

**Achieving Better Outcomes Together** 

The MLCO Commissioning Plan

How we work and what we will set out to do over the coming years

2025-2028







### **Foreword**



**Cllr Thomas Robinson**Executive Member for Healthy
Manchester & Adult Social Care

Welcome to the 2025-28 Adult Social Care Commissioning Plan which sets out how we want to continue to work going forward to ensure there is a vibrant, responsive and sustainable local care and support market.

This is our third Commissioning Plan. We have achieved much since we started this journey in 2021, and continue to view commissioning as a collaborative process for deciding how to achieve effective outcomes for and with Manchester people and communities.

Whilst challenges remain, we have a great opportunity working within the MLCO to join up, innovate and make creative use of all the resources and assets we have in our city. This Commissioning Plan sets out our direction of travel and supports our important work with the care sector and our VCFSE partners.

Thank you for being part of this journey with us.



**Bernie Enright**Executive Director of Adult Social Services

This Commissioning Plan aims to build on previous plans and lays out our approach to commissioning to achieve better outcomes for people who need to draw on care and support.

I'm really proud of the progress we have made over the last four years which is described in this plan. Now more than ever, it is so important that we continue to focus on promoting well-being and a strengths-based, person-centred approach to the commissioning process. Our aim is to ensure services are meeting current needs and anticipating future challenges by coproducing service provision, as well as maximising the insights gained from data collection and partnership working.

The only way we can do this is by listening to people with lived experience and understanding where our services work well, where we need to improve and where we can do things differently to support people to live their best lives in our communities.

Thanks to all involved in the delivery of this Plan.

## Commissioning in MLCO in Manchester

### **#WeAreCommunity**

## **An introduction to the plan from Sarah Broad**Deputy Director Adult Social Services

This plan has been produced as a refresh to the 2021/22 and 2023/24 Commissioning Plans which set out our priorities for commissioning in Manchester Local Care Organisation (MLCO), aligned to our Better Outcomes, Better Lives Programme.



Since we produced the first plan we have delivered a lot, working with providers and internal stakeholders, including frontline practitioners, to ensure that we are commissioning more responsively.

This plan looks back at our achievements to date, as well as setting out our next steps to ensure that we continue to put citizens at the heart of everything we do. This will ensure we are commissioning in a way which underpins Achieving Better Outcomes Together, our new plan for Adult Social Care.

#### This plan is for:

- **Providers** to help understand our priorities to support working together
- The VCSFE to enable delivering on our shared priorities in partnership
- **Front-line practitioners** enabling shared understanding of the work we do in commissioning
- Our commissioning teams to gain clarity on our priorities for the next phase
- People who need to draw on care and support and their carers are at the centre of this plan

Since we produced our initial Commissioning Plans we have continued to work on bringing together health and social care commissioning. Manchester Local Care Organisation (MLCO) and the locality team of Greater Manchester Integrated Care Board (GM ICB) are working together to identify opportunities for further integrated working in commissioning, linked to many of the priorities set out in this plan. Commissioning teams in MLCO, including our teams supporting ASC commissioning, will continue to support this work.

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### What our partners say

### Gaddum

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**Gaddum** greatly values its partnership with Manchester City Council, which demonstrates a deep commitment to improving the lives of residents through collaborative working.

The Council's strategic focus on inclusion, prevention, and innovation aligns with Gaddum's vision for the equitable health, wealth and self of every individual and community.

#### **Ben Whalley**

Chief Executive Officer



**Medacs** have worked with Manchester City Council for over a decade and Manchester has their citizens' outcomes at the heart of their approach.

During the time we have worked with Manchester I have noticed a huge improvement in the commitment and dedication towards working with providers rather than against. They are keen on working in partnership with care providers and other partners to ensure their citizens have the best and desired outcome for them.

We have worked closely with Manchester for recent initiatives like the trusted assessor and throughout the time we have felt supported and listened to - open to suggestions, ideas and making time to listen to providers.

They always ask for feedback and then work with us and in partnership to try and resolve the challenge together. In turn this has created a trusting, open, honest relationship between all parties and I feel this has made providers, care workers and other professionals feel valued by the council/commissioners which has had a positive contribution towards ensuring the citizens of Manchester get the tailored support they need to achieve their outcomes.

#### **Lesley-Ann Marshall**

Registered Manager



### Introduction to Manchester's commissioning landscape

## Historically, 'commissioning' has been how we work to arrange and buy services for people who need to draw on care and support. In MLCO, we want commissioning to be much more than that.

- Effective, strategic, compassionate commissioning will be how we work with system-wide partners to respond to local needs in a truly place-based way. People who need to draw on care and support are at the heart of everything we do. We will be relentlessly focused on cross-cutting, inclusive outcomes that matter to local people, from all backgrounds and walks of life.
- Adult Social Care in Manchester is pioneering, operating within an integrated health and social care system. Delivery of Adult Social Care, including commissioning, is managed within the Manchester Local Care Organisation (MLCO). The benefit of MLCO is the teams working together to provide a holistic approach to Manchester's residents, coordinating care around a person's aspirations and needs.
- Our approach to commissioning will support integration between health and social care services internal to the organisation
  and external to partners. This plan is currently aimed at commissioning in Adult Social Care, but over time we will continue to
  work with NHS partners to ensure that we share our vision, design principles and workstreams across health and social care
  commissioning. We also continue to work together with Children's Services, to make sure that people who need to draw on
  care and support are supported across their entire journey.
- Our Manchester Strategy 2025-35' has a clear vision that after the best start in life, Manchester people in 2035 will enjoy longer, healthier, happier lives whilst also feeling valued and respected, supported to play their part in their city's life, and use their unique strengths to make a Manchester we can all be proud of.
- This overarching commissioning plan acknowledges and builds on the success of our Learning Disabilities Commissioning Plan (2023/2028) which was co-produced with citizens with lived experience and their support networks. This plan can be found:

  <u>Adult Learning Disability Commissioning Plan 2023 to 2028 Manchester Local Care Organisation</u>
- This plan supports our continued transition toward a model of strengths-based commissioning which goes hand in hand with our strength-based social care practice and model. It will help us take steps towards implementing our vision, design principles and workstreams but we know that this will be a longer-term journey. We may not be able to achieve all that this plan sets out, but we are committed that this is our direction of travel: for the benefit of Manchester residents, our staff, partners and providers.
- This plan continues to align to the cross-cutting the Enabling Independence Accommodation (EIA) Strategy . The EIA Strategy is a collaborative approach between the Council's Strategic Housing team, Commissioners in Adult Social Care, Children's and Homelessness to improve the access, purpose and provision of supported accommodation in the city.



## Commissioning Plan: What is it?

We want our commissioning plan to describe our responsibilities and activities and to form the beginning of a conversation to achieve better outcomes for people who need to draw on care and support through partnership working and co-production.

This plan is a refresh of previous plans. This means that we are continuing to focus on the same principles and values which we set out in 2021, as they remain unchanged. Going forward this plan will be updated every few years, and future versions will continue to update on areas of success and new priorities. It will help us to focus on priorities to co-produce with people – be they people, our workforce, partners, providers and the VCFSE, or anyone who wants to be part of driving Manchester's future.



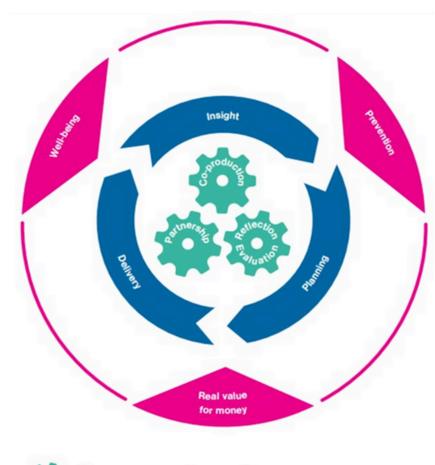
### What is commissioning?

Commissioning is often described as a continuous cycle with key phases, as in this diagram from the New Economics Foundation (NEF)

Put simply, commissioning is described as stages of "Insight, Planning, and Delivery":

- Insight identify what needs exist or are emerging and understand whether current services are effective
- Planning develop solutions with our citizens to meet identified needs and statutory obligations
- Delivery implement plans by procuring service provision, effective implementation, and rigorous contract monitoring
- Coproduction, Partnership, and Reflection/Evaluation are the key process 'cogs' at the heart of all we do that keep the cycle turning
- Prevention, Wellbeing, and Value for Money are key aims that we want to deliver for the people of Manchester.

Read the full NEF guide here





Components: co-production, partnership, and reflection and evaluation are applied consistently throughout commissioning



Phases: the three phases of 'Insight', 'Planning' and 'Delivery' structure the commissioning cycle



Aims: prevention, well-being and real value for money are the objectives of commissioning, and are supported and strengthened by the components and phases

## The importance of Social Value in all commissioning activity

Social value has a critical role to play in supporting the delivery of the outcomes of this Commissioning Plan. It will be increasingly important for social value to link partners and providers who deliver services for the MLCO to support that they can provide for Manchester's communities.

In particular, the below areas will be priorities for the coming year:



Create employment and skills opportunities to build back better



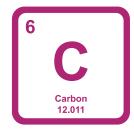
Provide the best employment that you can



Keep the air clean







Make your organisation greener

We expect our partners and providers to recognise the wider benefits of commissioning which addresses social value, and this is woven through our procurement practice.

## Commissioning Plan - Our Vision

As we continue to build on these foundations underpinned by ensuring we enhance care experiences and health and improve inequalities in 2025 and beyond.



### People, families and carers feel

Independent in their own home.

Connected to their community.

Know where they can get support when they need it.

The support they receive is world-class and right for them.

Fulfilled and supported as a carer.

Resilient and able to live their best life.



#### **Staff feel**

They are thriving in their role, and making a difference to people's lives.

They are challenged and inspired by our aspirations.

Part of a system and confident that their role provides a valuable contribution to maximising citizens' independence.

They know what's going on across the LCO and in communities.

Able to identify problems and work with colleagues and citizens to co-produce solutions.



### Partners and providers feel

Intrinsically linked to the people in our community.

They support us and we support them.

We are proactive about the challenges we all face.

Fair, supportive, trustworthy, ethical, low-carbon and setting a high standard for care and innovation.

Financially viable, agile and pay staff the Manchester Living Wage.

Connected across the local community.

Improve health and wellbeing of the population

Increase the wellbeing and engagement of the workforce

**Reduce inequalities** 

**Enhance experience of care** 

### What do we commission?

Broadly speaking, commissioners must be led by the Care Act 2014, the Mental Capacity Act 2005 and a range of other statutory legislation including the Equality Act 2010, Data Protection Act 2018 and the Human Rights Act 2000 to name a few.

Commissioners are guided by our frontline assessors, who undertake statutory assessments and aim to meet the identified needs of our citizens through a range of provision, whether that is in-house services, the external care marketplace or through the Voluntary, Community and Social Enterprise (VCSE) Sector. Here are a few examples of some of our core commissioning responsibilities\*:

Low level early intervention services with the VCSE for a range of cohorts including adults with Autism	Homecare	Residential Care	Nursing Care
Supported Accommodation for Adults with a Learning Disability & Autism	Supported Accommodation for Adults with Mental Health Needs	Supported Accommodation (Extra Care Housing) for older people	Discharge to Assess (commonly using Residential and Nursing Care beds)
Independent Advocacy Services	Support for Unpaid Carers	Develop bespoke strategies and plans e.g. Dementia or Carers Strategy	Daytime support

<sup>\*</sup>for illustration only

## Working together with people - embedding co-production

Recognising that co-production is a core process of the commissioning cycle and a key priority of adult health and social care, the council has invested in two new posts in 2024 to support the embedding of co-production across Adult Social Care.

Colleagues will work with in-house services, partners, and social work and commissioning teams to climb the 'co-production ladder' by developing training materials and working directly with services. This includes working with commissioning teams to ensure that the insight, planning, and delivery phases of the commissioning cycle have coproduction at their heart.

#### **Key Developments**

Invested in two new, permanent full time Coproduction Coordinator roles to support services and colleagues to climb the 'coproduction ladder'

Developed a proposed strategy with buy-in from senior leadership and SROs to support culture change

Created a safeguarding co-production space with experts by experience to collaboratively address issues the community has raised around the experience of safeguarding

Facilitated co-production sessions with social work colleagues as part of their continuous professional development



#### **Aims**

To co-produce principles of co-production with internal and external colleagues and the community we serve

To develop training materials and resources to support and upskill colleagues

To ensure people feel valued when working with our directorate through the development or refinement of key policy (e.g. remuneration)

To ensure commissioning is leading by example by identifying opportunities for coproduction at the earliest opportunity in the commissioning cycle

### Practice-led commissioning

A central feature of our commissioning approach in Manchester is the ability to act following feedback from our citizens and frontline practitioners.

- Citizens can inform the commissioning process through feedback following access to current services and through co-production opportunities as described.
- Our frontline teams can provide feedback via the MyViews process to share their reflections following social care assessments. This identifies and highlights gaps in service provision and innovative solutions to address the barriers our citizens experience.
- By taking a responsive approach, and making full use of the data provided by citizen feedback and practitioner reflections, we can address gaps in service provision and improve how we meet our citizens' changing needs through the commissioning process. Commissioners reflect on solutions through forums such as the Commissioners' Community of Practice.



## Introduction to Achieving Better Outcomes Together

# Achieving Better Outcomes Together

Achieving Better Outcomes Together is our updated plan bringing together all change and transformation in Adult Social Care. It builds on the principles of Better Outcomes, Better Lives.

To continue developing practice and embed sustained system change, Achieving Better Outcomes Together is also focused on the supporting systems and partnerships around practice that can have a significant impact on people's experience of care and support, enabling the continued development of a strengths-based service.

The commissioning developments and approach outlined in this commissioning plan are critical within Achieving Better Outcomes Together which includes a strong focus on improving outcomes for people who need to draw on care and support.

## **Achieving Better Outcomes Together will move us from strengths-based practice into a strengths-based System:**

- Embedding strengths-based commissioning as set out in this plan
- Further developing our Quality Assurance and Practice Framework to support a high standard of delivery
- Developing solutions using co-production with people who draw on services and carers to create impactful solutions, alongside developing a Citizen Strategy, underpinned by a co-productive approach
- Continuation of the delivery of My Life, My Way our programme of work focused on transforming learning disability and autism services with a focus on our in-house services as well as Preparing for Adulthood (transition)
- Working to progress changes to our Mental Health delivery model
- Continuing to expand our approach to prevention and access to services at the front door.



### Joint Strategic Needs Assessments

In Manchester, the JSNA currently takes the form of a series of reports focusing on specific issues or communities that are important to the city.

The following section demonstrates some of the headline data we use in the commissioning cycle/process to ensure we meet future demand and population changes.

A Joint Strategic Needs Assessment (JSNA) gives a summary of the health needs of local people. This summary uses the best data, evidence, and insight available. Producing a JSNA is a legal requirement of the Health and Wellbeing Board for all councils.

We and our NHS partners must legally consider a JSNA when planning health and care services. For us, this is overseen by the Manchester City Council Public Health department.



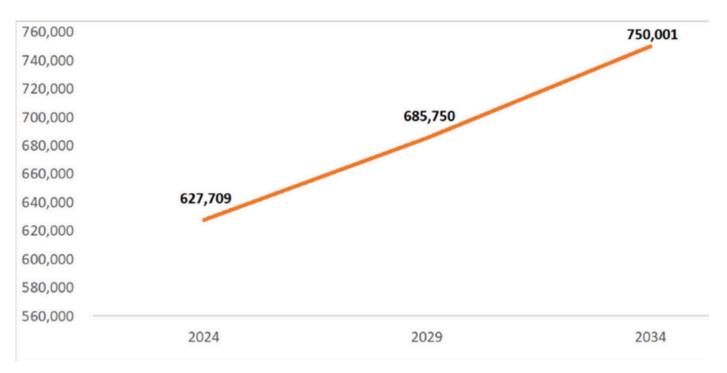
#### This is supported by a range of other local partners:

- NHS partners
- and VCFSE sector partners (Voluntary, Community, Faith, and Social Enterprise groups).

Completed JSNAs can be found here: <u>Existing JSNA Reports - Adults and Older People | Manchester City Council</u>

### Population changes

Manchester's population projection shows an upward trend in the total population over the next decades. The total projected population increase from 2024 to 2034 is approximately 122,292, indicating a steady and consistent growth over the 10-year period as shown in the chart below.



The population projections for Manchester highlight a significant demographic shift, with the older population (65+) expected to increase at a slower rate, c.19% by 2034, compared to the working-age population (WAA), which is projected to increase by 24% over the same period.

Making a relatively conservative assessment of the evidence of population change (growth) in the learning disability and learning disability and autism population, annual growth of 2% has been assumed to project the population over 10 years to 2033.

### Population changes

Population projections for the 65+, 75+, 85+ population in Manchester to 2034 are shown in the table below:

Age Group	2024	2029	2034
65+	54,836	57, 421	65,020
75+	23,109	22,214	23,590
85+	6,752	7,198	7,633

Evidence from Greater Manchester Integrated Care indicates that between 2021 and 2023 the growth in the 18+ population with learning disability was 1% and in the 18+ population with learning disability and autism it was 4%; a median growth rate of 2% per annum is assumed across both cohorts. This is consistent with the evidence of growth in the population of people with learning disabilities and autistic people due to children who transition to adult social care eligibility.

### Social isolation and loneliness

In Manchester, 36% of older people live alone, compared to 29% in England overall.

This is also the highest percentage for the North West and Greater Manchester.

64% of women in Manchester aged 65+ are not in a couple, compared to 46% of men.

Living alone and being widowed increases your risk of loneliness. Being a woman, on a low income, recently moving address, or being LGBTQ+ is also associated with a higher risk of being lonely. People with long-standing health condition or disability are almost three times as likely to experience loneliness.

60% of people who experience chronic loneliness will also experience mental distress.

Living in an urban area has been associated with a significant increase in loneliness. 37% of over 65s don't feel part of their local neighbourhood (who answered they disagree that they feel part of their neighbourhood on the residents' survey).

POPPI (Projecting Older People System) estimates there will be a 34% rise in older people living alone in Manchester between 2023 and 2040 from 17,190 to 23,018.



### How we use the Social Care Dataset

In this section, we have provided a summary of key adult social care data. Data plays a crucial role in a successful commissioning plan by providing evidence that informs decisions, and facilitates improvements.

By using data to understand needs, plan services, and monitor performance, commissioners, partners and the market can make more informed choices and deliver better outcomes.



### Summary of adult social care data

The data below provides partners and the market with past adult social care trend data and information that will aid decision making and business planning.

- We have seen an upward trajectory for the number of assessments completed which has resulted in a 34% increase over the last two financial years with the largest increase coming over the last financial year
- The main assessments completed are strength-based assessments, assessments for equipment and carers assessments
- From the **1,473** placements made in 2024 665 were for physical support, 377 for mental health support and 164 for mobility support
- The number of Direct Payments (between 2022/24) was 1,333 services and 820 individuals.



## **Housing needs**

We have worked with the Housing Local Improvement Network (LIN) to identify long term need for housing and accommodation. Key findings are summarised below:

- Based on projected data, an additional **1,260 extra care apartments**, with an average capacity of 80 apartments per scheme, will be needed during the next 20 years
- The current prevalence of dementia among the 65+ population (4.87%) in Manchester is higher than both the Greater Manchester average (4.11%) and the English average prevalence (3.97%). This evidence provides justification for the City Council's approach to commissioning extra care housing that can support people living with dementia. This also supports our work with care homes
- A mental health accommodation needs analysis was completed, showing us that we need
   225 additional units of Supported Accommodation and 110 units of general needs
   housing by 2033 this does not include Residential or Nursing care provision
- Within the areas of Learning Disability and/or Autism (LD/A), the headline outcomes from the analysis included that over the next eight years, an **additional 375 units of accommodation** will be required to address population growth and demand, and/or reconfiguration of existing property arrangements. Of this figure, 315 of the units needed are supported accommodation, and 60 units being general needs accommodation
- The LD/A analysis also indicated that there should be sustained growth in Shared Lives provision by approx. **60 units** across the next eight years, and in terms of residential care provision (within LD/A specifically), Manchester should target a significant and reduced reliance on this model of care by over 20% (up to 2033). A key contingent to help deliver this strategic objective, will be having more high-quality supported and general needs accommodation available with flexible models of care as a viable alternative
- The Housing LIN evaluation for older people's care homes predicts that across residential and nursing provision we need an overall **net increase of 250 care home beds** by 2039.





## The 7 commissioning priorities we set out to deliver in 2023

The priorities set out below were identified as key areas in the 2023/24 commissioning plan with the following section demonstrating progress made in 2024 towards achieving them.

Putting prevention into practice Create an environment with more citizen choice and control, with support closer to home that enhances peoples' wellbeing and independence in a way that is right for them

#### **Market Development**

Plan to support the adults social care market to be innovative, improve outcomes, align to LCO's strategic objectives & ensuring adequate supply of future support

#### **Co-production**

Making sure that commissioners have the tools and knowledge to meaningfully involve residents when developing support models, and to make sure that citizens' voices are heard when things aren't right

### Flagship commissioning activities

Identifying the highest impact projects in adult social care to make them more than the sum of their parts

### Building Local Good Practice into Business as Usual

Taking stock of current arrangements to make sure they are the best they can be

#### **Contract management**

Driving better outcomes for citizens through robust performance management of existing support delivery, evolution of measuring outcomes and better relationships with providers

#### Skills for strengths based commissioning Equipping the commissioning workforce and stakeholders in the widest sense with the knowledge and skills to deliver the commissioning plan prioritiesaligned to our Organisational Development (OD) plan

#### **Priority 1 - Putting Prevention into Practice**



#### What we've been doing in the past 12 months

Piloting services in areas such as befriending & respite

• Commissioned a new multi-service autism prevention offer with the voluntary and community sector from April 2025. Focusing on information and advice, helping people to understand their autism diagnosis more and therapeutic art services.

 Invested further into Learning Disability Prevention, particularly around friendships, relationships, dating and therapeutic arts. We did this using ASC investment funding and designed the service resultant from commissioners

communities of practice, listening to the views of frontline SW colleagues.

• Engaged with frontline staff and citizens on the types of prevention services they wish to see

Held co-production workshops to inform our prevention strategy and approach

### **Priority 2 - Market Development**



- Developed provider forums to gather provider feedback and intelligence and respond to changing market requirements.
- Reviewed the D2A arrangements and stepped these down to ensure that citizens are supported home or into longterm placements directly from hospital.

• Commenced a procurement exercise for homecare to ensure the market is fit for purpose. Award due summer 2025

- Commissioned a new provider framework for adults with a learning disability, autism and mental health conditions up to 2029. The framework covers Outreach, Day Services and Supported Living.

  • Held a care home investor round table to explore opportunities for the future development of strategic provision
- Created a care home, work programme to complement our focus on improving the care home market.
- Commenced a programme of work with strategic housing to develop the supply of accommodation.

Continued to grow the contract management function

• Rolled out the 'Provider Portal' and continuing to work towards the road map of system enhancements during 25/26. Restructuring our internal payment and contract system for external care providers is virtually complete.

#### **Priority 3 - Co-production**



#### What we've been doing in the past 12 months

- Co-production Team established (1x lead, 2x Coordinators) to improve adult social care practice around working together with citizens
- Scoping exercise completed with service and team managers to benchmark current understanding and identify needs
- Supported Social Worker CPD through dedicated co-production spotlight session
- Working with the Learning Disability Action Group to help shape the priorities of the Planning for People with a Learning Disability Board and key agendas within Learning Disability Services.
- Working in partnérship with VCFSE colleagues and citizens to improve knowledge and responsiveness to key issues (e.g. Carers Expert by Experience Panel, Our Safeguarding Voices).

### **Priority 4 - Flagship Commissioning**

- Adult Learning Disabilities commissioning plan complete and new provider framework for supported accommodation and day services in place from 1 April 2025. Launched a new Autism Prevention Offer from 1 April 2025 and review of in-house provision ongoing with the aim of developing a more complex care-oriented service model
- A strategic review of housing support services has taken place which identified what is working well and areas for improvement. A multiyear plan is now in development which builds upon areas of good practice and intends to reconfigure elements of provision to provide enhanced support for more vulnerable adults. Alongside this new performance monitoring systems will be introduced
- De-commissioned **discharge to assess** arrangements to ensure citizens are supported home or directly into long-term placements via intermediate care or reablement services
- **Homecare** redesign and tender for the future market supply across the city from Summer 2025. Service updated to include specifc areas of focus, such as trusted assessor, moving and handling optimisation.

#### **Priority 5 - Building Local Good Practice into Business as Usual**



#### What we've been doing in the past 12 months

- Working to improve our use of data by producing a template of baseline information for commissioners to collate with Performance Research and Intelligence (PRI) colleagues as part of any commissioning activity

  • Creating tools to better understand whether contracts are delivering good outcomes for Manchester citizens
- Improving our programme management of contract extensions, de-commissions and re-commissions so that providers and colleagues (procurement, PRI, finance) can plan their work
- Sharpening our understanding of social value and how we can use it in adult social care to leverage more value for Manchester citizens
- Working together with social work colleagues to identify gaps in service provision and responding to this with discussion, ideas and testing out new services on a small scale.

#### **Priority 6 - Contract Management**



#### What we've been doing in the past 12 months

- We've developed new contracting documents that are being implemented across care homes and the LD/MH procured framework
- Rolled out the first phase of our locality-based working in contract management with 2 dedicated portfolios created to support with provider delivery assurance
- Developed new tools and procedures to streamline the operational procedures for drafting new contracts
- Issued over 100+ framework agreements to providers onboarding to the LD/MH service framework
- Restructured our system to improve system efficiency and improve our payments approach with providers
  Rolled out Provider Portal across all care provider sectors and focused on the additional functionality to maximise its full potential in working together with providers.

### **Priority 7 - Building Skills for Strengths-Based Commissioning**



#### What we've been doing in the past 12 months

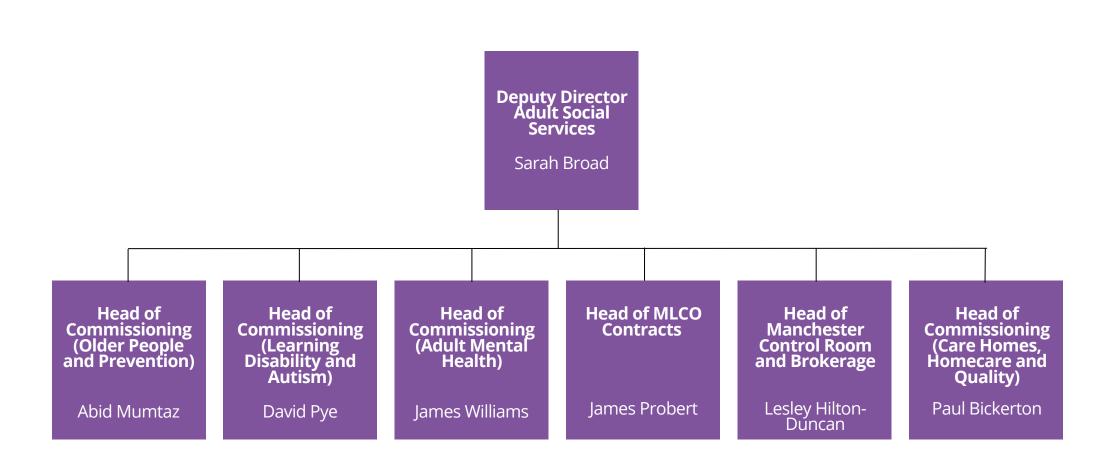
A detailed plan of staff training and development needs have been captured, focusing on internally-accessed courses as well as external training and certificated commissioning courses including:

- Level 2 Mental Capacity Act in Practice
- Level 2 Section 42 Safeguarding
- Tier 1 Oliver McGowan Mandatory Training on Learning Disability and Autism
- Mental health Dementia and Learning Disability (Awareness) for Health and Social Care
- IPC Commissioning course
- DHSC pilot commissioning programme (IGNITE) successfully completed for 1 x Head of Commissioning.



## MLCO Senior Commissioning Leadership Team

Our senior commissioning leadership team is made up of the following staff.



### Older People and Prevention Commissioning Update

### What we are doing well



- Ensuring the extra care provision is in-line with the projected need
- Ensuring our neighbourhood apartments are meeting the needs of citizens and the wider health and care system
- Continuing to develop initiatives in the community to improve hospital discharge
- Embedding co-production across the directorate
- Evaluating day services to ensure outcomes are achieved
- Ensuring dementia services are meeting need
- Commissioning preventative services
- Ensuring Day Services for older people meet the needs of our citizens
- Redesigning our online directory Help and Support Manchester (HSM).

### Our next steps



- Develop and embed a prevention strategy and workstream
- Ensure extra care has a pipeline of new schemes
- Tender home from hospital service
- Re-commission home from hospital service/s
- Pilot a short break offer for unpaid carers to inform future demand
- Co-produce an adult carers strategy
- Co-design befriending coordinator service.

#### **Challenges we are facing**



- Provision in the market for recent tenders including handy person service
- Identifying developments for respite/short breaks for unpaid carers.

#### **Success Measures**



- Supporting citizens to remain at home through appropriate respite provision for carers
- Support to preventing the need for longer term services through appropriate prevention services.

### Care Homes, Homecare and Quality Commissioning Update

### What we are doing well



- Continue to grow and develop the use of Trusted Assessor across the whole city which started in 2024 in the central Manchester area,
- Successful roll out of the Moving and Handling optimisation work, reducing double cover safely
- Working together with investors including a round table to discuss the future of care home stock
- Establishing a full care home work programme to reinvigorate the work we do with providers and the care delivered to citizens
- Creation of the Manchester Insight tool for intelligence across homecare with planned implementation once the contract is in place
- Continue to develop quality assurance for regulated activity in line with CQC changes.

### Our next steps



- Create a care home specification
- Create a 10 year market strategy for care homes
- Work together with internal and external partners to explore the development of new care homes
- Work together with providers to understand our care homes, including risks and planned mitigations
- Develop a new banded approach for care home fees
- Completion of the homecare tender evaluation and mobilisation of new contractual arrangements.

#### Challenges we are facing



- Increased demand for complex & challenging behaviour placements
- Increased demand for nursing dementia beds
- Completion of the broad and detailed care home, work programme.

#### **Success Measures**



- Improved homecare services in the city through the new contractual arrangements
- Fit for purpose care home provision in the city meeting current and future needs

### Mental Health Commissioning Update

### What we are doing well



- Launched a new supported living, outreach and day service framework for adults with a Learning Disability, Autism and Mental Health conditions, focused on a continuum of care model (low, moderate and complex level services)
- Designing and expanding our Reablement offer to people with mental health support needs
- Improve hospital discharge timescales by working with Greater Manchester Commissioners, Greater Manchester Mental Health Trust (GMMH) and our providers to create additional market capacity for bespoke packages of care
- Working collaboratively with GMMH, developing a new mental health social care pathway which will see the management of statutory services returned to Adult Social Care
- Developing the Manchester Advocacy Alliance with our advocacy partner Voiceability
- Using Care Cubed to ensure fair costs of care across the market, alongside utilising the rates agreed within the framework contract.

### Our next steps



- Full mobilisation of our new framework for mental health (and learning disability / autism services) and establishing a new provider engagement forum to help us collectively succeed
- Return statutory mental health services to the management of Adult Social Care
- Increase the supply of accommodation and housing for people with mental health support needs
- Work with ICB Commissioners to develop enhanced community support models
- Implementing Care Cubed cost calculator so everyone feels confident in its use, including working with NHS partners.

#### Challenges we are facing



- A shortage in good-quality general needs and supported housing
- A greater need for more independent models of support, including the use of technology enabled care.

#### **Success Measures**



- People are supported to remain independent in the community and in appropriate accommodation
- People are discharged from hospital in a timely manner

## Learning Disability and Autism Commissioning Update

### What we are doing well



- Launched a new supported living, outreach and day service framework for adults with a Learning Disability, Autism and Mental Health conditions, focused on a continuum of care model (low, moderate and complex level services)
- Implemented a new preventative service for adults with Autism (including adults without an LD diagnosis (Autismwise)
- Developing partnerships to develop large-scale strategic housing schemes between now and 2033
- Working with citizens and organisations (i.e Manchester People First) to strengthen our approach surrounding coproduction
- Positive work with Greater Manchester colleagues to deliver complex needs services for adults supported under the Transforming Care agenda.

### Challenges we are facing



- A shortage in good-quality general needs and supported housing
- A greater need for more independent models of support, including the use of technology enabled care.

#### **Success Measures**

 People are supported to remain independent in the community with the right accommodation and support provision in place.



### Our next steps



- Full mobilisation of our new framework for mental health (and learning disability / autism services) and establishing a new provider engagement forum to help us collectively succeed
- Reviewing preventative provision for adults with a learning disability
- Implementing the Care Cubed cost calculator so everyone feels confident in its use, including working with NHS partners to ensure a joined-up approach
- Work together with providers to understand our care homes, including risks and planned mitigations
- Driving forward our aims and ambitions to increase the supply of supported accommodation
- Continue with the delivery of My Life My Way including reviewing short breaks provision to deliver a comprehensive short breaks offer, including crisis prevention
- Working with transitional services to plan further in advance for citizens who may need adult social care in the future.

### Control Room and Brokerage Commissioning Update

### What we are doing well



- Expansion of the control room function into mental health supporting wider mental health system with partners
- Expansion of the brokerage function to support placement finding for all citizens and all services
- Increased and improved provider relationships and dialogue, especially in relation to market supply
- Improved performance data to track real-time hospital delays and flow
- Oversight of flow and delays in supporting discharge, to improve overall performance
- Ensuring through working with providers on a daily basis that capacity matches demand, supported by commissioning
- Bringing together colleagues from across the health system together with ASC to ensure joined up approaches to placement finding and hospital discharge.

#### Challenges we are facing



- Embedding and developing the skills of the team, following extensive recruitment
- Ensuring that the market is supported to be able to meet additional and complex demand.

### Our next steps



- Ensuring continued development of brokerage functions across all service areas including learning disability and mental health
- Embedding new brokerage arrangements for new LD/MH framework, including building relationships with providers
- Developing and improving optimised systems and processes ensuring up to date and live data and tracking.

#### **Success Measures**



• Finding the right care and support that ensures people's needs are met in a timely way, whilst obtaining value for money.

### **Contracting Update**

#### What we are doing well



- Expansion of the contracting function to support across adult social care through implementing locality-based ways of working
- Improving contract documentation in readiness for new service 'go-live' post procurement exercises
- Roll out of Service Contract Review and Utilisation Meetings (SCRUMs) across learning disability, mental health, homecare and care home services
- Restructuring of the contrOCC (contracts and payments) system to improve system efficiency and improve our payments approach with providers
- Driven the roll out of the Provider Portal across all care provider sectors.

### Our next steps



 Embedding effective, high quality contract management within all our commissioning approaches, including support to maintaining high performing, sustainable services.

#### **Challenges we are facing**



 Setting up new frameworks and contracts across service areas and with numerous providers creates high volumes.



#### **Success Measures**



 A sustainable market underpinned by strong oversight and governance i.e. performance monitoring and adherence to service specifications



### Market position statements

The rationale for a market position statement is to encourage commissioners, people who use services, carers and provider organisations to work together to explain what care and support services are needed and why.

Our market position statement is embedded into our commissioning plan due to the close links between commissioning and managing the market and market sustainability.

We are obliged by the Care Act (2014) to ensure that the care market is sustainable, diverse and high-quality. Market shaping means we will collaborate closely with partners to encourage and facilitate the whole market as well as with other relevant partners, including people with care and support needs, carers and families.

### This market position statement will outline:

- 1. The support and care services people need
- 2. How they need them to be provided
- 3. How commissioners want to work with the market to meet those needs and the most optimum ways



Our approach is clustered into Learning Disability, Autism and Mental Health framework arrangements, care homes, home care, quality and accommodation.

### Market position statements

#### **Learning Disability, Autism and Mental Health Framework**

During 2025/26 and beyond we will be working with providers to mobilise and embed our new framework arrangements. The framework includes big changes to the ways we have traditionally worked, including a move away from block contracts and the introduction of fee bandings associated with a continuum of care.

#### **Care Homes**

We are progressing our long term care home programme including redesigning the current service specification and creating a banded fee structure for 2026/27 and beyond, reflecting the complexity of citizens going into care homes.

We are also working internally and external to explore opportunities for developing new modern, fit for purpose care homes in the city through the right supply of sites, and collaborating with investors to create the right market environments for the future.

We are continuing to engage with providers through our care home provider forum and via quality improvement opportunities and peer learning.

#### **Homecare**

We will award new contracts through a new framework agreement during 2025. This will ensure we have sufficient provision in an ever-growing market for the next 4 years. We will be developing provider forums for the new homecare market following award, to support engagement and development opportunities.

### Market position statements

#### Quality

We are working with providers and stakeholders on the development of tools to ensure quality of provision to the citizens of Manchester is maintained and enhanced. This includes better use of electronic methods to support our understanding of service delivery. Currently in development is the Manchester insight tool for use with provider Electronic Care Monitoring reports. We are also working with providers to further develop electronic care planning, and medications administration to support oversight of services.

#### **Accommodation**

We are working with colleagues across Adult Social Care and the wider Council to develop a long-term plan for increasing the supply of supported accommodation and general needs housing to allow people to achieve as much independence as possible. Citizens, providers and social care staff have all told us this is needed, and we have backed this up with research from the Housing Learning and Improvement Network which has identified the projected need up to 2033.

We will be looking to work in strong partnership with providers who offer support flexibly around citizen needs, not pre-defined or overly restrictive models that promote dependence on paid support. We need 225 additional units of Supported Accommodation and 110 units of general needs housing by 2033 relating to mental health accommodation. Within Learning Disability and/or Autism services (LD/A) we require an additional 315 units of supported accommodation and 60 units of general needs accommodation by 2033 (375 total).

For Supported and General Needs Accommodation, the preferred model, is for the accommodation component to be delivered by Registered Landlords/Registered Providers, therefore we are keen for care providers to form strategic partnerships and relationships with key housing providers that have a presence within the City. Commissioners can support and stimulate these partnerships and conversations where required.

We have 27 neighbourhood apartments (to aid hospital discharge) across the city in North, South and Central Manchester, Some are in sheltered schemes, some are in Extra Care schemes.

### Key messages to the market

We want to work alongside partners and providers to support an innovative, diverse and sustainable commissioning market which will meet the care and support needs of our population.

We aim to work with the market in the following areas:

- Co-production, partnerships and prevention
  - Ensure services are co-produced with citizens
  - Work more closely with providers and ensure provider forums are in place for all services in 2025
  - Ensure prevention is at the centre of what we commission including commissioning targeted prevention services.
- **Extra care, neighbourhood apartments, respite and home from hospital services** 
  - Expand our extra care schemes
  - Potentially expand neighbourhood apartment schemes, following evaluation of current schemes
  - Develop respite/short breaks offer for unpaid carers
  - We will be going to market through a joint commissioning exercise, for the Home from Hospital service.

### Key messages to the market



#### Housing and accommodation partnerships

- We will ensure that for housing providers, any proposed rent levels are discussed with MCC revenues and benefits services at the earliest "proposal" phase, demonstrating "real tenancy test" principles
- We will ensure that there is a clear separation of care/landlordship in supported living, to ensure security of tenure for Manchester citizens
- We will facilitate partnership arrangements between care and support providers and partner landlords for prospective schemes, supported by SLA arrangements.



#### **Strategy and innovation**

- Create a ten year strategy for care homes, working with existing and new providers and investors
- Work with framework providers to bring forward innovative services that can support Manchester residents in new ways in addition to more conventional models of care. We welcome ideas and proposals from providers via the framework working with relevant commissioning teams
- We will work in collaboration to provide support for citizens with serious mental health conditions as well as other issues such as substance misuse and behavioural support needs
- We will work to ensure innovative technology enabled care is delivered across services, and more expansively across Learning Disability, Autism and Mental Health services.



