Stockport Together is a partnership between NHS Stockport Clinical Commissioning Group, Pennine Care NHS Foundation Trust (mental health services), Stockport Metropolitan Borough Council, Stockport NHS Foundation Trust (Stepping Hill hospital and community health services) and Viaduct Health (a federation representing all Stockport GPs).

**Time/Date/Venue:** Tuesday 4th July 1-3pm at Bridgehall Community Centre, Siddington Avenue, Bridgehall, SK3 8NR

**Responsible Officer:** Louise Hayes – Head of communications and business support

**Details of Organiser:** Marley – Stockport Homes

**Type of Engagement**

| X | Open Meeting | □ | Focus Group | □ | 1:1 interview | □ | Postal survey | □ | Phone survey | □ | Email survey | □ | Online survey |

**Attendees**

Dr Vicci Owen Smith, Clinical director of public health
Tim Ryley, Director of strategy and performance
Louise Hayes, head of communications, CCG
Lucy Cunliffe, communications lead, Stockport Together

Approximately 13 group members

**Demographic Breakdown of attendees**

| Age: | 30+ |
| Disability: | Mixed |
| Gender: | Mixed |
| Race: | Mixed |
| Religion: | Not known |
| Sexual Orientation: | Not known |

**Comments and Proposals:**

Vicci Owen-Smith, representing Stockport Together, gave a brief overview of the work to date and the plans that are being proposed to transform health and social care in the borough. The ‘listening event’ was held at Bridgehall community centre. This was followed by an interactive session to gather public views, questions and feedback.

Questions were invited at the end of the session and these have been summarised below:

**This is about saving money and privatising the NHS. The BMA have said that Sustainability and Transformation plans should be abandoned.**

It is right that we have got to be more efficient and spend less. However we are not looking to cut services to the detriment of the population, indeed it is predicted that if this works it will be absolutely fantastic for local people.

All areas across the country are doing something similar, but with different focuses. We have the buy-in of each of the five partner organisations, and are doing what we feel is right for the area.

It is true that we are being partly driven because the government isn’t giving us more
money, but the partners would not let any of the plans pass if the quality was not there. If any plan would result in a reduced quality service for the people of Stockport, it would not be allowed to proceed.

We’re not hiding the fact that the pot needs to be bigger, but what we’re trying to do is identify the best way to use the money we have currently got – we need to make it go further. We’re not claiming this completely solves the problem, but it will result in a better way of working which meets the needs of our community. We are not taking away any of the services that people need.

Each STP is different – our focus is on improving, not removing. People are looking to Stockport nationally as a good example of working together.

**But you’re not legally joined up yet?**
Some elements are. For example the statutory Section 75 fund is something that was legally signed in April 2016, this has pooled the adult social care and health budgets together. On the providers-side, mental health, adult social care, GPs and the hospital are creating a formal alliance which will allow them to delegate power to each other.

**Has this been tested in other areas?**
Yes, Torbay, Cambridge, Tower Hamlets, Bristol and other areas around the UK and across the world. If we look at areas such as Sweden and Spain, they have a much more integrated and stronger health service. We’re trying to learn from both national and international evidence.

**My concern is that this becomes a major blunder like poll tax…**
We use analysis and data from independent organisations like the Kings Fund and Nuffield Health. We’re doing this because we know people across Stockport have worsening health, and we truly believe that bringing the health and social care organisations together must have benefits.

**Didn’t this fail in those areas you mentioned?**
Not completely. But where things didn’t work out, we have taken some real learning and have made steps to mitigate against the same things happening in Stockport. However we are quite unique in having the buy in from all partners, the agreement to share risks and workforce in the way that we do. In areas where this has not worked these things have not been present.

We believe that providing joined up care, focusing on early detection and prevention are always the right things to do, but it may be seen as a negative that it took something like this to recognise that we weren’t working particularly well together.

**Why are children not included in the plans?**
The number of Stockport residents aged 65 and over is set to rise from 55,700 to 61,000 by 2020. It is therefore estimated that the number of people living with a long-term condition will increase by 53% in the next decade, which will challenge the traditional way of managing disease and illness. This is the population group that we...
need to focus on to prepare us for the future health and social care services for younger people.

**Why is respite care being taken away from families?**

*It was agreed to take up this point individually with the attendees to fully understand the issues being raised.*

**Why are volunteers being used to replace staff?** I am a long-standing service user and volunteer based at Stepping Hill, having attended the drug and alcohol services. I set up my own service to meet the objectives of getting and staying well.

There is a massive focus on leaning on third sector organisations, and service users are being seen as a commodity and are being passed around the system because there is money associated with treating them.

Recently the biggest drug and alcohol service in Stockport was shut down, and as a result, the voluntary service that I run has had to provide interpreting services and foodbank vouchers for people as they’re not available elsewhere.

I believe that using voluntary services to bolster health and care is unsafe. *It was agreed to take up this point individually with the attendees to fully understand the issues being raised. It will be treated as a formal complaint.*

We know that enforced volunteering doesn’t seem like the right thing, but volunteering in general is very positive.

We are looking to support people whose lives have a bigger need for mental health and social care services. For example, we know that people with mental health needs are much more likely to die 15 years earlier than those without, and this is largely due to smoking. We need to provide wider social support for people rather than just focusing on individual health or care needs.

We are trying to join services up so that you’re treated as a person not as a diagnosis. We’re training front-line staff to offer support for a person’s needs.

Having services that work much better together will help when trying to support volunteers to do what they want to do: support members of the community. The risk comes when money is tight, and the temptation could be to lean too heavily on volunteers.

The economic business case seems to suggest that there is a lot of high risk in the plans. And in some instances we refer to Stockport Together as our borough’s Sustainability and Transformation Plan [STP], and in others we say very clearly that it is not an STP...

Stockport as a borough does not have an STP – it is one area of the Greater Manchester STP. In Stockport we’re able to focus much more on local issues.
The issue we face financially is that we know we don’t have enough money. We know what would happen if we did nothing, and have looked at the best way to overcome this. In some areas, the different health and care organisations have been fighting to get the biggest share of the budgets, but we’re unique in Stockport in that all our directors of finance at each of the partner organisations are working together to get the best outcomes for the people of Stockport.

We’re not trying to pretend that this is plane sailing, but we know that it is the right thing to do. We absolutely recognise the risk, but it does have to be weighed up against the risk of doing nothing.

Is Stockport an STP? It fits exactly with the government’s plans to underfund the NHS...
We all recognise that the NHS is underfunded. STPs are an imposition from government, but Stockport Together isn’t.

Stockport Together is the vehicle to get the different organisations to come together to work better to use the limited resources we have. This does mirror the STPs, but isn’t one.