
Report to CABINET**Extending the Changing Futures to support the Enhanced Live Well Model as prescribed by Greater Manchester Combined Authority (GMCA)**

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Reason for Decision

This decision seeks approval to extend the Changing Futures Team to support delivery of the Enhanced Live Well Model prescribed by the Greater Manchester Combined Authority (GMCA) following the end of the national Changing Futures Programme on 1 April 2026. The proposal will maintain continuity of support for residents with multiple and complex needs, increase Local Authority staffing capacity to support implementation, and enable the future development of VCFSE and outreach services as part of the wider Greater Manchester Live Well Neighbourhoods Model.

Executive Summary

The Greater Manchester Combined Authority (GMCA) has allocated £600,000 per year for three years to Oldham to implement the Enhanced Live Well Model. Approximately 50% of the funding (with flexibility) must be invested in voluntary, community, faith and social enterprise (VCFSE) partners, with the remainder supporting the Local Authority team, including a data and performance function.

This proposal seeks approval to use the Local Authority allocation (approximately £300,000 per year) to maintain the existing Changing Futures Team and create two new fixed-term posts for three years. The cost of maintaining the existing team and funding the two additional posts is estimated at £342,000 per year. An additional £8,000 per year is requested to cover associated costs, including travel, emergency accommodation, IT equipment and DBS checks.

The remaining funding will be allocated to VCFSE partners to recruit specialist recovery outreach workers, peer support workers and support co-production activity, working collaboratively through the Live Well partnership.

Recommendations

It is recommended that Cabinet approves:

- The Director of Adult Social Care (DASS) accepting the Enhanced Live Well Grant in full of the Greater Manchester Combined Authority (GMCA).
- The extension of the Changing Futures Team for a further three years.
- The creation of 2 additional Changing Futures staff to support the delivery of the Enhanced Live Well Model.
- The continued provision of support for people experiencing multiple disadvantage, including homelessness, substance misuse, mental ill health, offending, domestic abuse, sex work, child removal, physical health needs, learning disabilities, neurodivergence, and care leaver status.

The Changing Futures team will also continue supporting individuals affected by reductions in preventative services and survivors of child sexual exploitation (CSE) who meet the service criteria.

A key priority of the Enhanced Live Well Model is supporting people who disengage early from substance misuse treatment. GMCA data shows that, in 2024/25, around one-quarter of opiate users left treatment unsuccessfully, with 66% doing so within their first year and 53% within their first three months of treatment. This proposal will strengthen Oldham's ability to engage and retain this cohort, alongside other residents experiencing multiple disadvantage.

1 Background

- 1.1 The Changing Futures program was a £92 million pound initiative between the Government and the National Lottery Community Fund. It sought to test innovative approaches to improving the outcomes for people experiencing multiple disadvantages including homelessness, drug and/or alcohol problems, mental health problems, domestic abuse and contact with the criminal justice system.

The systemic shift from Changing Futures to the Greater Manchester Live Well commitment is a system change program on three levels. On an individual level it is a better coordinated approach to help stabilize and improve outcomes for adults experiencing multiple disadvantages through a team of dedicated frontline workers in line with the principles of an enhanced live well offer.

- 1.2 At a service level, the programme promotes greater integration and collaboration through stronger partnerships and shared learning. Previous delivery has demonstrated the importance of Adult Social Care as a key strategic and operational partner. The programme will strengthen these connections through team integration, embedded roles and local governance arrangements. The aim is also to move from a fragmented range of services to a more consistent and connected offer. This will include closer alignment with other multiple disadvantage programmes, including Inclusion Health Services and a GP-led Multiple Disadvantage Support Programme commissioned by GMCA across Prevention Demonstrator Sites.
- 1.3 At a system level, the programme seeks to identify and address barriers that prevent services from responding effectively to people experiencing multiple disadvantages. GMCA requires areas to demonstrate how a prevention-focused, integrated model can improve outcomes. This will be supported through enhanced data collection, a co-produced Outcomes Star, and system change monitoring to evidence impact on both individuals and services.

2 Current Position

- 2.1 The Changing Futures Team works alongside partner services, including the Rough Sleepers Accommodation Programme (RSAP) and Move-On Navigators, to support people with multiple and complex needs who are often unable to engage with traditional services due to high levels of risk, vulnerability and exploitation.
- 2.2 The team compliments statutory provision by supporting some of the most vulnerable residents who may not meet Care Act eligibility thresholds but remain at significant risk of harm. Through the Making Every Adult Matter (MEAM) Panel, the team coordinates support for people experiencing multiple disadvantage, complementing the Tiered Risk Assessment Management (TRAM) process and the Complex and High-Risk Panel (CaHRP). Referrals are received from a range of services, including for survivors of child sexual exploitation (CSE), enabling tailored, multi-agency support.
- 2.3 The Team Manager currently acts as the link between risk management forums, ensuring cases are escalated and de-escalated appropriately. It is proposed that the new Grade 9 Senior Practitioner will take responsibility for coordinating the MEAM Panel, providing the link between MEAM, TRAM and CaHRP, supporting the team with complex cases and supervision, and leading on data collection, analysis and reporting. The role will also support integrated working across the wider Live Well neighbourhood model.

2.4 Current data held by the service is described below;

Name of Changing Futures Programme:

Oldham

Since 01/04/2026

Total beneficiaries

How many people in total have you supported since the beginning of the project?

215

How many people are you currently supporting (at end of period)?

82

How many people have you supported in total, in the period?

90

How many people have left or disengaged from the programme in the period?

8

Disadvantages

Of those that you have supported in the period, how many needed support related to the following:

Domestic abuse

52

Contact with the criminal justice system

47

Homelessness or rough sleeping

67

Mental health

83

Drug and alcohol problems

80

Of those that you have supported in the last quarter, how many needed support with 3 or more of the 5 elements of multiple disadvantage?

75

Leaving or disengaging from the programme

How many beneficiaries have left or disengaged for the following reason:

Support no longer required

3

Receiving appropriate support outside of the programme

1

Left the area

0

Cannot be reached/no response to engagement efforts

2

Cannot be reached due to contact with criminal justice system, hospitalisation etc.

1

Consent to be part of the programme withdrawn

0

Deceased

0

Other

1

Of those that have left, how many were on the programme for the following time:

0 to 3 months

0

3 months to 6 months

1

6 months to 9 months

3

9 months to 12 months

1

more than 12 months

3

3 Cost Benefit Analysis

- 3.1 Over a six-month period, the service has supported 40 residents. Based on an average of three interactions per resident, the estimated cost to the wider system would have been £446,400. With Changing Futures intervention and coordinated support, the actual cost was £117,500, resulting in an estimated cost avoidance of £328,900. This analysis is based on partner referral data and demonstrates the value of early intervention, coordinated multi-agency support, and a prevention-focused approach.

4 Options/Alternatives

4.1 Option 1: (Preferred option)

Approve the extension of the Changing Futures Team and create additional roles within the team to maximise the benefits of the service. This will strengthen delivery

of the Enhanced Live Well Model and support additional VCFSE outreach activity aligned to the Live Well Neighbourhoods Model.

Option 2: Discontinue and relaunch the service under a new model. However, this would disrupt the existing relationships, referral pathways and support arrangements. Grant conditions would still require funding to be invested in Local Authority staffing as well as VCFSE provision, limiting the benefits of this option.

5 Financial Implications

- 5.1 The preferred option is Option 1, which supports acceptance of the Enhanced Live Well Grant and continuation of the service model developed through the Changing Futures Programme. Approval is sought to accept the grant for a further three-year period, with funding of £600,000 per annum allocated to the Council.
- 5.2 The current team consists of 1.0 FTE Grade 6 and 4.0 FTE Grade 5 posts at an annual cost of £228,000, including on costs. To strengthen delivery of the Enhanced Live Well Model, it is proposed to establish 1.0 FTE Grade 9 Senior Practitioner and 1.0 FTE Grade 5 Support Worker posts at an additional annual cost of £114,000. The total staffing cost would therefore be £342,000 per annum.
- 5.3 A further £8,000 per annum is requested to cover non-pay costs, including travel and mileage, employee expenses, IT equipment, DBS checks, and office supplies. The remaining £250,000 per annum will be allocated to VCFSE partners to support the recruitment of specialist recovery outreach workers, lived-experience peer support workers, and co-production activity. This will be developed collaboratively with commissioning colleagues through the Live Well Partnership.
- 5.4 The proposed annual budget is set out below and will be replicated in 2027/28 and 2028/29:

Purpose	Budget
Staffing Costs	£342,000
Non-Pay Expenditure	£8,000
VCFSE Partner Provision	£250,000
Total Cost	£600,000
Funding Source	Budget
Enhanced Live Well Grant	£600,000

- 5.5 The grant agreement does not specify whether any unspent funding must be returned to GMCA or may be carried forward into future financial years.

Danny Jackson, Finance Manager (ASC) (25th June 2026)

6 Legal Implications

- 6.1 The Changing Futures Service provides support to a wide group of people experiencing multiple disadvantages including Homelessness, drug and/or alcohol

problems, mental health problems, domestic abuse and contact with the criminal justice system. The support provided through this service has shown improvements for people in physical health, mental health and ability to cope without misusing drugs or alcohol. The service provides support to vulnerable individuals and without this service, pressure would be placed on existing statutory services which have a duty to provide, and which have existing pressures.

Salma Yasmeen - ASC Solicitor (14th July 2026)

7 HR Implications

7.1 The proposal has a number of workforce implications that require consideration:

The proposal includes the creation of one Grade 9 Senior Practitioner post and one Grade 5 Support Worker post, both of which will be funded through external grant funding and established on fixed-term contracts for a period of three years. The service is to be mindful that when ending a fixed term contract with an employee who has over 2 years' service, a redundancy payment may be required if the employee does not find suitable alternative employment through redeployment.

Existing employees within the Changing Futures team will continue in post through the extension of the funding arrangement. Appropriate contractual arrangements should be reviewed to ensure that fixed-term employment status and funding arrangements are clearly reflected via the workforce change process.

The Grade 9 Senior Practitioner role represents a new management and supervisory position with responsibility for the day-to-day coordination of the team, staff supervision, performance management, complex case oversight, and data analysis requirements. A job evaluation should be completed (or confirmed if already undertaken) to ensure the proposed grading aligns with the responsibilities of the role.

Recruitment to the newly established posts will need to be undertaken in accordance with the Council's Recruitment and Selection Policy, including consideration of any redeployment obligations before external advertisement.

The continuation of externally funded posts presents a future workforce risk should funding cease after the three-year funding period. The service should therefore ensure employees are aware of the fixed-term nature of the funding and that workforce planning arrangements are in place to manage any potential end-of-funding implications.

The proposal supports the Council's strategic workforce objectives by sustaining specialist capacity within a service that supports vulnerable residents, promotes partnership working and delivers preventative interventions across multiple agencies.

No significant employee relations issues have been identified arising from this proposal. However, ongoing managerial support, supervision and well-being arrangements should continue to be in place given the complex and often challenging nature of the client group supported by the service.

Overall, from an HR perspective, the proposal is supported subject to appropriate recruitment processes, job evaluation arrangements, funding-based contractual provisions, and ongoing workforce planning being implemented.

Natasha Needham – Workforce Business Partner – 25.06.2026

8. Equality Impact, including implications for Children and Young People

8.1 N/A

9 Key Decision

9.1 Yes

10 Key Decision Reference

10.1 HSC-14-27

11 Background Papers

11.1 N/A

12 Appendices

12.1 Appendix 1 – Getting more support – An enhanced Live Well offer for people facing multiple disadvantage

12.2 Appendix 2 - Directly supporting adults experiencing Multiple Disadvantage - Policy & Strategic Background