

Stakeholder briefing

Devolution evaluation

Date: March 25, 2024

Introduction

On 01 April 2016, the Greater Manchester Health and Social Care Partnership, the body made up of the 37 NHS organisations and councils overseeing devolution, took charge of the £6bn health and social care budget from central government.

Today, a unique study evaluating the changes in Greater Manchester from 2016 to 2020 compared to the rest of England, is published in the journal of Social Science & Medicine.

The study led by the University of Manchester builds on previous evidence by investigating how changes in the health system may have led to increases in life expectancy in Greater Manchester over this period, analysing 98 measures of performance.

It was funded by The Health Foundation and supported by the National Institute for Health and Care Research (NIHR) Applied Research Collaboration Greater Manchester (ARC-GM).

The potential of locally driven integration and collaboration is clear in this report. The Greater Manchester Integrated Care Partnership (GM ICP) and other integrated care systems across the country will learn from these findings.

Summary of the results

Overall the evaluation confirms that real progress was made in the following areas:

- Improvements in population health life expectancy, healthy life expectancy, and self-reported wellbeing all improved from April 2016 to the start of the COVID pandemic in February 2020.
 Those improvements in life expectancy were larger in localities with high levels of deprivation and low baseline outcomes
- At the same time, measures associated with social determinants of health improved, including reductions in alcohol related admissions, reductions in crime, higher levels of school attainment, and higher employment rates
- Cancer screening rates also increased towards the national average despite limited changes in public health spending and other measures of public health performance



 There was also evidence of improvements in adult social care effectiveness and satisfaction, despite decreases in expenditure and staff, and improvements in primary care access and patient centeredness

According to the study, there were 11.1% fewer alcohol related hospital admissions, 11.6% fewer first-time offenders, 14.4% fewer hospital admissions for violence, and 3.1% fewer half school days missed from 2016 to 2020.

Same day GP appointments increased by 1.8% and unplanned A&E re-attendances were 2.7% lower, in line with increases in the GP and hospital workforce. Cancer screening rates also improved.

Adult social care effectiveness and overall satisfaction also improved by 17.6%, despite decreases in expenditure and staff.

However, adult obesity increased by 7.6% and median wait times for A&E treatment worsened by 12.2%. There were also mixed impacts of devolution on outpatient, mental health, maternity, and dental services.

The positive changes, argue the researchers, are likely to have been a result of different aspects of the Greater Manchester devolution deals.

This study has important implications for integrated care systems however there are key differences between the setup of the GM Partnership and the organisation of Integrated Care Systems which are acknowledged.

The University of Manchester has issued a media release about the evaluation, which will be published <u>here</u>.

We will be sharing the results across the week on our social channels and will publish a blog by Warren Heppolette, one of the original innovators of health devolution in Greater Manchester and now Chief Officer for Strategy and Innovation for NHS GM

NHS GM has also developed a detailed presentation about the findings which is available upon request.

For more information contact: gmhscp.gm-stakeholders@nhs.net