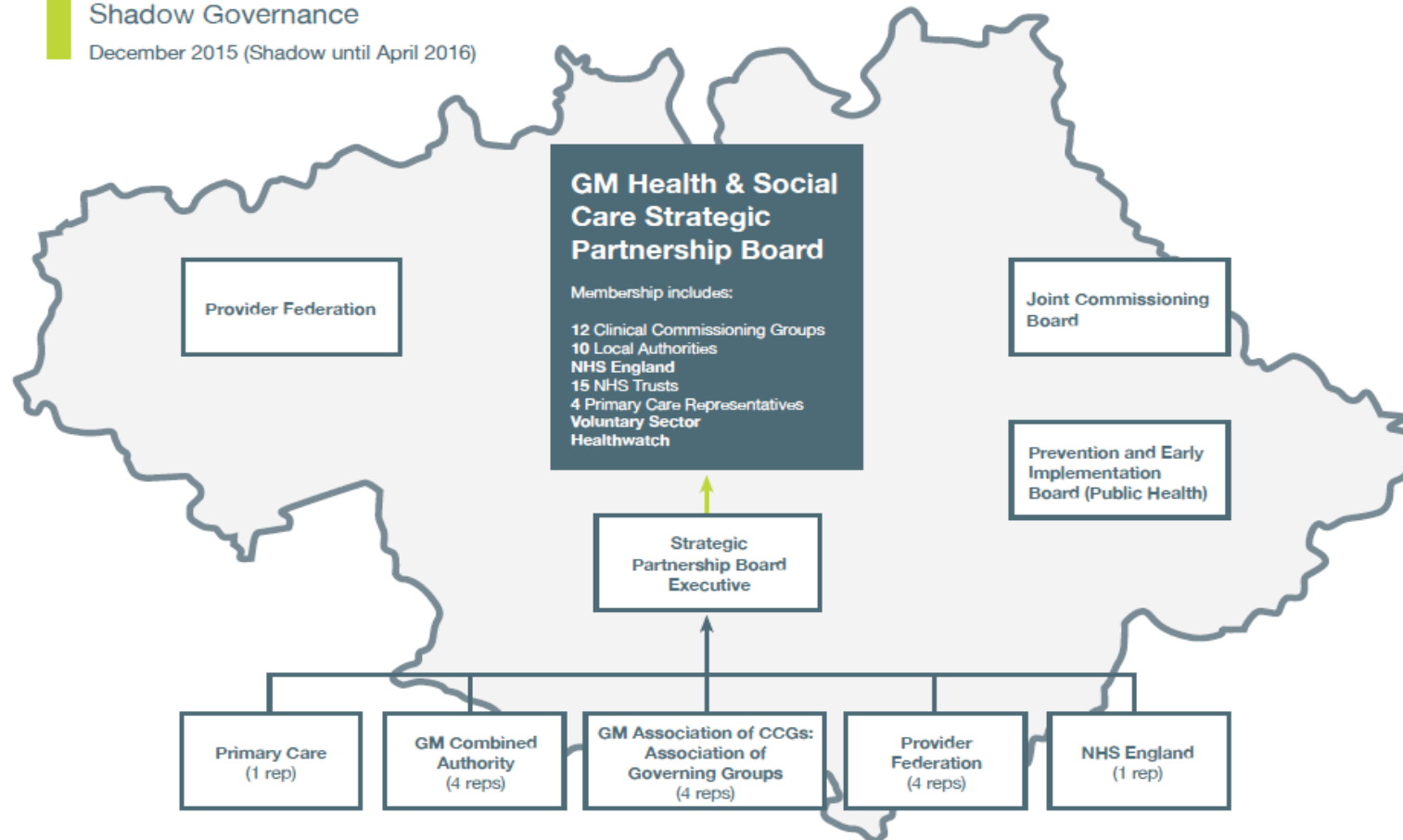
- Some notable successes:
 - By the end of December, hubs are operational in each CCG area, providing 7-day access for patients who need medical help across Greater Manchester with further hubs opening early 2016
 - Launched a new model of public health leadership – placing more emphasis on prevention and early implementation
 - Health Innovation Manchester – an innovative partnership with university/science experts
 - Healthier Together – Unanimous decision by 12 CCGs for four single services in GM
 - New vision to improve independence for people with learning disabilities across GM
 - New partnership, Dementia United, set to make whole of Greater Manchester more dementia-friendly.

Our shadow governance

Greater Manchester (GM) Health and Social Care Devolution

Shadow Governance

December 2015 (Shadow until April 2016)



Where are we focussing our efforts – our Strategic Plan

A fundamental change in the way people and our communities take charge of, and responsibility for, their own health and wellbeing



The development of **local care organisations**, 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 and innovation

Ten Locality Plans

Plans are being finalised locally...Contact your SRO for details



...within a GM wide framework.
These will include

- Financial plan
- Governance
- Enable implementation of locality plans
- Assure delivery of health and social care
- Commissioning
- Sponsor transformational projects
- Population involvement
- GM wide performance
- GM wide risk
- Working with regulators
- Public and political engagement

Where are we focussing our efforts?

A fundamental change in the way people and our communities take charge of, and responsibility for, their own health and wellbeing



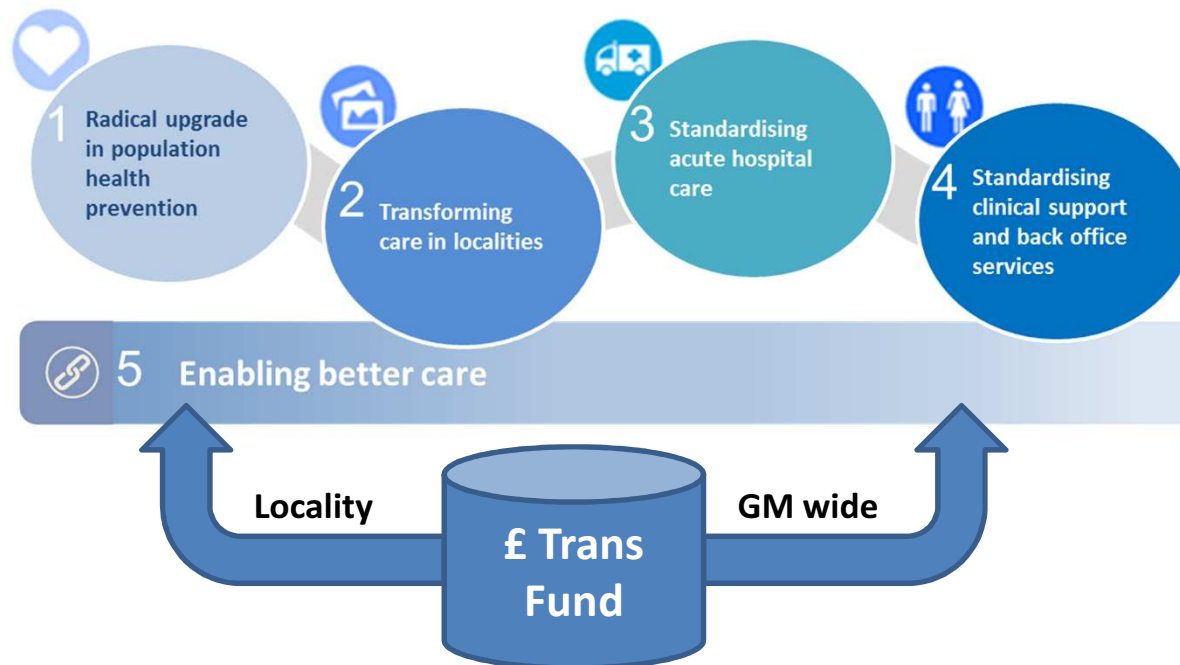
The development of **local care organisations**, where doctors, nurses and other health professionals come together with social care in teams, so when people do need support from public services it's largely in their community, with hospitals only needed for more specialist care

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

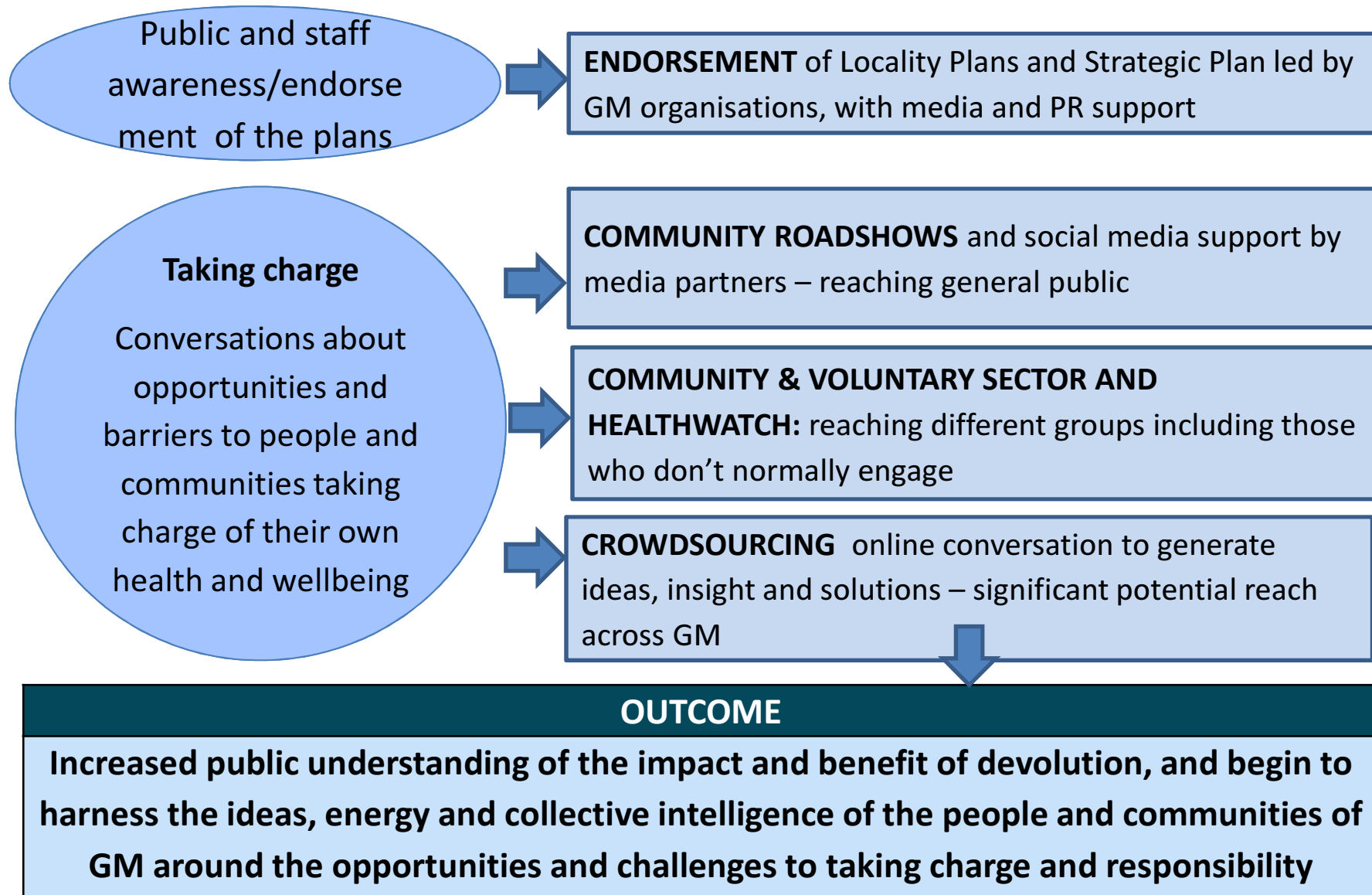
Other changes which will make sure **standards are consistent and high quality** across GM, as well as saving money, for example sharing some functions across lots of organisations, sharing and consolidating public sector buildings, investing in new technology, research and innovation

How will we pay for the changes?

- £450m has been earmarked to fund improvements in the big areas we are focusing on – known as the Transformation Fund.
- Effective and independent management of the Transformation Fund will be critical in ensuring the right projects are funded to deliver the agreed strategy.
- We are developing the process, but the guiding principle is that funding will be aligned to our strategic imperatives.



How will we engage with staff and the public?



April 1st 2016 – Go live

- Do you support the direction of the plan?
- How can you and your localities drive implementation?

E-mail: gm.devo@nhs.net

Website: www.gmhealthandsocialcaredevo.org.uk

Twitter: @GMHSC_Devo #takingcharge