

ONE STOCKPORT LOCAL, NEIGHBOURHOOD AND PREVENTION PROGRAMME – COLLABORATIVE HEALTH AND CARE

Report To (Meeting):	ONE Stockport Health and Care Board		
Report From (Board Lead)	Philippa Johnson, Deputy Place Based Lead and		
	Sarah Dillion, Director of Adult Social Care, Stockport		
	MBC		
Report From (Author):	Emma Bowe, Head of Transformation and Business		
	Support, Adult Social Care, Stockport MBC, Gale		
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	Community and Medicines Optimisation, NHS Greater		
	Manchester (Stockport)		
Date:	30 th October 2024	Agenda Item No: 10	
Previously Considered by:	Not applicable		

Purpose of the report:

This report provides an update on ONE Stockport Local – Neighbourhoods and Prevention programme, specifically activity and achievements from the Collaborative Health and Care pillar. These are outlined in sections 3,4 and 5 of this report.

As part of One Stockport Local we are bringing together services, organisations, and groups into one place making it easier for people to help themselves, their families, and those that they care for and supporting people with their health and care needs.

Key points (Executive Summary):

In the Collaborative Health and Care pillar we are building a model of care where collaborative teams focus on prevention, early intervention, and proactive care, supporting people to be healthier, happier, and independent in our neighbourhoods. We know accessing information and support can be complicated and we want to make it easier for people to help themselves, their families and those that they care for.

Key Achievements and Progress:

1. Area Leadership Teams (ALTs):

- Six ALTs have been established, each led by a Primary Care Clinical (PCN) Clinical Director, to drive change and address local population health needs.
- ALTs are working on population health plans and proactive care models to ensure timely access to appropriate help and prevent urgent needs.
- In section 4, the report provides examples of how our ALTs and team around the practice model (TAP) are proactively using population health plans to address local need and challenges, for example reducing alcohol related harm

in Tame Valley.

2. One Stockport Local Appointments:

- These appointments, delivered by Adult Social Care, focus on prevention, reducing social isolation, and promoting independence.
- A dedicated Stockport Local social work team manager is in place, and the model is being integrated into ALTs.
- The Gloriously Ordinary Lives training programme has launched for colleagues in Adult Social Care, enabling them to support people to be independent in their community.

3. Integrated Pathways:

- Aligned to the One Health and Care plan we have identified four key areas: Alcohol Related Harm, Cardiovascular Disease, Diabetes, and Frailty.
- We have delivered a number of deep dives and exploratory multi-disciplinary workshops to identify our current landscape and opportunities.
- Work is aligned with Greater Manchester initiatives to improve outcomes in these areas.

4. Out of Hospital Urgent Care Model:

- We know that we have disparities in access to and experience of our services and variations in health outcomes. We also know that we have a small segment of our population that uses emergency care on a frequent basis.
- We also know that we have a complex system with multiple points of entry.
- The purpose of this workstream is to develop a comprehensive urgent care offer to ensure timely and appropriate care.

Future Focus:

- Continued development and maturity of Area Leadership Teams and Team around the Practice, focusing on embedding a model of proactive Care. Sharing learning across each of our PCN areas.
- Expansion of One Stockport Local appointments and integration with other services.
- Further development of the Gloriously Ordinary Lives approach across various programmes.
- Advancing integrated pathways and aligning with Greater Manchester strategies.
- Enhancing the out-of-hospital urgent care model, including the establishment of a care coordination hub, and improving digital solutions.

Recommendation:

The Board are asked to:

- **Note** the progress and achievements outlined in this report. We welcome comment and feedback on the priorities described.
- Note that to deliver on the next phase of this programme that capacity will be required from colleagues from across the locality to participate in the delivery of each of the Collaborative Health and Care programmes.

Decision	Discuss/Direction	Information/Assurance	

Aims (please indicate x)			
Which	People are happier and healthier, and inequalities are reduced	X	
integrated care	There are safe, high-quality services which make best use of the	X	
aim(s) is / are	Stockport pound		
supported by	Everyone takes responsibility for their health with the right support	X	
this report:	We support local social and economic development together	X	

Conflicts of Interests	
Potential Conflicts of Interest:	None

Risk and Assurance:

List all strategic and high-level risks relevant to this paper.

Section six of the report outlines the key risks.

- Workforce Capacity Each workstream within this programme has identified the availability of colleagues to deliver this programme is their key risk. Due to the reactive nature of the services, we deliver in times of high demand colleagues time can be taken away from delivery of programme work.
- Change Fatigue In recent years there has been a significant amount of nationally driven change, as well as change within the Stockport locality. There is the risk that colleagues will face change fatigue. This can be mitigated though our One Team approach and through the wider neighbourhood and prevention workforce enabler.
- Financial Pressures The financial pressures faced within both the NHS and local government are likely to result in reductions to prevention budgets. This in turn will have a negative impact on the delivery of this programme of work.

Consultation and Engagement:

Local People / Patient Engagement:

We are committed to working with people with lived experience to help us to deliver this workstream. A number of workshops have been delivered over the summer where people with lived experience have supported the conversation.

In ASC (Adult Social Care), the Stockport Local appointments and Gloriously Ordinary lives work is supported by the Making it Real Board.

Workforce Engagement:	A number of workshops with colleagues from across our services have been delivered including.		
	Area Leadership Team Diabetes		
	Out of Hospital Urgent Care Model.		
	Within the Council the neighbourhood and prevention programme has been covered in the All-Colleague briefings.		

Potential Implications:				
Financial Impact:	Non-Recurrent	NA		
Please note - All reports with a	Expenditure			
financial implication require	Recurrent	NA		
detail of the level of funding,	Expenditure (please			
funding stream and comments	state annual cost)			
from Finance.	Funding stream		Yes	No
	Included in the s75 P	ooled		
	Budget			
	GM ICB (Stockport) of	delegated		
	budget			
	Other, please specify:			
Finance Comments:	This model is being implemented and delivered within			
	existing resource and commissioned services capacity			
	j sa g sa			
Performance Impact:	We are currently developing our key performance indicators, and this will be reported as part of the			
	locality annual report and borough plan.			
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Workforce Impact:	Workforce development will continue to take place as			
	we embed new ways of working and cultural changes.			
Quality and Safety Impact:	This is owned by the Senior Responsible Officers			
Quality and Salety impact.	(SROs) for Collaborative Health and Care.			
	(SROS) for Collaborative Health and Care.			
Compliance and/or Legal	N/A			
Impact:				
Equality and Diversity: General Statement:				
Has an equality impact assessment	If Not Applicable,	Yes N	lo	N/A X
been completed?	please explain why	, ,	<u> </u>	l
Environmental Impact:	General Statement:			
Has an environmental impact	If Not Applicable,	Yes N	Ю	N/A X
assessment been completed?	please explain why	7.00	-	,, ,
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