

Better Outcomes Better Lives

Adults Social Care Transformational Change



MLCO Exec - July 2024



**Manchester Local
Care Organisation**

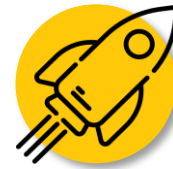
Leading local care, improving
lives in Manchester, with you



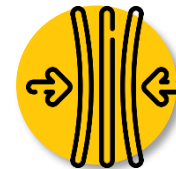
**MANCHESTER
CITY COUNCIL**

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Our journey...



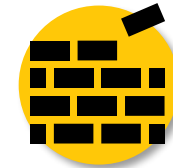
We launched in **January 2021**



Building resilience during COVID-19, with **strengths-based leadership** at all levels



Now seeing more and more examples of how **this approach improves outcomes**



Building culture



Focusing on relationships



*Strengthening the **golden thread***

Through

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Where we started...

2018

'Getting Basics Right'
Improvement Plan

Delivered

- ✓ Training on strengths-based approaches
- ✓ Increased capacity into the service; developing new care models
- ✓ Getting the basics in place to recover from previous funding reductions and prepare for transformation

£

Attracted investment into the service

Highlighted issues

- Gaps in our commissioned provision
- Further capacity gaps
- Greater visibility of impacts on outcomes for residents

2019

Commissioned the consultancy **IMPOWER** to undertake a **system-wide diagnostic exercise**, looking at the demand and modelling the future.

Predicted significant pressures in long-term care costs, to increase by **£40m** by 2023-24

Also demonstrated significant opportunities to **reduce, prevent** and **delay** demand into services, in almost **half of cases**.

Working on the right levers to affect change, outcomes could be improved and reductions to the increases in demand and cost, saving up to **£18.4 million**

The programme was designed to build a service that **supports people earlier** and **better**.

Delivering a **strength-based approach** that **increases** the levels of **independence** for Manchester people.

Ensuring that we provide the **right support** at the **right time**.

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Our Programme

1 What, 3 Why's, and 6 How's

WHAT

A long-term programme of practice-led change focused on supporting the people of Manchester to achieve **better life outcomes with less dependence on formal care.**

WHY

Because we know there is more we can do to improve the **care experience** and **manage care demand** in Manchester

Because there is more we can do to **support our frontline workers and integrated teams** with the technology and enablers they need

Because we need to make **significant, sustainable savings** this year and over the next four, to avoid service cuts

HOW

Maximising Independence

Embedding strengths based practice across our teams to maximise independence

Early Help

Enable residents to independently access early help resources within communities

Short Term Offer

Create a community reablement offer focused on optimising independence

See & Solve

Resolving barriers to strengths-based practice by working with teams to create the right solutions

Responsive Commissioning

Creating a responsive service offer that meets the changing needs of residents in maximising their independence

Performance & Finance

Embed a performance approach that uses an evidence to drive improvement

Transforming Safeguarding

Creating a robust and secure safeguarding system which protects people in a timely manner

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The programme

Maximising independence



“ Supporting our staff to work in a **strengths-based** way is fundamental to the programme ”

Early Help



“ Providing **the right advice, support and guidance** to people at the right time can make a significant impact in supporting people to stay well ”

Short-term offer



“ If we get this part of our offer right, it **will mean people only go on to receive longer term care when it's right** for them ”

See and solve



“ We want to **address entrenched system barriers** that get in the way of taking decisions which empower people ”

Responsive Commissioning



“ Effective, **strategic, compassionate and collaborative commissioning** will be how we work with system-wide partners to respond to local needs ”

Finance and performance



“ We want teams to **understand and own their own performance** and how their actions, behaviours and culture have an impact on measurable outcomes ”

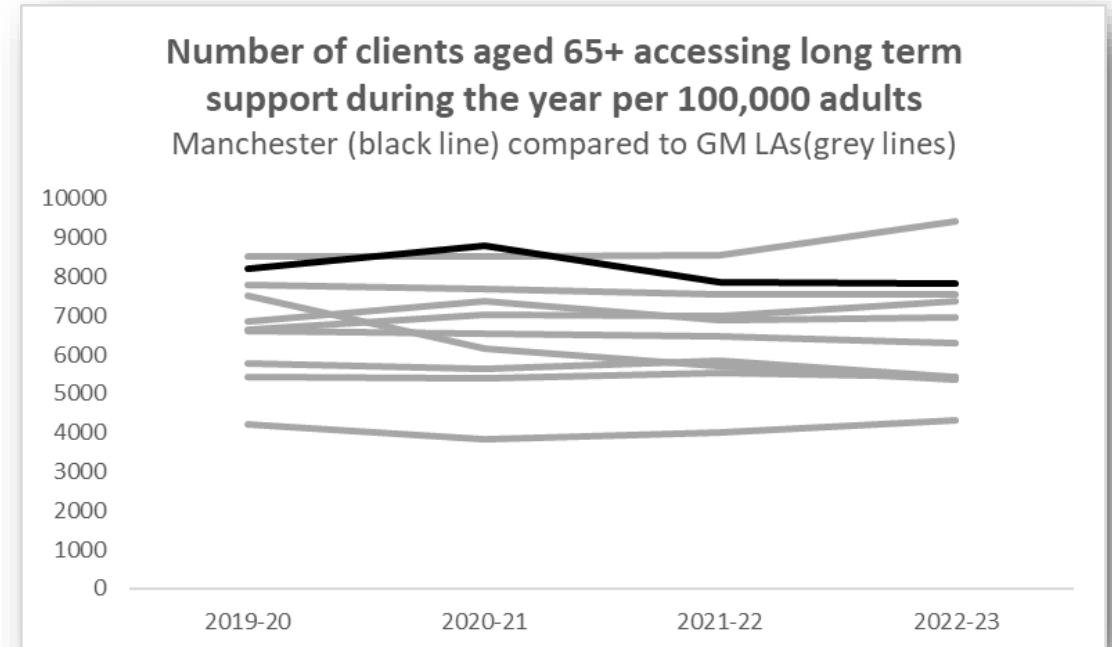
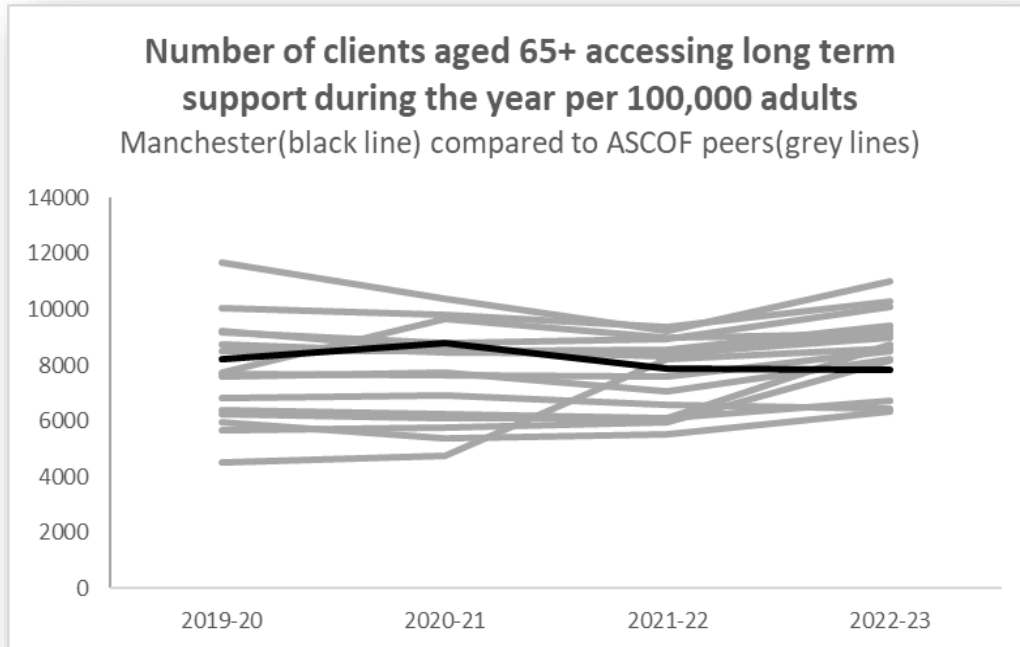


Impact and Evaluation

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Evaluating demand:

Demand has been impacted by a global pandemic within the last 3 years, making it challenging to draw correlations. However, comparing demand in Manchester with social care (ASCOF) peers, Core Cities, and Greater Manchester geographical neighbours, focusing on **the numbers of people aged 65 or over accessing long term care, weighted by population**, has shown that **demand in Manchester has reduced relatively more than comparator areas during the period of the BOBL programme**. Manchester also has maintained a downward trend other areas.



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Evaluating Impact: Financial impact

Given contextual changes in recent years, such as COVID-19 impacts, inflation, grant income, and NHS structural changes, it is challenging to directly show cause and effect linked to financial impact.

However, the overall impacts are considered positive in the wider context of pressures in the sector:

- A three-year programme of £18 million savings 2020-22 was applied to the long-term care budget, albeit smoothed by reserves and also offset by increased income
- The current savings programme added a further expectation of £8.5 million savings over 2023-26
- The demographic trend of **2% of long term care cost has been running well below national averages (4%)** and the **overall comparative position to other core cities** is seemingly relatively strong
- Growth into the budget is significant and includes £48 million in 2022-24, £49 million in 2024/25, and a further planned £19 million in 2025-27. This has improved financial sustainability in the care market, enabled sustained investment into care models and prevention, and the improvement plan for core practice.

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Evaluating Impact: Investment and a more stable position

Manchester has invested heavily in Adult Social Care transformation and capacity in recent years and managed to control increases in spend more effectively than comparable Local Authorities. The total net budget has increased from £162 million in 2019/20 to £220 million in 2023/24, including significant investment of £25 million in 2020/21, and a £30 million increase in funding in 2023/24 to manage the impacts of high inflation.

Spend on Adults in Manchester has however been less than other areas. According to SIGOMA analysis of municipal authority spend on Adults Social Care, **Manchester spent the lowest across Core Cities** in 2022-23; representing **39%** of total Council budget.

This is also well under England averages (**41.5%**) and SIGOMA averages (**39.5%**)

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Feedback from staff about the experience of change:

100

staff were engaged in December 2023 to understand how they had **experienced the BOBL programme**, what **impact** it had had on their practice and **how they felt** throughout the transformation journey via focus groups, CoPs engagement, 1:1 interviews and an online survey



Of 20 survey responses:

- ☐ **85%** of respondents were **satisfied** or **very satisfied** with BOBL
- ☐ **85%** of respondents felt that BOBL **overall was quite** or **very successful**
- ☐ **85%** of respondents were **slightly clear** or **very clear** on the overall aims of BOBL



- ☐ Improvements with **TEC** and support to embed prioritising TEC
- ☐ Improvements to the **Reablement** service
- ☐ **CoPs** becoming a safe space for staff to share **learning** and **collaborate**
- ☐ The development of a **“golden thread”** between front line staff, and senior management and commissioners, through **MyViews** and proportionate reviews.
- ☐ The **benefits** of **case studies** and sharing **positive** stories with teams. Staff who had shared a case study were sometimes invited to meetings with senior managers, and some highlighted that they felt very valued as a result.
- ☐ BOBL **improved the reputation of Manchester** nationally on adult social care
- ☐ **Strength-based practices** are now well embedded.



- ☐ **Equity, equality** and **accessibility** – there were some gaps in representation, e.g. young people were less engaged by TEC brochures, imagery and branding
- ☐ There was felt to be an over **focus** on the INTs compared to other services such as Learning Disabilities, e.g. in the roll out of AEST and Reablement.
- ☐ There were also felt to be **inconsistencies in engagement** and involvement in BOBL, depending on the focus of particular workstreams.
- ☐ Some staff said the overall **purpose** and activity of the programme could have been **clearer**.



Workstream impact detail

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Maximising Independence through Strengths-Based Practice

Strengths Based Practice

It's too easy to ask people what their needs are and want to fix it. **Better Outcomes Better Lives makes me more aware of working with people and not doing to them.** It keeps that at the forefront of your mind.

Gemma Wassall, Social Worker

Community Social Care teams were the primary focus of the BOBL culture change work and have shown **a shift in homecare hours, commissioning less than their hospital counterparts.** A deep dive analysis of Homecare data has shown that community teams commissioned a **monthly average of four double cover homecare packages** in the last year, compared to 17 from hospital teams.

This indicates that there is greater use of alternative methods of support and that there is increased focus on independence.

*Overall CoPs have improved my strength-based conversations and assessments, improved outcomes for service users; and **boost my confidence working with complex cases.** Thank you so much to the facilitators!*

My VIEWS

I felt better getting it off my chest. I was then invited to a senior managers meeting to provide more feedback. **The impact it's now had – just from completing My VIEWS...**

Andrea Moran, Social Work Team Manager



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Working earlier with people

Adults Early Support Team are a multi-agency and highly skilled team, allowing practitioners to take a holistic approach to a person's health and wellbeing. They deliver **solutions and short-term interventions** to enable residents to live well; providing low-level **technology and equipment, signposting to information, advice, guidance and community assets, and referring to appropriate services.**

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

Repeat callers are reducing, indicating more people are getting the right advice and guidance first time

Earlier triage from AEST means fewer inappropriate referrals now being sent through to neighbourhood teams

For me there's a lot of job satisfaction in **preventing people from losing their independence.** ”
AEST Team Member

“AEST has worked really well for our team. Both our **incoming work and duty officer work** have **vastly reduced** since in operation. So much so **our awaiting allocation tray disappeared for a day** because it was empty, this has never happened before. INT Team Member

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Increasing preventative support: Technology Enabled Care

Analysis has shown that TEC **supports independence** and the least restrictive option, as packages of care with TEC **have fewer hours of care on average than those without TEC**



Since the start of the programme there has been a...

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

Technology Enabled Care

“Becoming a TEC champion has given me the confidence to try new things. We’re really seeing the impact on TEC keeping people independent.”

Pamela Lewis, Social Worker

Cost avoidance modelling has shown...

TEC has led to **£0.33m** of Homecare support costs avoided over the 3 years

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Increasing preventative support: Reablement

Reablement is non-statutory, time-limited support that helps people **re-learn** or **re-gain skills** for **independent living**, that may have been lost following illness, accident or disability. Successful reablement means people **do not need longer term care**, or that they need a **reduced package of care**.

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



Manchester's Central Reablement Service was recently rated as 'Outstanding' by CQC

Cost avoidance modelling has shown...

£23m of homecare costs have been avoided over the three years by reablement

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Extra Care

Extra Care is **supported accommodation** for older people with an **onsite care team** commissioned by Adult Social Care, with commissioners acting as the gateway to placements and monitoring care and levels of need. Extra Care also promotes rightsizing as some older people leave larger properties and this helps the city's housing market free up these properties for others. There is strong national evidence of the **impacts on wellbeing, reduced demand on NHS** and **positive impacts** on **loneliness** and **isolation**

Extra Care has led to
£16m of costs avoided,
comprising £13m of
residential care avoided
and £3m of homecare
costs avoided

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Expanding Carers Support

Carers support is being scaled up, led by Carers Manchester, a partnership of 18 organisations that supports unpaid carers in the city. Carers Manchester works closely with the ASC Carers Team to ensure carers are aware of the offer for carers, **information** and **advice available**, and statutory carers assessments. The Carers pathway provides **help earlier in a carer's caring journey** to help them continue caring and avoid going into crisis.

183 new Carers
were registered in
November 2023,
much higher than
the monthly
average of 87 in
the last year

151 carers
assessments
were completed
in November,
higher than the
Better Outcomes
indicator of 138



Conclusion:

- Better Outcomes, Better Lives has led to **improved outcomes** and helped Manchester to **manage demand** and **spend** in recent years.
- Manchester is still facing extremely challenging financial pressures but social care **financial pressures are less** than many comparable Councils.
- Through working with people earlier, focusing on maximising independence and providing alternatives to costly support - over **£39m of costs have been avoided**.

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Next steps:

This review has informed forward planning for the service, by taking stock of what has worked well and less well, understanding the value for money of investments, and identifying where there are further opportunities for improvement and change. Responding to this, there are some key areas that are being taken forward with change and transformation work this year:

- ❑ **Adults Early Support Team** – expanding the approach to Learning Disabilities and Mental Health cases, strengthening the connections with the Multi Agency Prevention and Support offer of early help for cases that are below statutory thresholds but still require significant support
- ❑ **Technology enabled care** – building TEC more clearly into reviews of existing care packages as well as new cases, taking steps to make the technology more relevant to younger adults
- ❑ **Reablement into Enablement**– expand the offer to work with people with learning disabilities and more complex needs
- ❑ **ControCC** – to address challenges around the payments system Controcc and influence behaviour change around recording within Liquid Logic, to ensure that the support identified through support plans by Social Care teams can be commissioned and paid for through the Controcc system and providers are paid in a timely and accurate way.
- ❑ Expanding approaches that have a strong evidence base in order to further reduce demand and avoid cost given the significant financial challenges faced in the upcoming financial years and requirement for savings
- ❑ Ensuring future programmes and projects across adults have the right focus on influencing the drivers of behaviors and working with front line teams to deliver these changes, to develop the sustainability of the service.

The strategy of **preventing, reducing** and **delaying** the need for people to have long term support is continuing after the formal closure of the BOBL programme. The best outcomes for people are ones that promote independence so a continued key priority is to expand preventative approaches to targeted cohorts of residents.



Any questions?