

ONE STOCKPORT

Health & Care Plan

A Healthy & Happy Stockport

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FOREWORD

Stockport is a confident and ambitious Borough. United in the face of the coronavirus pandemic, our communities pulled together to support each other, overcome new challenges and build hope for the future. ONE Stockport - our new Borough Plan - is based on the priorities which have come from extensive engagement with the people who live and work in Stockport.

Health and Wellbeing are at the forefront of Stockport's vision for 2030 and a key priority for local people. If 2020 taught us anything, it's that we're stronger working together. We believe that the best way to deliver Stockport's vision is through collaboration across the wide range of partners who support health and wellbeing for local people. That means teams from statutory health and care bodies working together with voluntary and faith groups, private health and care providers, care homes and domiciliary care providers, community groups, family, friends and carers who, together, help to keep us healthy, happy and independent.

We want to build on the innovation, community spirit and outpouring of compassion that brought us together during the pandemic to tackle long-standing issues of inequalities and make Stockport a place where everyone has the best start in life, is supported to live well and age well.

Working together is about so much more than health and care services. It is about all the factors that make us happy and healthy, from education and employment to housing and security. It is also about people living their best lives, supported to make good lifestyle choices that improve their health and wellbeing and allow them to be independent.

This plan sets how we will work together as a system to deliver ONE Stockport's vision for **a Healthy and Happy Stockport**.



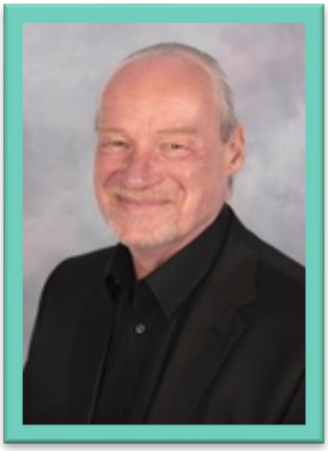
Dr Cath Munro

Chair of NHS Stockport Clinical Commissioning Group



Cllr Jude Wells

Cabinet Member for Adult Care and Health and Chair of Health and Wellbeing Board



Tony Warne

Chair of Stockport NHS Foundation Trust

0. EXECUTIVE SUMMARY

ONE Stockport[1] is a 10-year plan based on the priorities which have come from extensive engagement with people who live and work in Stockport. Health and Wellbeing are at the forefront of Stockport's vision for 2030, to be delivered through a single, system-wide plan for health and care. The key areas highlighted for action include:

- a collective, proactive all-age approach to prevention and early intervention from both a physical, mental and social wellbeing perspective to enable people to live healthy, happy lives
- taking a "whole person" holistic approach to the delivery of health and social care services, coordinating care delivered by multiple teams and organisations
- ensuring equity and equality in access to all services
- recognising and increasing the significant role which our Voluntary, Community and Social Enterprise (VCSE) providers have in supporting and connecting our local communities and providing advice and guidance to our residents
- improving access to and local information about mental health and emotional wellbeing services
- improving local employment, economic growth, education, housing and transport – the areas which have such a significant impact on people's health and wellbeing
- supporting our carers who are so vital to helping people retain their independence and prevent the need for high level health and care interventions
- working together to recover from the negative impact of Covid-19 on so many people in terms of physical and mental health - particularly those communities hardest hit through loss of employment, exacerbation of long-term conditions, increased waiting times, as well as the emotional impacts of loss, isolation, stress and grief
- locking in the benefits of increased collaboration between public services, the voluntary sector and local communities during the pandemic to support each other and the most vulnerable in our communities; retaining the digital advances in care provision; and learning from the success of the rapid, far-reaching and agile delivery of the COVID vaccination programme.

This ONE Health and Care Plan brings together existing strategies and plans, including Stockport's Locality Plan[2], Health & Wellbeing Strategy[3], and the key priorities from local partners' strategies into a single document and ONE vision for health and care partners. It sets out what we intend to do over the next 3-5 years to deliver our shared ambition for health and care. Underpinning this are specific, detailed delivery plans which will ensure local delivery of the requirements of the NHS Long Term Plan[4] and Greater Manchester's Integrated Care System[5]. A schedule of these deliverables can be found in **Appendix 1**.

We recognise that health and wellbeing are strongly influenced by a wide range of external factors. Achieving our aims will require a full-system approach, including delivery of all the plans set out under ONE Stockport.

[1] https://www.onestockport.co.uk/the-stockport-borough-plan/
[2] https://www.stockportccg.nhs.uk/about-us/what-are-our-plans-and-priorities/
[3] https://www.stockportccg.nhs.uk/stockport-joint-health-and-wellbeing-strategy-2017-2020/
[4] https://www.longtermplan.nhs.uk/
[5] https://www.gmhsc.org.uk/our-plans/about-our-plans/



National Context

This plan sits within the context of major national change in the organisation of the health service. The Health and Care Bill[6] establishes Integrated Care Systems (ICS) to deliver joined-up place-based working across health and care providers. This Plan is therefore focused on how we continue our transformation of the local health and care system as part of the Greater Manchester ICS.

Our work also sits within the context of significant financial challenges. Growth in long-term conditions and need for health and care services has put a strain on public sector organisations. Collaboration will be key to ensuring the best use of the 'Stockport Pound', eliminating duplication and creating economies of scale. We will work together with partners to build a sustainable health and care system with the capacity to flex in response to future needs and challenges.

Living with and beyond COVID

Responding to COVID-19 and the emerging unprecedented challenge has placed significant demand on the Stockport health and care system, as well as the wider public and private sector. The impact of the pandemic is becoming increasingly evident, and both public services and communities are likely to be dealing with the economic, social, and physical and mental health consequences for many years to come. Some of the issues we face include:

- COVID-19 as an acute illness likely to be prevalent in the population in future years
- the ongoing impact of 'long COVID' requiring access to existing or new services and additional support
- undiagnosed illness unrelated to COVID-19 and a directly correlated negative impact on population outcomes into the future
- increased mental health issues – both acuity and prevalence
- significant increases in the number of people on waiting lists for diagnostics, treatment and social care support
- increases in the number of Looked After Children (LAC) and placement breakdowns

[6] https://publications.parliament.uk/pa/bills/cbill/58-02/0140/210140.pdf

- an increased proportion of children and young people experiencing Adverse Childhood Experiences (ACEs)
- a significant decrease in the number of people in employment and the consequent negative impact on our local economy.

We were able to respond quickly and effectively to the pandemic, despite a rapidly changing and uncertain environment:

- public services and local communities have worked together to support each other and the most vulnerable in our locality
- we have seen an agile and rapid response from VCSE and demonstrated the significant role the sector will play going forwards
- we have significantly accelerated health and care integration
- care homes have worked together to provide mutual aid and provided excellent care to our residents
- we rapidly transformed the way we delivered primary care and outpatient services
- we accelerated progress in digital delivery; although we fully recognise the challenges faced of digital exclusion and the appropriateness of digital delivery in more complex interventions
- we effectively rolled out the largest mass vaccination programme in the country's history, including specialist vaccination services for vulnerable groups such as refugees and asylum seekers.

Delivering Change
We want to build on this learning and harness the opportunities presented by national changes to continue our transformation of the local health and care system.

Ultimately, we want to create the conditions that enable people to live healthy and happy lives, offering proactive support when needed from teams of professionals working together at a neighbourhood level.

Delivery will be through the eight programmes of work set out in this plan (see infographic below). The impact of these changes will be seen in the following high-level outcomes:

- **Stockport residents will be healthier and happier**, with tangible improvements seen in life expectancy; happiness & emotional wellbeing; the proportion of children and young people who are thriving; and reductions in social isolation and loneliness.
- **Health inequalities will be significantly reduced**, as evidenced through healthy life expectancy levels; access to key preventative services such as screening; early diagnosis of cancer, heart disease, and respiratory disease; reductions in smoking and obesity; and reductions in premature mortality among people with the worst health outcomes.
- **Safe, high quality services will work together for you**, resulting in positive CQC and service user ratings for all local services; delivery of national standards; improved access to services and reduced waiting times.
- **Stockport residents will be independent and empowered to live their best lives**, as evidenced through the proportion of people who are active, eat well and drink healthily; reductions in avoidable emergency hospital admissions and permanent admissions to care homes.

Strategic Ambition



Stockport residents will be healthier and happier



Health inequalities will be significantly reduced



Safe, high quality services will work together for you



Residents will be independent and empowered to live their best lives

Outcome Measures

Life Expectancy
Happiness scores
Emotional wellbeing
iThrive scores
Loneliness

Healthy life expectancy
Access to screening
Early diagnosis rates
Smoking rates
Obesity levels
Premature mortality

CQC ratings
Satisfaction levels
Improved Access
Waiting times
Delivery of national standards

Physical activity
Healthy eating and drinking
Hospital admissions
Permanent care home admissions

Delivery Programmes



Quality & Leadership



Early Help & Prevention



Independence & Reablement



Mental Health & Wellbeing



Tackling Inequalities



Stockport's Neighbourhoods



Age-Friendly Borough



Valued Workforce

1. INTRODUCTION

Stockport's Borough Plan – ONE Stockport[7] - is the overarching strategy that sets our shared strategic aspirations for Stockport 2030. It was developed through extensive engagement with local people, who told us that health and care is one of their top priorities.



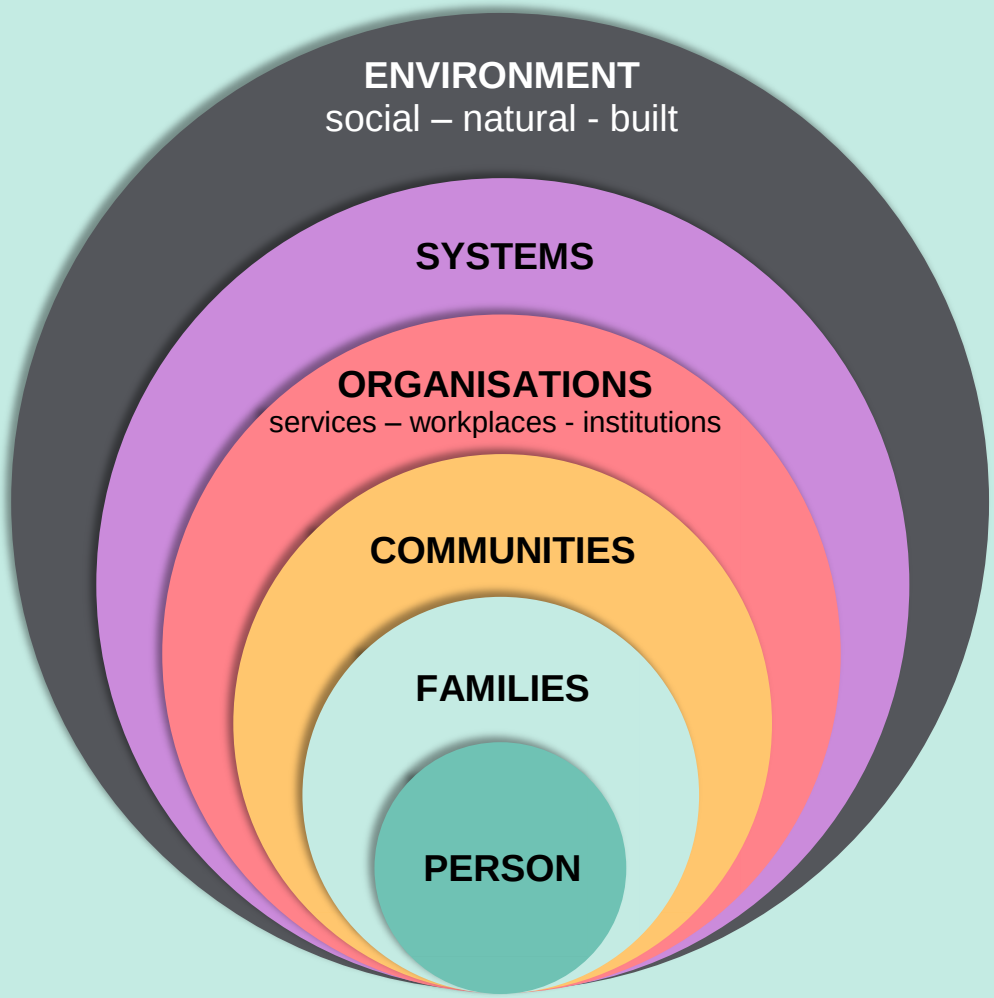
This Plan sits under the 'ONE Heart' section of ONE Stockport, setting out our shared approach to health and care outcomes through all of our partners working together to support local people to be Healthy & Happy. We recognise that health and wellbeing are strongly influenced by a wide range of factors, especially employment, connected communities and access to green spaces and activities. Delivery of the aims set out in this plan will be achieved as part of the full-system approach set out in the Borough plan and all of its delivery plans.

NHS Stockport Clinical Commissioning Group	STOCKPORT METROPOLITAN BOROUGH COUNCIL		NHS Stockport NHS Foundation Trust	NHS Pennine Care NHS Foundation Trust
Clinical Commissioners	Adult Social Care, Stockport Family & Public Health	Schools, Colleges and local education providers	Hospital Care & Community Health Services	Acute & Community Mental Health
VIADUCT CARE CIC	Mastercall Out of Hospital Healthcare	NHS	Sector³ STOCKPORT IN SYNERGY	healthwatch Stockport
Federation of 36 local GP practices	Out of Hours Primary Care	Pharmacy, Dentists, Opticians & Ambulance Services	Voluntary & Community Services	Patient Voice

[7] https://www.onestockport.co.uk/the-stockport-borough-plan/

One Heart, One Home, One Future

At the heart of Stockport are its people and the communities in which they live. We recognise the importance of ***all*** elements of the Borough plan in creating the conditions in which we can grow and thrive together.



Our lives are understood as being interdependent and shaped by the contexts we live in. Therefore, all our health, education, community, and social care services must also work together with individuals, their families and communities to improve local care and outcomes.

This plan provides a framework to guide our work across all stages of the life course from birth to death, to prevent risks becoming problems and challenges from becoming entrenched or turning into crises so that everyone in Stockport can live their best lives, be happy, healthy and independent.

2. THIS IS STOCKPORT

Stockport is made up of a wide range of communities, unique neighbourhoods, local villages and district centres. We are proud of where we live and celebrate the diversities that make up our borough. We're part of Greater Manchester, but we're also lucky to have Cheshire, North Derbyshire and the Peak District on our doorstep, sharing wide open countryside and farmland. This unique geography and sense of community is why Stockport is one of the healthiest places to live in the North West.



291,775	315,655	61,900	58,064	138,888	22,456	50,838	74,793
Local residents	Registered with a local GP	Under 18	Over 65	Disability / long-term condition	Black, Asian and Minority Ethnic	Live in most deprived wards	Live in most affluent wards
		21.2%	19.9%	47.6%	7.7%	17.4%	25.6%

Our Population

Stockport is home to 291,775 local residents, with 315,655 people registered at one of Stockport's 36 GP Practices. Stockport's population is split almost equally by gender - 50.5% female, 49.5% male - which mirrors the national trend. Stockport is one of the most polarized boroughs in the country, with some of the most affluent and some of the most deprived local areas, generating significant inequalities among community groups.

Stockport has the oldest age profile in Greater Manchester and the population continues to age. Currently 19.9% of people are aged 65+ and this is likely to rise to 21% by 2024. 9.4% of the population is aged 75+, 2.8% are over 85 and 1% are aged 90 or over. The number of children and young people in Stockport is also rising – particularly in areas of higher deprivation - though at a lower rate than the growth of our older population. Stockport's more affluent areas to the South and East of the borough tend to have older populations, while the more deprived wards in the Centre and North have younger populations.

Stockport's ethnic minority population has risen from just 4.3% in 2001 to around 8% at the 2011 census. If white minorities are included, such as Irish, Polish and traveller populations, this percentage rises to 11%. Areas to the West of the borough have the highest proportion of ethnic diversity - particularly among younger populations. Stockport has seen an increase in both the Muslim population and people of no religion between 2001 and 2011. On the whole these populations are younger than average.

40% of people registered with a Stockport GP have one or more long-term health conditions and around 30,000 people have caring responsibilities, including 4,230 children. 7,560 local children have special educational needs and / or a disability. Over 2,000 children are classed as 'in need' with 660 Looked After Children[8].

[8] 230 placed in Stockport by SMBC; 300 placed in Stockport by another Local Authority; 130 placed by Stockport in another Local Authority.

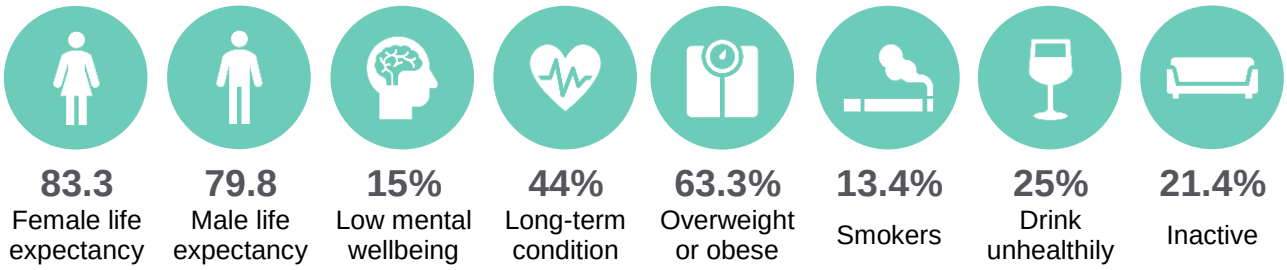
Health in Stockport

Stockport continues to be one of the healthiest places to live in the North West, with overall health outcomes similar to the national average. However, we know this is not the experience of all of our residents: outcomes vary significantly between affluent and deprived areas.

Average life expectancy in Stockport is high, with women living on average 83.3 years and men 79.8. However, there is significant difference within our neighbourhoods, with men in Bramhall South living 11 years longer than those in Brinnington & Central. This variation is also seen in healthy life expectancy - in the most deprived areas the decline in health starts at age 55, compared to 71 in the most affluent areas.

At least 93,500 people in Stockport have one or more long-term health conditions, with hypertension, asthma, diabetes and heart disease the most common. 7,560 local children have special educational needs and / or a disability. 15% of the population report low wellbeing – rising to 29% in deprived areas. 11.9% of children aged 5-19 report low mental wellbeing and 12.8% have a mental health disorder. Cancer is the main cause of death in the borough, followed by heart disease and lung disease. While this is the case for all community groups, people in more deprived areas are more likely to die earlier of these diseases.

26% of adults have three or more lifestyle risk factors associated with ill-health: 22% of adults are inactive, 25% drink unhealthily, and 63% are overweight or obese, similar to the national position. Stockport residents are less likely to smoke than the national average – only 13.4% of adults in Stockport smoke, compared to 13.9% nationally - but this rate more than doubles in areas of deprivation to 34% in Brinnington.



The Impact of COVID-19 on the long-term health of our population has yet to be fully understood. We know that at least 50,000 people in Stockport will have been infected with COVID-19 over the last 16 months, with 27,650 diagnosed and more than 1,900 being admitted to hospital as a result. More than 750 people in Stockport have sadly died due to COVID-19, and in 2020 the overall mortality rate for the borough was 14% higher than normal, an excess mortality level similar to the national average. COVID-19 is exacerbating existing inequalities in health and is particularly affecting older people, males, ethnic minority groups and those living in deprived areas. In addition, lockdown has impacted on children's development, the consequences of which will be not be understood fully for some time. National life expectancy modelling shows a reduction in life expectancy of 0.9 years for women and 1.3 years for men between 2019 and 2020, with larger reductions of 1.6 years for females and 1.9 for males in the most deprived areas.

Local Services

At some point in their lives, everyone will need the support of health and care services.

There are currently around 10,000 people working for the partner organisations to provide health and social care services. In addition, a wide range of people work in Stockport's private care providers and care homes; there are 3,000 employees and 49,100 volunteers working in Stockport's voluntary and community sector; as well as Stockport's 31,982 unpaid carers, who make a vital contribution to our system.

Stockport also benefits from a high number of health and social care professionals working across the region who live in the borough - providing a strong community asset.

Health and care services are a major industry, accounting for 12% of all employment in England. Each year in Stockport there are around:



1,500,000
GP appointments



470,650
Community health contacts



141,000
Mental Health appointments



105,000
Emergency Department attendances



131,700
Hospital admissions



350,000
Outpatient appointments



1,639,620
Prescriptions issued



70,000
NHS Sight Tests



18,039
dental appointments



3,514
Referrals to Children's Social Care



6,307
Adult Social Care users



2,300,000
Voluntary Sector interventions

United in the face of the pandemic, our organisations and communities have joined forces to create an ambitious, connected and caring borough, working hard to overcome the challenges. Through working together and supporting each other we know we can create a happy and healthy borough for all of our residents.

For more information on Stockport's population, needs and services, see our joint Strategic Needs Assessment[9].

[9] http://www.stockportjsna.org.uk/

3. OUR JOURNEY

Over the past decade, Stockport has seen significant changes in health and care:

People in Stockport can now access General Practice services 7 days a week



Patients have access to a team of pharmacists supporting medicines reviews and self-care advice in GP surgeries



Residents now have access to non-clinical advice and guidance on social, economic and practical needs from Social Prescribers in General Practice



People with back or joint pain and other musculoskeletal conditions can now go straight to a physiotherapist through their GP Practice



Children, young people and families can access Stockport Family's fully integrated health and care model of support based on where they live, with strong links to education inclusion services and schools



Children and young people facing a crisis now have support from a Rapid Response team and access to Safe Zones, designed with young people



People with complex care needs can benefit from a multi-disciplinary approach, bringing together all the professionals involved in their care to coordinate support in neighbourhood teams.



People now have access to Healthy Stockport - our prevention and self-care resource hub, which sits at the heart of a family of prevention services.



Adults struggling with their mental health can access the Open Door safe haven 7 days a week, supported by a 24 hour helpline and overnight safe space, STEM (Stockport Early Management Team).



In an emergency, people have access to a community Crisis Response Team; GPs in the emergency department; increased mental health support in A&E; and extended opening hours in the Ambulatory Care Unit to assess and treat people without an admission



2020 was an unprecedented year which had a profound effect on every member of our community. We are immensely proud of the amazing efforts made by our combined health and care workforce and their support teams during the COVID response as well as key workers in the wider public sector and community. We have seen incredible resilience and adaptation, with more joined-up care, which has delivered an outstanding result.

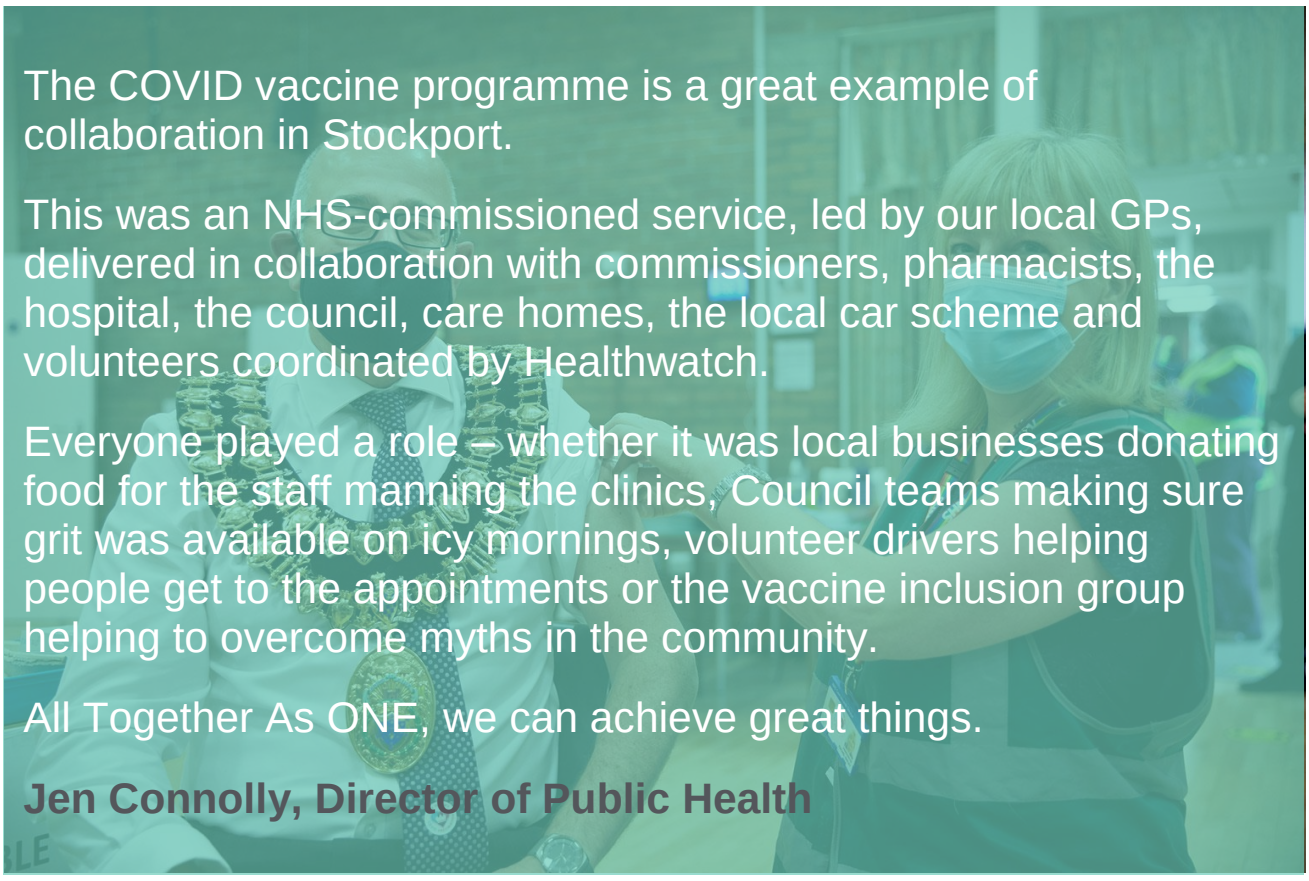
However, COVID-19 has not affected all of us equally and has exacerbated the inequalities in our borough:

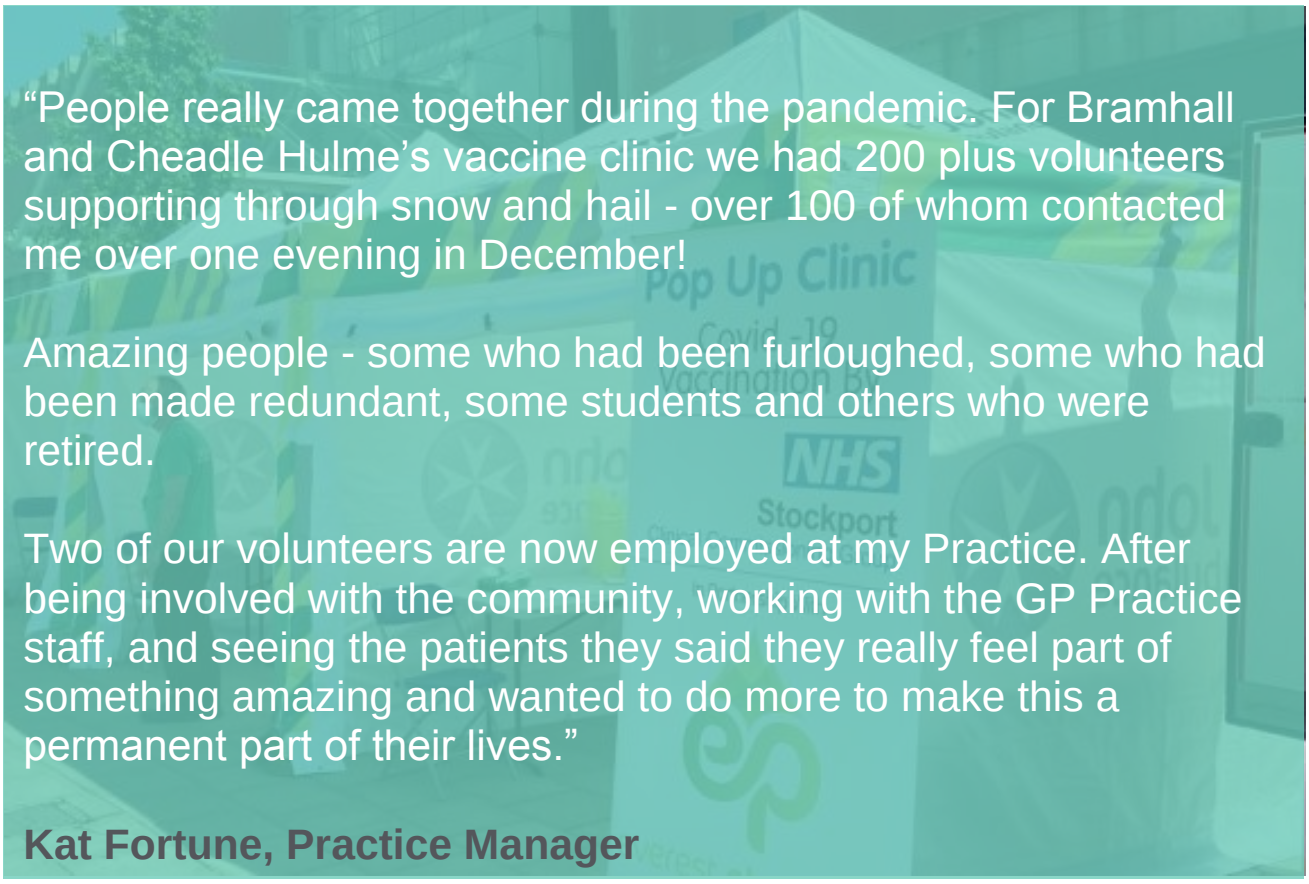
- rates of infection were significantly higher among people in manual occupations and frontline health and care staff;
- older people and those from Black, Asian and Minority Ethnic (BAME) backgrounds were more likely to experience serious complications from the virus; and
- mortality rates from COVID-19 have been significantly higher in areas of deprivation – particularly among younger people.

Even among those who did not contract COVID-19, lockdown has had significant impacts on mental health and wellbeing, felt most in: deprived areas where there is less access to green spaces and lower quality of housing; among those who are socially isolated; and among care home residents, where access to families and visitors was restricted. The focus on managing the pandemic has resulted in unavoidable delays for routine care, which has had a disproportionate impact on people with disabilities, long-term conditions, and families of children with special education needs and disabilities.

If 2020 taught us anything, it's that we're stronger working together.

Our aim is to learn from the positive changes over recent years and from the inspiring levels of community support and compassion during the pandemic to build back stronger, supporting our most vulnerable, to and create a healthy, happy and more resilient borough.





"People really came together during the pandemic. For Bramhall and Cheadle Hulme's vaccine clinic we had 200 plus volunteers supporting through snow and hail - over 100 of whom contacted me over one evening in December!

Amazing people - some who had been furloughed, some who had been made redundant, some students and others who were retired.

Two of our volunteers are now employed at my Practice. After being involved with the community, working with the GP Practice staff, and seeing the patients they said they really feel part of something amazing and wanted to do more to make this a permanent part of their lives."

Kat Fortune, Practice Manager



"Stockport Car Scheme is part of the Wellbeing & Independence Network. It helps to keep people well in their own homes by enabling those who would struggle with public transport to get out and about in a safe way.

Over the last year there has been a reduction in social groups and people going out shopping, so we adapted our service to help deliver prescriptions, foodbank parcels, pulse oximeters and thermometers to people shielding.

We also delivered 7-day support for people attending a vaccine clinic. Some days we have taken almost 80 people for a vaccine!

During these unprecedented times the number of people coming forward to volunteer has increased and enabled us to cover all requests for support. We feel that we can build on this enthusiasm and offer more medical transport in the future."

Sue Peck, Stockport Car Scheme

4. SHAPING OUR PLAN

The Borough Plan and our Health & Care Plan are for everyone, so it is important to us that we reflect this when shaping it.

Our plans are based on a wide range of evidence:

- throughout 2020 we spent time seeking and listening to over 3,800 people to capture the experiences, insight and aspirations of our communities, businesses and different partnership perspectives to inform the development of the Borough Plan
- over the first half of 2021 we spoke to almost 1,000 people about the health and care plan, and
- we have been analysing all our data and intelligence to understand our opportunities and our challenges.



Our data is telling us that:



Stockport's population is changing, we have an increasingly culturally diverse community, an ageing population and Stockport is a popular place for people to relocate to and live



Stockport has a strong economy, we are in the top 20 in the UK for productivity growth. We are responding well to new emerging industries. However, as with other areas we face the challenges of unemployment



We are a **polarised borough** (top 10 in England), with a number of our residents living in some of the most affluent and least affluent areas in England



Stockport's **children generally achieve above average outcomes,** however the most vulnerable and deprived children do not perform or engage as well as their peers across England



Stockport tends to have **good health outcomes and life expectancy** that have been improving year on year, but our **growing levels of health & care needs will present in challenges in future years.**

What we have heard is that:



People are **passionate** about their local area, enjoy being part of a community, supporting local businesses and want to get involved



Equality, equity and unity are important for our communities and at the heart of how we want to work together in the future



Access to **health services** was identified as a big future priority and **Mental Health and wellbeing** was a particular concern for young people.



Our **communities care for the environment** and want to proactively address the causes and impacts of climate change



People, businesses and communities talked about the importance of **inclusive employment opportunities** and inspiring future generations



The **economy and recovery** from COVID is a concern but we don't want to lose our ambitions around regeneration and economic growth



People and communities have, and continue to be, **impacted by Covid-19**, whether it is their health, employment, wellbeing or concerns for the future

In particular, the following feedback was received around health and care:

- While health in Stockport is generally good, people are worried of the impact of COVID-19 on their health and wellbeing and on existing health inequalities
- Access to good quality health services is a top priority for the future
- Cultural competency is important for services
- Emotional wellbeing and mental health is a priority - particularly for young people. Rates of poor wellbeing have almost doubled from pre-pandemic levels
- Obesity and smoking are on the rise among young people and key for improving health and reducing inequalities. Behaviours and cost are key barriers to making healthy choices
- Support for carers, including respite care, is a big priority – Signpost identified 1,000 new carers during the pandemic
- Wider factors like employment, education, housing, leisure and green spaces all have an impact on health and vice versa
- Social isolation is a major issue for mental wellbeing – even more so since COVID
- We have an ageing population which brings opportunities but puts more pressure on health and care services
- Some people and communities require additional support such as families with a child with Special Educational Needs and Disabilities, care leavers and older people
- Services need to work together and take a holistic approach to care for an individual.

A full analysis of engagement can be found in **Appendix 2.**

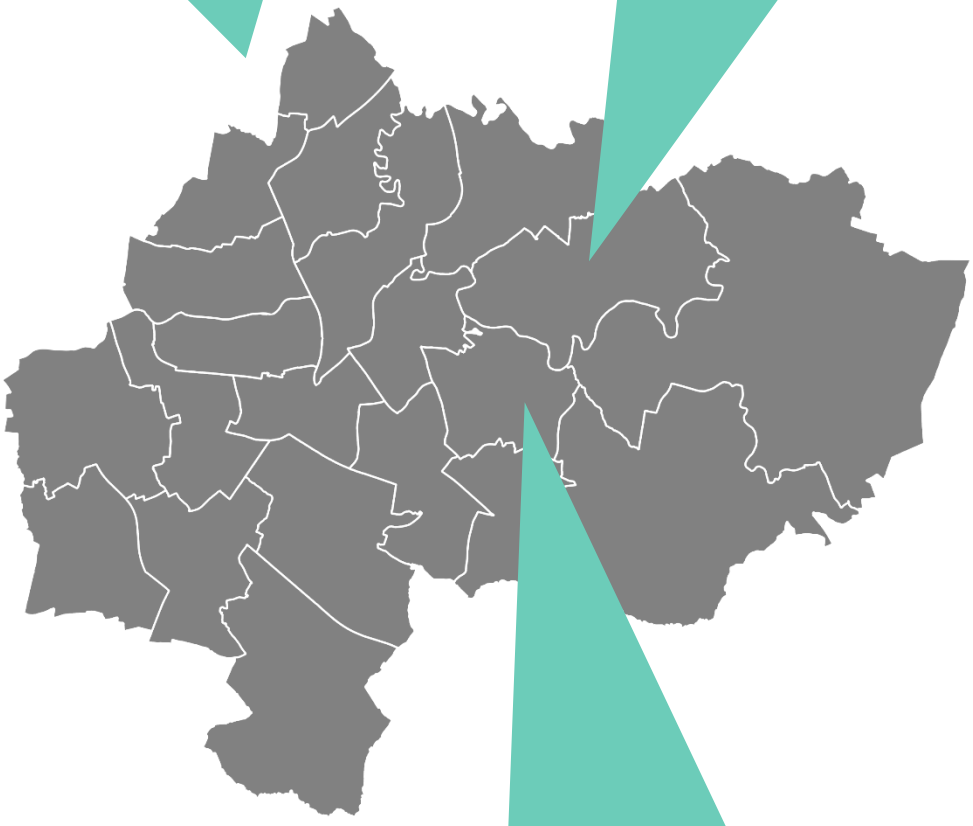
"Looking after our mental health is more important than ever!"

Millie, Stockport College, age 17

"I want everyone to be happy and healthy. Good health isn't just about good services it is also about employment, education, friendship and enjoying the outdoors."

Claire, Romiley, age 43

ONE STOCKPORT



Impact on health and wellbeing

Health Inequalities

Collaboration

Mental Health & Wellbeing

High Quality Services

Wider Determinants of Health

"For an aging population, I think having an accessible and good quality health care network is key - this ties in closely with a good quality social care and community network.
People need to feel safe and secure and this is dependent on health and connectivity.
It's imperative this is supported by being able to get around and have access to a solid and affordable public transport system."

Janet, Offerton, age 68

5. OUR VISION

Our vision for 2030 sees us all working together to develop a borough which is inclusive, caring, enterprising and full of ambition. **We want people to live the best lives they can and feel happy, healthy, included, and independent.**

For health and care, this means giving everyone the best possible start in life, reducing inequalities between different communities while improving health and wellbeing for everyone in the borough.

The best way to achieve this goal is to **work together as ONE system, wrapping care around the needs of the individual.** We will create a sustainable, person-centred system where professionals work together with local communities, recognising their strengths and assets, to prevent ill health, proactively support people to remain independent and offer high quality care when needed.

We want services to create the conditions that enable people to live healthy and happy lives and offer proactive support when needed. This means preventing problems emerging in the first place or, if issues have emerged, offering the help people need, when they need it, to address problems and/or prevent or delay them from getting worse. It means working *with* people rather than doing things *for* or *to* them and helping them to access and develop the resources available to them.

General Practice and local education settings will be key anchors that services are wrapped around. Learning from the progress of our integrated neighbourhood teams, Stockport Family, and the Team Around the Place, we will develop our **ONE Neighbourhood Model of multi-disciplinary teams, working together for their shared communities**. Health and Care leaders will work together as ONE System, embracing new technology to improve independence, access to information and services, and create a sustainable system, operating with a Place-Based budget to ensure delivery of quality outcomes for everyone.

Working through our neighbourhood model, we will **match support to local needs, increasing the scale and pace of progress to reduce health inequalities**. Our approach will be inclusive, recognising the significant benefits of communities looking after each other during the COVID pandemic and the impact of wider public services such as education, housing and employment on health and wellbeing.



➢ **Healthy, Happy, Included**



➢ **Communities that *care* and look after each other**



➢ **ONE Stockport, ONE Neighbourhood Approach**

A Healthy, Happy Stockport

Putting people at the heart of everything we do. Working together as ONE System to wrap support around the individual.



Person-centred care for you and your family at the end of life	• Palliative Care • Respite • Care Homes
Help to get you back to health and independence	• Rehabilitation • Reablement • Resettlement • Intermediate Care

Responsive care in times of need	• Elective care
	• Urgent care
	• Specialist services
	  • Mental Health
	  • Cancer Care
	  • COVID response

Support people to maintain their health, wellbeing and independence through proactive management of care	• Primary Care • Social Care • Neighbourhood teams • Housing • Education • Voluntary & Community Sector
Prevent ill-health and dependence	• Vaccination • Immunisation • Risk Stratification • Equipment & adaptations
Enable people to be healthy & happy, ensuring everyone has the best possible start in life	• Self Care • Wellbeing services • Reducing inequalities • High quality maternity services
Putting people at the heart of everything we do	• Local People • Families • Carers

This plan provides a framework to guide our work across all stages of the life course from birth to death, to prevent risks becoming problems and challenges from becoming entrenched or turning into crises so that everyone in Stockport can live their best lives.

6. VALUES

2020 has taught us so much and has enabled us to build new relationships, develop ourselves and work with those around us to overcome challenges – giving us hope for the future of Stockport.

In Stockport…

- **We are inclusive.** We believe our difference and unique experiences need to be celebrated. We proactively address inequality and hold ourselves accountable for everyone feeling included and valued.

- **We are ambitious.** We believe in Stockport, our people, and the places that make up our Borough. We are continuously challenging ourselves to be the best we can be for Stockport.

- **We are collaborative.** We believe in working together, including with our citizens, openly and honestly. We support each other and always work together for the benefit of Stockport.

We will uphold these values as citizens, employers and partners, championing them with our neighbours, our colleagues and our local communities.



As ONE Health and Care System, we will work to the following principles:

- **Person-Centred**
  Putting people at the heart of our services, recognising their skills, networks and assets. Professionals and organisations will work together for our communities

- **Place-Based**
  Working together across Stockport and within neighbourhoods to support shared populations. Following the principle of subsidiarity so decisions are taken closer to the communities they affect.
  Considering the whole system and responding to complexity with collaboration.

- **Outcomes-Focussed**
  Delivering excellence in our services, health and wellbeing outcomes, leadership and in how we support our colleague. Being innovative and informed by evidence.

- **Strengths & Asset-Based**
  Recognising the strengths and assets individuals and communities bring to the table and proactively engaging with them to co-produce the right support. Enabling personal growth and empowering people to determine and achieve their goals, drawing on their own and their communities' assets.

- **Fair**
  Reducing inequalities at the core of all we do, with links to wider public services and determinants of health. Valuing diversity and adapting ways of working to empower all of our communities.

- **Sustainable**
  Able to meet changing local needs within the available place-based budget.
  Make best use of digital technology to support our work and enable independence
  Working together to respond to the challenge of climate change.

"I don't know the difference between NHS Stockport, Stockport NHS and all the other services – I just want them to work together instead of passing people from pillar to post. There should be no wrong door for accessing care"

Steve, Signpost's Young Carers

"I know what I need better than any stranger sat behind a desk. You should ask me what I want, not tell me what you want to do"

Jean, Cheadle Hulme

"The people we all care for should come before the organisation we work for and the system needs to make that easy to do"

Julia, Social Worker

7. OUTCOMES

Our health and wellbeing have never been more important to us. ONE Stockport sets a clear mandate for health and care partners to deliver real change. Stockport residents will see tangible improvements in health and wellbeing as well as in the quality of local services. Through this plan, we aim to deliver the following outcomes for our population:

Strategic Outcomes	Measures of Success
 **Stockport residents will be healthier and happier**	• Increase in life expectancy • Increased happiness & emotional wellbeing scores • More children and young people who are thriving • Reduction in loneliness and social isolation.
 **Health and wellbeing inequalities will be significantly reduced**	• Increase in health life expectancy • Improved access to screening • Earlier diagnosis of cancer, heart disease, and respiratory disease • Reductions in smoking and obesity • Reductions in premature mortality among those with the worst health outcomes
 **Safe, high quality health and care services will work together for you**	• Positive CQC ratings for all services • Consistently high staff and service user satisfaction levels • Delivery of national standards • Improved Access to services • Reduction in Waiting times
 **Stockport residents will be more independent and empowered to live their best lives**	• More people are physically active • More people eating the recommended 5-a-day • Reduced rates of unhealthy drinking • Fewer avoidable emergency hospital admissions • Fewer permanent admissions to care homes

Delivery of these improvements will be monitored through Stockport's Integrated Care Locality Board and overseen by Stockport's Health & Wellbeing Board.

What Action We Will Take

1. Continue to provide **safe, high quality health and care services** through new system leadership arrangements and a joint improvement plan

2. Radical focus on **early help and prevention** through codesigning a new model, recommissioning key services for 2022 and making the most of digital technology. Including the network of support from friends, family members and the many local community groups and organisations that provide vital care and support within the home

3. Improve **mental health and wellbeing** through development of a joint all age mental health and wellbeing strategy working with communities, schools and businesses

4. Work together to undertake **targeted action on inequalities** through a new population health plan and **neighbourhood model** that recognises wider factors such as housing, employment and social connectedness

5. Build and retain a **resilient, valued and inclusive health and care workforce** that promotes homegrown talent to create training and employment opportunities for local people and carers through a joint workforce plan

6. Continue our work to be an **Age-Friendly Borough** through our aging well strategy that proactively supports people to age well and remain healthy, active and enjoy a good quality of life

7. Develop the way we deliver Adult Social Care and Health to help the people of Stockport to live their best lives possible. We will continue to embed and develop our operating models which promote **prevention, reablement and a Home First ethos**.

How We Will Measure Success

- Maintain and increase healthy life expectancy across the Borough, whilst also reducing the widening gap between our communities
- Early intervention and prevention keep people independent for as long as possible and reduces admission and re-admission to hospital, residential or nursing care
- Improvement in the levels of happiness, mental health and emotional wellbeing and increase the number of active people across the Borough
- Better access to mental health treatment and support (via CAMHS and Community Mental Health Services) for children and young people
- Improvement in the quality and timeliness of care and support needed
- Financially sustainable and resilient health and care provision.



8. PRIORITIES WE WILL DELIVER

The COVID-19 pandemic taught us all the importance of working together to support each other to design and deliver real change. We will maintain the positive collaboration and increased communications between partners, taking a system-wide approach to our work.

We will put local people above organisational needs through multi-disciplinary working and redeployment across services that flex to local needs; harmonise partner plans, providing checks and balances of the impact of one partner's plans on another's capacity.

In July 2021 the Government published a Health and Care Bill[10], outlining a range of reforms including the development of Integrated Care Systems (ICS) to deliver joined-up place-based working across health and care providers. Locally, this will take the form of a Greater Manchester ICS, supported by a locality construct in each of the ten Boroughs of Greater Manchester.

Integrated Care Systems will work at three levels:

- **System** setting strategic direction and delivering economies of scale
- **Place / Locality** bringing together local services to build a comprehensive offer
- **Neighbourhood** integrated teams of health and care professionals supporting their local communities

This structure, fits with the ideals of ONE Stockport and our Health & Care Plan to meet Stockport's needs through the following delivery model:

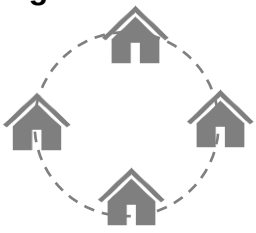
- ONE System based around you, not organisations
- ONE Locality Board managing outcomes from a place-based budget
- ONE Delivery Partnership operating ONE Neighbourhood model.

Using this new model, the following section sets out how we intend to deliver each of the health and care commitments in the borough plan:

- *Quality & Leadership*
- *Early Help & Prevention*
- *Independence & Reablement*
- *Mental Health & Wellbeing*
- *Tackling Inequalities*
- *Stockport's Neighbourhoods*
- *Age-Friendly Borough*
- *Valued Workforce*

For each commitment it explains what actions we will take, what outcomes we will deliver and what this means for you.

[10] https://publications.parliament.uk/pa/bills/cbill/58-02/0140/210140.pdf

Our Future Integrated Care System (1st April 2022)			
Level	**Population**	**Overview**	**Local Model**
System 	***2.822m in Greater Manchester***	Integrated Care System in which the whole area's health and care partners in different sectors come together to set strategic direction and to develop economies of scale.	#GreaterManchester
Structures:	Integrated Care Partnership (ICP) as the NHS body	bringing together the NHS, Local Authorities and wider partners including voluntary sector to address health, social care and public health needs across GM	
	Integrated Care Board (ICB)	responsible for NHS planning & funding allocation, performance, accountability and functions transferred from CCGs; plus day to day management of the ICS	
	GM Provider Collaborative(s)	responsible for delivery of NHS Constitution and standards of care care across different provider organisations	
Place 	***291,775 in Stockport***	Our Borough, bringing together health and care teams to understand local needs and prioritise service delivery to improve health and wellbeing for everyone in Stockport	#ONEStockport
Structures:	Health & Wellbeing Board	bringing together political, clinical, professional and community leaders across the health and care system to oversee local outcomes	
	Locality Board	Board of health and care leaders and service providers responsible for co-ordinating the local contribution to health, social and economic development, jointly managing the place-based budget and providing assurance to the GM ICS	
	Provider Alliance	bringing together local care providers to ensure seamless delivery of care, holding each other to account to transform, deliver, assure and sub-contract services to deliver the population health and wellbeing priorities of the Locality Board	
Neighbourhood 	circa 30,000 to 50,000 people	Local neighbourhoods served by integrated health and care teams to deliver more coordinated and proactive services that keep people happy, healthy & independent	#TeamBramhall #TeamCheadle #TeamHeatons #TeamTameValley #TeamHazelGroveOfferton #TeamVictoria #TeamMarple #TeamWerneth
Structures:	Neighbourhood Teams	multi-agency approach from GPs, community services, mental health teams, social care, voluntary sector and Healthwatch etc	

8.1. QUALITY & LEADERSHIP

We will work together as ONE System to deliver safe, high quality health and care services through new system leadership arrangements and a joint improvement plan.

Quality is our top priority.

> "There have been examples of excellent quality of care through the Covid-19 pandemic. People really stepped up and took responsibility to help people, regardless of which team they work in"
>
> **Julie, Mental Health team**

Stockport's health and care system currently relies heavily on hospital care, with high rates of hospital admissions for conditions which, in most parts of the country, would be treated out of hospital. We spend more on acute hospital care and less on NHS mental health services than our peers.

We believe that the only way to improve health and care for everyone in Stockport is to work together as ONE system, wrapping care around the needs of the family and or individual. We will work together to create a sustainable, person-centred system where professionals work together with local communities to prevent ill health, proactively support people to remain independent and offer high quality care when needed.

Leaders from across Stockport will come together to oversee a plan to improve our health and social care. We will co-produce a quality improvement plan and optimise outcomes through effective clinical and professional leadership.

> "Data sharing is critical for working well together. We need aligned systems and consent processes so we can share information and provide the best care to our shared populations."
>
> **Kirsteen, Citizen Focus**

We will embed a culture of safety and create an environment of continuous quality improvement, research, and innovation. We will positively act upon learning – whether from incidents, complaints, or compliments about what goes well – and share this across the system.

We will continue to work with partners across the city region to address variation in standards, access, and quality.

Safe, high quality health and care services

Objectives: To embed a culture of safety and create an environment of continuous quality improvement, research, and innovation. To take accountability for health and care services in Stockport continuously improve performance against national standards. To develop an Integrated Care System that provides seamless care and delivery of high-quality outcomes.

Actions:

- Develop local Integrated Care System & leadership arrangements
- Build a Provider Alliance to deliver integrated services in Stockport
- Re-design and integrate multi-agency pathways
- Develop a System Charter on Quality
- Co-produce a Quality Improvement Plan
- System-wide audit plan and commissioning strategy
- Community Diagnostic Hubs
- Rapid Diagnostic centres
- Enhanced Health in Care Homes
- Digital innovation, including virtual outpatients and telehealth
- Develop a strategy to optimise use of estate
- South East Sector development set out in Taking Charge
- Implement the GM Cancer plan
- Implementation of the Better Births Standards
- Recover health and care services post-COVID, reducing waiting lists
- Work with partners in GM to address variation in standards, access, and quality

Outcome Measures:

- Consistently high levels of satisfaction with health and care
- All services rated as ‘good’ or ‘outstanding by the CQC
- High quality Social Care services compliant with the Care Act
- Full delivery of NHS constitutional standards
- We will be in the lowest quartile nationally for clinical error
- Improved access to services and reduced waiting times
- Low levels of complaints upheld by the ombudsman
- Fewer child deaths, particularly in areas of deprivation
- Fewer unnecessary emergency admissions to hospital
- Reduction in harm to individuals
- Financial sustainability in the system

What does this mean for….

➢ Our population

Better care, improved services, and satisfaction. Greater confidence in health and care providers.

➢ Our staff

Proud of care provided. Enthusiasm to be a team member / leader.

➢ Our partners

Confidence in our system.

What will the future look like?

There should be no organisational boundaries, ensuring care is seamless. We will have a stable, highly motivated and engaged workforce, with the skills and expertise to enable us to deliver improvements in line with national and regional delivery programmes.



8.2. EARLY HELP & PREVENTION

We will work together as ONE System to deliver a radical focus on early help and prevention through co-designing a new model, re-commissioning key services and making the most of digital technology. Our work will include the network of support from friends, family and the many local community groups and organisations that provide vital care and support within the home.

Traditionally, health and care services have focussed on support for people in crisis. While this is important, we need a greater focus on supporting people to live well, preventing ill health and empowering people to live their best lives.

> "It's easy to wait for someone to fall down and put a plaster on their knee… … we should help people to live well so they don't fall in the first place!"
>
> **Healthwatch Engagement Event**

Prevention needs to start from an early age to improve outcomes and build a strong foundation for physical and mental health and wellbeing throughout life. We will collaborate across the system - particularly with schools - to give Stockport residents the best start in life, including delivery of the Start Well Strategy, and work with colleagues across the city region to respond to the Marmot review of inequalities in Greater Manchester[11].

We will ensure a particular focus on our children and young people with Special Educational Needs and Disabilities (SEND), including work on diagnostic pathways. More detail on our broader children's work can be found in "A Caring & Growing Stockport".

We will improve the use of technology to help people live well at home, with easily accessible advice and guidance. Digital support should enable people – we are committed to supporting those who cannot access this option. Through our "Active Communities Strategy" we will encourage everyone to lead healthy, physically active lives. We will also work together to improve our approaches to identifying health risks and social determinants earlier and supporting people to make changes before they develop long-term conditions.

Building from Stockport's successful screening programmes, we will enhance early assessment and intervention for long term conditions, with a specific focus on those conditions that most contribute to health inequalities: cardio-vascular disease, respiratory disease, cancer and diabetes. We will develop a community diagnostic hub, increasing access to screening and routine diagnostics out of hospital and a Rapid Diagnostic Centre for cancer screening.

We will review those services specifically commissioned to prevent ill health, social isolation and loss of independence to ensure that we are getting the most impact, reducing any overlap, sharing information, and targeting those with the greatest need. And we will embed early help and prevention into the way all of our services work across the system – shifting the focus from treating illness to helping people stay well and independent.

[11] https://www.instituteofhealthequity.org/about-our-work/latest-updates-from-the-institute/greater-manchester-a-marmot-city-region

Radical focus on early help and prevention

Objectives: To shift the balance of care from reacting to problems once a person needs help, to more support for people to stay well and reduce, avoid and delay the need for intervention by health and care services. Effectively address the social determinants of health and wellbeing and clearly articulate the health and social care offer to residents.

Actions:

- Re-commission preventative services
- Clearly articulate the health and social care offer to local people
- Community Prevention Hub development
- Diabetes Prevention Programme and online self-management
- Community Diagnostic Hub & Rapid Diagnostic Centre
- Respond to the Marmot review in Greater Manchester
- Early Help Strategy & Start Well Strategy
- Focus on childhood obesity
- SEND Strategy & Joint Commissioning Plan
- Address the wider determinants of health and wellbeing
- Make the most of assistive and digital technologies
- Digital Prevention Strategy
- Population Health Management & risk stratification
- Prevention, strength and asset-based focus in every pathway
- Provide information in an accessible way so people feel informed

Outcome Measures:

- Increase in life expectancy & healthy life expectancy in Stockport
- Improved outcomes for children with SEND
- Increase the proportion of people who are active
- More people using outdoor space for exercise / health reasons
- More people meeting the recommended 5-a-day, particularly children
- Reduce obesity levels, particularly in deprived areas and children
- Reduce rates of unhealthy drinking
- Reduce smoking, particularly in deprived areas
- Maintain high uptake of flu vaccine
- Increase uptake of screening
- Earlier detection of cancer, heart, liver, and respiratory disease
- Fewer people accessing formal care

What does this mean for….

➢ Our population

Support to live well and prevent the need for health or social care interventions. Improved health outcomes.

➢ Our staff

Satisfaction of empowering people and improving their lives. Reduction in preventable diseases.

➢ Our partners

Greater input from the voluntary sector. Partners will have confidence in us to deliver sustainable services.

What will the future look like?

More people are active, healthy, resilient, and happy. People take ownership of their health and wellbeing. Diseases are identified earlier and treated, reducing the demand on specialist services to provide timely support to those with serious conditions. Earlier intervention when treatment options are less expensive generates a sustainable health and care system, well placed to meet the needs of our growing population.



8.3. INDEPENDENCE & REABLEMENT

We will work together as ONE System to develop the way we deliver Adult Social Care and Health to help the people of Stockport to live their best lives possible. We will continue to develop and embed our operating models which promote prevention, reablement and a Home First ethos.

Over recent years our Adult Social Care team has developed a new approach to care, based on:

- Prevention – helping people stay well so that they don't need formal care
- Reablement – when people do need support, helping them recover and regain their independence;
- A Home First approach – delivering the right care and support to people within their own homes.
- Developing and implementing a strength and asset-based approach to enable people to utilise local and personal resources and support as much as possible without necessarily relying on formally provided and charged for services.
- Working with people who receive formal services to routinely review their care and support needs and ensure that any services they receive remain relevant and appropriate to theirs and their carer's circumstances.

This also applies to health services - when you are really sick, hospitals are the place you need to be. Ideally, services will prevent problems emerging in the first place, but when you do need help, it does not always need to be given in hospital. If you *do* need hospital treatment, this should be only for as long as necessary and your discharge should not be delayed. Once you are medically stable, you recover much better and faster at home with the right support around you. Being in familiar surroundings with support from loved ones, family and friends is also one of the best things for your mental wellbeing.

We want to change the way we deliver care so that people in Stockport are supported to stay well and independent, to take charge of their own health and wellbeing, accessing support as close to home as possible.

We want services to create the conditions that enable people to live healthy and happy lives and offer proactive support when needed. This means working *with* people rather than doing things *for* or *to* them and helping people to access and develop the resources available to them. However, when people do need formal care and support our aim is wherever possible to take a re-abling approach and work to promote people's abilities and independence.

Helping people live their best lives

Objectives: To support people to be happy, healthy and independent through a person-centred approach that helps people stay well and be as independent as they can be, preventing the need for formal care where possible, delivering services as close to home as possible, minimising length of stay in hospital or a care home, and enabling people to regain skills and wellbeing.

Actions:

- Thriving Communities reform programme
- Develop the Provider Alliance offer to people at risk of requiring formal support interventions
- Review of the Intermediate Care offer
- Develop alternatives to hospital to prevent unnecessary admissions
- Early Supported Discharge
- Structured Medication Reviews
- Making sure that people are only in care settings as long as necessary
- Social Prescribing
- Personal Budgets
- Community Champions
- DigiKnow Champions to support people to get online

Outcome Measures:

- People remain independent for as long as possible
- Fewer permanent admissions to residential and care homes
- Fewer admissions to hospital where care and treatment could be provided differently in the community or at home
- Fewer emergency hospital admissions among children
- Reduced length of stay in hospital
- More people accessing short-term services at the right time and reduce the need for long-term care
- More people feel confident to manage their own health or care needs
- More adults with a learning disability or serious mental illness living in stable appropriate accommodation
- More people have access to information, advice and guidance to maintain their heath and wellbeing
- Access to support is fair and representative of local population needs
- Local services comply with statutory and constitutional duties

What does this mean for….

➢ Our population

An increased level of independence. More emphasis on self-care and being involved in your care. Less trips to hospital and shorter time spent away from home.

➢ Our staff

An asset-based approach makes every role more meaningful. Healthy workforce role modelling positive lifestyle behaviours for the wider population.

➢ Our partners

A shared vision across the system to improve lives. Confidence in our sustainable system.

What will the future look like?

People feel confident to take control of their health and wellbeing to prevent ill health and stay independent. When support is needed, more often than not it will be offered close to home and in collaboration with the individual and their family / carers.



8.4 MENTAL HEALTH & WELLBEING

We will work together as ONE System to improve mental health and wellbeing through development of a joint all-age mental health and wellbeing strategy, working with communities, schools, and businesses

We want to improve mental health and wellbeing for everyone. We recognise that current services focus on people in crisis, rather than supporting people's emotional wellbeing, issues of loneliness, or helping people with mental health problems to live well.

We want to create a comprehensive package of care that supports people through all stages: from prevention, social support, emotional wellbeing, tackling loneliness, and living well with mental illness; to formal support like counselling, crisis care and inpatient services.



"BOOST deliver a range of physical activity sessions geared specifically at supporting people with poor mental health and those who are lonely and socially isolated, driven largely by my own lived experience of using physical activity as an alternative to prescribing.

I think residents find it incredibly difficult to identify non-clinical opportunities to improve their health and service providers do not have clear sight of what is on offer, particularly from the VCSE community."

Steve Flynn, BOOST

Care should also cover all ages – joining up support for children and young people through well-planned transition services with the support for adults and older people.

We want to extend the 'No Wrong Door' policy to all mental health and wellbeing services, so that people can always get the help they need, regardless of which part of the system they go to.

> "When people go to 'Open Door' - the drop-in service in the town centre – they will be signposted to the right service for them and supported to get the care they need."
>
> **Jane, Support Worker Manager**

As with many elements of this plan, mental health and wellbeing is strongly influenced by a wide range of factors, such as family, employment, education, deprivation, and housing. To create a comprehensive range of support will require input from a wider range of people. We will offer specialist mental health training in areas such as dementia, substance abuse, learning disabilities and eating disorders, to support all teams across the system to help service users with mental health support needs.

This workstream focuses on the actions that can be undertaken by health and care services, while recognising the importance of all elements of the ONE Stockport Borough plan to creating the conditions that can improve mental health and wellbeing.

Working with colleagues across the city region, we will support delivery of the Greater Manchester Mental Health & Wellbeing Strategy. Locally, we will ensure provision for mental health and wellbeing support across all communities, with particular focus on the most vulnerable groups.

Improving mental health and wellbeing

Objectives: To create a culture where people understand there is no health without mental health. System-wide support to maintain good mental wellbeing and prevent crisis. Recognition of the role of education, employment, housing and the community. A strong, joined up service offer for all age groups and levels of need that keeps people well and provides timely support when needed. Continued investment in mental health services.

Actions:

- No Wrong Door policy applied across all services
- Improving access to MH services, including place-based interventions
- Developing the primary care offer
- Reshaping community support for people with serious mental illness
- Creating alternatives to inpatient care
- Create a smooth transition for young people into adult services
- Better support for children and young people
- Annual health checks for people with serious mental illness
- Develop digital prevention offer
- 'Togetherall' online community support for emotional wellbeing
- Reduce social isolation, including befriending and volunteering networks
- Activity-based social prescribing
- Assertive outreach & post-discharge follow-up
- Development of emotional wellbeing support in schools
- Specialist day centre provision for people with dementia
- Specialist mental health training for all staff across the system
- Person-centred social care support which is compliant with the Care Act and complements NHS services

Outcome Measures:

- Fewer people experiencing low wellbeing
- Fewer people reporting loneliness and isolation
- More children and young people who are thriving
- 24/7 access to crisis care via NHS 111
- Core 24 mental health liaison service
- Fewer out of area placements for acute mental health
- Reduce premature mortality in adults with severe mental illness
- Reduce self-harm and suicide rates
- Fewer relapses / re-referrals into alcohol and substance abuse services
- Improved access to mental health services

What does this mean for….

➢ Our population

Consistent support for all ages. Support to live well. Better care and greater levels of satisfaction.

➢ Our staff

Proud of care provided. Capacity to deliver well. Enthusiasm to be a team member / leader.

➢ Our partners

Confidence in our system Joint working across the city region.

What will the future look like?

A happy borough where people are supported to live well. Good access to information about mental wellbeing, which is seen to be as important as physical health. Good access to support for all ages and needs.



8.5 TACKLING INEQUALITIES

We will work together as ONE System to undertake targeted action on inequalities through a population health system that recognises wider factors such as education, housing, employment, and social connectedness

While health and wellbeing in Stockport is, on average, among the best in the North West, we know that this is not the experience of all of our communities. We want to give everyone in Stockport the best possible start in life and support them to live well and age well with equal opportunities and access to quality services, in the right place and at the right time.

The COVID-19 pandemic has not affected us all equally and has exacerbated the inequalities in our borough. Rates of infection were significantly higher among people in manual occupations and frontline health and care colleagues; older people and those from ethnic minority backgrounds were more likely to experience serious complications from the virus; and mortality rates have been significantly higher in areas of deprivation – particularly among younger people. The lockdown has had significant impact on mental health and wellbeing - felt more in deprived areas where there is less access to green spaces and lower quality of housing. We anticipate that this will also impact on the level of long-term health conditions in deprived areas. Significant effort will be put into recovery of screening services to reach those people who did not attend appointments during the pandemic and ensure that this does not exacerbate inequalities.

We will work to reduce inequalities and maximise healthy life expectancy by tailoring services to local needs. This will require a disproportionate focus of resources for those with the poorest outcomes - primarily within areas of deprivation and among people with learning disabilities, serious mental illness, and children with special educational needs.

While advances in tele-care and digital access to services has benefited many residents, we recognise that some people are unable to use this resource. We are committed to supporting digital inclusion through training, support for businesses including a digital platform for care homes, digital champion volunteers, internet access in public spaces and the DigiKnow lending library. More information can be found in our Digital Strategy.

We will take a systematic approach to inequalities at all levels. We will work with colleagues across the city region to respond to the Marmot review of inequalities in Greater Manchester[12]. Particular focus will be given to those health conditions that are the main driver of inequalities in outcomes – cancer, heart disease, and respiratory disease.

We recognise that public services working in isolation cannot effectively resolve many of the complex issues that drive the need for our services, such as poverty, education, employment, loneliness, and trauma. We need to work together with individuals, their families, carers and communities, voluntary organisations, schools and businesses in ways that respond to their lived experiences and aspirations.

[12] https://www.instituteofhealthequity.org/about-our-work/latest-updates-from-the-institute/greater-manchester-a-marmot-city-region

Targeted action on inequalities

Objectives: To reduce health inequalities between different groups in our population and improve health and care for all.
To address the wider determinants of health and wellbeing through system-wide action, supporting everyone to live well.

Actions:

- Address the wider determinants of health and wellbeing
- Take a systematic approach to the drivers of health inequality (cancer, heart and respiratory disease)
- Recovery of screening services post-COVID
- Digital Inclusion
- Improve services for people with learning disabilities and autism
- Delivery of our SEND Strategy & Joint Commissioning Plan
- Peer-to-Peer support from Community Champions to challenge lifestyle behaviours that impact on inequalities

Outcome Measures:

- Reduce the widening gap in life expectancy between our communities
- Reduce the healthy life expectancy gap
- Improve outcomes for children with special educational needs
- Improve health outcomes for people with a learning disability
- Increase smoking cessation in areas of deprivation
- Increased uptake of health checks, particularly in people with a Learning Disability, Serious Mental Illness & those in areas of deprivation
- Improved uptake of diabetes support
- Improve the one-year survival rate from cancer
- Reduce early deaths from cancer, heart, liver and respiratory disease, particularly in areas of deprivation

What does this mean for….

➢ Our population

Fair access to services. Improved outcomes for all. Better access to specialist services when needed.

➢ Our staff

Proud to work in Stockport. A satisfying and varied career path. Stronger community engagement.

➢ Our partners

Greater collaboration – between agencies working together for the best outcomes for our residents.

What will the future look like?

Everyone in Stockport will have the best start in life and the opportunity to live and age well. Inequalities in health and wellbeing outcomes will be significantly reduced with improvements in outcomes for all.



8.6 STOCKPORT'S NEIGHBOURHOODS

We will work together as ONE System through a new neighbourhood model that recognises wider factors such as education, housing, employment, and social connectedness

As our population grows and ages, more people are developing complex care needs and requiring support from multiple health and care services. Partners in Stockport recognise that people are more than just their health conditions or care needs. We will put people at the heart of our services and tailor care to their individual needs by creating the conditions for individuals, communities, services and professionals to work together. Delivery of care will be through a joined-up neighbourhood approach, with relevant professionals working together to deliver a seamless service.

> "We need to create neighbourhood teams who identify with their shared community, not an organisation"

Feedback from Staff Engagement Event

We want to build on our neighbourhood approach for adults with long-term conditions, our Stockport Family model for children, and the Team Around the Place to create a local model that brings together all the people involved in supporting you in your own community. We will work together to proactively identify people who may be vulnerable to losing independence - for example through an unplanned hospital admission or not being school ready - and deploy support from different agencies to reduce that risk. Key to delivery will be information sharing between teams and full roll-out of the shared care record.

In developing a single model for neighbourhoods, we will work across the full life course, ensuring a smooth transition from children's to adult services. While the model of care will be universal, the focus of neighbourhood teams will be tailored to local needs. This may mean that services in one neighbourhood have different priorities to others.

Integrated neighbourhood services will be co-ordinated around Stockport's primary care networks and local schools, bringing together GPs, nurses, community health services, social care, specialist secondary care, mental health services, community and voluntary groups to prevent ill health and to proactively manage care when the need arises so that people can remain independent. We will connect wider public service partners to the neighbourhood model, including education, housing and employment. We will use anchor institutions like libraries, community centres and cafes, as community hubs that link into neighbourhood services.

> The Start Point café in Woodley is a community hub, where anyone can come in and get advice, information about services, online learning or even just find someone to talk to.

Our neighbourhood model will recognise the invaluable contribution of carers to the independence and wellbeing of local people and ensure that adequate support is also given to carers themselves to support their wellbeing and resilience. We will put a greater focus on community resources and the role of the individual in making healthy decisions.

ONE Neighbourhood Model

Objectives: To offer a joined-up service in neighbourhoods, bringing together professionals from across organisations to deliver person-centred care with actions and priorities determined at a local level.

Actions:

- Develop a single neighbourhood model for Stockport
- Baseline of health and wellbeing needs in each neighbourhood
- Baseline of neighbourhood workforce and assets
- Improvement plans for each neighbourhood based on local needs
- Implement the NHS Comprehensive Model for Personalised Care
- Shared care records
- Development of anchor institutions as community hubs in each neighbourhood

Outcome Measures:

- More people with a co-produced care plan
- Increased confidence among people with a long-term condition to manage their own care
- More carers with long-term conditions feel supported to manage conditions
- Improved satisfaction among people with complex care needs
- Crisis response within 2 hours and reablement care within 2 days
- Fewer emergency hospital admissions for chronic conditions
- Fewer emergency hospital admissions for children with long-term conditions such as asthma, epilepsy, diabetes
- Fewer permanent admissions to residential or care homes
- Reduce the widening gap in life expectancy between our communities
- Reduce the healthy life expectancy gap

What does this mean for….

➢ Our population

Joined up care. Only need to tell your story once. Care and support solutions based on local need. Coordinated support.

➢ Our staff

Proud to work in Stockport. A satisfying and varied career path. Stronger community engagement.

➢ Our partners

Greater collaboration – between agencies working together for the best outcomes for our residents.

What will the future look like?

Health and care professionals work together in each neighbourhood of Stockport to support local people. Agencies will collaborate to focus on local needs, reducing inequalities and achieving positive outcomes through personalised care.



8.7 AGE-FRIENDLY BOROUGH

We will work together as ONE System to build an age-friendly Borough through our aging well strategy that proactively supports people to age well and remain healthy, active and enjoy a good quality of life, starting in the early years.

Stockport has an older population than most of our neighbours. This is a both a testament to the success of local health and care services and an asset moving forward through the knowledge, experience and support our older population provide to the community.

We need to celebrate the many ways older residents actively contribute to our communities, including volunteering, providing informal care to family and friends, their economic contribution to local businesses and their rich knowledge and experience.

As people live longer lives with more complex health and care needs, we need to work together across communities to support people better and earlier so that they can continue to live as independently as possible, remain healthy and active, feel happy, valued, respected and appreciated, and maintain a good quality of life.

Social isolation is a major issue for older residents which has become significantly worse in the pandemic and threatens health and wellbeing. Loneliness is an issue for many across the ages and needs to be recognised and supported.

For many older people the motivation to join groups is social interaction, so we have turned buddying schemes into Walk and Talk, which also incorporates families, so all ages can support each other in active living

We want to develop Stockport's ageing well strategy to make this a truly Age-Friendly Borough. We firmly believe Age Friendly should relate to all ages and be embedded in how we work together, design local areas, and shape services so that children are supported to thrive, people can grow and age-well with the right care at the right time.

The Reddish Cycle Repair Shed is an inter-generational project that works with Adswood Primary school, enabling disadvantaged kids to learn to fix and own a bike.

We need to develop housing that is inclusive, suits people at different stages of their lives and meets different needs - taking advantage of future developments in technology around adaptable housing for all ages.

In terms of employment, we need to recognise the role of older people in our workforce, value their experience and support them to share learning with future generations.

And we need to review the education offer around lifelong learning, particularly focussing on the all-age strategy to support people at all stages of their lives from re-training and getting back into employment, to adult literacy.

An Age-Friendly Borough

Objectives: To embed a culture of fairness and an environment that supports people to start well, live well, and age well.

Actions:

- Start Well Strategy & Children's Plan
- Development of the Team Around the School approach post-16
- Ageing Well Strategy
- 'Big Conversation' to plan for a happy, healthy older age
- ONE Stockport Age-Friendly Network
- Active Ageing Programme
- Promote and support inclusive employment practices
- Volunteer Hub development
- Invest in lifelong learning, skills and training
- Develop an all age living campus, including intergenerational housing and an Academy of Living Well
- Planning for green spaces
- Deliver our active communities strategy
- Invest in tele-care, health and technology assisted living
- Invest in digital platforms for Care Homes
- Development of the Frailty Pathway
- Inter-generational programmes
- Activity-based social prescribing
- Support for carers

Outcome Measures:

- Consistently high service user experience
- Reduce the proportion of people reporting loneliness and isolation
- Reduce the proportion of people experiencing loneliness
- Families supported to ensure children are ready for school
- Increase the proportion of people who are active
- Reduce the average age of people entering permanent care
- Improved market sustainability
- People enabled to live well at home for longer.

What does this mean for….

➢ Our population

More intergenerational support initiatives.
Inclusive education, training, and employment opportunities.

➢ Our staff

All staff valued.
Life-long learning opportunities.
Strength and asset-based approach.

➢ Our partners

System-wide programmes of work to build relationships and maximise capacity.

What will the future look like?

People live their best lives and are proactively supported to age well, remain healthy, active and enjoy a good quality of life.



8.8 VALUED WORKFORCE

We will work together as ONE System to build a resilient, valued and inclusive health and care workforce that promotes homegrown talent to create training and employment opportunities for local people and carers through a joint workforce plan

Our workforce is our greatest strength and is key to delivering this vision. To be successful, we need to support our colleagues, make sure they are given the tools they need to do their job, feel valued and are offered opportunities to develop their career in Stockport. We also need to ensure the workforce of the future by developing clear, exciting career paths and ensuring that training and education opportunities exist to develop our home-grown talent.

There are currently around 10,000 people working for the partner organisations to provide health and social care services as well as the wide range of colleagues in Stockport's private care providers, voluntary sector and the 31,982 unpaid carers, who make a vital contribution to our system. Stockport also benefits from a high number of health and social care professionals working across the region who live in the borough, providing a strong community asset.

As local needs change and we develop our services, we need to support colleagues to take on new challenges and work in different ways across organisational boundaries to meet local needs. By developing a joint workforce development plan across all of Stockport's health and care services, we can support teams to understand all parts of the system and how they work together to support local people. This will also provide opportunities for lifelong learning and new, fulfilling career opportunities.

To create a sustainable system that is fit for the future, we also need to consider a joint approach to training and development, linked to our new integrated approach that creates training and employment opportunities across the system, including mentoring and placements for colleagues across different services.

"The Academy of Living Well is helping to target the right candidate, create the new qualifications for the workforce required of the future and make the adult social care career path more attractive to future generations."

Workforce Engagement Event

This plan provides a real opportunity to bring teams together to learn from each other and create the conditions for effective collaboration that benefits local people.

"When we put up organisational boundaries it reduces our impact"

Liz, Community Champions

"Working creatively together we can create the synergies that help all of our teams with shared issues like hard to recruit to posts"

Janet, Adult Social Care

"Stockport Family has a really positive story to tell on recruitment, retention and staff satisfaction – we should share this learning"

Rebecca, Stockport Family

A resilient, valued, and inclusive workforce

Objectives: To provide an inclusive employment experience for our colleagues from all backgrounds and communities. To provide local choices for training, education and career development. To improve the health and wellbeing of colleagues. To provide resources; culture and engagement; education and development. Support staff to work collaboratively with other professions in a multi-disciplinary way.

Actions:

- Establish a baseline of existing HR & OD capacity, skills, and plans
- Develop and implement a Joint Workforce Strategy
- Undertake a joint recruitment approach for key roles
- Invest in career path opportunities, including for residents with additional needs such as care levels and young people with SEND
- Launch a multi-professional leadership development programme
- Support teams to work collaboratively across professional and organisational boundaries to support residents
- Recruitment to new roles in Primary Care Networks
- Provide a shared training platform across the system
- Ensure our staff wellbeing programme is accessible and effective
- Focus on the ageing workforce
- Career Academy to deliver a Stockport Standard of Care
- Introduce new ways of working, including agile, flexible, and digital
- Focus on becoming best in class for equality, diversity, and inclusivity
- Engage with schools and higher education to grow local talent
- Train all teams on supporting people with mental health issues

Outcome Measures:

- Consistently high levels of staff satisfaction
- Improve levels of colleague engagement and morale
- Improved retention rates
- Improved representation of diverse communities in our workforce
- Reduce vacancy rates
- Reduce levels of agency staffing
- Improve sickness absence and wellbeing of colleagues
- Increase apprenticeships and the numbers of colleagues in ‘new roles’
- Understanding of professional roles in multi-disciplinary approach
- Consistently high learning outcomes from workforce training

What does this mean for….

➢ Our population

A skilled and responsive workforce Compassionate, high quality care. Agility – adapt to and influencing changing times.

➢ Our staff

Rewarding experience at work. Opportunities for training and career prospects. Recognition of your contribution.

➢ Our partners

Integrated working
Shared responsibility

What will the future look like?

Stockport will be a great place to work with a wide range of education, training, and career options. We will have happy colleagues and satisfied patients. We will have a great reputation for the work we do and people will want to work here.



9. ENABLERS

Delivery of our shared goals will require input from a range of enabling services, providing shared solutions to the technical issues of how we bring together a wide range of professionals from a number of different organisations and locations around the borough.

Estates
Together, we will review local infrastructure to support the provision of more care outside of the hospital site and the effective co-location of teams to enable new ways of working. This work will reflect the opportunities of using the whole health and care, and indeed wider public service, estate to best effect. Core to this ambition will be an increasing deployment of flexible technology for colleagues.

Finance
We will work together with partners to build a sustainable health and care system – better than before - with the capacity to flex in response to future challenges.
We will develop detail on how money will flow to and through the system and how financial governance and accountability need to operate at neighbourhood and boroughwide levels.

Commissioning
As we move into an Integrated Care System, the aim is to dissolve the historic divide between commissioning and delivery of services. The separation of purchasing and provision in the 1990s gave commissioners responsibility for understanding local needs and rewarded providers for delivery of their specific areas of care, generating competition between providers and stifling collaboration. The ICS presents an opportunity for commissioners to work with providers to ensure that gaps in services are addressed and improve experiences and outcomes for service users by combining commissioning knowledge of population needs and front-line intelligence on managing care to develop a comprehensive model that considers the interests of the wider health system.

Digital Transformation
We will build digital solutions to new ways of working, including connected infrastructure, integrated systems, digital access to services and better use of health and care intelligence to support earlier intervention and improved outcomes, as well as supporting people to be in control of their own information.

Business Intelligence and Information Governance
Our information is one of our most valuable assets in understanding local needs and the impact of the services we provide. We will encourage further use of data and gather insights using the ‘The Big Stockport Picture’ which brings together data published by organisations from across the Borough and is designed to help with local transparency, aid collaboration and to build products and services that benefit Stockport citizens. We need to be able to share, safely and appropriately information with other organisations working together to support our citizens.

Communication, Engagement and Co-Production
We will involve local people in co-producing services that meet their needs and ensure that residents are informed of the public sector offer as well as their own role in health and care. We will ensure colleagues and wider stakeholders are informed and engaged in a timely, consistent, and appropriate way to coproduce the new system.

10. APPENDICES

APPENDIX 1 – Schedule of deliverables from the GM & NHS Long-Term Plan
APPENDIX 2 – Engagement Report
APPENDIX 3 – Equality Impact Assessment

APPENDIX 1 – Schedule of deliverables from GM's 'Taking Charge' and the NHS Long-Term Plan

Stockport's Health and Care Plan sets out a single vision for health and care across the borough and what we intend to do over the next 3-5 years to deliver our ambitions. As an active partner in Greater Manchester's Integrated Care System, our vision supports the local delivery of GM's strategic plan for health and care and the Long-Term plans of the NHS.

This schedule sets out the requirements of the NHS Long Term Plan and Greater Manchester's Integrated Care System and how they will be delivered under this plan.

Priority	Requirements	Delivery Plan
Fully Integrated Community-based Care (including Primary Care Networks)	Enhanced Health in Care Homes	Quality & Leadership
	Structured medication reviews	Independence & Reablement
	Personalised care support	Stockport's Neighbourhoods
	Early cancer diagnosis	Early Help & Prevention
	20,000 additional staff to work in Primary Care Networks over 5 years	Valued Workforce
	5,000 full time equivalent doctors in general practice	Valued Workforce
Reducing Pressure on Emergency Hospital Services	Improved crisis response within two hours, and reablement care within two days;	Stockport's Neighbourhoods
	Providing 'anticipatory care' jointly with primary care;	Stockport's Neighbourhoods
	Supporting primary care to developed Enhanced Health in Care Homes;	Stockport's Neighbourhoods
	Building capacity and workforce by implementing the Carter report and using digital innovation	Valued Workforce
Giving people more control over their own health and more personalised care	Implement the six components of the NHS Comprehensive Model for Personalised Care	Stockport's Neighbourhoods
Digitally enabling care	Virtual Outpatients, reducing outpatient visits by 30 million a year nationally	Quality & Leadership
Improving Cancer Outcomes	Improving the one-year survival rate.	Tackling Inequalities
	Improving bowel, breast and cervical screening uptake;	Early Help & Prevention
	Roll-out of FIT for symptomatic and non-symptomatic populations in line with national policy, and HPV as a primary screen in the cervical screening programme;	Early Help & Prevention
	Improving GP referral practice;	Quality & Leadership
	Implementation of faster diagnosis pathways;	Quality & Leadership
	Improving access to high-quality treatment services, including through roll out of Radiotherapy Networks, strengthening of Children and Young People's Cancer Networks, and reform of Multi-Disciplinary Team meetings;	Quality & Leadership
	Roll-out of personalised care interventions, including stratified follow-up pathways	Quality & Leadership
	Rapid diagnostic centres	Quality & Leadership
	Lung health checks	Early Help & Prevention

Priority	Requirements	Delivery Plan
Improving Mental Health Services	345,000 additional children and young people (CYP) aged 0-25 will be able to access support via NHS-funded mental health	Mental Health & Wellbeing
	Expansion of access to specialist community perinatal mental health services in 2019/20;	Mental Health & Wellbeing
	By 2020/21 there will be 100% coverage of 24/7 adult crisis resolution and home treatment teams operating in line with best practice;	Mental Health & Wellbeing
	The continued expansion of CYP mental crisis services so that by 2023/24 there is 100% coverage of 24/7 crisis provision for CYP which combines crisis assessment, brief response and intensive home treatment functions;	Mental Health & Wellbeing
	The development of local mental health crisis pathways including a range of alternative services so that by 2023/24 there is 100% roll out across the country.	Mental Health & Wellbeing
Shorter Waits for Planned Care	No patient will have to wait more than 52-weeks	Quality & Leadership
	Access to First Contact Practitioners (FCP) by 2023/24	Valued Workforce
More NHS Action on Prevention	Targeted investment to develop NHS-funded smoking cessation services in selected sites in 2020/21;	Early Help & Prevention
	Additional indicative allocations for all STPs and ICSs, from 2021/22, for the phased implementation of NHS smoking cessation services for all inpatients who smoke, pregnant women and users of high-risk outpatient services (as a complement not a substitute for local authority's own responsibility to fund smoking cessation).	Early Help & Prevention
	The Diabetes Prevention Programme (DPP) is a nationally-funded and commissioned programme. Systems should set out local referral trajectories that will contribute to the national DPP uptake;	Early Help & Prevention
	Targeted funding for 2020/21 and 2021/22 for a small number of sites to test and refine an enhanced weight management support offer for those with a BMI of 30+ with Type 2 diabetes or hypertension and enhanced Tier 3 services for people with more severe obesity and comorbidities.	Early Help & Prevention
	Targeted funding available from 2020/21 to support the development and improvement of optimal Alcohol Care Teams in hospitals with the highest rates of alcohol dependence-related admissions.	Early Help & Prevention
	Targeted support from the NHS Sustainable Development Unit to spread best practice in sustainable development, including improving air quality, plastics and carbon reduction.	National
	Targeted support available to regions to drive progress in implementing the Government's five-year national action plan, Tackling Antimicrobial Resistance, to reduce overall antibiotic use and drug-resistant	Quality & Leadership
A Strong Start in Life for Children and Young People	Implementation of Better Births standards • Continuity of Carer to support the most deprived areas, to address health inequalities • Saving Babies' Lives Care Bundle (v2) to optimise implementation, particularly the new element on reducing pre-term births. • UNICEF Baby Friendly Initiative • Neonatal Critical Care services to develop allied health professional (AHP) support • Integrated support for families during neonatal care Postnatal physiotherapy and multidisciplinary pelvic health clinics	Quality & Leadership
	Children and Young People's Transformation	Quality & Leadership
	Developing age-appropriate integrated care, integrating physical and mental health services, enabling joint working between primary, community and acute services, and supporting transition to adult services;	Stockport's Neighbourhoods
	Improving care for children with long-term conditions, such as asthma, epilepsy, diabetes, and complex needs;	Stockport's Neighbourhoods

Priority	Requirements	Delivery Plan
	Treating and managing childhood obesity;	Early Help & Prevention
	Supporting the expansion of Children and Young People's mental health services;	Mental Health & Wellbeing
	Improving outcomes for children and young people with cancer	Quality & Leadership
Learning Disability and Autism	Reduction inpatient usage and beds	Tackling Inequalities
	Learning disability and autism physical health checks for at least 75% of people aged over 14 years	Tackling Inequalities
	Local offer for autistic young people	Mental Health & Wellbeing
	Use the reasonable adjustment 'digital flag' in the patient record or, where this is not available, use the Summary Care Record as an alternative.	Mental Health & Wellbeing
	Intensive, crisis and forensic community support	Mental Health & Wellbeing
Cardiovascular Disease	Increasing the numbers of people at risk of heart attack and stroke who are treated for the cardiovascular high risk conditions; Atrial Fibrillation, high blood pressure and high cholesterol. This will be supported by the roll-out in 2020 of the CVDPREVENT audit. From 2020/21 funding will be included in fair shares allocations to systems.	Tackling Inequalities
	Testing the use of technology to increase referral and uptake of cardiac rehabilitation from 2021/22. In 2023/24, funding for wider roll out will be included in fair shares allocations to systems;	Independence & Reablement
	Pilot schemes in 2020/21 and 2021/22 to increase access to echocardiography and improve the investigation of those with breathlessness and the early detection of heart failure and valve disease. From 2022/23 funding for wider roll out will be included in fair shares allocations to systems.	National
Stroke Care	Delivering Integrated Stroke Delivery Networks (ISDNs),	National
	Ensure that all patients who need it, receive mechanical thrombectomy and thrombolysis.	Quality & Leadership
	Early Supported Discharge (ESD) should be routinely commissioned and available to all patients for whom it is appropriate	Independence & Reablement
	Integrate ESD and community services	Independence & Reablement
Diabetes	Support for more people living with diabetes to achieve the three recommended treatment targets;	Early Help & Prevention
	Targeting variation in the achievement of diabetes management, treatment and care processes;	Early Help & Prevention
	Addressing health inequalities through the commissioning and provision of services;	Tackling Inequalities
	Expanded provision of access to digital and face-to-face structured education and self-management support tools for people with Type 1 and Type 2 diabetes;	Tackling Inequalities
	Providing access for those living with Type 2 diabetes to the national help Diabetes online self-management platform, which will commence phased roll out in 2019/20;	Tackling Inequalities
	Ensuring universal coverage of multidisciplinary footcare teams (MDFTs) and diabetes inpatient specialist nurses (DISN) teams, for those who require support in secondary care.	Stockport's Neighbourhoods
Respiratory Disease	Identification of respiratory disease	Early Help & Prevention
	Increase associated referrals to pulmonary rehabilitation services	Early Help & Prevention
Giving NHS Staff the Backing they Need	Setting targets for BME representation across its leadership team and broader workforce by 2021/22	Valued Workforce
	Improving mental and physical health and wellbeing	Valued Workforce
	Enabling flexible working	Valued Workforce
Delivering digitally-	Digitise to core standards supported by a robust IT infrastructure by 2024	National

Priority	Requirements	Delivery Plan
enabled care across the NHS	By 2021/22 all staff working in the community will have access to mobile digital services to	Valued Workforce
	Integrated child protection system: By 2022 a new system will replace dozens of legacy systems;	National
	By 2020, every patient with a long-term condition will have access to their care plan via the NHS App, enabled by the Summary Care Record (SCR). By 2023 the SCR functionality will be moved to the local shared health and care record systems and be able to send reminders and alerts directly to the patient;	National
	Personal Health Records delivered through local health and care records that will also hold care plans	Stockport's Neighbourhoods
	All women have their own digital maternity record by 2023/24;	National
	By 2021 all parents will have a choice of a paper or digital Redbook for their new babies.	National