Creating the LCO in Manchester
September 2017
Why is this needed?

• The NHS and social care are both facing huge financial pressures.
• Despite some great services, Manchester has some of the poorest health outcomes and some of the worst health inequalities in the country.

What does this mean?

• Our care is not consistent, across Manchester:
  • Multiple providers
  • Fragmented care models
  • People have numerous contacts with different services, repeating their needs over and over.

• In the most deprived areas in Manchester, life expectancy is lower than in the least deprived areas.
  • 8.2 years lower for men
  • 6.4 years lower for women
What is a Local Care Organisation?

• A partner-owned organisation to manage community health and social care.

• Services co-ordinated by Integrated Neighbourhood Teams across the city, with clinical leadership from GPs.

• We’re supporting people to stay healthy, independent and to remain in their own homes.

• We’re helping them to access services closer to where they live - and avoid unnecessary hospital admissions.

• We’re creating opportunities to offer more choice in decisions about care.

• We’re managing and developing a direct workforce of c.4000 staff.
# LCO Core Purpose

*Leading local care, improving lives in Manchester, with you*

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<tr>
<th>Goals</th>
<th>Priorities</th>
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<tr>
<td>1. Manchester is the world leader in innovative person centred health and social care technologies.</td>
<td>1. The LCO champions and invests in community development which addresses the social determinants of health and well being.</td>
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<td>2. We will be a great organisation to work for and with creating opportunities for and investing in the people of Manchester.</td>
<td>2. We will invest in information technology to maximise the potential of health and social care economy.</td>
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<td>3. People and communities will be involved in decisions about their health and care</td>
<td>3. The communities of Manchester and the LCO will together transform Health and Social Care building upon existing strengths and resources to create local, responsive and accessible services.</td>
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<td>4. Over the next 10 years Manchester is internationally recognised as a city where all residents live healthier, happier and longer lives.</td>
<td>4. We need an LCO that recognises the importance of the first 5 years of a child's life and is committed to working with families and communities to address life long inequalities.</td>
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<td>5. We need an LCO that works collaboratively to deliver seamless care within a culture of shared responsibility for the person not the problem.</td>
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<td>6. We need a LCO that can make the best use of existing resources using a sustainable model which reflects the local community to eradicate health inequalities</td>
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<td>7. We need an LCO that actively cares and supports colleagues and communities</td>
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One Team is a new way of working – an approach to delivering person-centred, place-based care for the people of Manchester.

Integrated teams in 12 neighbourhood locations, across the city.
Manchester’s Local Care Organisation

- Single leadership structure
- Integrated neighbourhood teams
- Single care record
- Multi-disciplinary teams
- Person-centred care

- Preventing ill-health
- Better health outcomes
- Improved services standards
- Supporting self-care

- Progressive, equitable, inclusive and respectful
- Highly-skilled people
- Centre for innovation and employment
- A liveable city: attractive, clean and safe

A healthier Manchester

Centre for innovation and employment
How will it work?

Integrated teams of health and social care professionals to work collaboratively together, to provide a joined-up service. Partnership with the voluntary and community sector, to provide wider access to community resources and services across the city.

We’re working more closely with other organisations – such as
- housing, education, employment, transport
- commissioners and providers of home care, residential and nursing homes
to create a joined-up local system that really works for the people of Manchester.
Working as

• Integrated teams, based in local neighbourhoods.
• Trusting each other’s assessments.
• Coordinating care through a keyworker.
• Shared care record.
• People who use the services are designing the services.
• Safe, compassionate, effective care.
• Using our expertise and initiative.
• Making a difference.
Why neighbourhoods?

• People spend most of their lives in communities, not in hospitals or at work.  
This is where life happens.

• Manchester has creative, supportive, thriving, vibrant and diverse communities across the city.

• NHS strategy suggests that neighbourhoods of approx. 50,000 people is a good starting point to deliver high-impact community care.
The stories of our neighbourhoods

WHO:

• Community health and social care, acute trusts, GPs and primary care, public health and local partners including:
  • voluntary sector and arts organisations,
  • Community, faith, youth, LGBT, BME groups,
  • Citizen’s Advice, Job Centre and employment,
  • community pharmacy,
  • housing organisations and homelessness charities,
  • the universities,
  • service users and local residents.

WHY:

• To describe the current state of citywide health and social care – and how it could look
• To better understand our neighbourhoods and the needs of our communities.
Creating a new organisation – building on existing services

• Developing our plans and designing our services around the needs, experiences and aspirations of the people of Manchester...’designing with the people, for the people’
  • Our aim is for each neighbourhood to have a clear plan for their local area, alongside a clear plan for all neighbourhoods to deliver effective integrated care.
  • Our commitment is to deliver a strategy that reflects the voices of those who live and work in Manchester.

• Creating governance and organisational structures, from operational service delivery teams, through to HR, finance, office premises and facilities.

• Exec team currently working at offices on Fountain Street, in the centre of Manchester.
Preparing a business case

To meet the procurement requirements set by Manchester Health and Care Commissioning, we need to demonstrate:

• how we will work as an organisation
• how we will provide services
• and how we will design new models of care - to improve outcomes for people.

Business case, to explain our approach & plans will be submitted to the commissioners in Autumn 2017.

Planned ‘go live’ in April 2018
Our clinical strategy

We’ve looked at the population health of Manchester and identified 5 at-risk groups which must be our first priority.

In our first 2 years, we’ll be working to improve care and experiences for:

- Frail older people
- Long-term conditions / End of life
- Adults with complex lives
- Mental health / LD / Dementia
- Children and young people
Designing new models of care

• To improve experiences and outcomes for people and to help teams reduce duplication and work in an integrated way.

• We're working with people who deliver services, our partners (like the voluntary and community sector), and with the people who use these services.

• Our current projects include:
  • High impact primary care
  • Frailty care
  • Integrated neighbourhood teams
  • Discharge to assess
  • Early help
Developing neighbourhood leadership

• New locality and neighbourhood leadership structures, with GP professional.

• We envisage that each neighbourhood team will include:
  • GP Clinical Lead
  • Nursing/AHP Lead
  • Social Care Lead
  • General Manager

• Developing the model and implementation plan in partnership with stakeholders, so that new teams can be in place before April 2018.
## LCO Programme Plan

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<th>Programme Area</th>
<th>Key Deliverables</th>
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<tr>
<td>Service Strategy</td>
<td>- Care Strategy</td>
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<td>- Target Operating Model</td>
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<td>Setting Up the Organisation</td>
<td>- Post Transaction Implementation Plan</td>
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<td>- Governance Framework</td>
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<td>- Structures and leadership teams</td>
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<tr>
<td>Transaction</td>
<td>- Business case</td>
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<td>- Due Diligence</td>
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Workforce & OD Priorities - immediate

- Engagement
- Workforce mapping
- Organisational set-up
  - Governance framework
  - Organisational structures
  - On-boarding
- Relationships with partners
- Team building
- Supporting the development of business case
Workforce & OD Priorities – 2018 & beyond

• Workforce strategy to support service strategy
  • New models of care
  • Supply
  • Access to employment
• Workforce information
• Alignment
  • Values & behaviours
  • Appraisal
  • Recognition
• Leadership Development
Any Questions?