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**Manchester City Council  
Report for Resolution**

**Report To:** Health and Well-being Overview and Scrutiny Committee – 4  
March 2010

**Subject:** Securing our Shared Future

**Report of:** Chris O’Gorman, Programme Director, NHS Manchester

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**Summary**

This report summarises the programme arrangements for Securing our Shared Future Programme, the joint quality and cost improvement programme led by NHS Manchester. It describes the governance arrangements of the programme, the approach being taken to identifying quality and cost improvement initiatives, and the immediate next steps.

**Recommendations**

The Health and Well-being Overview and Scrutiny Committee is asked

- a) to note the contents of this report
  - b) to note the progress of Securing our Shared Future to date
  - c) to receive a further report in May 2010 summarising the areas supported within the programme for implementation and/or further development
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**Wards Affected:**

All

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**Background documents (available for public inspection):**

Monthly reports from NHS Manchester to the Health and Well-being Overview and Scrutiny Committee

Report to extraordinary Health and Well-being Overview and Scrutiny of 16 February 2010 on future organisational arrangements for Manchester Community Health

## 1.0 Introduction

The likely impact of the global banking crisis and the national recession on public sector funding has been recognised for some time. The implications for the NHS were made explicit by Sir David Nicholson, NHS Chief Executive, in the summer of 2009 when he described an expectation that the health service would need to find savings of between £15bn and £20bn, 15-20% of the total expenditure on the NHS over the following five years.

A national 'quality, innovation, productivity and prevention' (QIPP) programme was subsequently launched and expectations placed on all NHS organisations that they should start planning to achieve the levels of efficiency improvements required.

NHS North West has issued guidance to NHS organisations in the region to develop or contribute to QIPP plans at individual organisation, health community, wider health system, region-wide and national levels.

NHS Manchester has made an early start on developing its QIPP plans, and has launched its local QIPP programme under the name of 'Securing our Shared Future' in September 2009.

This paper describes the aims and objectives of the programme, and the progress it has made so far.

## 2.0 Securing our Shared Future – description of the programme

Securing our Shared Future is a joint programme, led by NHS Manchester, which involves Pennine Acute Hospitals NHS Trust, Manchester City Council, Central Manchester University Hospitals NHS Foundation Trust, Manchester Mental Health and Social Care Trust, Manchester Community Health, University Hospitals of South Manchester NHS Foundation Trust and the practice-based commissioning hubs in North, Central and South Manchester.

The aim of the programme is *"to develop and implement solutions that enable the NHS and social care in Manchester to commission and provide sustainable, high quality care in an increasingly challenging financial climate"*. In other words, the programme is about both quality and cost improvement in health and social care services.

The programme seeks to identify to identify efficiency gains of up to £200m recurrently by the end of 2013/14. This figure has been arrived at by applying the estimates provided by the Department of Health for the NHS as a whole to Manchester's current income. It is expected that most, if not all, of the £200m of efficiency gains will be reinvested back into health services in order to meet demands for additional activity, cost pressures such as pay and clinical supplies, and service developments. In other words, it is not expected that the savings required will be lost to Manchester's services but that, whilst budgets remain relatively flat, the money will be required to 'go further'.

The programme is linked to QIPP plans in individual organisations and in the Greater Manchester 'footprint' as a whole. The programme is also closely linked to the QIPP plans of Trafford, and of the North East Sector of Greater Manchester, which consists of North Manchester, Heywood, Middleton and Rochdale, Bury and Oldham.

The programme does not seek to make savings in one area of the health and social care system by transferring costs and risk to another area. Its approach is to help all providers reduce costs within the health and social care system so that they can continue to provide the range of health and social care services required by the people of Manchester within the future available resources.

Securing our Shared Future has three phases:

1. 'Opportunity identification' – locating by as wide range of means as possible the opportunities for quality and cost improvement across the City's healthcare services; conducting preliminary analysis and engagement with stakeholders, and prioritising a list of initiatives which were most likely to achieve the programme's overall aim. This phase will last until March 2010.
2. 'Benefits realisation' – intensive further testing of the 'short listed' set of initiatives, including further public and patient engagement and clinical review; implementation planning. This phase will commence in April 2010 and may take between 3-12 months depending on the initiatives within the 'short list'
3. 'Implementation' – mobilisation of implementation plans to commence the quality and cost improvement initiatives

A programme governance structure has been put in place consisting of a Programme Board, whose membership is the Chief Executives of all of the partner organisations, together with the Director of Manchester Community Health, and the Chairs of the North, Central and South PBC hubs. The Deputy Chief Executive (Performance) of MCC is a member of the programme board and helps ensure alignment of the programme to the Council's corporate goals, and to the shared goals within the Local Area Agreement and Community Strategy.

Alongside the Programme Board is a Clinical Reference Group consisting of the Medical Directors or equivalents of each partner organisation. There is also a public and Patient Advisory Group which meets monthly to review the progress of the programme and advise on the likely public and patient engagement requirements for the initiatives which are being identified.

NHS Manchester has engaged KPMG to provide data analytics support to the programme, and to offer access to expertise about best practice in health and social care systems elsewhere in the United Kingdom, and abroad.

### **3.0 Opportunity identification**

In order to generate the wide range of potential opportunities for review within the programme, a series of work-streams have been established led by multi-agency thematic groups.

Six thematic groups have been created, each chaired by a Programme Board member, and consisting of clinical and managerial representatives from partner organisations, in some cases together with patients or patient representatives. These thematic groups are tasked with identifying potential quality and cost improvement initiatives in the specific service areas.

The first set of over one hundred potential initiatives or opportunities was produced at the end of 2009. The identified initiatives were then prioritised according to their ability to contribute to the programme goal of achieving cost and quality improvements. The resulting more refined set of initiatives are now being further worked up by the thematic groups.

The current thematic groups are therefore focusing on the following areas:

- Continuing care – NHS funding for people with ongoing healthcare needs
- Shared services – making the best use of ‘back office’ functions amongst organisations
- GP payment mechanisms – how the funding of primary care can best incentivise efficient use of healthcare resources
- Children’s services – how the further development of aligned or integrated children’s services can not only improve quality and contribute to the children’s safeguarding arrangements, but also deliver efficiency savings
- Mental health – how improving access to mental health services can generate cost and quality improvements
- Integrated care - how aligning or integrating services, especially for people with long-term conditions, can delivery benefits to patients and to the health and social care economy. This workstream has a particular focus on urgent care and includes end of life care.
- Planned care – how better use of local resources could maintain access to services but provide efficiency savings

Each thematic group has looked in detail at ideas and opportunities arising from comparing Manchester’s services to equivalent services elsewhere in England, and best practice in Britain and abroad. Comparisons with relevant benchmarks can helpfully reveal opportunities for increasing efficiency if Manchester’s services are ambitious to be amongst the best in the country. KPMG has assisted the thematic groups with data analysis and with critical challenge to ensure that each group is being sufficiently ambitious.

A strong theme of a number of the thematic groups has been the opportunities presented to both quality and cost improvement by forms of joint working, including integration of services. This is particularly the case in children’s services (building on the existing children’s trust arrangements) and in relation to urgent care and long-

term conditions where greater integration of services is anticipated to deliver improvements in care for patients, and efficiency savings.

Alongside the thematic groups, a public and patient engagement programme has been established which includes the Public and Patient Advisory Group but which also seeks views and comments from the public through NHS Manchester's membership scheme, and through a survey available on the public website with alternative arrangements available for those who are not able to access the internet.

Finally, a staff engagement programme, also linked to NHS Manchester's website but supported by staff communications programmes in each partner organisation, has been established.

#### **4.0 Programme proposals**

During March 2010, it is anticipated that the programme will have produced a series of detailed discussion documents which look at specific opportunities for cost and quality improvement within the thematic group areas. Each document will be considered by the programme and a view taken as to whether further work is to be undertaken or not. At present, only a small number of these discussion documents have been produced and intensive work is underway to prepare the remainder by 31 March 2010.

Once considered by the programme board, the proposals in the documents may be agreed for further consideration and work. In some cases this 'further work' may simply be implementation. For example, the proposals emerging in relation to continuing care address improvements that can be made in procuring continuing care services so that there is more control from commissioners over the prices charged for continuing care placements, and that these prices can be directly linked to the levels of quality of service expected. Proposals of this type have the potential to deliver savings and quality gains quickly.

In other cases, however, further work may include additional analysis, further clinical and public and patient engagement, further staff engagement and detailed planning. For example, the proposals for the future of Manchester Community Health, presented to the extraordinary Health and Well-being Overview and Scrutiny Committee meeting on 16 February 2010, and which are directly related to Securing our Shared Future (especially the children's services and integrated care thematic groups) will take twelve months to see through to complete implementation as a wide-ranging plan of engagement, consultation and negotiation needs to be executed first.

It is proposed that a summary of the proposals and the further work to be undertaken is presented to Overview and Scrutiny at its May 2010 meeting.

#### **5.0 Conclusion**

Securing our Shared Future is a vitally important local programme which brings together the NHS and the Council to plan future changes to health and social care

services which will both improve quality and cost, enabling health and social care services to continue to flourish despite the changing picture of public sector finance.

The programme is at an important point in its roll-out, as it reviews the prioritised set of initiatives and opportunities coming forward from the thematic groups.

As the thematic groups report, the next steps will include either implementation or further work, engagement and consultation, depending on the initiatives proposed.

## **6.0 Recommendations**

The Health and Well-being Overview and Scrutiny Committee is asked

- d) to note the contents of this report
- e) to note the progress of Securing our Shared Future to date
- f) to receive a further report in May 2010 summarising the areas supported within the programme for implementation and/or further development