



**Greater  
Manchester  
Health and  
Social Care  
Partnership**

---

**Bury Health & Wellbeing Board  
Warren Heppolette  
November 27th**

# Taking Charge in Context



## Our Aims – by 2021

- **More babies being born a healthy weight** (over 2,500g ) which makes a huge difference to their long term health
- **More children** reaching a good level of social and emotional development - **ready for school**
- **Fewer people dying** from cancer, heart and lung disease
- Supporting people **to stay well and live at home** for as long as possible.



## Value Proposition - Building on Real Progress

Early evidence is that devolved system is working

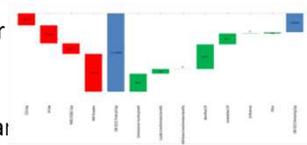
- Generated system surpluses over last 2 years, and on track at least to balance again this year
- Primary care extended access achieved
- Emergency bed days stabilised and now starting to turn downwards; delayed discharge rate almost halved
- Cancer survival rates improved almost to national average, best rated acute stroke services in country, positive elective waiting time performance
- Population health model is unique in country. Smoking rates currently reducing by 4x rate of average for country, school readiness improving, health & employment programme outperforming DWP national work programme, dementia diagnosis rates amongst highest in country
- Social care under-funded and started from very poor place but in 2 years we have increased number of care homes CQC rate good and outstanding from 55% to 74%
- Mental health – We are investing £134m. We met the national CYP and adult access standards last year with something to spare, we already have a schools programme and next month will become first place in country to publish CYP MH waiting times.
- Governance model means we can get the tough stuff done. Merger of UHSM and MFT took one year start to finish; through Salford Royal and Improvement Board took on Pennine Acute and eliminated all 13 'inadequate' services in 15 months.

# Where are we now?

If we refresh the picture today we can see how our starting position can be shown to have shifted.

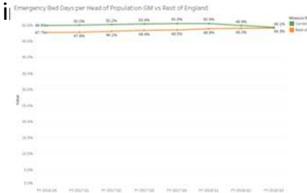
## Financial Management

We have generated system surpluses over last 2 years, and on track to at least balance again this year



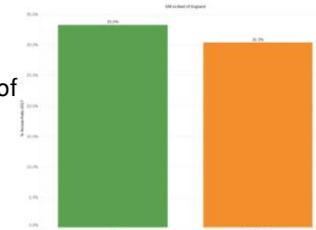
## Hospital Bed Days

Emergency bed days in GM have been held broadly stable in GM in early days of devo with signs of a more recent downturn



## Mental Health Access

We have met the 19/20 CYP access target a year ahead of schedule rising from 11.1% baseline to 33.3% in June '18



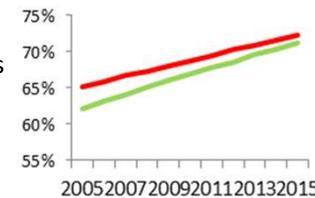
## A&E Attendance

We have tracked below the national growth level since devolution



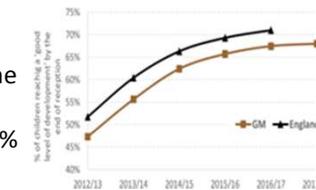
## Cancer Survival

We have improved cancer survival rates to almost national average



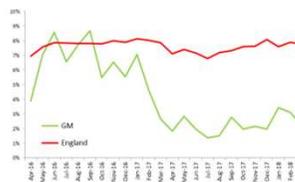
## Percentage of children achieving a good level of development

We have narrowed the gap to England year on year since the 2014 Devolution Agreement from 4.8% to 3.5%



## Delayed Transfers of Care

We have reduced delayed beds by 1.7% since devolution, compared to a growth seen nationally



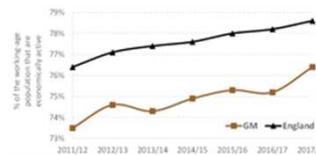
## Smoking Reduction

We are reducing smoking rates currently by 4x rate of average for country



## Reducing Worklessness

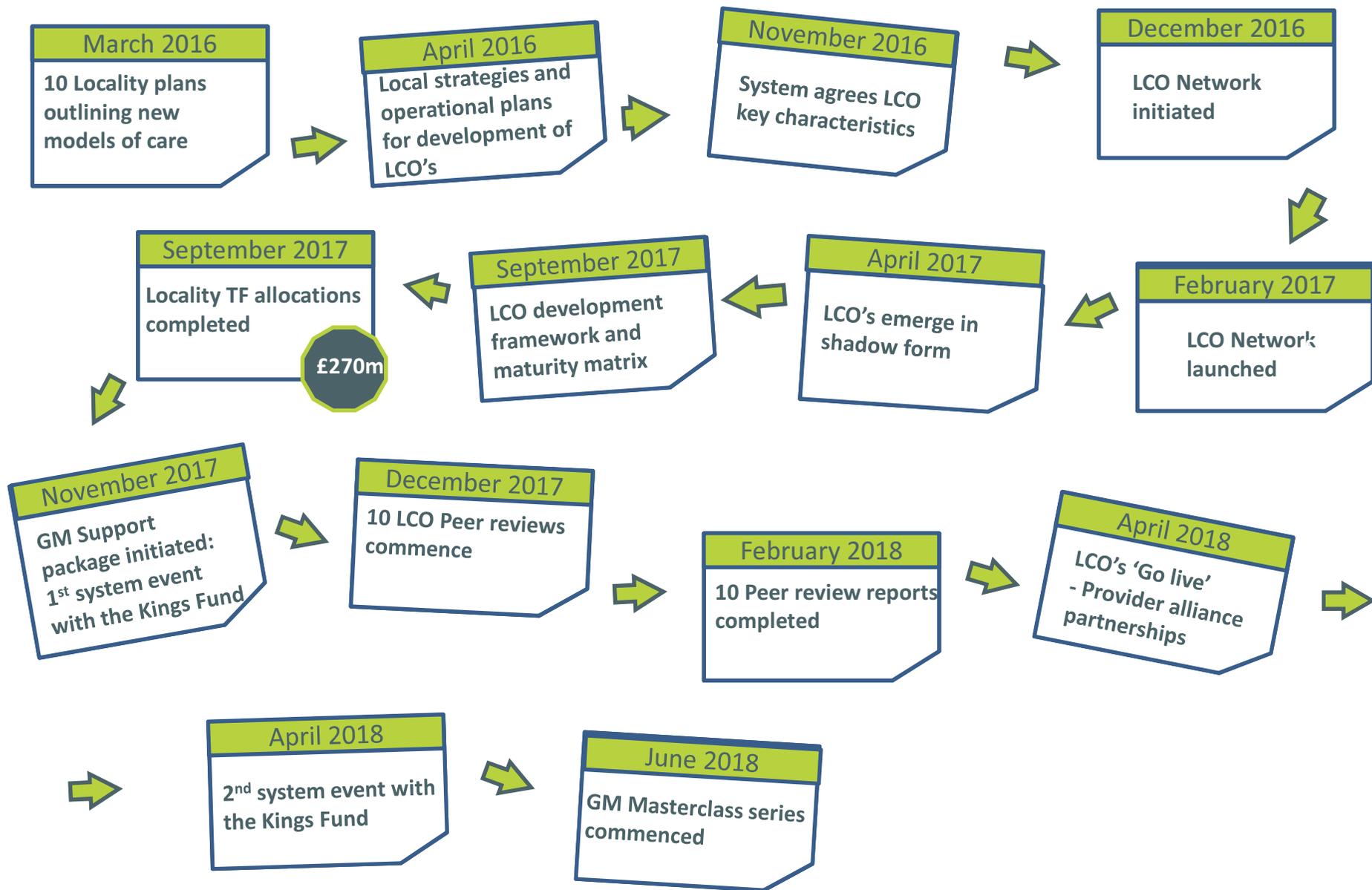
Over 3,200 long-term unemployed people have found work through Working Well, with the full programme already having paid for itself



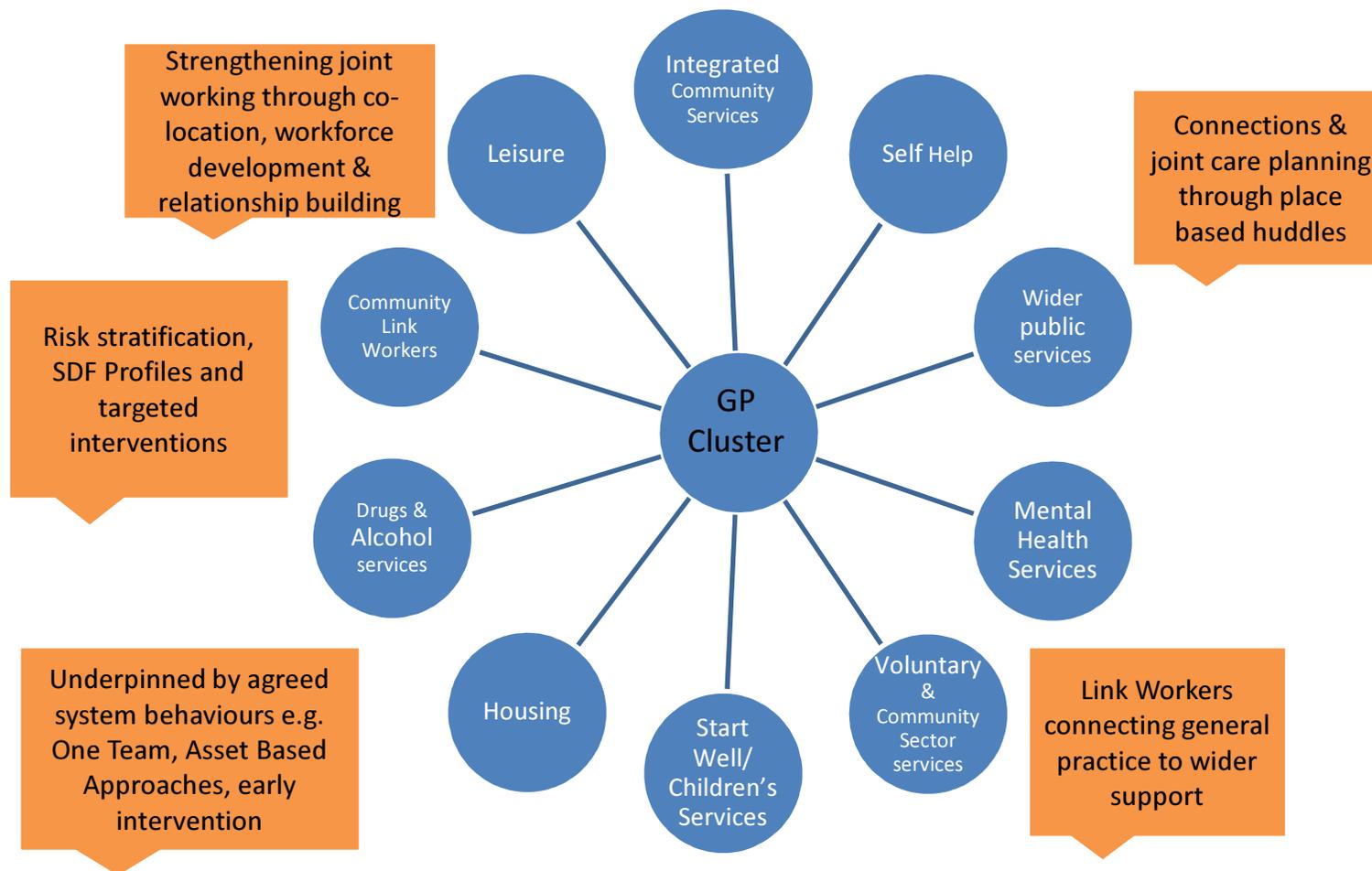
## The building blocks of transformation

- Local care organisations coordinate delivery of integrated care in each borough
- Boroughs are made up of smaller neighbourhoods - GP practices working with other health and care professionals
- Standardisation across hospital sites and more care in the community, closer to home
- A single local commissioning function in each borough plus a GM Commissioning Hub

# LCO Route Map – summary to date



# Working in Neighbourhoods



- 30-50,000 population
- Co-terminus GP Clusters
- Neighbourhood Managers & dedicated capacity
- Schools
- Neighbourhood data profiles
- Community Assets mapped
- Estates Strategy
- multi-agency huddles
- Sub-neighbourhood teams in areas of greatest demand

## Bury's Successes so far

- Integrated Neighbourhood Teams in 2 localities
- 1 neighbourhood focusing on design and mobilisation of care home support model
- 1 neighbourhood focusing on the the design and mobilisation of the single point of rapid response
- Green Car
- Bury Directory and One Community offering a greater range of opportunities for citizens
- Integrated Virtual Clinical Hub
- Urgent Treatment Centre due to go live on the 5<sup>th</sup> Nov

## Expected developments in Bury by April

- Integrated Neighbourhood Teams
- Integrated Intermediate Tier
- Single point of rapid response for the Borough
- The early help offer
- Integrated End of Life provision
- Health trainers in place delivering the integrated wellness service
- Workplace health team expanded
- Falls pathway in place
- Support offer to care homes
- New deal for carers and social prescribers tendered

## What's coming next?

- Greater Manchester is considering our next stage of improvement in light of local progress and national developments
- We will work across the whole public service as part of a vision of a 21st century NHS as part of a new model of public service within the city-region.
- The Greater Manchester reforms have been described as 'equally as bold as the creation of the NHS' and could be the country's first population health system
- Greater Manchester continues to update on progress in delivering Taking Charge as part of our Annual Reports and Business Plan
- In the New Year we will consider and plan for the implications of the NHS Long Term Plan to update our plans
- We will connect all of these changes to our opportunities to unlock our economic potential as part of our local industrial strategy.



For further detail go to:

[www.gmhsc.org.uk](http://www.gmhsc.org.uk)

@GM\_HSC