On 1 April 2016 Greater Manchester took charge of the £6billion spent on health and social care in our 10 boroughs, following our devolution deal with the government. We were also given an extra £450million to help transform services.

We want to spend all that money wisely.

Devolution gives us the freedom and flexibility to do things that benefit everyone in Greater Manchester. We are making our own decisions. We’re tackling serious conditions like cancer and heart disease, and looking at bigger problems that affect our health.

And it is starting to pay off. Some changes are already making a difference.

In this document, we’ve highlighted some of the achievements over the last two years that have been started - or in some cases accelerated - by our ability to use our devolved powers and ways of working to do things differently in Greater Manchester.
In the run-up to devolution, the NHS in Greater Manchester and our partners considered how we could improve the city region’s health and wellbeing as quickly as possible. We wrote a five year plan, **Taking Charge**, based on what thousands of people had told us was important to them and what had stopped them from taking charge of their own health.

In Greater Manchester, services will be built around the person, helping people live healthier and happier lives. For the first time in the history of the NHS, the home not the hospital will be the default setting of care.

Our main aims are to:

- Help everyone manage their own health better
- Provide more joined-up care near where people live
- Offer easy access to specialist treatment when it’s needed
- Do things better, more efficiently, and to the same high standards, right across Greater Manchester.

Devolution means being clear on what we’re doing. We’re constantly tweaking how we run things to cut bureaucracy and duplication. We keep checking what we spend money on.
Two years after taking control of our health and social care budgets, devolution is making a difference to everyday lives in Greater Manchester.

This document explains in more detail what has been done so far. But some of the highlights include:

- **Giving children a better start** – we’re spending an extra £1.5m on oral health to improve children’s teeth, and getting more children ‘school ready’.
- **Lifestyles are being improved** – for example we’re helping 115,000 smokers quit over the next three years – one in two of them would have died younger from a smoking-related condition.
- **We’re fighting cancer** with a mobile screening programme and ‘cancer champions’ are out and about in communities.

- **Mental health is being put on a equal footing with physical health**:
  - We’re spending £74m on child and adolescent mental health and bringing more mentors into schools and training teachers on mental health.
  - We’re spending a further £50m on adult mental health services.
- **Our services are rapidly improving**, for example our stroke centres are top-rated and we estimate that 200 lives have been saved because of the specialist care people have received in them.
- **We’re creating more services closer to people’s homes**, and making it easier to see medical professionals at convenient times – more people are satisfied with their GP practices and extended opening times.
- **We’re spotting and treating dementia quicker** – seven more people a day are diagnosed with dementia, and getting the help and support they need.
Everyone is working together to make things happen faster and more efficiently. Big organisations like local councils and the NHS have come together to create the Greater Manchester Health and Social Care Partnership.

And devolution means that we have an even wider circle of partners like the emergency services, charities, volunteers, family carers, individual health and care staff, patients and people. When ‘we’ is used in this document and elsewhere, it means everybody with a common aim of making Greater Manchester an even better place to live and work.

People have been brought together to make a real difference to how things are done here. For instance, Greater Manchester’s 15,000 voluntary and community organisations have been recognised formally, and the 10 Healthwatch ‘patient champions’ are involved in our decisions. We’ve worked with unpaid carers on a charter setting out what help they should get.

Greater Manchester's first Mayor is an important devolution partner in tackling broader problems that affect people’s health and everyday life. Already our partnership is doing something about homelessness:

- 500 more homeless people have their own GP
- No one gets discharged from our hospitals straight onto the streets
- ‘Outreach’ services bring healthcare directly to homeless people.

Strong partnerships built through devolution help us redesign and streamline services quickly, so they work more effectively and are led by people who understand local issues.

For example, Central Manchester University Hospitals NHS Foundation Trust (CMFT) and the University Hospital of South Manchester NHS Foundation Trust (UHSM) joined together to create a new Foundation Trust, city-wide hospital Trust, the Manchester University NHS Foundation Trust (MFT). Also in 2017 the formation of the Northern Care Alliance NHS Group brought together five hospitals, 2000 beds, specialist and acute services, a range of associated community services, and over 17,000 staff across Salford Royal NHS Foundation Trust and The Pennine Acute Hospitals NHS Trust.

Devolution is a chance for different staff to work alongside each other, like our new neighbourhood teams. These bring health, social care and charity or voluntary group workers together in one building, making it easy to share information and concerns about the people they see.

The Devolution Difference
We’re preventing health problems

Devolution is a chance to be flexible and proactive, so we can focus on keeping everyone healthy and well throughout their lives.

We don’t just offer treatment when things go wrong, we prevent problems in the first place. We target people most at risk of getting ill. For instance, we’ve put money into helping those likely to develop type 2 diabetes change their lifestyle (like what they eat) to stop that happening.

We’re now responsible for screening and immunisation. This means we can offer more flu jabs through local pharmacies and to children in primary schools. More people have been taking us up on the offer, including pregnant women and over-65s.

We’re giving children a better start

Devolution means we can tackle Greater Manchester’s particular problems – like the bad teeth which affect a third of our five-year-olds. Many end up in hospital to have teeth out or because of pain or infection. All this affects their confidence and ability to learn.

We’ve made it quicker for each child to get their first dental check. We’ve spent £1.5m on free toothpaste and toothbrushes for health visitors to give out when they check on under-fives, and setting up daily supervised teeth-brushing sessions at primary schools and nurseries.

We’re getting more Greater Manchester children ‘school ready’. It’s an issue for us because a third (that’s 12,157 children) aren’t – they’re slow to develop in lots of ways, and find it harder to begin school ready to learn and make friends. Services like health visitors, GPs and nurseries now share information so they spot children who are struggling. Then they work together to make sure no one gets left behind.

It’s great to see children take control of their own health. For instance, brownies in Salford have developed a ‘sugar smart’ badge they earn by completing a healthy food activity book and quiz.
We’re improving lifestyles

Devolution gives us freedom to think about health more broadly, and tackle all sorts of things that may affect it. For instance, social workers in GP practices in deprived areas are ready to help with problems like debt or poor housing.

Drink is an issue for more people in Greater Manchester than the national average. Too many end up in hospital, or die at an early age. We’ve successfully tested a new approach—'community alcohol champions' trained to help family, friends and workmates rethink their drinking habits.

We’re determined to make Greater Manchester smoke-free. We keep finding ways to help people quit the habit, especially pregnant women and new mums.
We’re getting everyone active

We’ve now got a ‘cycling and walking commissioner’—champion cyclist Chris Boardman. His 10-year plan, Made to Move, aims to get everyone to walk and cycle more, especially for short trips. That leads to better health from being active, plus less harmful air pollution from traffic.

We’ve had funding from Sport England to test ways to encourage physical activity, especially among children outside school, unemployed people, and anyone aged 40-60 who’s likely to have a long-term health condition.

We’re helping people into jobs

Evidence shows that those out of work with a health condition for 6-12 months have just a 2% chance of returning to employment, and after two years are more likely to die than return to employment.

Under devolution we want stop this trend, and do our bit to help people back into work. We have £52m to develop our own version of the national Work and Health Programme and help more people into jobs, especially if they struggle because of poor health or a disability.

We’re applying lessons from our Working Well programme. It already gets more long-term employed people back to work than Jobcentre Plus.

We’ve designed a ‘personal support package’ that includes a dedicated advisor to help overcome barriers to finding and staying in a job, such as social isolation and debt. And we’ve also been given £5.2m to offer ‘talking therapies’ when mental health problems stop someone working.
We’re providing leading care for the people who need it most

With devolution comes innovation. We are increasingly looking outside traditional health and social care settings to find new ways to support people to live their lives in the best way possible.

In Wigan, for example, everyone is already working together to integrate community services; community nurses are working alongside social care workers, enablement staff and therapists. This fresh approach provides seamless support to local residents with long-term medical conditions, and reduces admissions to hospital.

In areas where people need more help, social workers in GP practices are ready to assist with problems like debt or poor housing. And as more and more local teams join together, more social workers and district nurses regularly talk face-to-face about the people they care for.

We’re also helping care homes get more support from nurses and doctors, so elderly residents can be protected from harm and treated where they live, and fewer end up in hospital.

Sometimes simple ideas can make a real difference. Care staff have invented a paper armband that’s a fast and easy way to spot if an older person is not eating or drinking enough to stay healthy. Devolution has given us the freedom to test this out locally and our new networks make it far easier to introduce across Greater Manchester.

We’re doing more to help older people stay independent and live well, like the ‘take a seat’ scheme. It encourages local businesses to give older customers somewhere to sit, offer access to toilets or a drink of water, and make it easier to find their way around.
We’re spotting and treating dementia quicker

Seven more people a day are diagnosed with dementia and getting the help and support they need.

Devolution has given us freedom to invest in dementia services that not only spot signs of the disease as soon as possible but then make the right help readily available. Our dementia diagnosis rates are already higher than the national average – that’s around seven more people a day than most places.

We’re also supporting local areas with their own approaches, which are seeing results. An independent national panel has assessed Bury, Bolton, Trafford, Stockport and Salford as ‘outstanding’ for dementia. Bury in particular ranks among the highest in the country for its speedy and accurate diagnosis rates, and for the high number of people with dementia whose personal care plan is carefully monitored to check they get the help they need.

Devolution encourages us to work together across Greater Manchester, and that’s helping us become a good place for people with dementia to live, and for their families to get the support they need. We’re sharing knowledge and ideas on what works well. Our community pharmacies now train their staff to take time to deal sensitively with customers with dementia. The police have introduced a scheme to collect personal details that will help find someone with dementia if they go missing. Links with research bodies offer chances to try the latest dementia treatments and products.
We’re investing in better mental health

Mental health is as important as physical health – and we’re putting £134m into making it better. That’s the biggest investment in mental health care anywhere in the country.

Devolution gives us the flexibility to respond to local needs – like the ‘resilience hub’ we set up to help anyone affected by the Manchester Arena attack. So far it has provided support to around 3,000 people.

We’re paying particular attention to suicide prevention, eating disorders, attention deficit hyperactivity disorder (ADHD), and helping children and young people in crisis and women just before and after giving birth, when they’re at particular risk of mental health problems.

Our voluntary sector is helping us to provide special training to help schools spot early signs of problems like anxiety in pupils and offer the right support.

We are aiming to go as far and as fast as we possibly can to help people with mental health issues - our ambition is that every Greater Manchester hospital will have an expert ready to support people at any time, night or day. And patients with mental health issues will get the same high standard of care, whichever hospital they’re in.

We’ve speeded up tests so people can get a definitive diagnosis of mental health problems sooner, and can receive the expert care they need straightaway. Greater Manchester police, fire and ambulance services who come across someone in crisis can now call for expert advice at any time.

It’s got easier to get ‘talking therapies’ that can particularly help anxiety and depression. More people are being seen, treated and on the road to recovery within six weeks of being referred for therapy.
We’re doing more to tackle cancer

The flexibility devolution gives us means we’re in a better position to do something about cancer. That includes making lifestyle changes to reduce the risk and spotting early signs so you get treated quickly. We’re one of the few places in the country that doesn’t keep patients waiting too long for the right treatment.

We’ve already recruited 5,000 ‘cancer champions’ – volunteers ready to talk about cancer in their local community, advise on healthy behaviours, and encourage local people to get screened and have any concerns checked out.

Greater Manchester is home to top cancer research – including at The Christie, which has been nationally rated ‘outstanding’. As a result, every year more than 500 local people with the disease can take part in new clinical trials. And we’re providing every cancer patient with their own ‘recovery’ package of help to live well after treatment.
We’re getting more from our hospital specialists

Devolution gives us more control so we can help our hospitals change how they work, and ensure the same high standards across Greater Manchester.

We’re improving services and creating expert teams who can work together across different hospital sites. This gets the most out of the specialist skills and equipment available, with less waste and duplication. Staff can share details so treatment feels seamless.

Our new ‘urgent and emergency care hub’ keeps a close eye on what’s happening and warns us about pressure building up in A&E across the city region. It helps direct patients to the best place for them, and where they can be seen fastest, especially when things get busy and staff are stretched. This really helps keep things moving even in the busier winter months.

We don’t want anyone to be in hospital if they don’t really need to be. So patients who arrive at A&E are ‘streamed’ to the most appropriate service. This could mean sending them for tests, to a nearby urgent treatment centre or their own GP.

We’re offering easier access to urgent care

Devolution offers freedom to introduce new services, like the urgent treatment centres being set up across Greater Manchester. They bring all sorts of staff together in one place to quickly treat a range of serious illnesses and injuries near where people live.

In Heywood, Middleton and Rochdale, a fully equipped emergency response vehicle, staffed by paramedics and specialist nurses and therapists, goes straight to people’s homes. In a test of the service, 86% of those seen didn’t need to go to A&E.
We’re creating more services close to home

GP practices are trying new approaches, like being the base for staff with a wide variety of skills. As a result we’ve seen an improvement in overall patient satisfaction with GP practices and extended opening times. And we’ve invested in making it easier to see a doctor, nurse or another member of the team at a convenient time.

Also, a ‘virtual clinical hub’ in the Heywood, Middleton and Rochdale CCG area helps patients see a GP outside normal hours. Practices are watching out for people at greater risk of getting ill, or who’ve got needs that aren’t being met, like family carers.

Stronger partnerships created since devolution help us expand services, like the care opticians provide for minor eye conditions. In Bolton, for instance, someone treated in hospital for something like glaucoma may get follow-up checks done locally. It’s faster and more convenient, and frees hospital specialists to see more patients and cut waiting times.

Every day 108,000 people visit Greater Manchester’s 704 community pharmacists. So we’re working with them to make the most of this opportunity to provide our population with advice on medicines and treatment, especially as many pharmacies are open in the evening, at weekends and bank holidays.

In Trafford, pharmacists based in GP surgeries help manage patients with complex and long-term conditions by checking all their medication works well.

Since devolution more people are using NHS dentists – and are happier with the care they’re getting. Our formal agreement with community groups, charities and voluntary organisations is helping us get the best from their services too.

We’re also bringing local people with learning disabilities and/or autism back from long-stay hospitals elsewhere into community care in Greater Manchester. So far, and with the right support, we have safely transferred and resettled 50 people. That’s more than our target.

Devolution gives us flexibility so we don’t just look after people in traditional health and care settings. For example, a new service will help vulnerable people who end up in police custody, court or prison. It offers expert support to address health and related problems at the root of their criminal behaviour.
We’re testing new treatments

Devolution gives us greater control over funding to try new things, and adopt them more widely if they work.

Greater Manchester is already home to some of the world’s top scientific research. And now global companies are particularly keen to offer local people the chance to test the latest treatments, because the joined-up way we work under devolution means they can tie clinical trials to patient data more easily.

Health Innovation Manchester was set up under devolution to turn the latest discoveries, medicines and technology into treatment our population can benefit from as quickly as possible.

Already it’s involved in 80 projects on things like getting rid of hepatitis C, improving dementia care and identifying people at most risk of heart disease. A new way to manage lung disease outside hospital is being tested at 11 of our GP practices.
We’re making the most of our medicines

The more medicines someone is prescribed, the bigger the risk of mistakes or that they won’t work well together. So we want our patients to only take medicines they really need, that are safe and do them good.

That’s the thinking behind the agreement we’ve signed with the pharmaceutical companies since devolution – to make sure the £1bn worth of medicines we buy from them really make a difference to local people’s health.

We also encourage hospital patients to bring in their own medicines from home. This helps staff decide the best and safest treatment for them, avoids disruptive breaks in treatment, means there’s no wait for a fresh prescription when they’re ready to go home and saves lots on new or duplicated medication. Initial results show significant savings and a better experience for people.

In Heywood, Middleton and Rochdale a simple finger prick blood test is available for patients at their doctor’s surgery. The test takes seconds to perform and results are available within minutes. These can help GPs decide if a respiratory infection needs to be treated with antibiotics, or if it’s caused by a virus which will not respond to antibiotics.
We’re going digital for better health

We’ve got big digital ambitions, and, through devolution, a special fund of £70m to invest in them. We’ve already improved systems to connect health and care services together from any location, and help them communicate more easily, like secure messaging.

It’s now easier for staff in different services to share patient records and know what appointments are booked, so things go more smoothly.

We’ve spent money on IT hardware like mobile devices for ambulance and community teams so they get the right expert advice just when they need it, wherever they are. GPs can connect to medical consultants and get help to treat people in the practice instead of referring them to hospital. It’s got easier for individual staff to arrange tests for patients, speeding up diagnosis.

In Tameside, care home staff can “Skype” nurses at their nearest hospital to talk through what to do when a resident is taken ill, instead of automatically sending them to A&E.

‘Remote consultations’ using special software are now possible if someone can’t visit their doctor in person. Our new MyCity Health online resource advises on things like quitting smoking and helping people in every area of Greater Manchester find nearby activities, clinics and groups.

“\nIn Tameside, care home staff can “Skype” nurses at their nearest hospital to talk through what to do when a resident is taken ill, instead of automatically sending them to A&E. ”\n
The Devolution Difference
We’re checking we spend money wisely

Devolution gives us the flexibility to spend our money more wisely. We can allocate budgets where they’re most needed and save in other areas that we know have less impact on local people’s lives.

Working closely together makes the most of our limited resources and reduces waste. We can monitor how much value we get from everything we do, and whether it’s affordable and worthwhile.

All 10 areas of Greater Manchester have received a share of the £450m “Transformation Fund” to spend on local changes. We’ll keep a close eye on the difference these make.

We ended our first year with a £236m surplus – this will help ease the financial pressures of the NHS nationally and ultimately be reinvested in Greater Manchester.

Devolution has also helped us work in ways that attract extra funding and outside investment, like being picked as a ‘cancer vanguard’ and given £2.3m to test new ways to prevent and treat cancer.

We’re finding what works at local level

The freedom devolution offers is helping the various parts of Greater Manchester provide health and care to meet specific local needs. We now have 10 local care organisations (LCOs) with their own plans for change and money to pay for them.

In all areas GP practices have come together as neighbourhood ‘clusters’ that can cope with demand better and tackle bigger problems affecting local people’s health, like poor housing.

We’re seeing lots of fresh ideas. In Wigan community nurses work alongside social care staff and therapists to support people with long-term conditions at home, so they need less hospital treatment. In Bolton a new service helps people with ‘chaotic’ lifestyles reduce their frequent hospital visits.

Oldham is introducing ‘social prescribing’ at GP clinics, using specially trained staff. This recognises that people may visit their GP for reasons that aren’t strictly medical. Helping them to be active in their community and to build support networks may do them more good, and prevent future health problems.
We’re encouraging staff to develop

The joined-up approach encouraged by devolution helps us see what health and care staff we need all across Greater Manchester, not just in individual areas.

We have more control over how we recruit and develop people, get them started on apprenticeships and work placements, and move between jobs. This makes it easier to fill vacancies and skills gaps.

We’re taking advantage of national schemes, and were chosen as the largest test site for ‘nursing associates’. We already have 240 of them. This is a chance for experienced healthcare assistants to gain nursing skills and take on extra responsibilities.

Being part of another programme has helped us attract 50 qualified doctors from abroad to come here for further training each year.

Devolution is encouraging everyone to share each other’s expert knowledge. For instance, new online learning gives GPs and other community health staff more confidence to refer patients with suspected cancer to specialists. We’ve set up training and support networks for mental health workers. Most general practices have had training from the lesbian, gay, bisexual and transgender (LGBT) community in how to meet their needs better.
This document is just a snapshot of the huge amount of work that is going on across Greater Manchester. Over the coming year we will continue to make our plans reality.

We want to keep you updated on this and how devolution continues to make a difference to everyday lives in Greater Manchester. Please use the details below to stay in contact with us:

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