

DRAFT Adult Social Care Prevention Strategy

2025-2028

#WeAreCommunity



Foreword

Prevention is a cornerstone of our adult social care offer in Manchester.



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Our goal in Manchester is not only to support people who need to draw on care and support, but also to identify potential issues early and prevent them from escalating.

We are committed to supporting citizens to stay well, live independently, and enjoy fulfilling lives for as long as possible. Through proactive and person-centred approaches, we aim to promote resilience within our communities.

This strategy sets out our vision for prevention in adult social care over the next three years as we believe that prevention is not just a moral imperative but a practical one.

By helping people who need to draw on care and support earlier, we can reduce or delay the need for more intensive and costly care, easing pressure on services and improving outcomes for individuals and communities.

This strategy builds on the strong foundations we have already laid. It is rooted in continuous learning, co-production, and the lived experiences of the adults, unpaid carers and communities we support. It is not a static document, but a living one that is designed to evolve over time through ongoing dialogue and collaboration. I am confident that this strategy reflects our shared ambition for a healthier, more resilient City.

I would also like to thank people who need to draw on care and support, and colleagues, for their invaluable contributions to shaping this vision. Together, we are building a future where prevention is at the heart of everything we do in adult social care.

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1.Introduction

This co-produced strategy outlines our ambition to embed prevention at the heart of adult social care. We are committed to using a strength-based approach to help prevent, reduce, and delay the need for statutory health and social care. However, where needs are identified, we will intervene as early as possible, supporting people who need to draw on care and support to live well and as independently as possible.

We recognise that meaningful prevention requires collaboration. That's why this strategy has been developed in partnership with our communities and staff. Co-production is not just a principle, it is a practice we are embedding across all levels of our work. Together, we will build a system that supports citizens to thrive.

This strategy begins by setting out the **national and local context** in which adult social care operates, acknowledging the challenges and opportunities we face. It then presents the rationale for prevention including why it matters, and how it supports better outcomes for individuals and the sustainability of our services.

We then turn to **the voices that matter most**: our citizens and colleagues. Through consultation and co-production, we have gathered insights into what citizens value and need. These have been distilled into key themes and insights that shape our strategy.

Following this, we detail the core principles, key priorities, and practical steps we will take to embed prevention across our services. Finally, we then describe the anticipated outcomes of this approach both for individuals and for the wider health and care system.

This structure ensures that our strategy is grounded in evidence, shaped by lived experience, and focused on delivering meaningful change.



2. National context

To ensure alignment with broader objectives, it is essential that this strategy reflects both national and local policy drivers. This approach safeguards against divergence and ensures our direction is fully embedded within existing frameworks and ways of working.

The Care Act 2014 positions prevention as a core duty of local authorities, closely tied to the overarching principle of promoting individual wellbeing. This statutory legislation emphasises and underlines the importance of proactive support and early intervention across the care system.

The Care Act 2014 places the promotion of individual wellbeing at the heart of all care and support functions. This principle applies at every stage from the provision of information and advice to assessment, planning, and review. Wellbeing is intentionally defined in broad terms, encompassing areas such as personal dignity, physical and mental health, protection from abuse, control over day-to-day life, participation in work and community life, and more.

Promoting wellbeing is not limited to individual-level interventions. It can and should occur at multiple levels:

- **Individual level:** Through personalised care and support planning that reflects what matters most to the person.
- **Community level:** Via approaches like population health management, which uses data and local insight to design targeted interventions.
- **Population level:** Through universal public health measures that aim to improve health outcomes and reduce inequalities across society.

By embedding the wellbeing principle across all levels of care and support, services can become more person-centred, preventative, and empowering.

National policy continues to evolve towards the current landscape of integration of care systems, with an emphasis on place-based planning and coordinated provision. This shift creates fresh opportunities to strengthen preventative approaches through partnership working, provider collaboratives, joined-up services, and a focus on population health management.

3. Local context

Health is a central thread throughout Manchester's Local Development Framework Core Strategy, reflecting a deep commitment to reducing inequalities and supporting a sustainable, healthy population. The strategy explicitly prioritises health equity, healthy lifestyles and the broader social determinants that influence wellbeing.

The **Manchester Local Care Organisation (MLCO) Commissioning Plan** places prevention at the heart of its agenda, identifying it as one of eight core themes. The plan focuses on creating environments that promote citizen choice and control, deliver support closer to home, and enhance wellbeing and independence tailored to individual needs.

To support delivery, six key priorities are outlined: adopting a population health approach, developing neighbourhoods, ensuring safe and effective services, partnering with primary care and the VCSE sector, strengthening system resilience, and shaping the future of the Local Care Organisation.

The **Greater Manchester Integrated Care Partnership Strategy: Improving Health and Care in Greater Manchester** emphasises prevention through two interconnected lenses: addressing the wider determinants of health, and utilising tools such as population health management to drive forward the prevention agenda.

Locally, **Making Manchester Fairer** (MMF) serves as the city's overarching strategy to address inequalities. Developed in response to Sir Michael Marmot's Build Back Fairer review, MMF acknowledges the significant disparities in healthy life expectancy across communities and calls for urgent action to prevent illness and premature death.



4. Rationale for prevention

Evidence from the King's Fund suggests that up to 85% of what determines a person's health lies beyond the reach of traditional healthcare, shaped instead by social circumstances, environmental factors, and behavioural patterns. This striking statistic underlines the critical importance of prevention as a collective responsibility.

Improving health outcomes and reducing inequalities demands a whole systems approach and one that brings together services, sectors, and communities. By working collaboratively to influence these wider determinants, we can create the conditions that support healthier lives and lasting wellbeing for all.



Source: Dahlgren, G. and Whitehead, M. (1993) Tackling inequalities in health: what can we learn from what has been tried?. Via www.kingsfund.org.uk

5. Approach to prevention

Our prevention model is structured around three levels — Prevent, Reduce, and Delay — reflecting a graduated, person-centred approach to supporting wellbeing and independence at every stage of need.

1 **Prevent** - Primary prevention/ promoting wellbeing

This universal approach applies to everyone.

It aims to help individuals maintain their independence and avoid the development of care and support needs.

It encompasses a broad range of services and resources, including access to timely information and advice, promotion of healthy and active lifestyles, initiatives to reduce loneliness and isolation, and the creation of supportive health-enabling environments.

2 **Reduce** - Secondary prevention/ early intervention

This targeted approach is directed at citizens at risk of developing further care and support needs.

The focus is on identifying emerging needs early and intervening to slow or halt their progression.

Interventions might include carer support services, home adaptations, and wider wellbeing initiatives.

3 **Delay** - Tertiary prevention/ formal intervention

This approach supports individuals with established or complex conditions.

It aims to reduce the impact of those conditions, prevent escalation, and maximise independence and quality of life.

Services may include rehabilitation and reablement, care delivered at home, respite care, emotional and peer support, and chronic disease management.

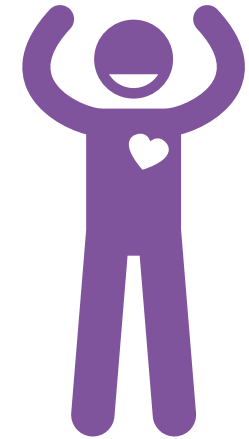
What matters to citizens is staying healthy

Our approach to prevention is rooted in meaningful engagement with the citizens of Manchester. We recognise that to truly understand and support citizen's needs, we must look beyond traditional care conversations and engage with citizens about their overall health and wellbeing.

By listening to what matters most we gain valuable insights that go beyond individual services. These insights are essential for system-wide working, enabling us to align priorities across health, social care, housing, and the voluntary sector.

This joined-up approach ensures that the voices of our citizens directly shape the design and delivery of services, helping us to act on what matters most and build a healthier more resilient city.

As part of the co-production approach to developing this strategy and to bring the above to life, we engaged with citizens to discuss what they value most in maintaining their physical and mental health. The feedback has been grouped into three key themes:



- 1 Staying active** emerged as a key priority, with many highlighting the added benefits of being active within a community setting.
- 2 Community-based activities** such as walking groups, knitting circles, and lunch clubs were seen as particularly valuable. These not only support physical health through regular movement and engagement but also enhance mental wellbeing by fostering social connections and a sense of belonging.
- 3 Being part of a group** with shared interests helps reduce isolation, build friendships, and create supportive networks that contribute to overall health.

6. What does prevention mean in adult social care?

To understand the behaviours that shape health and wellbeing, and the impact prevention can have, it's essential to begin with a shared understanding between the system, local communities and citizens. Whilst the feedback from citizens is rich and varied, making it difficult to define prevention in a single phrase, three key concepts have emerged that help shape our collective understanding.

Concept 1: Personal Responsibility



Personal responsibility and prevention go hand in hand in promoting a proactive approach to wellbeing. Taking personal responsibility means:

- Recognising how your actions and choices affect your health and independence.
- Engaging in behaviours that reduce risk and support long-term wellbeing.
- Seeking help early and making use of available resources.

However, personal responsibility doesn't happen in isolation. It must be supported by:

- Education and awareness: Citizens need clear, accessible information to make informed decisions.
- Supportive environments: Communities and services must enable and encourage healthy choices.
- Equity of access: Everyone should have the opportunity to take responsibility, regardless of their circumstances.

What Citizens Told Us Matters Most

Citizens shared a clear and heartfelt vision of what helps them stay healthy and independent. Their voices highlight the importance of personal responsibility:

- "I take ownership to keep myself mentally and physically healthy"
- "I keep myself happy and independent"
- "I exercise to keep strong and reduce the risk of falling"
- "It's important to have personal awareness for my own health"
- "I know I need to stop smoking and sometimes need a nudge to help me"



Concept 2: Early Help

When speaking with citizens, the importance of early help came through clearly and consistently. In the context of prevention, early help means supporting people who need to draw on care and support at the earliest possible stage before challenges escalate or become more complex.

This proactive approach focuses on:

- Identifying needs early through listening, observation, and community engagement.
- Offering timely, appropriate interventions that prevent issues from becoming entrenched.
- Improving outcomes by addressing root causes rather than symptoms.
- Building resilience in individuals, families, and communities.

Citizens also highlighted several key principles that should underpin early help:

- A whole-system approach to prevention, where services work together seamlessly.
- A variety of support options, tailored to different needs and circumstances.
- A community-centred model, where local assets and relationships are central to building long-term resilience.



What Citizens Told Us Matters Most

Through our conversations with local people, we heard powerful reflections on what prevention and early help should look like in adult social care. Some of the themes were:

Mental Health and Emotional Support

- “Having a safety barrier and someone to speak to when mentally unwell”
- “We can all be vulnerable at times, having a place of safety is essential”

Clarity and Simplicity in Support

- “Take things one step at a time to make sure people are clear about what to do”

Timeliness of Intervention

- “Early intervention can't be too late in the process”
- “If a condition was picked up sooner at an earlier stage rather than later it would make a massive difference”

Home Safety and Practical Adaptations

- “Home adaptations service is excellent”

Proactive Health Management

- “Taking steps now to prevent problems later is essential”

Concept 3: **Prevention First**

A prevention first approach in adult health and social care focuses on stopping health issues before they start, rather than reacting to them. This proactive model is essential for improving long-term outcomes and reducing the demand on health and care services.

Prevention first means prioritising:

- Health promotion and lifestyle support
- Early identification of risk factors
- Timely, targeted interventions for those most at risk.

Prevention first means tackling the root cause by recognising that health is shaped by more than medical care. It requires addressing social determinants like:

- Poverty and financial insecurity
- Poor nutrition and food access
- Inadequate housing
- Limited access to education and healthcare.

By tackling these underlying issues, we can create the conditions for healthier lives and more resilient communities.

Prevention first means linking with Early Intervention

- Identifying individuals at risk of health problems
- Providing support early to prevent escalation
- Empowering people to take control of their health and wellbeing



What Citizens Told Us Matters Most

Citizens shared practical, grounded insights into what prevention means in their daily lives. Their comments reflect a strong desire for independence and community connection:

Safety and Accident Prevention

- “I want prevention towards hazards, fall risks”
- “We need to make sure there is nothing to cause accidents”

People want their environments, especially their homes, to be safe and free from hazards. Simple preventative measures can significantly reduce the risk of falls and injuries.

Independence and Choice

- “I need to be able to have what I need to stay independent”

Maintaining independence is a key priority. Citizens want to make their own choices and access the tools, services and support that enable them to live their lives on their own terms.

Community and Local Access

- “We need to try to rebuild communities through a community first approach”
- “Having local services like food shops prevent having to get people to do shopping for you”

Access to local services and amenities helps people stay active and independent. Citizens also expressed a strong desire to rebuild community connections, recognising that strong neighbourhoods are a form of prevention in themselves.

7. Adult social care journey: Learning from lived experience

To shape the prevention strategy that truly reflects the needs of the community, we asked citizens to share their experiences of navigating the adult social care system. We wanted to understand what worked, what could have been done differently and what would help if they were starting their journey again.

Key themes from citizen feedback were:

1. The Role of Primary Care

Primary care was recognised as a vital first point of contact for preventing ill health. Citizens valued the advice and referrals provided by GPs and nurses. However, many felt that the medical focus of primary care limited its ability to connect people with wider community resources. More consistent signposting to local groups and wellbeing activities could have delayed or reduced the need for formal social care.



2. The Importance of Home

Citizens overwhelmingly identified the home environment as the most influential factor in their health and wellbeing. Poor housing conditions such as damp, cold or unsafe homes were seen as major contributors to both physical and mental health problems. A safe, warm and secure home was described as essential for maintaining independence and avoiding crisis.



3. Awareness of Services and Prevention

A lack of awareness about available adult social care services was a recurring theme. Many citizens, especially those from minority communities, reported not knowing what support existed or how to access it. This gap in knowledge limited their ability to make informed decisions and engage with preventative services early.



What citizens told us: Experiences across the Adult Social Care journey

Citizens shared a wide range of experiences with some highlighting gaps in awareness and access whilst others shared positive outcomes when supported by adult social care.

Barriers and Missed Opportunities

Limited Access by Age

- “Having access to some services earlier would help, some services are currently restricted to 55+”

Public Awareness

- “There needs to be more public awareness of services”
- “There should be more knowledge and awareness of social care”

Information Gaps

- “Only once you’re in hospital you find out what services are available”
- “Not always sure who to contact for help”

Engagement with Social Care

- “In some circumstances adult social care involvement needs to happen before hospitalisation”

These quotes reflect a need for earlier engagement, better signposting, and more inclusive access to preventative services.

Positive Experiences and What Worked Well

Effective Reablement and Equipment Support

- “I accessed great reablement following hospital discharge”
- “When looking after someone, I rang adult social care about adaptations. The physio & OT came out and I got a stool for the shower, perching stool and handrails. This has helped me stay independent”

Valued Support from Carers and Social Workers

- “I have nothing but positive comments on carers coming in to support me”
- “Excellent expertise in the social work team, got it right at the very start”
- “As a carer a social worker who thinks out of the box has really worked well for us”

Preference for Community-Based Support

- “Community support is preferred to professional support – community first”

These reflections show that when services are timely, person-centred, and well-communicated, they can have a significant positive impact on people’s lives.

Community First is a philosophy and practice that places emphasis on local, informal support networks such as family, friends, neighbours and community groups as the foundation of care. It builds on the strengths and assets already present within communities, including skills, shared spaces, relationships and local knowledge. At its core, Community First focuses on prevention and early intervention, aiming to address needs before they escalate into crisis.

Navigating Health & Adult Social Care

In adult social care, prevention is rooted in promoting independence, wellbeing and delaying or avoiding the need for formal care. However, citizens have told us that navigating the health and social care system can be a significant barrier.

To be effective, prevention will involve proactive, person-centred measures that support individuals to maintain their health, skills, and confidence. This includes:

- Clear, accessible pathways into support services
- Consistent and transparent communication to build trust
- Early, community-based interventions that reduce reliance on formal care
- Support for self-management and informed decision-making

A prevention-first approach will only succeed if people feel confident in the system and are empowered to engage with it early before needs escalate.

What Citizens Told Us: Trust, Access, and Communication

Citizens shared honest and insightful reflections on their experiences with adult social care systems.

Their feedback reveals a strong desire for clear communication, signposting, and more inclusive support, even when formal care is not needed.

Key messages from citizens included:

Desire for signposting and support

- “If I’m told no, I don’t meet the criteria for social care, I would still like to be signposted to community groups as a form of prevention”

Citizens want to be supported even when they don’t qualify for formal care. Signposting to community resources is seen as a vital part of a prevention first approach.

Need for Better Communication

- “There needs to be better communication across the health and social care system”
- “Barriers to accessing early intervention includes policies as they are different in departments and organisations and there’s sometimes a lack of communication”

Inconsistent communication and siloed policies across systems create confusion and delay access to support.

Language and Approach

- “Let’s not use the word can’t”

Language matters. Citizens feel that negative or dismissive language erodes trust and reinforces the perception that services are inaccessible.

Clarity of Information

- “People are not always sure who to contact for help”
- “Let’s improve information so we know where to go”

People often feel lost in systems. Clear, accessible information and visible points of contact are essential for building trust and enabling early help.

Key principles

Considering the insights shared by citizens, we will ensure we act on the following principles:

1. Prevention is Rooted in Partnership, Empowerment and Wellbeing

Prevention is not just a service model, it is a collaborative approach that empowers individuals and communities to take control of their health and wellbeing. It thrives on strong partnerships across the health, social care and community sector.

2. Prevention is a Continuous Process

Prevention should be viewed as an ongoing consideration, not a one-off or time-limited intervention. It must be embedded throughout the adult social care journey from initial contact to long-term support.

3. Prevention is Distinct from Meeting Eligible Needs

While meeting eligible needs is a statutory duty, prevention operates independently. It applies before, alongside, and beyond formal care assessments and eligibility thresholds.

4. Prevention Applies to Everyone

A prevention-first approach must be inclusive and far-reaching. It applies to:

- Individuals with no current care and support needs, helping them maintain independence and wellbeing.
- Individuals with care and support needs.
- Unpaid carers with formal and informal roles.

8. Colleague engagement: Insights from Adult Social Care staff

As previously outlined, this prevention strategy has been co-produced with both citizens and adult social care colleagues. Whilst the earlier section focused on citizen experiences, this section explores what adults social care colleagues have told us about how well current ways of working support prevention and where they see gaps or barriers. Through colleague engagement sessions and feedback, ten overarching themes have emerged which are;

1. Community-Based Services

Colleagues emphasised the critical role of community-based services in delivering preventative support. These services:

- Provide early intervention and tailored support within local settings.
- Help delay deterioration in health and wellbeing.
- Offer accessible, non-clinical options that reduce reliance on formal care.

Colleagues highlighted the need for stronger links between statutory services and community assets to ensure people are supported before reaching crisis.

2. Knowledge of Services

Practitioners noted that knowledge of available services, both within and beyond adult social care, is essential for effective prevention. This includes:

- Understanding risk factors and early warning signs
- Promoting healthy lifestyles and self-management
- Being able to confidently signpost individuals to appropriate support.

Colleagues expressed a desire for better information-sharing systems and cross-sector training to enhance their ability to intervene early.

3. Assistive Technology and Equipment

Colleagues recognised the preventative power of assistive technology and equipment, particularly for:

- Reducing falls and accidents in the home
- Supporting independence for citizens with disabilities or long-term conditions
- Delaying or avoiding the need for formal care.

However, they also noted that more could be done to raise awareness of what's available and how to access it, including as part of the hospital discharge process.

4. Removing barriers to prevention

To successfully embed a prevention-first approach, it is essential to understand the barriers that currently limit its effectiveness:

Communication Challenges

- Formal communication methods (e.g. letters, phone calls) are not always effective, particularly where language barriers exist.
- Colleagues suggested that text messages with links to videos or translated content may be more accessible and better received by diverse communities.





Eligibility Criteria and Missed Opportunities

- Both colleagues and citizens expressed that when individuals do not meet eligibility criteria more could be done including linking citizens with local community assets
- There is a strong belief that everyone should be linked to local community assets, regardless of eligibility, to support wellbeing and contribute to the prevention agenda.

Fragmented Services and Siloed Working

- Prevention is often seen as “someone else’s responsibility”, with public health, primary care, and adult social care operating in silos
- A more joined-up, system-wide approach is needed to ensure prevention is embedded across all services.

Service Awareness and Workforce Development

- Colleagues reported difficulty keeping up to date with available services, especially in high-pressure environments.
- There is a need for standardised awareness of services to ensure staff are confident in signposting and supporting preventative approaches.

5. Building on Strengths

Colleagues spoke highly of the quality and impact of existing services, particularly:

- Reablement services, assistive technology, unpaid carers pathway, Shared Lives, health protection initiatives and the Achieving Better Outcomes Together programme.

These strengths provide a solid foundation on which to build a more integrated and prevention focused system and service. Having prevention as a distinct workstream will add clarity, purpose and measure distance travelled.

6. Shifting from Reactive to Proactive Prevention

We need a system-wide shift from reacting to problems after they arise to anticipating and preventing them. Reactive prevention manages existing issues; proactive prevention identifies risks early and intervenes before problems escalate.

Prevention should be the default mindset across all roles and services across the system which is supported by professional curiosity and a strengths-based approach.

7. Learning and Sharing Across the System

To make prevention a reality, colleagues have the time and space to learn from one another and share best practices. This collaborative learning culture will help connect citizens to their communities, regardless of whether they receive formal care packages or not.

8. Professional Curiosity in Every Contact

Every interaction is an opportunity to look beyond the immediate need. Practitioners explore underlying risks, understand the broader context of a person’s life, and challenge assumptions. This leads to more meaningful support and better outcomes.

9. Communities First and Asset-Based Approaches

Strong communities are central to prevention. By linking individuals to local networks and resources, we foster belonging and resilience. Using an Asset-Based Community Development (ABCD) approach, we focus on what citizens and communities can do and not just what they need. This helps unlock local strengths and supports sustainable wellbeing.





10. Partnerships at the Core

Effective prevention relies on strong partnerships. In Manchester, we will build on our history of collaboration with statutory services and the voluntary, community, faith, and social enterprise (VCFSE) sector to deliver joined-up, community-focused support.

What colleagues told us

“Assistive Technology is quick to implement and really supports independence”

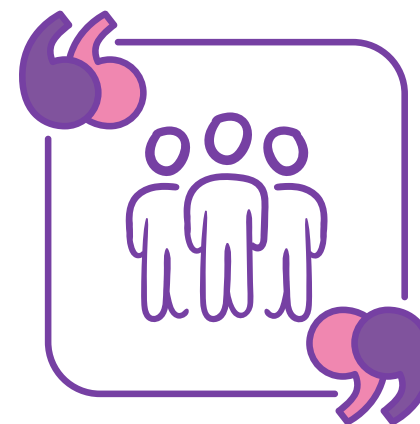
“Our Unpaid Carers Pathway supports carers through peer support, respite, and crisis prevention”

“We empower citizens and ensure services reflect real needs”

“There should be no wrong door to access and prevention should be at the heart of every contact”

“Achieving better outcomes together has achieved so much and having prevention as a workstream we can make a real impact”

“We work best when we have a programme. Structured approaches are effective”



9. Commissioners' role in embedding prevention

As part of the co-production process, we also engaged with commissioners, who play a pivotal role in advancing prevention within adult social care. Their role involves shaping services and systems that promote wellbeing, reduce reliance on formal care, and empower communities.

Through these discussions, five key themes emerged, which are:

1. Proactive Insight and Planning

- Actively identify and understanding emerging needs across communities
- Using data, engagement, and local intelligence to inform decision-making.

2. Integrated System Working

- Collaborate across the Manchester Local Care Organisation (MLCO) and wider system partners
- Ensure commissioning aligns with integrated care priorities and supports joined-up delivery.

3. Investing in Community Strengths

- Build on existing community assets and support community-led solutions.
- Promote empowerment and resilience through local initiatives.

4. Targeted, Evidence-Based Commissioning

- Address service gaps using robust evidence and business cases
- Commission services that focus on prevention, early intervention, and reducing escalation of need.

5. Championing Strength-Based Practice

- Work alongside frontline teams to embed a strengths-based, person-centred approach
- Ensure prevention is embedded in all commissioned services, supporting people to live independently for longer.

10. Strategic solutions

So far in this strategy, we have explored the outcomes of both citizen and colleague engagement. The following section brings these perspectives together, presenting a unified set of strategic solutions.

These solutions and themes emerged through our collaborative engagement sessions with both groups. They represent broad, high-level focus areas that will shape our approach to embedding prevention across the directorate. The identified themes are:

1. Empower the VCFSE Sector

We recognise and support the vital role of Voluntary, Community, Faith, and Social Enterprise organisations in leading prevention efforts.

2. Simplify Access to Services

We will make our services easy to understand, with clear and accessible information so people can get help when they need it.

3. Make Prevention a Shared Responsibility

We will embed person-centred practices across Adult Social Care, encouraging everyone to contribute to wellbeing and happiness.

4. Think Beyond Immediate Formal Needs

We will focus on proactive and forward-thinking support, not just current challenges.

5. Strengthen Community-Based Support

We will prioritise prevention initiatives that are rooted in local neighbourhoods and tailored to community needs.

6. Champion Inclusivity

We will ensure our prevention strategies reflect and respond to the diverse backgrounds and experiences of our city's residents.

7. Promote Smart Solutions

We will increase awareness and use of technology and equipment that enhance independence and wellbeing.

8. Creating a “No Wrong Door” Culture in Adult Social Care

By adopting a “no wrong door” culture in adult social care means that every point of contact, regardless of how or where someone enters the system, is treated as an opportunity to offer early help & prevent.

Strategic solutions expanded

The following section provides deeper insight into the strategic objectives we've identified through co-production. It reflects what truly matters to the citizens of Manchester and highlights the foundations we need to strengthen to make prevention meaningful, impactful, and sustainable.

1. Empower the VCFSE Sector

VCFSE (Voluntary, Community, Faith, and Social Enterprise) organisations are uniquely positioned to deliver prevention and early intervention services due to their deep roots and trusted presence within local communities.

Their close connection to the people they serve gives them a strong understanding of community-specific needs, enabling them to design and deliver tailored health and wellbeing initiatives.

These organisations are well-equipped to lead community-driven programs that empower individuals to take control of their health and make informed choices. When VCFSE groups collaborate with statutory services, they contribute to the development of integrated, responsive, and effective prevention strategies and services that are grounded in the realities of the communities they support.

2. Make Prevention a Shared Responsibility

Creating a culture where prevention is everyone's responsibility requires a fundamental shift to one that "works with" citizens. This approach centres on partnership, empowerment, and shared accountability. It means:

- Empowering individuals to make informed choices about their health and wellbeing
- Supporting communities to adopt healthier lifestyles through accessible resources and inclusive environments
- Embedding prevention into everyday life, services, and systems so that it becomes a natural and shared priority.

By making prevention a collective effort, we can build healthier, more resilient communities and reduce the burden on health and care services.

3. Simplify Access to Services

Simplifying access to adult health and social care involves a range of coordinated actions aimed at making services more user-friendly, efficient, and inclusive. This includes improving access to clear, up-to-date information and providing advocacy support to help individuals navigate the system.

A centralised digital platform can streamline access to services and support, particularly for unpaid carers. Integrating health and social care services ensures a more seamless experience, while simplifying referral and assessment processes can reduce delays and administrative burdens.

Together, these strategies aim to create a more responsive and person-centred system.

4. Think Beyond Immediate Needs

The demand for care and support services is changing, influenced by several key factors including an ageing population, the rising prevalence of long-term health conditions and rapid advancements in technology. In this evolving landscape, prevention is more important than ever.

By promoting healthy lifestyles, enabling early intervention, and providing targeted support for those at risk, preventative approaches can significantly reduce the need for formal care. This not only improves individual wellbeing but also helps to sustain health and social care systems by reducing pressure on services.

5. Strengthen Community-Based Support

Neighbourhood-based prevention focuses on building healthier communities by harnessing local assets and actively involving residents in addressing health and social challenges close to home. This place-based approach:

- Leverages local knowledge and resources to design relevant and effective interventions.
- Engages residents in shaping solutions, fostering ownership and long-term commitment
- Improves health outcomes by promoting early action and community resilience
- Reduces pressure on formal health and care services through proactive, local support
- Empowers individuals to take charge of their wellbeing in familiar and supportive environments.

6. Promote Smart Solutions

Technology and equipment are vital tools in preventative care, especially for individuals with disabilities or those at risk. These innovations:

- Support functional independence by enabling individuals to perform daily tasks more safely and effectively
- Reduce the risk of accidents and injuries, particularly in the home or community settings
- Enhance quality of life by promoting autonomy and reducing reliance on formal care services
- Enable early intervention, helping to maintain health and wellbeing before more intensive support is needed.

By integrating adaptive solutions into everyday life, we can empower individuals to live more independently and safely, while also easing pressure on health and social care systems.

7. Creating a “No Wrong Door” Culture in Adult Social Care

A “no wrong door” culture in adult social care ensures that every interaction no matter where someone enters the system is a gateway to early help, prevention, and meaningful support.

Embedding a “no wrong door” culture transforms adult social care into a proactive, responsive, and sustainable system, one that prevents crises, supports independence, and delivers better outcomes for all.

11. Embedding prevention in adult social care

To embed prevention into everyday practice, it will be at the heart of care and not an add-on. This involves consistently promoting independence and wellbeing, whilst working to prevent or delay declines in health. What it means:

- ✓ **Embedding prevention involves integrating proactive strategies into everyday care and not treating them as separate or reactive tasks. It's about:**
 - Promoting independence and wellbeing
 - Preventing or delaying deterioration
 - Collaborating across sectors (health, housing, transport, communities).
- ✓ **From Reactive to Proactive**
 - Reactive prevention = responding after issues arise
 - Proactive prevention = anticipating and addressing risks early
 - Prevention must become the default mindset across all roles and services.
- ✓ **Professional Curiosity & Strength-Based Practice**
 - Look beyond presenting needs
 - Explore risks, challenge assumptions, and understand full circumstances
 - Use every contact as an opportunity to improve outcomes.

- ✓ **Communities First & ABCD Approach**
 - Link citizens to community assets to build resilience and belonging
 - Focus on what citizens and communities can do, not just what they need
 - Use Asset-Based Community Development (ABCD) to unlock local strengths.
- ✓ **System & Partnership Working**
 - Prevention is a whole-system responsibility
 - Build on Manchester's strong history of collaboration
 - Work with statutory services and VCFSE partners to deliver joined-up support
 - Include prevention as a workstream under adult social care and across the system.
- ✓ **Enablers for Success**
 - Time and capacity for staff to learn and share
 - Culture of continuous learning and best practice exchange
 - Prevention embedded in every contact, every role, every service.

Key outcomes of the prevention agenda

The final area we explored as part of this strategy was outcomes. Both citizens and colleagues shared their perspectives, which are outlined below:

Outcomes for individuals



Prevention leads to:

- Greater independence through better access to community resources and self-care
- Enhanced wellbeing and quality of life for both citizens receiving care and their carers
- Reduced social isolation and loneliness, fostering stronger community connections
- Delayed or reduced need for formal care and support, helping citizens stay independent longer.

Outcomes for organisations and systems



At system level, prevention supports:

- Reduced demand on services, freeing up resources for those with higher needs
- Improved staff retention, addressing workforce challenges like turnover and recruitment
- Service innovation, making roles more attractive and improving overall sector sustainability.

Outcomes for staff



Staff benefit from both direct and indirect effects of prevention-focused work through:

- Improved job satisfaction through meaningful, proactive engagement
- Lower stress and burnout, supported by wellbeing initiatives
- Stronger workplace relationships, fostering collaboration and morale
- Higher staff engagement, contributing to a more resilient workforce.

12. Implementation

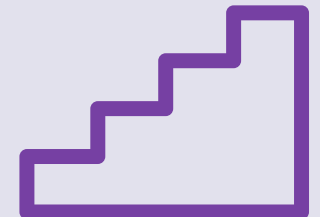
This strategy will be operationalised through a Communities of Practice (CoP) delivery model, which will serve as the primary mechanism for fostering collaboration, knowledge sharing and continuous improvement across relevant stakeholder groups.

By leveraging the CoP framework, we aim to build a sustainable learning culture that supports the implementation of best practices, encourages peer-to-peer engagement, and drives innovation within the system.

In June 2025, ADASS launched its 'The Future of Prevention' programme, setting out a national vision and framework for embedding prevention at the heart of adult social care. We will align our local prevention strategy with this framework, using it as a foundation to guide our priorities, shape our delivery models, and ensure consistency with emerging best practice. By adopting this approach, we aim to strengthen our preventative offer, promote independence and wellbeing, and reduce demand on statutory services through earlier, more integrated interventions.

The programme consists of a 5-step delivery model:

- 1 Step 1: Identify and Prioritise Residents Based on Impact**
We will use data-driven insights and professional judgement to identify individuals and communities who are most likely to benefit from preventative support. This ensures our efforts are focused where they can make the greatest difference.
- 2 Step 2: Understand People Holistically**
We will take time to build a full picture of each person's strengths, needs, aspirations, and circumstances, recognising that effective prevention requires a whole-person approach, not just a service response.
- 3 Step 3: Connect People to the Right Support**
We will actively link individuals to the most appropriate support, whether formal services, community assets or informal networks, ensuring timely, personalised, and coordinated interventions.
- 4 Step 4: Measure and Drive the Impact We're Aiming For**
We will track outcomes and use feedback to understand what's working, adapt our approach, and ensure we are delivering meaningful, measurable improvements in citizens lives.
- 5 Step 5: Sustain the Model and its Benefits**
We will embed this approach into core practice, governance, and commissioning, ensuring long-term sustainability and continued benefits for this cohort and future populations.



Evolving discussion

This co-produced Adult Health and Social Care Prevention Strategy marks the beginning of an ongoing dialogue. It is not only a foundation for immediate action but also a commitment to continuous learning and adaptation.

By revisiting the co-production process annually, we aim to remain responsive to evolving needs and priorities.

Regular engagement with both colleagues and citizens will help ensure accountability for the actions we've committed to, while also enabling us to track shifts in community needs and expectations over time.

This iterative approach will support a more dynamic, inclusive, and effective prevention strategy that grows with the people it serves.

