WorkWell – Stockport Delivery

30th October 2024



Introduction

- This set of slides sets out the proposed Stockport Locality Delivery Plan as part of the Greater Manchester WorkWell Vanguard – to be delivered from December 2024 and up to 31st March 2026.
- WorkWell in GM will be one of 15 Vanguard pilots, and will be the biggest in the country, supporting 8,000 people in programme worth up to £7m
- The programme will provide low intensity support people at risk of falling out of employment due to health conditions, and also those recently unemployed (last 6 months) and with a health condition
- Assessment and Action Plans for individuals are key requirements

Where are we currently in Stockport?

- Stockport is a growing economy, experiencing a strong period of regeneration and development.
- Unemployment (Claimant count) levels are generally low, relative to GM & UK .
- Ensuring economic benefits are felt by all residents is a priority, but we know Stockport is one of the most polarised LA areas in the country, both in terms of life expectancy and economic outcomes as shown in the difference between Brinnington and Bramhall – the two factors are interdependent of each other.
- There is currently a range of relevant commissioned employment services such as the Work & Health Programme and Individual Placement and Support in Primary Care (IPSPC) – however navigating this is confusing, with no Single Point of Contract / Triage for Work & Skills
- Stockport has over 13,000 PIP cases below State Retirement Age 70% are either psychiatric or MSK related
- National evidence suggest that one adult in six (17.0%) have a CMD (Common Mental Disorder): one in five (20.7%) women and one in eight (13,2%) men; in Stockport this would equate to 40,300 people 25,200 females and 15,100 males.
- There are around 39,800 people registered with a Stockport GP with a diagnosis of depression on their medical record and around 38,700 with a record of anxiety. Diagnosis rates are increasing.
- There is a clear deprivation profile with the depression rate increasing as deprivation increases. Depression rates for both men
 and women in the least deprived areas are around half that in the most deprived rate.
- The COVID-19 pandemic and cost of living crises have led to increases in self-reported symptoms of depression, especially for younger women, those with disability, those who are financial vulnerable and those living in deprived areas.

Where do we want to get to with WorkWell?

- Ensure we have a service for employees with health conditions and those recently unemployed that is easy to engage, adaptive and flexible in response to the needs of residents and employers
- Create a legacy, with better co-ordination of employment services and sharing of resources, linking triage for our Work & Skills offer initially between WorkWell and In Work Progression, but also with other provision – Single Point of Contact for Residents & Employers
- Take a proactive approach supporting people in employment / recently unemployed to support their health and employment needs, be that accessing health services or finding a new job
- Start to develop a strategic approach between Work & Skills, Public Health and the NHS and VCSE sector to longer term approaches to addressing Work & Health outcomes – building on the GM Mayor's ambition for the model of Live Well
- Ensure work is seen as good for improving health outcomes, and is a key plank of social prescribing

Locality Cohort

- Under the GM Delivery Plan for WorkWell, there are 3 pan-GM cohorts identified:

 People at risk of leaving employment due to a Mental Health or Musculoskeletal condition
 People at risk of leaving employment and awaiting community / elective care NHS services
 People recently unemployed (last 6 months) with a health condition
- The GM Delivery Plan enables Localities to identify a 4th cohort for their areas should they wish
- Cohorts 1-3 are on the whole seem inclusive of the vast majority of individuals we would expect to support through WorkWell, for example 70% of PIP assessments are Mental Health or Musculoskeletal related in Stockport.
- Stockport proposes to focus on the 3 pan-GM cohorts but undertake targeting specifically in communities with poorer health and economic outcomes such as Brinnington and Central Stockport, and with priority groups such as young people Care Experienced.

Numbers to be supported in Stockport & Funding

Funding & Participant Numbers Context

- Following a 'Fair Share' modelling of the 8,000 GM beneficiaries across GM, based on population size, an indicative total of up to 816 was identified by GM for Stockport;
- The percentage of residents to be supported is limited to 30% in 2024/25 (6 months) and 70% in 2025/26 (12 months)
- Maximum funding, to be paid quarterly in arrears, is based on the agreed numbers to be supported, and then actual people supported (in terms of Assessment & Action Plan) this is based as follows:
 - 60% basic funding on agreed numbers
 - 40% based on actual participants
 - £800 is paid per participant in 2024/25 and £811 per participant in 2025/26
- This would generate maximum funding of: £197,725 in 2024/25 (£118,635 basic and £79,090 participant starts dependent) and £461,358 in 2025/26 (£276,814 basic and £184,543 participant depending). Total £659,083. This is the maximum funding, and will be payable based on grant claims quarterly including numbers supported and evidence of eligible expenditure incurred in delivery, e.g. invoices
- The funding would need to cover, Work & Health coaches (at Viaduct), additional capacity in local services for referral e.g. health and wellbeing, leisure activities, counselling, if demand requires this and locality promotion and engagement. Payment from DWP is in arrears. First payment was due to be March 25. GM intends to provide payment 4 weeks after quarter end to support providers

Local Delivery Team

- The Stockport Locality will need to take a Multi-Disciplinary Team approach to supporting delivery of WorkWell, bringing together existing local employment and skills support, such as Adult Education Budget funded employability and skills provision, In-Work Progression (to start in October), Stockport Homes Employment Team (Work Club), as well as community-based health provision, social prescribing services, mental wellbeing resources and GP / Primary Care integration
- Support is to be low-intensity, not for long-term unemployed, and this is reflected in the funding
- A 'Stockport Work & Skills Triage Officer' is currently being recruited by SMBC, to be based in Continuing Education as part of In-Work Progression (starting early December also) - will also promote and support referrals to WorkWell along with Primary Care and other community partners. The Triage role will be the 'single point of contact' for Work & Skills services initially, including WorkWell.
- Other additional services capacity can be comissioned as required to meet needs of participants e.g. counselling, wellbeing services, healthy lifestyle, bespoke training

Stockport WorkWell Delivery Model

Initial Triage (Work & Skills Triage Officer) & Warm handover to Work & Health Coaches at Social prescribing Provider if WorkWell referral

Engagement with Primary Care, MSK, Mental Wellbeing support, VCSE to promote and support referrals

Work & Health Coaches at Social Prescribing Provider undertake onboarding, assessment, Action Plan, ongoing support and data tracking / reporting

Family Hubs & Libraries – Support for community engagement and access to support services

Skills support, e.g. Community Learning (Stockport Adult Education Service, College)

Employment support in the community e.g. Work Clubs, more intensive support referrals where appropriate

Engagement with employers to support in work adjustments Access to health and wellbeing support via Social Prescribing Provider

Proposal for Viaduct Care CIC to Employ Work & Health Coaches – Social Prescribing Offer

- Incorporated into the existing Wellbeing Team with additional new staff
- Short-term programme Dec 24 March 26. New additional contract with Viaduct under delegated contract waiver process
- Overlaps with current Health and Wellbeing Coaches/Social Prescribers roles but will be standard documentation required (Assessment & Action Plans) – Non-clinical roles
- 4 additional Health and Work Coaches to be employed FTE
- Contract cost for proposed Work & Health Coach Team is £320k Total possible maximum funding if 816 supported is £659k
- Potential to commission additional health and wellbeing support capacity from local services, such as in Voluntary, Community and Social Enterprise (VCSE) sector e.g. Musculoskeletal Pain Clinic, injury clinics, counselling, Mental Wellbeing, leisure activities – as demand requires.
- Some targeted focus, e.g. Central Stockport and Brinnington, but universal offer across Stockport
- Referrals from Work & Skills Triage role and can also be direct from GP/Wellbeing team

Costings

Programme Expenditure	Total	Basic Funding (60%)	Total Max Participant Dependent (40%)
Income	£659,083	£395,450	£263,633
H&W Coach Cost (Detail below)	£320,116		
Set up costs (Staff time in Locality Team0	£3322		
Remainder for Additional capacity in Local Services	£335,645		
4 x Band 5 Work and Health Coaches FTE 18 months	Total Cost	Breakdown (of Total H&W Coach Cost)	% (of Total H&W Coach Cost)
Salary Total Cost (including on-costs)	£278,660		87%
Training		£ 4,900	2%
Management (inc equipment/expenses)		£ 36,556	11%

Key Timeline & Next Steps

- Stockport Data Protection Inter-Authority Agreement (DPIA), Data management & Contract commissioned – to be completed Late October / Early November 2024
- Appointment of Work & Health Coaches Late October / Early November 2024
- Work & Skills Navigator appointed recruited October 2024
- Report to Health & Wellbeing Board November 2024
- Delivery of programme: December 2024 March 2026