

Integrated Care Partnership Board

30th June 2023

ICP Strategy Implementation

**Greater
Manchester
Integrated Care
Partnership**



Our Strategy Missions – Overview



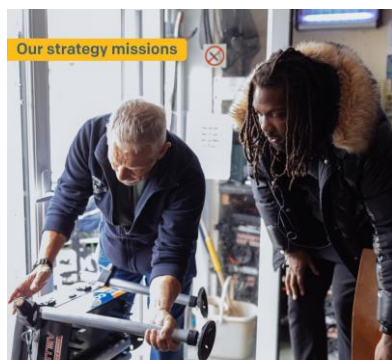
Strengthen our communities

We will help people, families and communities feel more confident in managing their own health



Help people to stay well and detect illness earlier

We will work together to prevent illness and reduce risk and inequalities



Help people get into, and stay in, good work

We will expand and support access to good work, employment and employee wellbeing



Recover core health and care services

We will continue to improve access to high quality services and reduce long waits



Support our workforce and carers at home

We will ensure we have a sustainable, supported workforce including those caring at home



Achieve financial sustainability

We will manage public money well to achieve our objectives



Approach to Implementation – through the ICP Board

- We propose that a key part of the Board's role is to challenge our system on the delivery of the missions in the ICP strategy. This would include a series of 'deep dives' into each of the missions enabling system partners to discuss and agree how we can draw on the contributions of all partners to achieve the missions
- This will inform the development, and implementation of, the Joint Forward Plan
- The area of focus for the June meeting is Mission 1 on Stronger Communities



Mission 1 – 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

- The Mission contains a range of actions working with partners across the system – including tackling poverty, working in partnership with the VCSE and focusing on digital inclusion
- Today's update focuses on three specific areas where there are significant recent developments to update the Board on. These are set out in the next slide



Mission 1 – Strengthening our Communities

The Neighbourhood Model

- Update on the development of the **Neighbourhood Model**. How place-based working, connected to public service reform, brings together the connection to the broadest range of factors affecting people's health and wellbeing. Place-based working is central to the delivery of the ICP Strategy and Joint Forward Plan.

Listening to and investing in communities as a critical part of that model

- Update on the **Live Well programme**. Our work to continue to grow community-led information, activity and support in all our neighbourhoods so that all residents, particularly those experiencing inequalities, are given opportunities to feel safe and well, find purpose, connection and happiness

Making a real difference in peoples lives

- **Increasing identification and support for victims of violence** in all health care settings – including the new serious violence duty for organisations and the work we are doing in partnership on violence reduction and supporting victims.

Neighbourhood Model and Public Service Reform

Recent System Stocktake on 'Unified Public Services'

The GM Reform Delivery Executive commissioned a **stocktake exercise** to understand the current position in relation to our ambitions for public service reform, 'Unified Public Services', and the implementation of the integrated neighbourhood model.

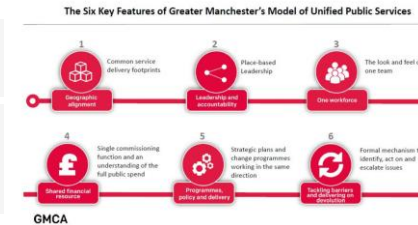
Recognising the complexity of the task, a **'modular' approach** was taken using a **survey tool** and as well as **reflective conversations** with the system, at a locality level and with organisations working across GM.

The approach taken was designed to allow an **open and honest** reflective exercise as opposed to a 'rate and rank' exercise. The stocktake was both a backwards looking understand of the **maturity of place based working** as well as a **forward looking & practical insights piece**.

Was designed to provide insight and **promote learning, highlight further areas for exploration** and help us understand **where we may need to re-prioritise our efforts**

Section 1

GM Model Key Features



Section 2

Spotlight Priorities



Multiple Disadvantage



Front doors



Role of VCSE sector

Section 3

ICS Developments



Section 4

Working with GMP



Findings and Insights relating to Health and Care

Some of the themes and issues arising from the stocktake exercise

1. Health and Care considered an essential part of the wider neighbourhood model and integral to the GM Model's emphasis on people, prevention and place.
2. Optimism around the possibilities presented by ICS developments.
3. A sense that initial ICS developments have proved challenging to local autonomy and in some respects have made it more difficult for health to integrate with other public services as part of a whole place agenda.
4. There are numerous examples of multiple integrated models in localities which points towards fragmentation.

Areas for Further Exploration



Developing the Neighbourhood Model with Public Service Reform

The Unified Public Services system stocktake has highlighted...

A need to work together to **create capacity and innovation** in all of Greater Manchester's public services so that they are **accessible, equitable and responsive** to the needs of people and communities, making our strongest contribution to tackling inequality, improving health and enabling Good Lives For All

...that this shared endeavour could initially focus joint effort on

PEOPLE & COMMUNITIES

A stronger role for public services in enabling the growth of community capacity and capability

SERVICE DELIVERY

A more integrated *full spectrum* response to the range of issues facing residents

SYSTEM SHIFT

A disciplined focus on changing the system conditions that produce inequalities in the outcomes people experience

...and taken forward through

- Joint work between ICP and GMCA in specific programmes and with identified cohorts (e.g. multiple disadvantage, Live Well, Family Help)
- Development of the Devo Deal Shared Outcomes Framework
- Joint Forward Plan reporting



Live Well



Place

Opportunities for every resident to contribute to and get help in their community to live well, with cohesion and connection between initiatives, organisations and sectors.

Relationships

High trust relationships helping people to access Live Well opportunities.

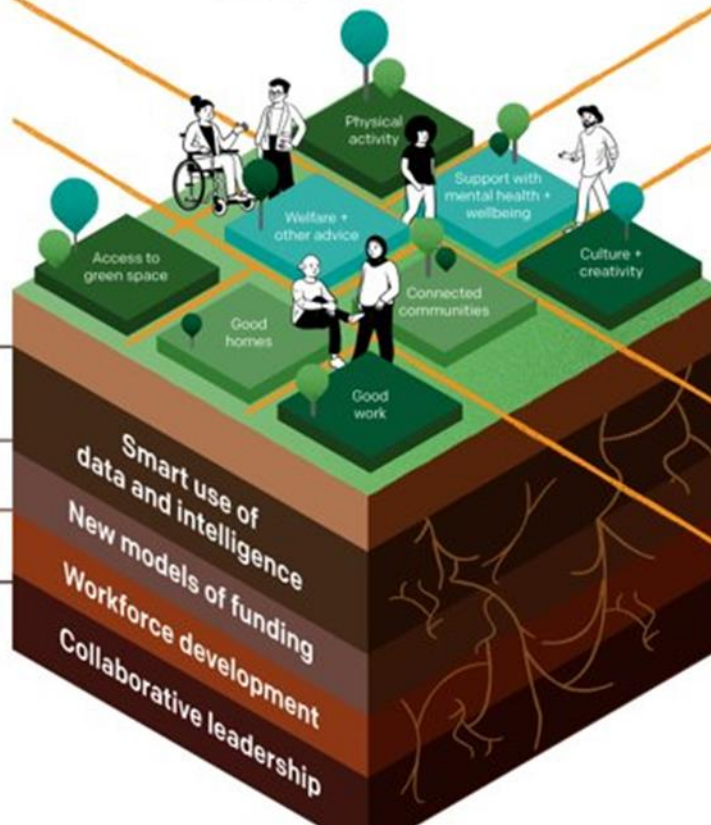
The voluntary and statutory sector work collaboratively to build, deliver and sustain a Live Well ecosystem

Voluntary and community sector

A thriving, supported and sustainable voluntary, community, faith and social enterprise sector.

System

A statutory system which supports, amplifies and enables community led and owned prevention, early intervention and wellbeing work.



To understand impact and demonstrate value without over burdening the VCSE with bureaucracy

To support flexible but sustainable community infrastructure and activity

Supporting staff and partners to be person-centred, skilled and confident

Meaning we listen, learn and genuinely co-produce

We know that...

Through the information, activities and support created by communities, our citizens get the opportunity to improve their health, wellbeing and social connectedness. Only by working alongside people and communities to create healthier happier lives will we see sustainable improvements in the health of our population.

Live Well is our programme to support the expansion of an offer of local activities and support to live happily and healthily, feeling safe, connected and purposeful, as a key component of the person-centred neighbourhood model.

By helping grow community led health, we aim to expand the opportunities available to people, and reduce health inequalities. This builds out from our excellent track record as a city region on social prescribing.

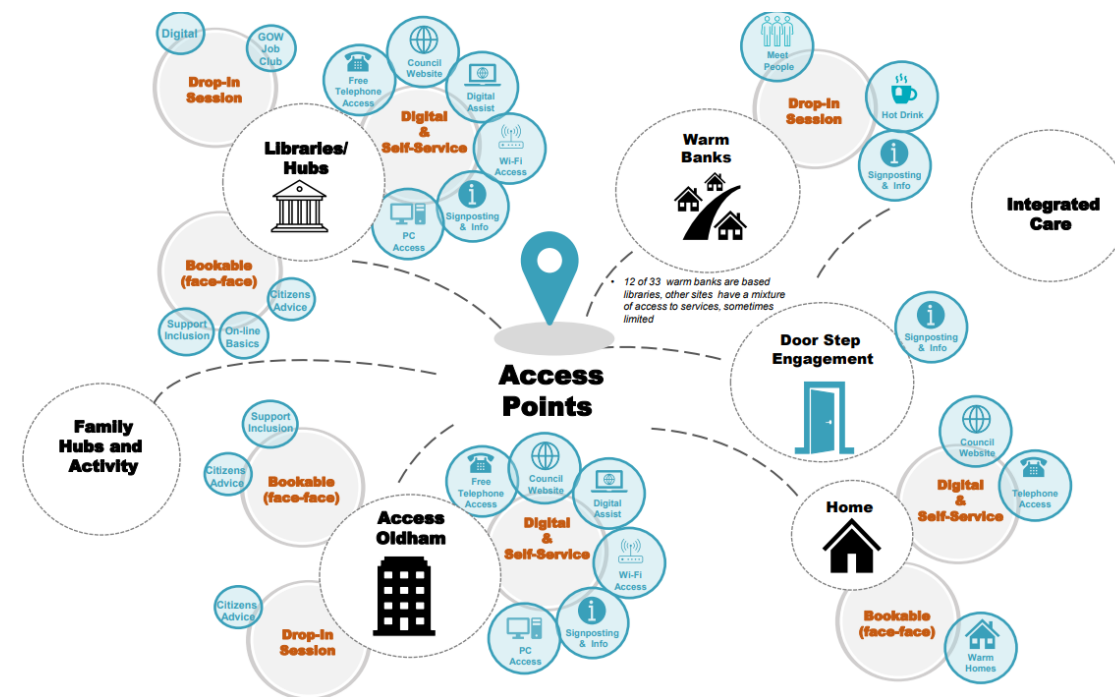
Oldham snapshot

Oldham is progressing a bold agenda to achieve place based integration. It is building an integrated neighbourhood approach where staff work together across services to better support local residents and help to overcome the effects of the significant deprivation many find themselves in.

By listening to, and working with, communities they are actively increasing the role that communities themselves play in achieving this. With over 200 people every month getting support this year from the social prescribing innovation partnership, headed up by Action Together, they are hearing and acting on what people want and need.

For example a new peer support group for younger men was established in Failsworth after hearing that many people in this group were struggling with mental health, and felt limited around where they could go. The new weekly group was really successful and is evolving into a volunteer led peer support group. This is just one small example of Oldham's investment in community led health – with more than £0.5m invested through the One Oldham Fund in 22/23.

Oldham has stepped forward to be one of 5 Lottery funded 'Accelerator sites' for Live Well – building district based budgets for community led and determined prevention activity.



Rochdale snapshot

A deep commitment to shifting power to communities in Rochdale and working in an integrated way in neighbourhoods has led to a co-ordinated response to poverty across the system supported by and connected in with health and care.

Poverty Summits brought people together to think and talk in a very different way – developing a shared voice with communities which enabled them to come to integrated, inclusive and participatory action. Participants said they wanted more combined efforts to:

- **Help Communities to Rise:** more funding and investment, community-led decision-making, community wealth and ownership
- **Work, Skills and Opportunity Making** (including Community Wealth Building)
- **Information, Access to Support and Advice** (including welfare benefits): Make it acceptable to ask for help; cash first; neighbourhood buddies; It's not ok to expect poverty; good partnerships; accessible formats; accurate information
- **Housing:** Limit energy price hikes, working in partnership; work towards a “Pre-Eviction Protocol”; transitional housing route maps

New kind of approaches and partnerships are emerging in Rochdale. One example is the ‘Warm Homes’ project – investing health funding into tackling housing issues that were causing ill health. This has enabled them to offer people with health issues exacerbated by their housing situation an offer of housing improvement support, alongside more holistic conversations and help, via a VCFSE organisation.

One family were helped who had a gentleman living there with 90% of his body covered with acute psoriasis, which was exacerbated by cold and meant that he had to wear three layers of clothing at all times. He also had Cardiovascular Disease and had previously had a heart attack. They had single glazing and faulty windows in their property which meant that they had to keep their heating on for longer, even in the summer. The man still had to have blankets covering him with the heating on. They didn't have the funds to do the works on their windows. The new initiative enabled a local VCSFE organisation, Groundwork, to offer them support and organise work on their windows to make the property warmer and more fuel efficient.

“I would like to thank you for all the hard work you have done to get the help and funding for my family which can keep us safe and warm this winter and in the future. You have no idea how much this means to me and my family and the positive impact this can make on our lives.”

Rochdale will also be working as a Live Well Accelerator site to figure out, on behalf of Greater Manchester, how approaches like these can become the default way of working for our system.



The cross GM Live Well Programme

Building on a Mayoral Manifesto commitment, we worked with over 150 organisations across Greater Manchester to shape what Live Well means here, and to determine the most valuable work to be done collectively.

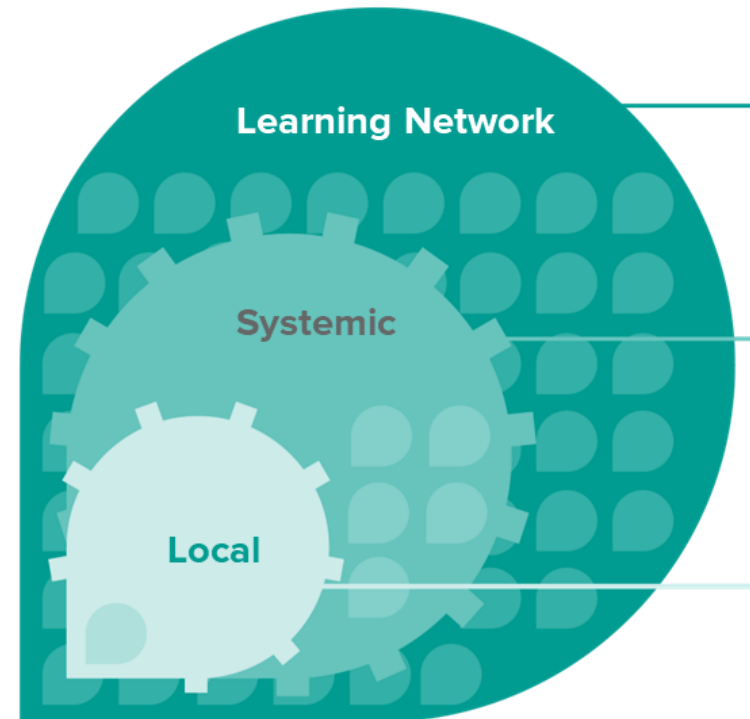
We co-designed a strategic programme to complement and support what localities and communities already do best.

It was agreed the Live Well programme would work alongside people making change to:

- Break down common local and systemic barriers that get in our way
- Support each other to grow this work through:
 - Sharing learning, evidence and peer support
 - Investing, and shifting power and resources to people and communities
 - Growing practice out of Personalised Care and Social Prescribing

The National Lottery invited us to submit a bid to help take this forward. We have been working with interested localities to develop the full bid, that, from Autumn 2023, will bring in £1m over 2 years. It will fund work in 5 localities on priorities identified in the co-design stage, plus a learning network to share these and connect the excellent work happening all across Greater Manchester.

From Live Well practice in **some places**, to sustainable Live Well systems **in all places**



Networks **to support** all those working to grow Live Well, and to consolidate **and share learning** across the whole of Greater Manchester and beyond

Together with national partners, leaders across Greater Manchester **unblock system barriers** arising in Accelerator Sites and learn how best to enable and support this community led work

Accelerator Sites tackling system wide **locally relevant barriers** and modelling a sustainable, whole system, place-based approach to Live Well

Increasing identification and support for victims of violence

Serious Violence Duty - duty to collaborate to prevent and reduce serious violence (passed into law - January 2023).

NHS GM has delegated commissioning responsibility for Health and Justice (since 2018) – enabling joint commissioning of victims services, and partnership approach to violence reduction:

First city region
to develop a
Gender Based
Violence
Strategy

Health are key
strategic and
operational
partners in
Violence
Reduction Unit

NHS commitment to:

- Develop minimum **standards of care for victims of domestic abuse in primary and secondary care**– standardised monitoring across GM
- **Test out new approaches for identification and referral of victims in sexual health services (ADVISE pilot – 52 fold increase in disclosures)**

- **Pilot trauma responsive care in GP practices** - Adverse Childhood Experience) screening pilot (Manchester).
- **Community-led violence reduction programmes eg**
 - Hulme and Moss Side – community trauma response to violence via detached youth service aligned with place based neighbourhood health inequality plans
 - [UniteHER builds relationships between girls and professionals from across Greater Manchester - Greater Manchester Violence Reduction Unit \(gmvru.co.uk\)](https://www.gmvru.co.uk)
 - Primary School Transitions programme (BLOCKS) – engages children in years 4,5 and 6 (and their parents/carers) in preparation for transition to high school to prevent violence and promote well-being (aligned with CYP mental health)

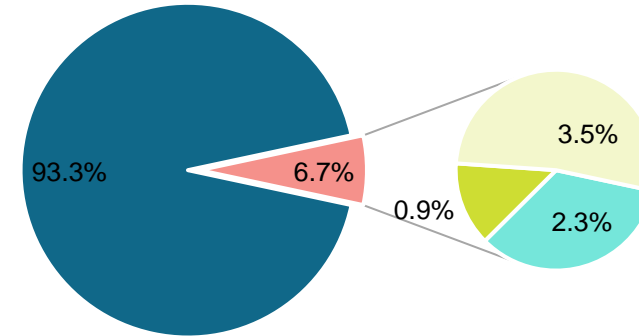
Impact of **ADVISE**

Trends in disclosure rates of Domestic Violence and Abuse in MFT Sexual Health Clinics

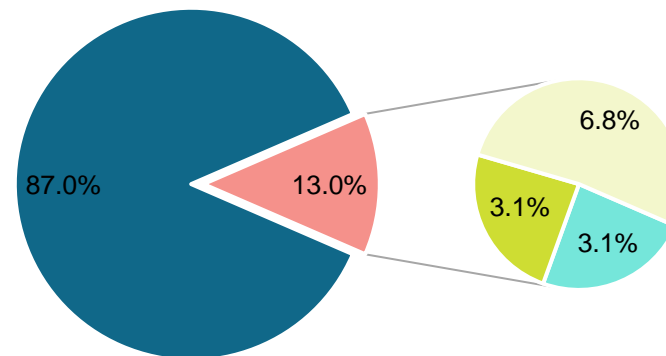
	21/22	22/23	Change
Disclosures of DVA	20	1038	52-fold increase
Referrals	5	159	32-fold increase
Referred to MARAC	3	6	2-fold increase

'I was quite apprehensive about asking routinely but have found that there has been lots of positive feedback from patients including people who have thanked me for asking. If the question is normalised there isn't a problem'

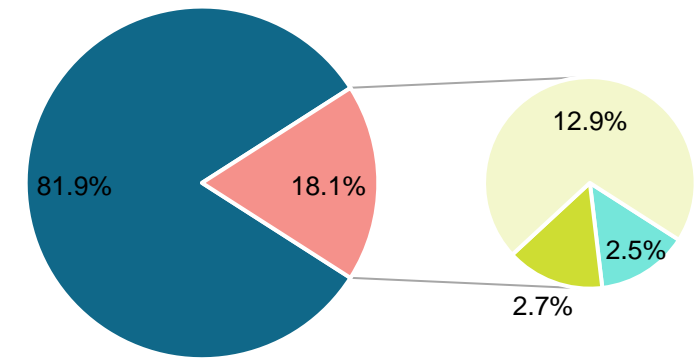
Heterosexual (female) disclosure rate



Gay (female) disclosure rate



Bisexual (female) disclosure rate




Increasing identification and support for victims of violence

Opportunities/Challenges

- **Place Based leadership relating to Serious Violence Duty** - Need to clarify relationship and governance between Community Safety Partnerships and Locality Place Based Boards/Health and Well-being boards to ensure alignment of intelligence, resource and strategic commitments for violence reduction
- **Levelling up – implement minimum standards for victim support in health settings to comply with legal duties** (Serious Violence Duty, Domestic Abuse Act). This will require re-alignment of resource for staff training, referral pathways and sustainable funding models for VCSE advocacy support – opportunity to clarify Locality/GM commissioning space and governance as part of JFP
- Alignment between Live Well and Violence Reduction prevention programmes



Key Issues for Board Discussion

- Does the Board have any specific questions or comments on the three areas – the Neighbourhood Model; Live Well; Increasing identification and support for victims of violence
 - How can our Partnership further support delivery of this mission?
 - What information would help the Board in its consideration of the missions in the strategy
 - Which mission would the Board like to focus on next?
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