

# Manchester Local Care Organisation: Operating Plan 2024/25



May 2024

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# MLCO Operating Plan 2024/25: Contents

The Manchester Local Care Organisation (MLCO) Operating Plan (2024/25) has been designed as a navigation document to support the connectivity between our neighbourhood and service plans. The Operating Plan (2024-25) should be read alongside the service plans and outlines, which can be requested from Service Managers.

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# 1. Message from Our Chief Executive

Katy Calvin-Thomas



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# 1. Introducing our Plan

## To all MLCO staff and the colleagues and partners we work with,

I want to thank you all for the work you do everyday supporting, enabling and caring for the people of Manchester; once again in 23/24 we have continued to develop the MLCO and demonstrate the impact that working together can have for the people who use our services, as well as for the benefit of our own learning and development.

Our work with primary care and other partners in our neighbourhoods to address the barriers that drive health inequalities for hypertension, diabetes and bowel cancer screening and improve our outcomes in these areas is demonstrating the impact that targeted approaches can have; the work to mobilise Hospital at Home has been a real system effort and whilst we are at the start of our journey on this, we are really seeing the impact for some of our most vulnerable residents; we continue to work in our neighbourhoods providing a comprehensive and integrated health and care response; positive assessments of service contributions as part of the Joint Targeted Area Inspection (JTAI), Special Educational Needs and Disability (SEND) and Sickle Service Peer Reviews; we have embarked on a significant programme to improve our digital capability and with your help our data is improving – we must continue to work together to improve this. We have seen many of our teams achieve improved status through accreditation and we achieved a balanced financial position.

For the next 12 months, I want us to ensure that together we don't lose sight of our core purpose – the delivery of safe, effective services for the people in Manchester in partnership with colleagues in primary care, local authority, hospitals, voluntary sector and beyond. Together, I want us to look for and act upon opportunities to be more proactive in our approach and how we really ensure we are 'preventing' ill health and the need for long term services. Access to some of our services remains a challenge which we must find a sustainable approach to addressing during this year, with our commissioners. We will need to support people through urgent care pathways and develop the Hospital at Home model. I am also very conscious that since the pandemic the balance of the work we do between unplanned and proactive care has shifted and I want to work to redress this through our Population Health Management work in partnership with VCSFE and primary care. We will continue our discussions about how the Section 75 we have in place in Manchester enables us to further integrate services for people in community.

**Katy Calvin-Thomas**  
Chief Executive, MLCO



This plan outlines some of the highlights from our previous year including those identified in all of your service plans; this year in service plans we have included some case studies highlighting the great work of our teams. It also summarises the work I believe we need to focus on to continue to develop the MLCO as the organisation that delivers health, care and wellbeing services, empowers its staff and collaborates with partners to secure the best outcomes for residents and our staff in Manchester.

I want this Plan to be your plan that you refer back to and alongside your service plans, together they should guide the work of your teams for the next 12 months. They need to inform objective setting and your development discussions and should be live documents that you are able to reference back to. If any of you need support from the teams in other services or the corporate teams, please follow this through with your line manager. I am looking forward to visiting your 'locality meetings' during the year to hear about how your teams are continuing to deliver brilliant services in the community and continue to improve them during 2024/25.

*Please remember, we have another Operating Plan for the services we are in charge of delivering in Trafford.*

A handwritten signature in black ink, appearing to read 'K. Calvin-Thomas'. The signature is fluid and cursive.

Katy

# 2. Looking back: 2023/4

## Our Achievements



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## 2.1 MLCO Key Achievements 2023/24

### Patient Safety & Experience

- Reduction in category 3 & 4 pressure ulcers from 25 in 2022/2023 to 17 on 2023/2024. This is due to intensive ongoing training for staff
- No serious falls in 2023/2024
- Patient Safety Incident Response Framework (PSIRF) implementation
- Roll out of patient experience platform
- Roll out of Quality Care Round (QCR) and What Matters to Me (WMTM) across all nursing services
- NICE guidance compliance process and lookback exercise.

### Workforce & Leadership

- Focus on **staff engagement** inc. launch of our appraisal framework ('A Different Conversation') and 2023 staff survey results show positive feedback.
- Launched '**Leading Together**', bespoke Band 7 Leadership Programme piloting with Allied Health Professionals (AHPs) and District Nurses.
- Significant number of colleagues completed **allyship training** and role of allies supporting Equality, Diversity and Inclusion (EDI) activity to be revisited and new EDI Lead.
- Continuing to **improve efficiency and applicant experience** in the recruitment pipeline and widening access to employment opportunities
- Activity ongoing to **improve retention** and reduce avoidable absence
- Continued development and **promotion of health and wellbeing support** to staff and case management support for line managers.

### Finance & Operational Excellence

- Control total achieved, including the additional ask
- Hospital @ Home mobilised (utilisation on March 11<sup>th</sup> 2024 was 100%)
- 78 weeks waits eliminated and 65 week waits eliminated across services
- Achievement of Referral to Treatment (RTT) 18-week standard in three of four services
- Sustained over achievement of 2hr crisis response target
- Continued to support reduction in No Reason to Reside (NR2R) position
- LCO driven data quality (DQ) improvement programme has seen material and continued improvements across core LCO DQ measures.

### Strategy

- Implemented the Community Sickle Cell pathway to support the MFT Sickle Cell Unit (SCU).
- Integrated Neighbourhood Team (INT) model reviewed and changes mobilised to build consistency; work underway to build stronger alignment to wider partners through Teams Around the Neighbourhood.
- Population Health Management embedded into INT model; shared plans agreed with Primary Care Networks (PCNs) for targeted actions to address health inequalities (hypertension, diabetes and bowel cancer screening).
- Children's team continue to work in partnership through the Family Hubs in the City
- Hospital at Home mobilised in 3 Manchester localities; initial evaluation showing positive impact
- Digital plan – driving improvements to the end user experience
- Community Health Transformation programme: delivered service changes in podiatry, Manchester Case Management (MCM), and Children and Young People (CYP) Orthoptics and Speech and Language Therapy (SALT) in partnership with Integrated Care Board (ICB) (Manchester) team
- Better Outcomes Better Lives completed and evaluated.
- System transformation (Manchester and Trafford) network started
- LCOs supporting development of GM Community Services Group and Commissioning Group; leading elements of the work plan.

## 2.2 MLCO Performance 23/24

### Contacts vs Plan (Full Year)

Achieving planned activity for 23-24.

Performance	Target
1.06M, -3.8%	1.10M

### RTT Waiters 52 weeks + (Full Year)

No Referral to Treatment (RTT) patient should wait more than 52 weeks to be seen by a consultant.

Performance	Target
0	0

### Vacancy rate (March-24)

Number of vacancies with the LCO should be a maximum of 7.5%

Performance	Target
3.5%	7.5%

### All waiters 65 weeks + (March-24)

No patient should be waiting over 65 weeks to be seen.

Performance	Target
6	0

### Contact Linked to a Referral (March-24)

At least 98% of contacts should be linked to a referral.

Performance	Target
97.8%	98%

### Retention Rate (March-24)

Retention rate should be 89%; minimising avoidable staff turnover where possible.

Performance	Target
85%	89%

### Outcomed Appointments (March-24)

90% of diary appointments should be "actualised" (marked Attended / Did Not Attend).

Performance	Target
88.4%	90%

### Crisis Response 2h (March-24)

85% of calls to crisis should be responded to within 2 hours.

Performance	Target
96.8%	85%

### Sickness Absence (R12M)

Managers should work proactively with staff to reduce sickness absence to 4.5%

Performance	Target
6.3%	4.5%

# 3. Our Corporate Plans: 2024/25

Our Objectives



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# Our priorities

2024-2025


## Our vision - as one health and care team

Working together we can help the people of Manchester:

 Have equal access to health and social care services

 Live healthy, independent, fulfilling lives

 Be part of dynamic, thriving and supportive communities


 Have the same opportunities and life chances, no matter where they live

 Receive safe, effective and compassionate care, closer to their homes

## Our way of working - #WeAreCommunity

- We provide services in the community across Manchester
- We work together with partners in the community
- We work across neighbourhoods with a focus on what is important to local communities
- We are a staff community, working as one team across community health and adult social care.

## Our core priorities for 2024-2025


 A population health approach

Working with partners on prevention and reducing health inequalities - with a focus on hypertension, diabetes, take-up of bowel cancer screening and childhood asthma.



Safe, effective and efficient services

Ensuring our services meet core performance metrics and working across care pathways with partners to continually improve the service offer.

 Working with primary care & the voluntary sector

Ensuring GP Leadership is at the heart of the LCO and co-producing priorities with the city's Primary Care Networks and VCSE sector to tackle health inequalities.



Developing our neighbourhoods

Delivering core health and care community services through our Integrated Neighbourhood Team model, with teams proactively working together.

 Resilience

Continuing to keep people well in the community, reducing pressure on other services. Developing our community urgent care model to help keep people out of hospital.



Building the future for the LCOs

Increasing the scope of the LCO with a 'Think Family' approach. Playing a key role in the wider system developments in Manchester.

## 3.2 KLOEs 2024/25

Key Lines of Enquiries (KLOEs), and supporting metrics, are aligned to the performance metrics that are monitored through the Community Health Performance Board and Adult Social Care (ASC) Performance Boards. The KLOEs and metrics for 24/25 are below:

KLOE Theme	Description	Metric Measured	Where Monitored
Quality	We will better understand the experience of our patients and families through collecting a larger proportion of feedback. This will help us improve services.	What Matters to Me scores Quality Care Round Scores	Health Performance Board
	We will promote MLCO as a good place to work and to make best use of available apprenticeship levy funding to widen access to employment and support career development in MLCO, and to ensure a proactive approach is taken to filling vacancies so that progression through the recruitment pipeline is as fast as possible.	Recruitment into vacancies	Health Performance Board
Workforce (Community Health and ASC)	We will develop data analysis to improve understanding of drivers of avoidable staff turnover and to develop effective plans and promote employment support offers to help reduce avoidable turnover.	Increasing workforce stability	Health Performance Board
	We will agree and implement plans to improve Health and Wellbeing and to develop the role of Health and Wellbeing Champions, and to work with line managers to ensure proactive and supportive case management of sickness absence.	Reducing unplanned absenteeism	Health Performance Board
	We will deliver the LCO's operational plan within control total.	Achieve activity plan Deliver Value for Patients Plan	Finance, Performance & Contracting Group
Finance	We will develop and implement robust schemes that are QIA checked and agreed through system governance to deliver the LCO's Value for Patients (VfP) target recurrently.		
	Strong financial controls and detailed financial reporting with a focus on integration.		
Activity / Performance	We will meet the needs of our residents in a timely and effective way.	Nobody waiting over 52 weeks Crisis response 2 hour standard.	Health Performance Board

# 3.3 Our Community Health Workplans 2024/25

*People at the centre of everything we do*

MLCO Priority	Key Deliverables 2024/25
<p><b>A population Health Approach</b></p>	<ul style="list-style-type: none"> <li>• Continue to roll out the data led approach to closing health inequalities in agreed CORE20PLUS5 areas for both adults and Children and Young People (CYP).</li> <li>• Support the development of CYP Virtual Wards (VWs) and delivery of priorities identified through both Childrens Clinical and Professional Advisory Group (CCAG) and the Manchester Children and Young People’s Reform Programme.</li> <li>• Support the Long-Term Conditions (LTC) programme in Manchester and identification of improved clinical and professional pathways.</li> <li>• Develop relationships and work programmes with Manchester Metropolitan University (MMU) to look at evaluation of neighbourhood working and prevention strategies across the Local Care Organisation (LCO).</li> </ul>
<p><b>Developing our Neighbourhoods</b></p>	<ul style="list-style-type: none"> <li>• Progress the Manchester Neighbourhood approach ensuring greater collaboration through the Teams Around the Neighbourhood demonstrating the impact they have for residents and our communities.</li> <li>• Design an MLCO community prevention strategy ensuring Voluntary and Community, Faith and Social Enterprise (VCSFE) are central to co-production of approach at Neighbourhood level and enabling Neighbourhood level commissioning</li> <li>• Agree a plan to support North Manchester strategy delivery and the North Manchester General Hospital redevelopment business case to pilot and evaluate prevention-focused initiatives across community partners to deliver improved health and wellbeing in the North</li> </ul>
<p><b>Safe, Effective and Efficient Services</b></p>	<ul style="list-style-type: none"> <li>• Deliver statutory NHS access, quality and safety requirements across all services</li> <li>• Implement the LCO Single Point of Access plan and business support strategy</li> <li>• Implement Patient Safety Incident Response Framework (PSIRF) in the LCOs.</li> <li>• Deliver improvement outlined in the Patient Safety Incident Response Plan (PSIRP) across the 5 key areas</li> <li>• Work with system partners to ensure that children, young people and vulnerable adults are kept safe</li> <li>• Ensure that mandatory training compliance and safeguarding supervision for Childrens services achieve the Trust target</li> <li>• Improve patient/service user, their families and carers experience of all LCO services in accordance with the Manchester Foundation Trust (MFT) Learning Disability (LD) and Autism strategy</li> <li>• Deliver the dementia, carers and patient experience strategies and embedding What Matters to Me (WMTM) and Quality Care Round (QCR).</li> <li>• Work to ‘close the gap’ of WMTM and QCR at LCO and service level</li> <li>• Implement the Quality Assurance Reviews across all community services in the LCO over the next three years</li> <li>• Develop and refine a model to baseline capacity and demand for community health services.</li> <li>• Support and respond to audit and inspections outcomes within Children’s Community Health Services (CCHS).</li> <li>• Validate the methodology for waiting list management in community health and implement plan agreed with MFT Group to reduce waiting times.</li> <li>• Review and implement a revised governance structure.</li> <li>• Continue to implement the Community Health Transformation Programme delivering a core standardised Community Health service and pathways based on understanding of need.</li> <li>• Deployment of the Ulysses Risk and Assurance module across all community health services to demonstrate compliance with CQC quality statements and fundamental standards.</li> </ul>

### Working with Primary Care and VCSE

- Support communications into Primary Care (PC) around clinical changes particularly Hospital at Home (H@H), community response and any changes in service specification or delivery from Community Health Transformation Programme.
- Support MFT strategy to adopt the best practice around interfaces in line with Association of Medical Royal Colleges (AoMRC) guidelines.
- Lead the design of an MFT Sickle Cell, Thalassaemia and Rare Anaemia service strategy informed by Community-led engagement strategy delivery and the North Manchester General Hospital redevelopment business case to pilot and evaluate prevention-focused initiatives across community partners to deliver improved health and wellbeing in the North

### Resilience

- Deliver LCO Control Total and agreed Value For People plans
- Develop a future plan for community services estate.
- Work with LCO Managers and MFT/Manchester City Council (MCC) Resourcing Teams to promote employment and career development opportunities in MLCO/TLCO and to ensure a proactive approach is taken to filling vacancies so that progression through the recruitment pipeline is as fast as possible.
- Work with MFT/MCC Business Intelligence (BI) teams develop data analysis to improve understanding of drivers of staff turnover and to promote employment support offers to help reduce avoidable turnover.
- Deliver our Operational Development (OD) Plan to reinforce strengths-based leadership and improve staff engagement, including embedding the refreshed 'A Different Conversation' Appraisal Framework and delivering the Freedom to Lead 2024 event
- Deliver agreed leadership and team development plans for 24/25 and evaluate impact, including i. Leading Together Programme Cohorts 2, 3 & 4 ii. TLCO Neighbourhood Development Plans iii. Hospital at Home Team Induction Framework
- Review LCO Equality, Diversity and Inclusion (EDI) priorities and plans, and deliver LCO EDI programme for 24/25.
- Agree and implement a development plan to improve the impact of LCO Health and Wellbeing Champions, and to work with managers to ensure proactive and supportive case management of sickness absence.
- Develop and deliver a digital improvement and transformation plan.

### Building the Future for the LCO

- Design and mobilise an integrated Learning Disability service model through an aligned commissioning and service plan
- Support the redesign thinking around LCO urgent care and discharge pathways with a Home First ethos in partnership with all hospital sites and include the drive to establish a robust Hospital@Home offer. Hospital@Home will be embedded as a single one team model across sites and community teams with pathways to support general medical, respiratory illnesses, heart failure and frail older patients as a minimum. This will require joint working with site SDECs and development of a resilient workforce model across 7 days.
- Compile an outline business case to develop an Electronic Patient Record (EPR) across community health (subject to Strategic Outline Case (SOC) agreement).
- Embed Frontline-led service change supporting staff to identify opportunities for improvement and test / implement them.
- Refresh S.75 in place between MFT / MCC
- Build on the aligned commissioning model in the MLCO to support the operation of the Integrated commissioning function for Manchester Integrated Care Partnership through the Joint Commissioning Board
- Continue to work with Research and Innovation (R&I) regarding speciality alignment planning for research in community services and review opportunities for clinical audit and quality improvement to align in a similar way.

# 3.4 Our Adult Social Care Workplans 2024/25

ASC Priority	Key Deliverables 2024/25
Prevention	<ul style="list-style-type: none"> <li>• Design and develop a co-produced MLCO Prevention strategy with VCSE partners.</li> <li>• Expand Early Help and Prevention offer into working with people with a Learning Disability (LD) and Complex support.</li> <li>• Ensure a 'Reablement first' approach to discharge and community step-up pathways, so that everyone who could benefit can access the reablement offer</li> <li>• Build an LCO-wide approach to embed Tech-enabled care into Operating models. Review and develop a service strategy for Equipment services in the City, further increase use of Tech-Enabled Care (TEC) to support independence.</li> <li>• Further develop a community services approach to improve the lived experiences of carers.</li> <li>• Deliver and evaluate impact of Moving and Handling pilot, maximising independence to reduce use of homecare.</li> <li>• Develop and explore blended roles with community services in Homecare.</li> </ul>
Commissioning	<ul style="list-style-type: none"> <li>• Retender commissioned contracts for Homecare and LD / Mental Health (MH) supported accommodation. Healthwatch, unpaid carers and independent advocacy have recently concluded.</li> <li>• Build on the aligned commissioning model in the MLCO to support the operation of the Integrated commissioning function for Manchester Integrated Care Partnership.</li> <li>• Continue to enable frontline teams to inform commissioning priorities through See and Solve and My Views as part of responsive commissioning.</li> <li>• Brokerage to expand scope and support Learning Disability and Mental Health support.</li> </ul>
Preparing for Adulthood	<ul style="list-style-type: none"> <li>• Strengthen the transition from Children's into Adults Services through the PREPARING FOR ADULTHOOD programme working earlier with young people with an LD to maximise independence; Work with CYP services and develop a plan for the c.50 children expected to transition to adults in 24/25.</li> </ul>
Safeguarding	<ul style="list-style-type: none"> <li>• Transform SAFEGUARDING into a system that supports people in a timely manner, so that people feel safe and secure where they live – making safeguarding personal.</li> </ul>
Care Market	<ul style="list-style-type: none"> <li>• Develop a <b>Care Market sustainability plan</b> - working with the care market to address market stability, review market framework rates and support providers with recruitment and retention and increase Extra care provision.</li> <li>• Develop a Manchester Care Home strategy.</li> <li>• Maintain engagement through INNOVATION LABS.</li> <li>• Embed learning from trusted assessor pilot and expand across the city.</li> </ul>
My Life, My Way and Learning Disability	<ul style="list-style-type: none"> <li>• Mobilise next phases of the MY LIFE, MY WAY programme, including Supported Accommodation, Day Services and Short breaks and transport services.</li> <li>• Ensure timely assessments and case reviews.</li> <li>• Identify opportunities for LEARNING DISABILITY INTEGRATION of internal health and social care teams.</li> </ul>
Hospital Demand management and statutory duty	<ul style="list-style-type: none"> <li>• Review ASC approach in discharge pathways and Integrated Discharge teams, implementing a plan following learning from Newton Europe.</li> <li>• Continue to work with the VCSE to support patients leaving hospital to receive high quality, supportive and practical offer focused on preventing readmission and improving people health and wellbeing.</li> <li>• Deliver <b>statutory NHS access, quality and safety requirements</b> across all services and deliver safe, effective and efficient Adult Social Care (ASC) services as outlined in the Care Act 2014.</li> </ul>
Controcc	<ul style="list-style-type: none"> <li>• Improve the WORKFLOW, SYSTEMS RECORDING and PAYMENTS PROCESS though CONTROCC improvement; reduce 'on-hold' invoice position.</li> </ul>
GMMH	<ul style="list-style-type: none"> <li>• Support GMMH on their improvement journey to become a safe, effective and strengths-based offer.</li> </ul>

# 3.5 Our Joint Workplans 2024/25

MLCO Priority	Key Deliverables 2024/25
<p>A population Health Approach</p>	<ul style="list-style-type: none"> <li>• Design and develop a co-produced MLCO Prevention strategy with VCSE partners.</li> <li>• Expand Early Help and Prevention offer into working with people with a Learning Disability and Complex support</li> <li>• Build an LCO-wide approach to embed Tech-enabled care into Operating models. Review and develop a service strategy for Equipment services in the City, further increase use of TEC to support independence.</li> <li>• Develop relationships and work programmes with Manchester Metropolitan University (MMU) to look at evaluation of neighbourhood working and prevention strategies across the Local Care Organisation (LCO).</li> </ul>
<p>Developing our Neighbourhoods</p>	<ul style="list-style-type: none"> <li>• Develop and explore blended roles with community services in Homecare</li> <li>• Support communications into Primary Care (PC) around clinical changes particularly Hospital at Home (H@H), community response and any changes in service specification or delivery from Community Health Transformation Programme</li> <li>• Progress the Manchester Neighbourhood approach ensuring greater collaboration through the Teams Around the Neighbourhood demonstrating the impact they have for residents and our communities.</li> </ul>
<p>Safe, Effective and Efficient Services</p>	<ul style="list-style-type: none"> <li>• Support the redesign thinking around LCO urgent care and discharge pathways with a Home First ethos in partnership with all hospital sites and include the drive to establish a robust Hospital@Home offer. Hospital@Home will be embedded as a single one team model across sites and community teams with pathways to support general medical, respiratory illnesses, heart failure and frail older patients as a minimum. This will require joint working with site SDECs and development of a resilient workforce model across 7 days.</li> <li>• Home First / Hospital at Home: Ensure a 'Reablement first' approach to discharge and community step-up pathways, so that everyone who could benefit can access the reablement offer, Review ASC approach in discharge pathways and IDT, implementing a plan following learning from Newton Europe.</li> <li>• Build on the aligned commissioning model in the MLCO to support the operation of the <b>Integrated commissioning</b> function for Manchester Integrated Care Partnership</li> <li>• Embed Frontline-led service change supporting staff to identify opportunities for improvement and test / implement them / Continue to enable frontline teams to inform commissioning priorities through See and Solve and My Views as part of responsive commissioning</li> <li>• Ensure timely assessments and case reviews</li> <li>• Identify opportunities for LEARNING DISABILITY INTEGRATION of internal health and social care teams</li> <li>• Deliver <b>statutory NHS access, quality and safety requirements</b> across all services and deliver safe, effective and efficient Adult Social Care (ASC) services as outlined in the Care Act 2014</li> <li>• Improve patient/service user, their families and carers experience of all LCO services in accordance with the Manchester Foundation Trust (MFT) Learning Disability (LD) and Autism strategy</li> <li>• Transform SAFEGUARDING into a system that supports people in a timely manner, so that people feel safe and secure where they live – making safeguarding personal</li> <li>• Implement the LCO Single Point of Access plan and business support strategy</li> <li>• Support and respond to audit and inspections outcomes within CCHS</li> </ul>

Working with  
Primary Care and  
VCSE

- **MLCO PREVENTION STRATEGY:** Design and develop a co-produced MLCO Prevention strategy with VCSE partners.
- **HOME FROM HOSPITAL:** Continue to work with the VCSE to support patients leaving hospital to receive high quality, supportive and practical offer focused on preventing readmission and improving people health and wellbeing.

Resilience

- Strengthen the transition from Children's into Adults Services
- Work with CYP services and develop a plan for the c.50 children expected to transition to adults in 24/25.
- Develop a future plan for community services estate
- Review and implement a revised governance structure

Building the  
Future for the  
LCO

- **EARLY HELP & PREVENTION:** Expand Early Help and Prevention offer into working with people with a Learning Disability and Complex support
- Design and mobilise an integrated Learning Disability service model through an aligned commissioning and service plan
- Refresh S.75 in place between MFT / MCC
- Build on the aligned commissioning model in the MLCO to support the operation of the Integrated commissioning function for Manchester Integrated Care Partnership
- Develop and deliver a digital improvement and transformation plan
- Continue to work with Research and Innovation (R&I) regarding speciality alignment planning for research in community services and review opportunities for clinical audit and quality improvement to align in a similar way.

## 3.6 Digital, Data and Business Intelligence

The LCOs digital, data and business intelligence resources will continue to prioritise work that enables operational and corporate teams to deliver better services. All this work is captured in the **LCOs Digital Programme**, which forms part of the LCOs Transformation Portfolio, and is governed by the **Digital Design Authority**.

### WORK AREAS

**Digital Architecture & Infrastructure** – improving staff experience of the IM&T that underpins day-to-day work: ensuring networks are stable, secure, reliable and accessible; hardware is fit-for-purpose and IM&T support teams are better able to diagnose and resolve infrastructure issues in a timely and impactful way.

**Core Systems Implementation & Optimisation** – improving the functionality and effectiveness of core systems to better enable patient management through digital means. This will involve exploiting opportunities created by HIVE, and improving the effectiveness and reliability of LCO applications, including EMIS and Liquid Logic amongst others.

**Shared Care Records** – greater utilisation of the Greater Manchester Care Record (GMCR) to its full extent to enable improvements to direct care and treatment, by providing health and care professionals with access to vital patient information. It will also inform better service planning and analytics, as well as research.

**Knowledge & Insight** – Delivering high quality and timely operational management MI and performance reporting and enabling business change through the provision of expert data analysis and insight. All underpinned by accurate data, using powerful data visualisation tools to aid understanding.

### PRIORITY ACTIVITIES

- Digitising the **LCO Care Quality Control (CQC) Registered Bed Base**
  - In ASC, delivery of a new **Community Alarm and Tech-Enabled Care (CATEC) Platform**, and **digitisation of Reablement and Disability Supported Accommodation (DSAS)**
  - Continued improvement work, driven by staff feedback, around the **LCOs Information Management and Technology (IM&T) Infrastructure**, in collaboration with MFT Group Informatics and MCC ICT Unit, including **digital integration** at a neighbourhood level.
- **EMIS Optimisation** programme, delivering a more useable and stable EPR
  - Development of an **EPR Strategy** to set the parameters for a new community EPR system
  - LCO-wide roll out of **eRostering**
  - In ASC, stabilisation of **Liquid Logic** and support for the delivery of the **ContrOCC** project.
  - Continue to seek opportunities to develop **Robotic Process Automation (RPA)** solutions.
- Enable the **community data feed** from EMIS into GMCR
  - Identifying **staff requirements** for a shared care record
  - Assessment of **potential system developments** stemming from the GM GMCR Team, i.e. end of life care planning.
- **Service redesign** - Data & BI support for Responsive Health Commissioning
  - **Discharge focus** - Data & BI support for Hospital@Home and Home First Programmes
  - **Internal transformation** – improvement of the BI and data infrastructure.
  - **Mandatory** – maintenance and improvement of day-to-day reporting and data quality standards, including the Community Services Dataset (CSDS) and Community Health Services Sitrep.



## 3.6 HR&OD

The Human Resources and Operational Development (HR&OD) team have six priorities for 24/25, that can be split into themes:

1. Recruiting the people we need for now and the future
2. Retaining the people we need for now and the future
3. Developing organisational culture to improve staff experience
4. Developing leaders and teams
5. Improving wellbeing at work and reducing sickness absence
6. Promoting diversity & inclusion in our workplace



### What does success look like?

1. Vacancy levels <8% (health) and <14% (ASC), improved diversity in our workplace reflecting the communities we serve.

2. Staff turnover is <12.6% (Health) and <8% (ASC).

3. Improved staff feedback in 24/25 Staff Surveys (indicators tbc, but probably including i. 'the quality staff appraisal conversations' ii. 'recommending LCO as a good place to work' and iii. 'feeling supported by their line manager').

4. Programmes delivered according to plan with successful impact evaluation.

5. Improved Feedback in 24/25 Staff Surveys on wellbeing (indicators tbc). Sickness levels reduced to >5%.

6. Equality, Diversity and Inclusion (EDI) Programme approved by LCO Executive Team by 30th April. Improved Black and Minority Ethnic (BME) representation in leadership roles, improved feedback from staff with protected characteristics in 24/25 staff surveys.

## 3.6 Quality, Safety and Professional

Within the quality, safety and professional portfolios, there are four priorities for 24/25 –

1. Delivering a positive experience for patients, families and carers
2. Providing effective partnership working to safeguard our most vulnerable people
3. Nursing, Midwifery and Allied Health Professionals (NMAHP) STRATEGY
4. Delivering safe, evidence-based care in line with the patient safety strategy



### What does success look like?

1. All services will use QCR, WMTM and FFT with close alignment of WMTM and QCR %.

2. Annual review of safeguarding systems, processes and practice demonstrates a high level of assurance across all services.

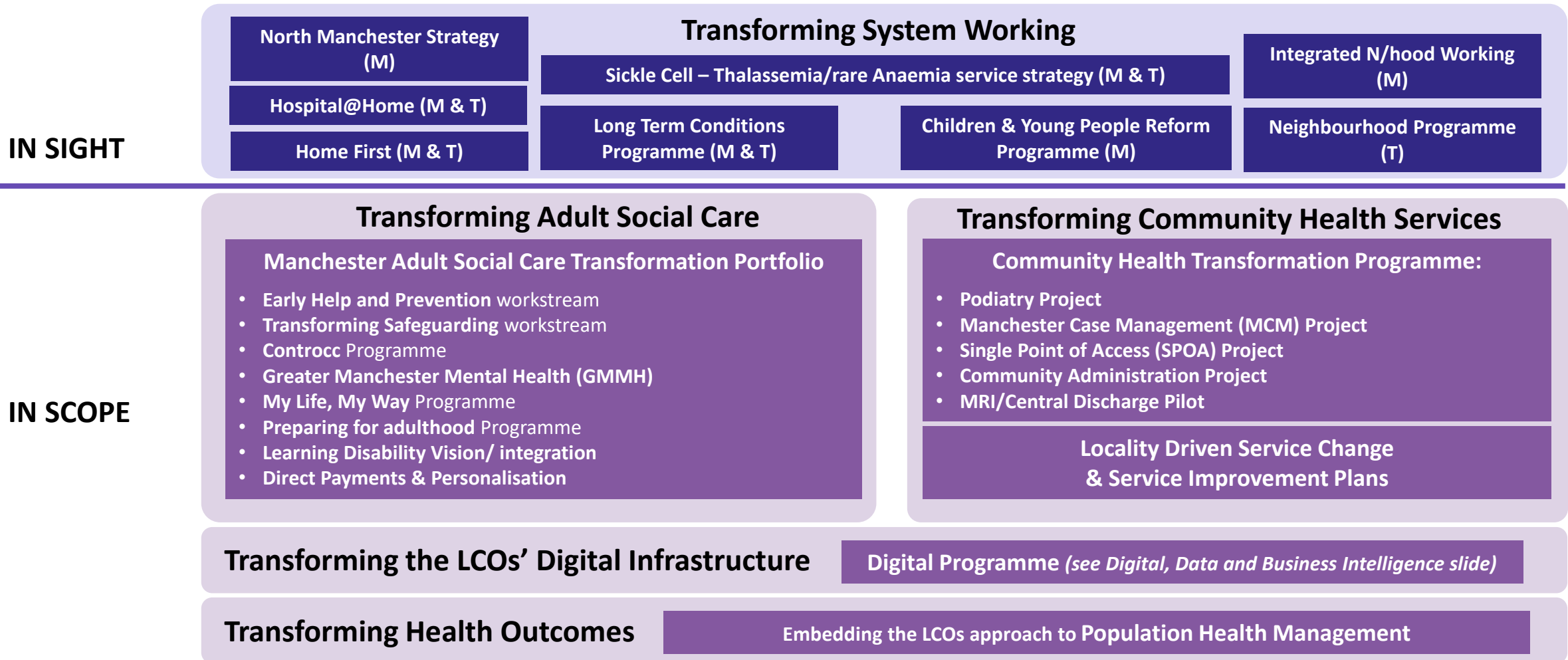
3. Implementation plan developed and delivered to ensure the MFT NMAHP strategy is delivered in line with LCO priorities.

4. Delivery of Patient Safety Incident Response Plan.

5. We will use a Quality Improvement (QI) approach to drive population health improvements in neighbourhoods and service development in Hospital at home.

# 3.6 Transformation

The LCOs develop an annual **Transformation Portfolio**, which captures business change priorities over the following 12 months. The diagram below captures MLCOs 2024/25 priorities in outline. ‘In sight’ initiatives are those that MLCO is leading or contributing to, which have separate governance structures outside of the Transformation Portfolio Board given they are being delivered in partnership at a system level. ‘In Scope’ initiatives are governed by the Transformation Portfolio Board. Further details can be found in the full Transformation Portfolio Plan.



# 3.7 Communications and engagement

How we work to support the LCO vision

Working together the LCOs help people:



Live healthy, independent, fulfilling lives



Have the same opportunities and life chances, no matter where they live



Have equal access to health and social care services



Be part of dynamic, thriving and supportive communities



Receive safe, effective and compassionate care, closer to their homes

Supported through communication and engagement by:

- Promotion of LCO services and service led health promotion initiatives
- Supporting PHM engagement approaches
- Neighbourhood engagement work
- Being a trusted source of health information.
- Ensuring all neighbourhoods can tap into our expertise - and levelling up where there are gaps
- Bringing the LCO style into locality level work across Manchester and Trafford.
- Equity first ethos embedded through our communications and engagement approaches wherever possible
- A digital-first approach, with alternatives where need is identified.
- Developing opportunities for participation
- Promoting the #WeAreCommunity ethos
- Supporting our LCO staff community with excellent and responsive communications and engagement.
- Raising awareness of community based services and initiatives to public and referrers
- Working with partners to ensure community services are promoted
- Building on the Home First ethos.

Key priorities for 2024-2025

Shouting about community



Promoting the work of the LCO to a wider external audience using traditional media and digital channels. We will support our teams to showcase their services, linking in with partner media functions in MFT and MCC where appropriate to do this. A programme of external promotion will be underpinned by our We Are Community theme.



Helping our services deliver

Work with and on behalf of our teams and services to deliver communications that support them to deliver first class services. This includes information aimed at service users, referrers and for recruitment. We will further develop our core offer to teams and ensure that that all LCO teams can access it and plan ahead for work that is required.

Supporting change and transformation in the LCOs



We will support transformational change in the LCOs with communication and engagement programmes. There will be a focus on proactive and open engagement internally and externally so people can influence change and transformation is clearly understood. We will support understanding of financial challenges and the need for change.



Developing service user participation in the LCOs

Building on our excellent engagement work to develop participation opportunities for public involvement in the LCOs through reader panels, neighbourhood opportunities and a greater emphasis on service user storytelling. We will ensure the LCO plays a lead role in the new GM and locality participation structures and support our wider locality teams.

Building stronger partnership communications



The neighbourhood model means we are uniquely placed to play a key role in the new GM and locality comms & engagement structure - ensuring the LCO and community voices are represented in campaigns. We will also develop our comms into primary care and MFT frontline staff and taking a lead role in shaping borough wide engagement.



Strengthening staff communications and engagement

Build on our positive engagement scores in the staff surveys by continuing to refine and improve our staff facing communications offer based on feedback. This will be underpinned by development of a new extranet, a staff comms network and amplifying staff recognition and celebration through the year. We will continue to work in close partnership with our OD colleagues.

## 3.6 Commissioning

The MLCO Commissioning Plan has been refreshed for 2024/2025, aligning with Better Outcomes, Better Lives transformational programme in adult social care. The vision consists of a series of 'I will' statements, encompassing citizens, families and carers; staff; partners and providers. These statements also support the five aims of Population Health Management.

The full Commissioning Plan can be accessed through the Intranet.



### What does success look like?

We have invigorated our work with the VCSE

We recognise the significant contribution made by Unpaid Carers by increasing the number of carers assessments

Our Commissioning workforce will ensure that providers adopt a strength-based model of support

We will pay the right amount to support a sustainable care market

There is a greater focus on integrated commissioning with the potential to align contracts

We reduce the number of days lost to sickness

We have higher CQC rated residential and nursing care sector either good or outstanding

We have strengthened our partnership with Manchester Housing Providers to further plan what housing we will need for the future

Our staff benefit from an annual appraisal

There will be a higher spend on local providers

Our providers contribute to the success of the Commissioning Plan

Explore ongoing opportunities for joint/integrated commissioning approaches

# 4. Our Service Plans: 2024/25



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# 4.1 Service Plans

Service plans enable service teams to document their work plan for the coming year and ensure that services are aligned to the priorities of the MLCO, whilst identifying areas for improvement that need further support. Service planning templates have been developed for 2024/2025 based on feedback and reflections from 2023/2024.

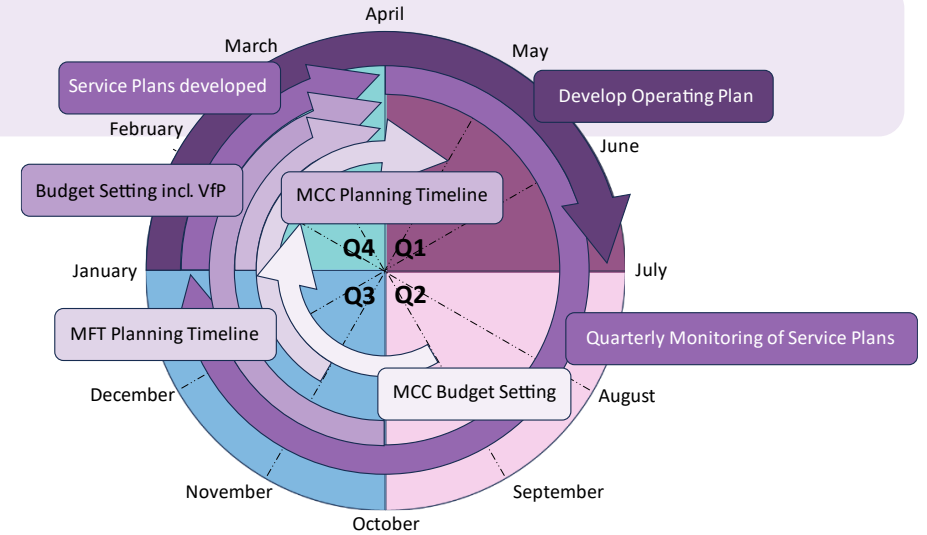
A service plan sets out:

- A brief overview of the previous year (23/24)
- Priorities for the coming year (24/25)
- How services intend to meet the priorities and address some of our key organisational challenges through our Key Lines of Enquiry (KLOEs) the LCO produces
- Any support the service needs

Services are also required to complete a Workforce Plan alongside this, focusing on 7 areas:

- Engagement
- Resourcing
- Workforce Transformation/Redesign
- Health and Wellbeing/Absence Management
- Equality Diversity & Inclusion
- Leadership & Management
- Workforce Development

Service plans can be requested through Service Managers.



Workforce Plan 24/25 - Add Service Area

The following sets out the key workforce requirements to support delivery of the priorities within the 24/25 in achieving an efficient, appropriately ~~planned~~ and diverse workforce.

Workforce Area	Issue	Action	Support required
Staff Engagement			
Resourcing/Recruitment			
Workforce Transformation/ Redesign			
Health and Wellbeing/Absence Management			
Workforce Equality, diversity and Inclusion			

2024/25 AD Led/Integrated Neighbourhood Team Service Plan

Include: what the plan is for, priority workstreams in the coming year. Delete 'AD Led/INT' as appropriate - Add Name of Service/INT in line below.

Manchester Local Care Organisation  
Leading local care, shaping lives in Manchester, with you.

Our Service: Describe your service here. Service Lead:

Looking back at 2023/24 - Key Achievements and Impact:  
• Text here

2024/25 - Our Priorities (summary):  
• Text here

How we are contributing to the Zero carbon/Climate change agenda (including plans for 24/25):  
• Text here

How we are supporting the reduction of health inequalities (including plans for 24/25):  
• Text here

# 4.1 Service Plans

Our service leads have developed service plans that underpin and compliment this Operating Plan. The service plans are not presented in this document, but cover:

- 13 INT service plans
- Citywide or locality service plans for adult community health services and ASC provider delivery plans
- A Children’s community health service plan (joint with TLCO)

The plans are available on request from service managers and the service plan list is:

**LCO Community Health Services: Children’s (Citywide)**

- Health Visiting
- CCNT
- Vulnerable Babies Service
- School Health
- Healthy Schools
- Community Paediatrics
- Speech and Language
- Physiotherapy
- Occupational Therapy
- Audiovestibular medicine; Audiology, Newborn Hearing Screening
- Orthoptics

**Community Health and Adult Social Care (Citywide)**

- AAA screening
- Community Dental
- Complex Needs
- DSAS, Day services, short breaks
- Expert Patient Programme
- Integrated Learning Disability
- IV teams
- Manchester Case Management
- MSK
- Podiatry
- Nutrition
- Safeguarding (adults)
- Sickle Cell and Thalassaemia
- Stroke and Neuro-rehabilitation

**Community Health and Adult Social Care (Locality)**

- CHD Heart Failure (South)
- Crisis Response (N,C,S)
- Diabetes (North)
- Home Pathway (N,C,S)
- Lower limb (North)
- MCR
- MCR D2A (N,C,S)
- MCR ICT (N,C,S)

**Integrated Neighbourhood Teams**

- Ancoats, Bradford and Clayton
- Ardwick and Longsight
- Burnage, Chorlton Park and Didsbury
- Cheetham and Crumpsall
- Chorlton, Whalley Range and Fallowfield
- City Centre
- Gorton and Levenshulme
- Harpurhey, Charlestown and Higher Blackley
- Moss Side, Hulme and Rusholme
- Moston, Newton Heath and Miles Platting
- Old Moat and Withington
- Wythenshawe
- Wythenshawe, Brooklands and Northenden



## 4.2 Priority Highlights from our Teams and Services

A selection of highlights from our Services

### Integrated Neighbourhood Team (INT)

Lead on the development of a child and family wellbeing offer in **Didsbury, Chorlton Park and Burnage**.

Deliver safe and effective services in **Miles Platting, Newton Heath, Moston and City Centre** through fully compliant processes, caseload analysis and an improved induction and probation process.

Work with Housing Stakeholders in **Moss Side, Hulme, and Rusholme**, to support cost of living crisis, reduce social isolation, fuel poverty and wider health inequalities.

### Crisis

To work with MFT Acute **Hospital @ Home** Clinical Pathways Group to support admission avoidance, promoting care delivered at home. To continue to offer training to care home staff to improve health outcomes for care home residents.

Attend external training on learning disabilities to enable service to **meet the needs of the wider community**, utilising CPD funding.

To create opportunities and improve engagement with GPs to increase knowledge and understanding of population health to identify opportunities to improve inequalities and access to healthcare.

### Children's Community Health Services

Implement the **IT solution** to support the management of the **Autism and ADHD pathways**.

Review the **administration provision and professional administration support** to key services. Continue to recognise and utilise the added value brought by administration services.

Support **our staff** to develop their skills and personal health and resilience, to build a workforce fit for the future

Continue to streamline the **SEND** processes and offer, in line with the SEND review.

## Community Health Services

The **Manchester Specialist Community Dental Service** will continue to explore options to develop the estate to provide accessible dentistry in the North Manchester area and Central Manchester for Special Care Dentistry to accommodate increased patient footfall and surgery capacity. Develop accessible surgeries all with inhalational sedation capability.

The **Manchester Sickle Cell and Thalassemia Service** will add satellite clinics, for partner screening at Salford Hospital & North Manchester general.

The **Abdominal Aortic Aneurysm (AAA)** Service will explore the development of new Health Optimisation pathway from 5.0cm to improve patient fitness in readiness for surgery.

The **North Hospital @ Home Team** will continue partnership working with Acute and Community to maximise opportunities to increase the referrals to the service.

## ASC Services

The **Day Support Service** will implement a new Day Services transport offer for citizens attending Day Services and Short Breaks.

**Safeguarding** will ensure the service has a timely safe and appropriate response to a Safeguarding concern, keeping the individual at the centre and maintaining effective communication with the individual or their advocate, families and carers and all concerned including providers and professionals.

The **Manchester Equipment and Adaptations Partnership** will develop TEC across more internal LD supported accommodation and potential for external sites.

The **Mental Health Commissioning team** will deliver the retender, award, mobilisation and stabilisation of the new framework for Supported Living and Day Services for Mental Health, Learning Disabilities and Autism.

## 4.3 Themes from Service Planning

A selection of key themes identified from Service Plans:

### How we are meeting the Zero Carbon Agenda



### How we are reducing Health Inequalities



# 5. Budget Strategy and Finance Plan 2024/25



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# 5.1 Our Budget Strategy and Financial Plan 2024/25

## The MLCO budget strategy for 2024/25:

- To deliver the LCO's operational plan within control total.
- To develop and implement robust schemes that are QIA checked and agreed through system governance to deliver the LCO's Value for Patients (VfP) target recurrently.
- Strong financial controls and detailed financial reporting with a focus on integration.
- Continue to operate 'aligned' budgets between community health services (MFT) and adult social care (MCC) under the section 75 agreement.
- Refresh finance framework within the s75 agreement when updated in August 24.
- Support to the Community Health transformation programme to ensure services are optimally configured to operate safely and efficiently and with high quality, equitable care outcomes across the city within the budget envelope.
- Care Act compliance and meeting the needs of clients with an efficient and effective strength based assessment process.
- Deliver ASC improved forecasting, business processes and data quality to support the business to meet the 24/25 financial challenges.
- Supporting a fragile care market, working with providers to best meet need, and ensuring providers can recruit and retain an effective workforce.
- Work with partners to further develop Hospital at Home and discharge to assess beds to optimise flow from hospitals and outcomes for patients.
- Safe, resilient services aimed at maintaining client independence and supporting the City's hospitals with effective discharge.
- Working closely with partners on activity flows within the H&SC system and financial consequences.
- Progress the transformation programmes aimed at longer term financial sustainability such as Learning Disability Services, Long Term Condition management, children's services and Neighbourhood working.
- Support for recommissioning of home care, LD and mental health contracts. Review of daycare services.
- Support for improving and replacing business systems.
- Ongoing work to further improve partnership working in Manchester.
- Respond to short term funding opportunities.

# 6. Appendices

Our Partner Plans  
LCO Planning Cycle  
Delivering Our 2023/24 Priorities



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# 6.1 Manchester Foundation Trust Annual Plan 2024/25

**OUR MISSION** Working together to improve the health and quality of life of our diverse communities

**OUR VALUES** Our mission is underpinned by our five core values.

We Are  
Compassionate

We Are  
Curious

We Are  
Collaborative

We Are  
Open & Honest

We Are  
Inclusive

Work with partners to help people live longer, healthier lives



More people being supported to live healthy lives in the community with fewer people needing to use healthcare services in an unplanned way.

We will work with partners to target the biggest causes of illness and inequalities, supporting people to live well from birth through to the end of their lives, reducing their need for healthcare services.

We will improve the experience of children and adults with long-term conditions, joining-up primary care, community and hospital services so people are cared for in the most appropriate place.

Provide high quality, safe care with excellent outcomes and experience



More people recommending MFT as a place to be treated.

We will provide safe, integrated, local services, diagnosing and treating people quickly, giving people an excellent experience and outcomes wherever they are seen.

We will strengthen our specialised services and support the adoption of genomics and precision medicine.

We will continue to deliver the benefits that come with our breadth and scale, using our unique range of services to improve outcomes, address inequalities and deliver value for money.

Be the place where people enjoy working, learning and building career



More people recommending MFT as a place to work.

We will make sure that all our colleagues feel valued and supported by listening well and responding to their feedback. We will improve staff experience by embracing diversity and fairness, helping everyone to reach their potential.

We will offer new ways for people to start their career in healthcare. Everyone at MFT will have opportunities to develop new skills and build their careers here.

Ensure value for our patients and communities by making best use of our resources



Make the biggest possible difference with the resources we have by delivering our financial plans.

We will achieve financial sustainability, increasing our productivity through continuous improvement and the effective management of public money.

We will deliver value through our estate and digital infrastructure, developing existing and new strategic partnerships.

Deliver world-class research & innovation that improves people's lives



More people participating in and benefitting from world-class research and innovation.

We will strengthen our delivery of world-class research and innovation by developing our infrastructure and supporting staff, patients and our communities to take part.

We will apply research and innovation, including digital technology and artificial intelligence, to improve people's health and the services we provide.



## 6.2 Manchester City Council Corporate Plan 2024/25

The Business Plan 2024/25 for Manchester City Council is structured around the 7 priority themes in the MCC Corporate Plan.

It was produced following the development of 42 service plans which describe in more detail the achievements, priorities and activities of the 42 services which collectively make up Manchester City Council.

The MCC Corporate Plan describes the Council's contribution over the next 2-3 years to delivering the [Our Manchester Strategy 2015-2025](#).

Our Manchester is the vision that the whole city - not just the Council - is working towards. This is for Manchester to be in the top flight of world-class cities by 2025 and to be somewhere that is:

- Thriving
- Full of talent
- Fair
- A great place to live
- Connected

The MCC Corporate plan 24/25 is structured around 7 thematic areas:

1. Inclusive economy where every resident shares in the prosperity of our growing economy
2. Tackling climate change and create a healthy, green, socially just city where everyone can thrive
3. Advancing Equality, Diversity and Inclusion
4. Children and Young People enjoy a happy, health and successful future
5. Improving Health and Wellbeing for all
6. Inclusive Communities, Thriving Neighbourhoods
7. Well managed Council

The MLCO has a key contribution to make to the delivery of this plan and this has been factored into this Operating Plan



# 6.3 Manchester Locality Delivery Plan 2024/25



<b>Improve physical and mental health and wellbeing, prevent ill-health and address health inequalities, so that people live longer in good health, wherever they are in the city</b>	<b>Improve access to health and care services, so that people can access the right care, at the right time, in the right place, in the right way</b>
<ul style="list-style-type: none"><li>• Management of Long-Term Conditions</li><li>• Healthcare-Led regeneration</li><li>• Children and Young People</li></ul>	<ul style="list-style-type: none"><li>• Urgent and Emergency Care Recovery</li><li>• Transforming Mental Health Services in the community</li><li>• Primary care access</li></ul>
<p>Optimising the Neighbourhood approach for the City</p>	

Delivery and sustainability of the plan is dependent on the enabling functions of workforce, digital, business intelligence, finance, estates, equality and inclusion, quality, community involvement and development, and service improvement and commissioning

To deliver across the locality, relationships and interdependencies with the GM Strategic Clinical Networks, Health Innovation Manchester, GM Integrated Care Partnership Strategy and Our Manchester Strategy will be key, as well as alignment to the GM Integrated Care Equality Objectives. Engagement and co-production with patient and community groups will inform equality actions which will be embedded as key outcome measures.

# 6.4 MLCO / MFT / MCC Priorities

LCO priority	MLCO / TLCO key deliverables 2023/24	MFT Priorities					MCC priorities						
		P1	P2	P3	P4	P5	P1	P2	P3	P4	P5	P6	P7
Population health management approach	<ul style="list-style-type: none"> <li>PHM</li> <li>CYP</li> <li>LTC</li> <li>Neighbourhood working</li> </ul>	Y			Y		Y	Y			Y	Y	
		Y			Y	Y			Y	Y	Y	Y	
		Y			Y						Y	Y	
		Y			Y		Y	Y			Y	Y	
Working in neighbourhoods	<ul style="list-style-type: none"> <li>Neighbourhood approach</li> <li>Prevention</li> <li>North Manchester Strategy</li> </ul>	Y			Y		Y	Y			Y	Y	
		Y			Y						Y	Y	
		Y			Y						Y	Y	
Working with primary care	<ul style="list-style-type: none"> <li>H@H</li> <li>Sickle Cell and Thalassaemia</li> <li>AoMRC Guidelines</li> <li>Prevention</li> <li>Home from Hospital</li> </ul>	Y							Y	Y			
		Y	Y					Y	Y		Y	Y	
		Y	Y						Y		Y	Y	
		Y			Y						Y	Y	
Safe, effective services	<ul style="list-style-type: none"> <li>SPOA</li> <li>Quality and safety</li> <li>Capacity and demand</li> <li>Waiting list management</li> <li>Governance</li> <li>CHTP</li> <li>Integrated commissioning</li> <li>LD Integration</li> <li>TLCO: SEND</li> <li>TLCO: OSRC</li> </ul>		Y								Y		
			Y		Y						Y		
			Y		Y						Y		
			Y		Y						Y		Y
			Y		Y						Y		Y
			Y		Y						Y		Y
			Y		Y						Y		Y
Resilience	<ul style="list-style-type: none"> <li>Financial and budget plan</li> <li>Community services estates</li> <li>People Plan (recruitment, retention, appraisals, workforce development, EDI, sickness absence)</li> <li>Digital</li> </ul>		Y		Y								Y
				Y	Y					Y			Y
				Y	Y								Y
Future for the LCO	<ul style="list-style-type: none"> <li>LD</li> <li>LCO Urgent Care</li> <li>EPR</li> <li>S.75</li> <li>Frontline-led service change</li> <li>Integrated commissioning model</li> <li>R&amp;I</li> <li>Early help and prevention</li> </ul>	Y	Y		Y								Y
		Y	Y	Y	Y						Y		Y
		Y	Y	Y	Y	Y					Y		Y
		Y			Y	Y	Y			Y	Y		

## Quarter 3

October – December 2023

# MLCO & TlCO Planning Cycle

- Outline planning timescales and processes
- MFT Annual Planning Guidance released
- MFT Cuts 1 and 2 templates released and submitted, Cut 3 released
- Locality meetings with Heads of Services (HOS) / Assistant Directors (ADs)
- Issue draft planning guidance and templates
- 2024/25 NHS Planning Guidance published (December)
- Draft components for Operating Plan
- Value for Patients Cut 1

### Products

- Draft framework of operating plan
- Draft planning guidance
- Draft framework of service plans
- MFT planning cuts 1 and 2 submitted

## Quarter 4

January – March 2024

- MLCO Executive approval of framework
- Incorporate NHS Planning Guidance into Operating Plan
- Confirmation of finance activity and targets
- Issue updated planning guidance (inc. NHS England)
- Finalise KPIs/dashboard and share with service teams
- MFT Cut 3 submitted, Cut 4 released and submitted
- Service plans submitted and approved by leadership teams (mid-March)
- Consult with MLCO partners (through Accountability Board)
- Value for Patients cuts 2-3
- Develop monitoring framework for Operating Plans and Service Plans

### Products

- Approved Operating Plan
- Service plans (complete and approved)

### Meetings

- Accountability board (TBC)
- MLCO Exec (TBC)
- Locality meetings
- Partner governance (MFT/MCC/ Trafford Council)

## Quarter 2

July – September 2024

- Produce quarterly progress reports to the Accountability Board
- As appropriate, clarify commissioning intention for next financial year
- For Adult Social Care (ASC), clarify budget strategy for next financial year (MCC)
- Bi-annual Locality meetings with service leads

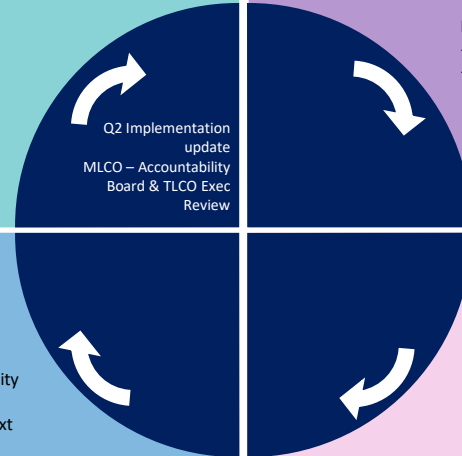
## Quarter 1

April – June 2024

- Produce summary of the Operating Plan
- Adapt INT service plans into Neighbourhood 'Plans on a Page'
- Communication and Engagement Plan to publish final plans
- Final version of 'Plans on a Page' circulated to staff, partners and public/service users
- Launch at F2L 2024
- Commence monitoring framework and align to performance Boards.

### Products

- Final Operating Plan
- Service plans on a page
- Prezzi interactive plans on a page



## 6.6 2023/24: Delivering our Priorities

MLCO priority	MLCO key deliverables 2023/24	Delivered?
Population health management approach	Mobilise and assess Population health Management (PHM) methodology to address health inequalities through the INTs working with Primary care Networks (PCNs) and wider community partners to address key population health challenges (e.g diabetes, hypertension, CVD and bowel cancer screening take up).	<input checked="" type="checkbox"/>
	Develop opportunities to embed PHM into CYP services aligned to Core20Plus5 priorities	<input type="checkbox"/>
	Mobilise the Making Manchester Fairer – Kickstarter programme - MLCO will continue to support Manchester residents into employment and support initiatives that make us an employer of choice, creating new channels and ways of engagement that prevent inequality gaps across Manchester widening.	<input checked="" type="checkbox"/>
	North Manchester strategy: design pilot care models across community, VCSE, MH and primary care enabling the NMGH redevelopment plans; focused on wellbeing of staff and residents.	<input type="checkbox"/>
Developing Our Neighbourhoods	Mobilise the refreshed INT service model delivering closer alignment of community health services with Social care, primary care, MH, VCSE; community service model for Manchester.	<input checked="" type="checkbox"/>
	Develop options for blended roles across statutory services and the care market, trusted assessor, CHC, equipment and therapy models.	<input type="checkbox"/>
	Bringing Services Together for People in Places model will continue to develop; enabling an integrated model of neighbourhood working across core public sector services including Health and Adult Social Care (through the INTs), GMP, Housing, and Children's and Adult services. This include support for MCC to mobilise the 3 Family hubs in the City and thriving families	<input checked="" type="checkbox"/>
Working with Primary Care and VCSE	Through mobilisation of the refreshed INT Operating Model, agree closer working alignment with PCNs	<input checked="" type="checkbox"/>
	Primary care - develop offer to maximise community services and VCSE support for primary care – opportunities provided by Coordinated Care Pathway, Care navigation and social prescribing	<input checked="" type="checkbox"/>
	(Support) North Manchester strategy delivery, ensuring PCNs (North), VCSE and community partners are engaged in the design and delivery.	<input checked="" type="checkbox"/>
Resilience	Focused workforce support: reducing vacancies through bespoke attraction strategy and strengthening connections to local communities, improve recruitment processes and reducing avoidable absence by proactive health and wellbeing support and effective case management.	<input checked="" type="checkbox"/>
	Design a clinical service strategy for integrated community services built from the Commissioning Reform programme and service plans	<input type="checkbox"/>
	Support delivery of MFT clinical service strategies; identifying opportunities for improved interfaces between acute and community services through redesigned care pathways	<input checked="" type="checkbox"/>
	Mobilise and measure the impact of actions delivered by community services to contribute to zero carbon inc. route mapping, prescribing practices, sharing of good practice approaches and opportunities to support sustainable travel.	<input type="checkbox"/>
	Continue to embed EDI into service design, delivery and impact approach	<input checked="" type="checkbox"/>

MLCO priority	MLCO key deliverables 2023/24	Delivered?
Safe, Effective and Efficient Services	Deliver the 2023/24 finance plan, operate within the Control Total, developing plans to increase productivity and deliver 2023/24 WRP plan	☑
	Ensure Community services adhere to national planning standards and deliver AOF priorities	☑
	Work with partners to support hospital discharge through the Resilient Discharge Programme (RDP) including development of the Transfer of Care Hub, control room, the development of the new model of bedded care and Virtual Wards; delivering the NR2R standard	☑
	Deliver the LCO Commissioning Reform programme outlining opportunities to redesign / remodel adult and children's community health services LCO community health services transformation	☑
	Deliver phase 4 of Better Outcomes Better Lives (BOBL) focused on 'maximising independence', 'short term offer', new ASC front door through earlier interventions, continuing to strengthen our 'performance framework' and embedding a 'see and solve' approach to barriers to delivering the programme.	☑
	Undertake a review of ASC in-house provider services.	☑
	Agree a service strategy for Sickle Cell and Thalassaemia (MFT), working with wider stakeholders and building from community engagement	🟡
	Continue to work with commissioners (NHS GM) to test / implement the proposed new service specification for community dental services.	☑
	Deliver year 2 of the LCO Allied Health Professionals (AHP) strategy focused on workforce and service development	☑
	Continue to support our staff through the People Plan (recruitment, retention, attendance, appraisal, mandatory training and workforce development	☑
Understand benefits of HIVE implementation, roll out to bed base and scope options to extend / develop a community EPR	☑	
Future of the LCO	Agree LCO Digital strategy priorities, working with MCC / MFT and MICP to mobilise inc. TEC enabled care and further roll out of automation opportunities	☑
	Convene Freedom 2 Lead 2023 and mobilise quarterly service plan impact reviews to inform LCO business change; aiming to build momentum for QI in the LCOs	☑
	Continue to undertake thematic staff engagement approach	☑
	Refresh the MLCO Commissioning Plan highlighting impact from 22/23 and outlining approach to deliver an integrated commissioning approach	☑
	Further embed the Think Family and Thriving Families approach through collaborative working and joining up children's services with mental health, adult services, community health services and integrated neighbourhood teams through the MLCO	☑