



Greater Manchester



# Adult Social Care deep dive for Joint Health Scrutiny Bernie Enright Executive Director of Adult Social Services

- In 2017 the GM Adult Social Care Transformation Programme was developed to deliver several key priorities to support local reform and transformation. Since then, the programme has worked collaboratively with all partners to bring about system wide change and transformation.
- Critical to the success of the programme has been the strength of the relationships, collaboration and mutual support across the system and beyond, and a strong dispersed leadership model. GM ADASS is recognised as a cohesive, critical and strategic part of the whole GM system
- ASC accounts for over a third of LA spending in GM and supports around 50,000 individuals. This includes providing care and support, care and for people to support better outcomes and better lives . This also includes supporting the workforce, providers and unpaid carers.
- There is increasing demand and complexity linked to demographic change, which represents a significant financial risk and pressure for councils
- We have over 1,000 independent ASC providers in GM, but our market is fragile and over the past year we have seen many care providers exiting the market and we continue to support them to remain resilient
- We prioritise early action and proactive prevention, and continue to focus on preventing people from being admitted into hospital, and to return home to independent living (c500 people each week)

# Great Manchester Adult Social Care Transformation – The Vision

Living Well  
at Home  
Programme

Directors of  
**adass**  
adult social services  
**NHS**  
Greater Manchester

“The vision we must aim for is good lives well lived which creates a sense of purpose, sparks our energy and sets a shared direction of travel” (Hilary Cottam)

“We want all people to live in the place we call home with the people and things we love in communities where we look out for one another doing the things that matter to us” (Social Care Future Vision)

To develop across Greater Manchester a transformed **model of independent living** to support people to **live well at home** with the best **quality of care** and support and placing **personalisation** at its heart and with a rewarded, recognised and **sustainable workforce (GM ADASS)**

# Greater Manchester Adult Social Care Transformation Living Well at Home

**Workforce** – we will recruit, grow and develop a workforce that provides first class, person-centred care to support people to live well at home

**Markets** – we will continue to develop the market to ensure it is resilient, diverse and delivers high-quality, person-centred care which is reflective of the current and future population

**Urgent and emergency care** – we will focus on preventing people from going into hospital, and to return home to independent living

**Supporting people with complex needs** – we will ensure that people who experience complex needs have access to care and support close to home

**Supported housing** – we want to make sure that people have access to the right housing, in the right place, alongside support which enables them to live as independently as possible

**Living Well at Home programme vision** – in Greater Manchester we aim to support people to live well at home, as independently as possible making sure that the care and support people experience is built on their own strengths and in of the best quality

**Mental health** – we will ensure equitable access to mental health and social care by developing the workforce, improving service integration, and supporting people to live well in their own homes

**Safeguarding** – we will enable people to stay safe, underpinning everything we do in adult social care

**Enhanced health at home** – people are able to access health, care and support closer to where they live at the right time

**Digital** – we will support providers to move to digital care records, test out deterioration and falls prevention technology, and advance utilisation of technology enabled care

**Carers** – support colleagues to embed the GM Carers Charter and Exemplar Model, and focus on co-producing solutions to supporting carers who experience health inequalities and social injustices

**Learning Disabilities and Autism** – we will support delivery of the GM strategies, with a focus on reducing inequalities and supporting people to live gloriously ordinary lives

# BOBL Impact & Evaluation Summary

2021-2024

**Earlier Help and Support:**  
Providing **the right advice, support and guidance** to people at the right time; making a significant impact in supporting people to stay well

67% of calls are now **resolved** each month by the Adults Early Support Team, circa. 1,100 calls



The numbers of people aged 65 or over accessing long term care, weighted by population in Manchester has **reduced** relatively more than comparator areas\*\* during the period of the BOBL programme. Manchester also has maintained a **downward trend** other areas



Circa. **£39.33m of cost avoidance** through using preventative approaches incl. TEC, Reablement and Extra Care



**Increasing our short-term support** so that **people only go on to receive longer term care when it's right** for them

27% increase in new support plans including TEC from **13.9%** to **40.4%**



74% of citizens left reablement **needing no further care or reduced care** in 2023



Supporting our staff to work in a **strengths-based** way, focusing on maximising independence

100 staff engaged with in the evaluation said that the programme had **supported their strengths-based practice**



Community Social Care teams have shown a **shift in homecare hours being commissioned, indicating alternative support is being used**

Demographic trend of **2% of long term care cost has been running below national average** (£) (4%)

\*Contextual factors including the global pandemic and current cost of living crisis, have undoubtedly impacted the city. Therefore, direct correlations around demand seen cannot be fully assumed

# Challenges, opportunities and innovation

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## Challenges

- No long term investment or sustainability plans
- Increasing demand and complexity, significant financial risk and pressure
- Impact of Real Living Wage uplift
- Parity of esteem with NHS - recruitment and retention of the workforce
- Sustainability of the care market
- Increase in complexity of care and support needed
- Need to have capacity and skills in place to deliver the left shift
- Community health specifications need reviewing
- Integrated commissioning (pooled budgets)

## Opportunities

- Contribution of adult social care to the GM economy is £2.63 billion, workforce c75,000
- 'Live Well', neighbourhood models and prevention – we are piloting 'Live More' connecting people with dementia with early action and collaboration with Social Care Future around reopening the LA 'front door'
- **ASC Commission** lead by the mayor
- Strategic commissioning projects
- **Transformation and integration of services aligned with health, housing, and communities**
- Strength based approaches across GM and the wider system

## Innovation

- GM social care academy in place
- Supported expansion of new, blended health and care roles
- GM Strategic Commissioning Framework in place
- Improved the quality and sustainability of the care market
- Secured over £22m of investment to enable transformation delivery
- **Business case to prevent falls in older people, with recommendation for a strategy that will ensure better outcomes**
- Digital grants to enable providers to be more effective