



The Health Foundation and National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC) Greater Manchester

Devolving Health and Social Care: Learning from Greater Manchester

BRIEFING DOCUMENT

1. Background

In February 2015, Greater Manchester secured a 'ground-breaking' deal with the Treasury to take control of the £6 billion currently spent on health and social care for the 2.8 million people of Greater Manchester. The health and social care devolution agreement, or 'Memorandum of Understanding', established between the Greater Manchester Combined Authority (GMCA), Government, NHS England and Greater Manchester Clinical Commissioning Groups (CCGs), set out plans for devolving control over health and social care decision-making and funding to a newly established 'Greater Manchester Strategic Health and Social Care Partnership Board' and a 'Joint Commissioning Board', bringing together all the local authorities and CCGs of Greater Manchester.

As stated in the Greater Manchester Health and Social Care Devolution Briefing Pack (<u>GMCA, 2015</u>), health and social care devolution is seen as central to enabling Greater Manchester leaders 'to have a bigger impact, more quickly, on the health, wealth and wellbeing of Greater Manchester people, by being far freer to respond to what local people want; using their experience and expertise to help change the way we spend money'.

Being the first location in England to achieve health and social care devolution status, it is widely acknowledged that there is a wealth of important learning and knowledge to be gained from the 'Greater Manchester experience', not only for national policymakers and other areas interested in pursuing similar devolution arrangements, but, critically, for those actively involved in Greater Manchester devolution itself, with the opportunity for emerging learning to be fed into the process in 'real-time' in order to contribute to and optimise further developments.

This document provides a brief overview of the 'Devolving Health and Social Care: Learning from Greater Manchester' research evaluation funded by The Health Foundation and NIHR CLAHRC Greater Manchester. This evaluation research study has been co-designed with key local stakeholders, to contribute to the development and evaluation of Greater Manchester health and social care devolution, and support the sharing of learning, both regionally and nationally.

2. What is the focus of the research?

In collaboration with key stakeholders, it has been agreed that the research will explore the changes and impacts that come about through devolution, by mapping and measuring the connections between policy, organisational, and service change. Three broad research topics are outlined below:

a. Understanding policy development and the policy process: with devolution in its infancy, we will seek to build an in-depth understanding of how health and social care devolution policy is created and developed over time, and the contributions various





stakeholders - from statutory bodies and professions, to public, patients and voluntary groups - make to this process. From the outset, we will also endeavour to develop a clear understanding of the effects and impacts that devolution is intended and expected to deliver, and how it is believed devolution may bring about such changes. The metrics by which impact can be measured will also be explored, with this information being used to inform the research as it progresses.

- b. Describing and analysing governance, accountability and organisational forms: we will explore how existing governance, accountability and reporting arrangements are influenced and modified by health and social care devolution, and what this means in practice, particularly in relation to creating new ways of working or securing and managing change. We will also track changes to organisational forms and relationships across Greater Manchester over time, and seek (as far as possible) to understand the costs associated with making such changes, together with the longer-term costs associated with the new organisational structures and forms established.
- c. Mapping and modelling services and service users changes and improvements: we will identify a series of 'marker' health and social care devolution initiatives (e.g. some of those associated with the early implementation priorities for devolution) and seek to identify measures of quality and outcomes that are plausibly connected to these initiatives, and define and describe the mechanisms (including the influence of devolution) by which these initiatives are expected to bring about intended improvements. We will also explore the selected initiatives using methods such as scenario planning and rapid evidence synthesis, to support the development of measurement frameworks and the setting of objectives, providing a baseline for the longer-term evaluation of the types of improvements which come about through health and social care devolution.

Three cross-cutting themes will also be explored through the above research topics: subsidiarity, integration, and efficiency and effectiveness.

3. What will the research involve?

In view of the fluid and novel context associated with health and social care devolution, the design of the research is both emergent and relatively flexible, with our research activities being responsive to findings and events as they emerge and unfold. The research will be conducted over a two year period (from Autumn 2015), with the first six months being used as a scoping period, during which data will be collected to enable us to better understand and capture events as they unfold, and to help inform and refine the focus of our activities during the main phase of the research.

It is envisaged that we will use a range of methods to collect data in relation to our research topics (as defined in section two), including in-depth interviews with key stakeholders, observations (we envisage that a member of the research team will be collated within the Greater Manchester devolution team for up to four days a week), documentary review and exploration of the wider literature. Intended and actual impacts of health and social care devolution will also be explored using modelling and a range of quantitative data analysis methods.

4. Who is conducting the research?

The research study is jointly funded by The Health Foundation (http://www.health.org.uk/) and the NIHR CLAHRC Greater Manchester (http://clahrc-gm.nihr.ac.uk/), and brings





together a team of researchers with extensive experience in conducting rigorous and independent, yet collaborative, research of this kind.

The research team is principally based at the University of Manchester and is co-led by Professor Ruth McDonald (Professor of Health Science Research and Policy) and Professor Kieran Walshe (Professor of Health Policy and Management). The individuals involved have a broad range of expertise relevant to Greater Manchester devolution, including in local government, health and social care policy and research, organisational behaviour, health and social care economics, governance and accountability, and ethnography and organisational dynamics.

5. How will the learning be shared?

Over the lifetime of the research study, frequent opportunities (frequency to be agreed in collaboration with key stakeholders) will be provided for learning to be shared with Greater Manchester devolution leaders and other stakeholders, enabling them to hear about, and reflect on, findings as they emerge. This will help to validate the findings and inform the focus of ongoing research, but, critically, will also help to ensure that findings can be used in real-time to inform the work and ongoing development of the local devolution process and work programme. In addition, the research team will work with The Health Foundation to ensure that useful findings are communicated and shared with national policy makers.

A variety of different methods (e.g. reports, interactive meetings, press releases) will be used to share findings and reflections, with the timing, format, content and messages of such communications being tailored to meet the needs of different audiences. We will also publish findings in academic journals and disseminate them through appropriate conferences. This is important in terms of informing wider communities nationally and internationally, and ensuring that findings associated with the 'Greater Manchester experience' make an enduring and meaningful contribution to the evidence base.

6. How can I find out more?

To find out more about this research, please email clahrc@srft.nhs.uk or telephone +44 (0)161 275 0745. Further information is also available on the NIHR CLAHRC Greater Manchester website (http://clahrc-gm.nihr.ac.uk/).