

### **GM Joint Health Scrutiny: Update on NHS Reform**

Presented by: Claire Connor and Jo Street

Date: Tuesday 14 October

### **Background to NHS Reform**



- On 1 April 2025, NHS England wrote to ICB and provider leaders outlining how we will work together in 2025/26 to deliver our core priorities, laying the foundations for reform in preparation to deliver the ambitions of the 10 Year Health Plan
- Delivering the 10 Year Health Plan will require a leaner and simpler way of working, where every part of the NHS is clear on their purpose, what they are accountable for, and to whom. Our focus is to deliver the three strategic shifts:
  - Treatment to prevention stronger emphasis on preventative health and wellbeing, addressing the causes of ill
    health before medical intervention is needed
  - Hospital to community reducing reliance on acute care by building more joined up, person-centred care closer to home in local neighbourhoods
  - Analogue to digital Using technology and data to make healthcare smarter, faster, and more tailored to each person's needs
- NHS England has worked with ICB leaders across the country (including some of our own) to co-produce a <u>draft Model</u>
   ICB Blueprint that clarifies the role and purpose of ICBs, our core functions and what needs to be in place to ensure success:
  - ICBs will continue to play a vital leadership role, focused on understanding population health needs, planning for the long term, reducing health inequalities and ensuring access to consistently high quality and efficient care
  - Our functions will be more focused, with some responsibilities moving to providers or regional/national teams over time. We will need to do some things differently, more efficiently and/or at scale
  - Not all changes can be done this year as some need legislation and some functional changes/transfers will need time to be done safely

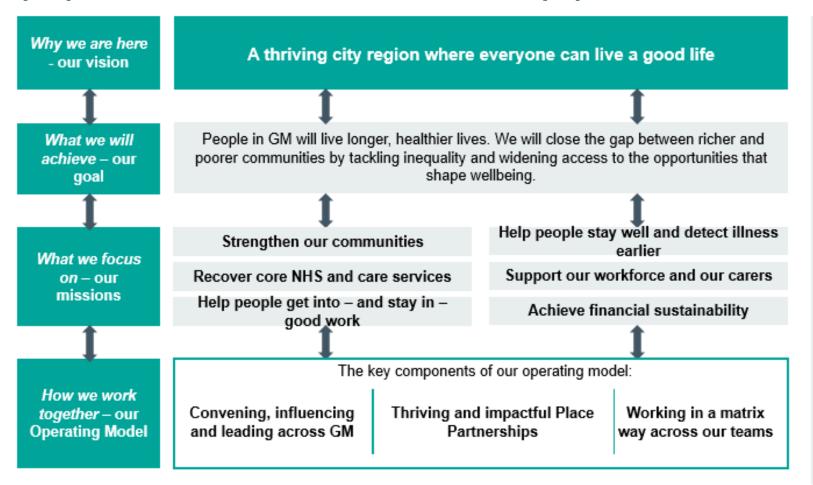


### Our approach to reform in NHS Greater Manchester

- We are committed to delivering an operating model for NHS GM in line with the model ICB blueprint, build on strong partnerships, local needs and a shared ambition for population health improvement
- GM will retain footprint aligned with GMCA (supported by the ICP) and not merging with any other ICBs
- GM is ahead nationally, already using an integrated place model, and we have reaffirmed our commitment to 10 places aligned with local authorities
- Our vision for Greater Manchester still applies as does our commitment to our 6 missions as outlined in the <u>ICP strategy</u>
- We continue to be committed to our <u>Sustainability Plan</u> and the three shifts (outlined in 'Background')
- NHS GM will be accountable for the £8.5bn of health spend across Greater Manchester
- We will aim to influence the wider public sector spend across Greater Manchester by working in partnership with colleagues from across a range of services
- To oversee our progress, a Task and Finish Group, chaired by NHS GM's chair, Sir Richard Leese is now established with membership from senior leaders representing providers, Place and staff alongside our chief officers
- We continue to engage with stakeholders from across the ICP, including the voluntary, community, faith and social enterprise (VCFSE) sector, provider trusts and primary care



# As we change our organisational form, we retain our purpose, vision and six missions for our population



We are a city region with a global reach.

Our hyper-collaborative approach has put Greater Manchester at the forefront of progress. We are home to renowned universities and research institutions. We have the largest tech cluster outside London and the largest life science cluster outside Cambridge. We have one of Europe's top visitor economies, are the beating heart of the UK's creative industries, a sporting capital, pioneers of public transport and trailblazers of English devolution.

Our collective vision for the next decade is to see a thriving city region where everyone can live a good life. But economic and social progress have always gone hand in hand here, so Greater Manchester is only successful if every part of our city region and every person in our city region is successful.

NHS Greater Manchester intends to make its contribution, as a key public service partner, bringing its resources and capacity to bear to improve the physical and mental health of our three million residents. Commissioning for health as well as health services.



### **Next steps**

- An engagement exercise will begin shortly with NHS GM and wider stakeholders. A standardised slide deck will be provided to support the following objectives;
- Publish the final draft of the new Operating Model and take feedback
- Build on the discussions of how we will implement this new Operating Model
- Provide a stocktake on where everything is up with regards to the Reform programme (including timelines)
- Ensure everyone has a common understanding of 'strategic commissioning' and can describe the role of our proposed 'Place Partnerships'
- Ask staff how the organisation should work with and support them during the proposed upcoming staff consultation



#### 'The ask of the committee'

- As key stakeholders, members will take part in the stakeholder engagement exercise at the November meeting. Besides the objectives listed previously, are there any areas of focus you would like us to pay particular attention to when we deliver the session to you all?
- Deputy Place Leads will be presenting the slide deck at each Locality Board to inform your local health leaders. However, are there any other ways you will be willing to support the delivery of this engagement exercise within your own locality using your own networks?



## Thank you