Questions from GMOPN Health and Social Care Event

Digital Exclusion/Information

➢ How to make information more accessible and stop digital only?

➢ How will you reduce the impact of digital exclusion?

A major part of the GM Health and Social Care Partnership's IM&T plan is to empower all patients and residents to receive the information they need to support their health and well-being. To do this, we are making sure that patients and residents have the opportunity to give their perspective on how digital systems are put in place in our localities.

The overarching Greater Manchester Digital Strategy, which the Health and Social Care System is a key part of, has set out clear aims to increase digital inclusion across Greater Manchester – including increasing the number of adults with basic digital skills. The strategy also has a specific focus on how improving access to digital technology has the potential to reduce social isolation for older people. So, whilst as a city region, we are moving towards digital by default, we will need to make sure that all residents are supported to participate in this so that individuals and communities are not excluded.

Social Services/Policy

➢ How can we get the older people's agenda to have the same parity as early years?

➢ What is being done about falls prevention and how much of a priority is it, if at all?

➢ What specialist support is available to BAME older people?

➢ Currently older people delayed in hospital are called 'bed blockers'. They are actually 'victims of a disintegrated system'. How can we create a properly integrated system?

All of the parts of the life course – starting well, living well and ageing well – have equal priority in Greater Manchester.

Greater Manchester is now the UK's first age-friendly city-region, as recognised by the World Health Organisation (WHO).

GM is one of only three areas in the country that is developing its own Local Industrial Strategy (LIS). Part of this strategy will respond to the Government's Grand Challenge on the Ageing Society. Some of the initiatives within this include:

- The Ageing Hub: a partnership of researchers, local authorities, the health and social care partnership, voluntary and community sector organisations and other agencies to coordinate a strategic response to the opportunities and challenges of an ageing population across Greater Manchester.
- The Big Lottery-funded £10m Ambition for Ageing programme to create age-friendly communities.
- World-class ageing research centres, including the University of Manchester Institute for Collaborative Research on Ageing (MICRA), Health Innovation Manchester, the Derma-pharmacology unit partnership between University of Manchester and Salford Royal, the Manchester Biomedical Research Centre, and the new Older People and Frailty Unit.

As part of the Ambition for Ageing programme, research was commissioned from the University of Manchester on the challenges facing older people both now and in the future. The report, which concluded in April 2018, highlighted the social isolation often experienced by BAME people as they age. The report emphasised the significant opportunity for the Ambition for Ageing programme to carry out further, detailed work to understand how we can better tackle this vital issue.

There is a significant amount of work at both GM and local level on falls prevention – and it remains a high priority. Across the 10 localities, a range of initiatives are in place to prevent falls. The Health and Social Care Partnership is working to improve falls prevention in care homes – in particular those where falls prevalence is much higher. We are also looking at the evaluation of assistive technologies for falls prevention and how these can be rolled out across GM to prevent falls. In addition, to strengthen our expertise on this vital subject, local universities will be publishing report on falls prevention among Older People in the New Year.

We are working to create a fully integrated health and social care system in Greater Manchester that puts the needs of people and communities before those of individual organisations. We would agree that delays in people leaving hospital reflect a system that is not working as well as it should. To tackle this, we are integrated both the provision and commissioning of health and social care. In terms of provision, each of the 10 localities in Greater Manchester is developing its own Local Care Organisation (LCO). These are based on neighbourhoods of populations of around 30,000 to 50,000 with teams made up of a range of professions and groups (including the community and voluntary sector) providing joined up care and support to that neighbourhood. On the commissioning side, we are integrating our Clinical Commissioning Groups and local authorities in each area to create Single Commissioning Functions (SCFs). Through this work, we plan to break down some of the barriers that have prevented health and care being built around the needs of individuals.

Education/Prevention

➢ How can we prepare ourselves at an earlier age to prevent the problems of isolation and loneliness in older age?

➢ How can we re-build community spirit and caring neighbourhoods?

➢ How do we identify people needing support earlier and provide that support for them (preventative work)?

➢ What provisions can we make for the most vulnerable housebound?

The Campaign to End Loneliness (a network of organisations committed to helping people of all make connections that matter) has published a significant amount of helpful advice on this area. This includes:

• Learning how to cope with potential loneliness: Feeling lonely is not in itself a mental health problem, but the two are strongly linked. Having a mental health problem increases your chance of feeling lonely, and feeling lonely can have a negative impact on your mental health. Although most people need some kind of social contact to maintain good mental health, everyone has different social needs. You may be someone who is content with a few close friends, or you may need a large group of varied acquaintances to feel satisfied. Top tips in coping with feelings of loneliness include:

- Think about what is making you lonely

- Make new connections

- Open up

- Take it slow

- Be careful when comparing yourself to others

- Check how you are feeling

- Get some help

The GM PCCA (Person and Community Centred Approaches) programme is looking to understand the barriers and reduce social isolation and loneliness within communities.

Increasing social connection is also a key part of the work in many Local Care Organisations in GM. The LCOs also have a clear focus on early intervention and prevention – so that people are helped

and supported at a much earlier stage to retain their independence. Our Dementia United programme also has a clear focus on earlier diagnosis, and post-diagnostic support, so that people can be provided with the help they need as soon as possible.

We have developed a programme called `Living Well at Home' setting out our ambitions for a new model of independent living and support delivered through transformed adult social care and health"

Our ambition is to keep people as well and independent as possible, in their own homes and communities of choice, (we have combined these programmes as there should be no difference in the quality of care or values of staff, whether you are in a care home, supported living or housebound/ in need of additional support at home).

The key elements of the `Living Well at Home' programme are:

- Personalised care and support – how can we move away from a time and task system in favour of asking people what matters to them, and enhancing wellbeing through asset based approaches

- Quality – ensuring that everyone in GM can be assured of good quality harm free care and support, building on quality improvements and ensuring due recognition for excellent quality across the region

- System reform and High impact changes – how can we improve the whole system from hospital to home to offer support as and when it is required, and help prevent, reduce and delay admissions. Seeking to enhance wellbeing through joined up systems and genuine partnership working at a neighbourhood level

- Market shaping and development – working in partnership with independent sector providers to ensure genuine choice, and ensure a sustainable market which works in the interests of service users and carers and helps plan and evolve to meet future needs.