



Getting more support

An enhanced **Live Well** offer for people facing multiple disadvantage



LIVE WELL
DOING THINGS DIFFERENTLY WITH
GREATER MANCHESTER'S COMMUNITIES



Introduction

An enhanced Live Well offer recognises that many people need additional, intensive support to live well and to thrive within a universal, community-led and cross-sector system of support.

These are people who often face multiple, intersecting challenges and struggle to navigate support as it is currently organised. This can lead to poor outcomes and repeated signposting. People experiencing multiple disadvantage often live with several connected issues at the same time. Many are known to different services but without one coordinated plan, and struggle to engage with systems not designed around their lives.

As a result, they are passed between services, face rigid eligibility rules and receive crisis-driven care instead of early help. This leads to poorer outcomes, repeated trauma and rising pressures across A&E, housing, mental health, social care and criminal justice. Staff often feel stretched holding risk without the right structures, and the system carries high costs.

In Greater Manchester, this affects a significant cohort. GM analysis suggests at least 120,000 people are experiencing some form of multiple disadvantage, many with long-term or recurrent needs. A key priority group are people facing combinations of homelessness, substance misuse, mental health issues, domestic abuse and criminal justice contact.

Without an integrated response, people can become stuck in cycles of crisis, out-of-area placements and delayed discharge, increasing pressure on acute services and driving avoidable costs.

Recognising this, Greater Manchester has committed – through GM Live Well and wider public service reform – to improving support for people with co-occurring housing, mental health and substance use needs. This is at the heart of the enhanced Live Well offer.

Enhanced Live Well will build directly on the wider ambition of Live Well, Greater Manchester's commitment to ensuring great everyday support is available in every neighbourhood. As a key mayoral manifesto commitment from Andy Burnham, GM Live Well reimagines health, social and employment support from the ground up, led by communities and enabled by a more connected and preventative system focused on reducing inequalities. It is built on Live Well Centres, Spaces, Offers and an Optimum Neighbourhood Model, supported by a thriving and well-resourced VCFSE sector, a skilled Live Well workforce and a shared culture of prevention.

How the enhanced Live Well offer has developed

This document sets out the emerging enhanced Live Well offer, a shared framework for supporting people experiencing multiple disadvantage.

The approach draws on learning from programmes including Supporting Families, the Rough Sleeper Initiative, the Housing First programme, Working Well, Focused Care, Co-occurring Conditions, and the Changing Futures programme. These programmes have played an important role in developing more consistent, joined-up practice across organisations and localities.

The offer has also been shaped through extensive co-design with programme teams, cross-sector partners, the Unseen Voices Panel (including people with lived experience of multiple disadvantage) and a wide range of community voices and practitioners. This ensures the framework is rooted in lived experience and reflects what matters most to the people directly involved.



This document aims to support everyone working with people facing multiple disadvantage, from frontline practitioners to those shaping local approaches.

It is intended to help localities develop their own approach to Enhanced Live Well, building consistent, relationship-based support for those who need it most while connecting into the wider GM Live Well model.

How Enhanced Live Well connects to the Live Well Hallmarks

Enhanced Live Well will be one of the core Live Well Offers within GM Live Well. It is designed to sit alongside Live Well Centres, Live Well Spaces, with the wider Live Well Neighbourhood approach, providing intensive, relationship-based support for people facing the highest barriers.

While Centres, Spaces and universal Offers provide accessible, everyday support, Enhanced Live Well brings an additional layer of skilled, multidisciplinary help for people experiencing multiple disadvantage. It connects directly into each of the Live Well hallmarks, strengthening the neighbourhood model, deepening prevention, and ensuring no one falls between services.



Three features of the enhanced Live Well approach

People's lives don't fit into single services or neat pathways.

That is why the enhanced Live Well model will bring together three features that work as one approach:

1

Enhanced Live Well Teams

A core team of key workers supported by a wider multidisciplinary group who operate as one team. They provide joined-up, flexible support that responds to all parts of someone's life. Key workers bring the time, skill and capacity to build deep, trusting relationships and stay with people through complexity — often going beyond traditional 1-1 support.

2

Person-centred practice

Support shaped around each person's needs, strengths and goals. Built on trust, trauma-responsive, psychologically-informed and anti-racist practice, and the leadership of people with lived experience.

3

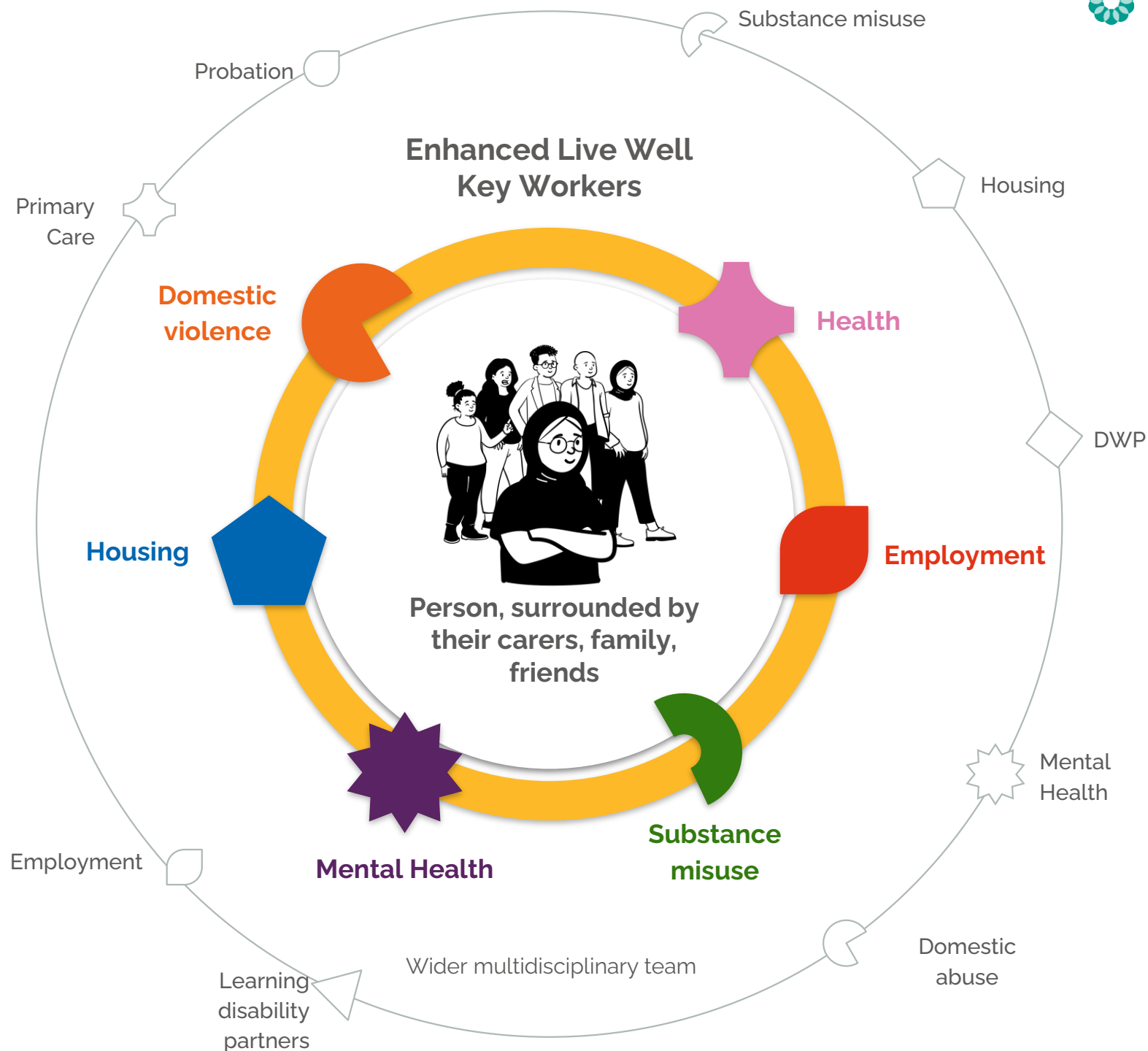
Part of an integrated neighbourhood approach

Teams working within a wider neighbourhood system so support is connected, preventative and rooted in community life.

The Enhanced Live Well offer

„As Enhanced Live Well key workers we will stay alongside you, doing our best to provide first-hand support across different specialist areas of expertise.

Our strong links with a wider multidisciplinary team mean that we can quickly ‘pull in’ support from partners without just referring you on.”





1

Enhanced Live Well Teams

Enhanced Live Well Teams bring together a core team of key workers with a wider group of multidisciplinary partners from across the system. Together they form a joined-up team that provides co-ordinated support across all parts of someone's life. The team offers consistent, long-term, preventative support and helps people facing multiple disadvantage

A core team of Enhanced Live Well Key Workers

A dedicated team of skilled key workers employed by the local authority and the VCSE sector. They bring a mix of skills across health, housing, education, employment, lived experience and peer support, allowing them to respond to different yet connected needs. The team has low caseloads, giving workers the time to build consistent, trusted relationships. The team reflects the communities they support and provides long-term, preventative, person-centred support. They act as navigators, trusted companions and problem-solvers, using their judgement to work flexibly and alongside people.

A wider multidisciplinary team (MDT) offering connected support

Around the core team sits a permanent multidisciplinary team made up of partners across the system including housing, mental health, substance use, primary care, probation, DWP, domestic abuse, employment, learning disability support and more. The MDT meets regularly for case reviews and joint planning, sharing information and agreeing clear actions together. They have strong relationships and work as one team to offer preventative, joined-up support. The MDT can pull in specialist services as needed, using collaborative referrals. They respond early, bring in the right partners at the right time and provide co-ordinated support.

A shared way of working

Enhanced Live Well Teams work to a shared purpose, values and principles, backed by collective governance that brings partners together around one approach. The team is trusted to make joint decisions, share accountability and hold risk together. Shared policies, procedures and data-sharing agreements make support consistent so people aren't passed from service to service. Staff work as one joined-up team across statutory and voluntary sectors, offering seamless transitions and shared ownership of each person's journey. Training, reflective practice and a culture of learning support the workforce, and partners work together to identify where services themselves create barriers and take action to remove them.



Key components

A core team of key workers

employed by both the local authority, primary care and/or VCSE sector, with skills across housing, health, substance use, employment and peer support

Co-location wherever possible,

with regular opportunities to build strong relationships, including team-building days and shared time together

A diverse team that reflects the community

supported by inclusive recruitment and lived experience representation

Established systems for information sharing,

data-sharing agreements and joint support planning

Low caseloads

to enable intensive, relationship-based working

Clear shared policies,

procedures and partnership agreements that set out one approach

A permanent multidisciplinary team involving housing, mental health, substance use, primary care, probation, DWP, domestic abuse, employment and learning disability partners

A shared process for referral review

and decision-making, where partners actively connect and collaborate to build relationships across the system—not just pass people on

Regular MDT case reviews,

at least fortnightly, with shared planning and clear agreed actions

Governance rooted in a single shared approach,

held by the VCSE or LA depending on employment arrangements, and strengthened by lived experience leadership. Teams are empowered to take, share and hold risk

Tools to measure and track person-centred outcomes,

address barriers and improve support pathways

Strong relationships

between statutory and voluntary services, with proactive effort to maintain respect and trust

2

Person centered practice

Person-centred practice sits at the heart of the enhanced Live Well Offer. Support is built around what matters to the person. Workers take time to build trust, work flexibly and meet people where they are. The approach is trauma-responsive, gender-responsive and anti-racist, recognising the realities shaped by people's histories, cultures and identities. Lived experience is embedded in design and delivery, helping the team work in ways that feel human, empowering and honest.



Person-centred and flexible approaches

Enhanced Live Well Teams use person-led, strengths-based approaches that give people space to decide what they want to focus on. Workers start where people are, often with simple, practical support that builds trust. They take small steps at the person's pace, without pushing system priorities or a set timetable. Support is flexible, relational and responsive — whether that means going for a chat, helping with a PIP form or seizing the moment when someone feels ready to make a change. Workers offer proactive and assertive outreach, including follow-up when people disengage, meet people in places they feel comfortable and work at a pace that suits them. Support recognises that progress is not linear, people may step back, disengage or take a break without questions asked, and workers remain consistently present so there is always a stable relationship to return to. They offer persistent support where the door doesn't close and workers have the permission and autonomy to work beyond traditional role boundaries.

Trauma-responsive, gender-specific and anti-racist practice

Support is shaped by an understanding of trauma and how it affects behaviour, trust and engagement. Workers are curious, transparent and non-judgemental, recognising that distress can show up in different ways. The approach is gender-specific where needed, especially for women whose experiences of violence, abuse, child removal or criminalisation shape how safe they feel with services. Teams work in anti-racist ways, recognising how discrimination, racism and migration experiences shape people's lives and their relationship with services. Where appropriate, teams create specific spaces for different groups to feel understood and supported - for example those with experience of homelessness or rough sleeping. Workers are trained on an ongoing basis, reflective and confident in taking a harm reduction approach.

Lived experience shapes design, delivery and evaluation

Lived experience runs through the enhanced Live Well model. People with lived experience are part of the workforce, design, delivery and decision-making. Their insight accelerates trust and strengthens problem-solving from a real-life perspective. Workers with lived experience are well supported, valued and fairly paid. Enhanced Live Well also aims to champion progression and development pathways, ensuring people with lived experience can grow into senior and leadership roles so the workforce reflects the communities it serves at every level. There are multiple ways for people to contribute through mentoring, co-production, lived experience forums, service improvement and recruitment. The approach values both lived and learned experience, with power shared and decisions made transparently. Lived experience also plays a vital role in holding the wider system to account — highlighting where support isn't working and driving improvements. Barriers are removed so people can stay connected to support for as long as they need.



Key components

Person-led support

where workers start with what matters to the person and build plans around their needs, priorities and goals. Support delivered in person-friendly venues and familiar community spaces.

Support is not time limited.

Workers and the person agree together what a natural and appropriate end to their support looks like, with light-touch check-ins as needed and a clear understanding that the door remains open and that people can return if circumstances change.

Proactive outreach delivered in the community,

including in supported accommodation, street-based settings and targeted work with A&E, probation and VCSE partners.

Workers trusted with autonomy

to provide needs-led support, with space to build trust, no time limits and acceptance that progress is non-linear.

Trauma-responsive practice built into the model,

with workers trained to recognise how trauma affects behaviour, trust and engagement, and to create psychologically safe relationships and environments where people feel respected, believed and in control.

Gender-specific support available,

including access to women-only workers for those who need it, support for men, and support that is inclusive of trans and non-binary people, recognising their specific experiences and safety needs.

Workers trained to respond to different forms of inequality, including racism, domestic and sexual abuse, LGBTQ+ identities and structural barriers, with training that is ongoing and reflective.

Transparent and shared systems for information sharing

and support planning, with people involved in decisions about their information, including how it is captured, shared and communicated in formats that meet their preferences.

Lived experience roles built into the workforce, with fair pay and opportunities to contribute through mentoring, service improvement, recruitment and decision making. They are supported through training and appropriate supervision.

Clear policies and procedures

that enable person-centred and trauma-responsive working, written clearly and accessibly, outlining what must/should/could happen and how people can challenge or escalate concerns.

3

Part of an integrated neighbourhood approach

Enhanced Live Well Teams are embedded within Live Well Neighbourhoods. They work within a connected system of statutory services, the VCFSE sector, primary care, and specialist support including drug and alcohol services, housing, adult social care, community safety, probation, GMP, DWP, domestic abuse services and more.

Working in this shared neighbourhood footprint — whilst recognising that people move across neighbourhoods and interact with multiple services — allows teams to deepen preventative and collaborative work, respond earlier and 'pull in' support at critical moments. They link into existing neighbourhood partnership structures and work closely with Live Well Centres and Spaces, creating smooth routes into the universal offer.



Working as part of one neighbourhood system

Enhanced Live Well Teams form one part of a wider neighbourhood support system, working alongside statutory services, VCFSE organisations, community groups and the Live Well universal offer. They link into neighbourhood partnership structures, working alongside primary care networks, housing partners, community safety teams and the wider Live Well workforce. People are connected straight into the right support, including Live Well centers and Spaces. Workers can quickly pull in housing, mental health, drug and alcohol, primary care and community support without multiple referrals or assessments. The approach values and invests in VCFSE organisations and community groups, recognising their crucial role in neighbourhood-level prevention and connection.

Enhanced Live Well Teams also strengthen the wider system: their specialist insight and practice can be drawn on by other neighbourhood workers — offering guidance, problem-solving and support in huddles or partnership forums, even where they are not taking someone onto their caseload. This makes the enhanced Live Well offer an asset to the whole neighbourhood, not only to the people they work with directly.

Shared approaches and resources enable integration

Neighbourhood approaches take account of how people move across boundaries, where they spend time and how their lives intersect with multiple services. A set of neighbourhood-level enablers makes this integrated working possible. Shared workforce models, shared budgets and information-sharing arrangements allow teams to respond collectively rather than in silos. Joint training across sectors, including trauma-responsive and anti-racist practice, strengthens confidence, consistency and connection. Pooled resources, integrated commissioning and aligned urgent and crisis pathways help prevent repeat A&E use and ensure follow-up care happens in the community.

Influencing wider system change

Enhanced Live Well Teams play a key role in shaping and improving the wider Live Well Neighbourhood approach. Real-time learning from complex casework helps identify barriers in policy, practice, funding and commissioning, and supports partners to make changes that improve outcomes. Teams contribute to neighbourhood and place-based discussions, and feed into neighbourhood learning loops, helping to strengthen pathways, improve accessibility and champion lived experience. This influence extends across sectors, supporting a shift towards prevention, inclusion and flexible, person-led practice across the whole system.



Key components

Enhanced Live Well Teams contribute into place-based governance that provides space for more formal integrated governance and more informal participatory decision-making, shared learning and cross-boundary leadership.

Clear local crisis and urgent care pathways that connect A&E, mental health, primary care and neighbourhood teams.

Seamless links to Live Well Centres and Spaces, including warm handovers, proactive accompaniment and tailored transition support to ensure people can genuinely access and sustain engagement with the universal Live Well offer. Staff build confidence and trust so that universal services feel safe and accessible.

Strong relationships with primary care networks, housing, adult social care, community safety, drug and alcohol services and other local partners.

Shared budgets, pooled resources and integrated commissioning to enable joined-up responses and reduce duplication.

Investment in VCFSE organisations and community groups as core neighbourhood partners, including lived experience-led services.

Information-sharing arrangements and joint systems that allow workers to plan and act together, including building a shared understanding of how many people are experiencing multiple disadvantage.

Staff working together to identify where their own services are creating barriers and take action to remove them.

Joint training across sectors, including trauma-responsive, strengths-based and anti-racist practice, to build a consistent approach.

Regular and meaningful opportunities for people to share their experiences and shape support, recognising that the realities of multiple disadvantage shift over time.

Proactive outreach

Team members go to people where they are — e.g. in Live Well Centres, housing, health settings, A&E or community venues.

Introduction

People can be introduced by another service or person, or seek support themselves through a community venue or online.

Being welcomed

Assessment and planning

The key worker and the person take time to build trust and work together to develop a strengths-based goals plan. Any urgent risks are addressed straight away with immediate wrap-around support.

MDT review

The person is allocated to a key worker during the MDT. If people are better supported by another offer, they are introduced to another team.

Exploring support

Practical, hands-on support

Staying safe

Peer support

Improving physical health

Housing and stability

Strengthening wellbeing and resilience

Healthy relationships and social connection

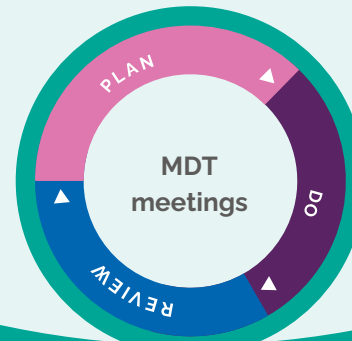
Creative and meaningful activities

Building positive futures

Support in moments of crisis

Providing persistent and consistent support

The team provides flexible, person-centred, strengths-based support that follows people's changing needs and goals. Progress is reviewed in MDT meetings, and the key worker may change as the person's needs evolve. Support accepts that progress isn't linear: people may step back or take a break, and workers remain a consistent, trusted presence throughout.



Working towards a natural endpoint together

Agreeing an end point together, while making it clear the door is always open. Offering light follow-up to check in on how things are going.

Supporting others

Encouraging people to support others if they want to — through mentoring, peer support, co-production, volunteering or lived experience roles.

Celebrating and reflecting

Celebrating achievements and progress, and reflecting together on what could have been better, with any actions picked up straight away.

Moving Forwards





Practical, hands-on support

Addressing basic needs such as housing, health, money, benefits, food, digital access, independent living and occupational therapy. Providing everyday, human-level help including attending appointments together, filling out forms, paperwork, budgeting and communication support.



Peer support

Opportunities to connect with others and give and receive support through peer groups, lived experience forums, Live Well Spaces and local community groups.



Improving physical health

Support to manage physical health conditions, including help with GP care, health appointments, medication reviews, managing long-term conditions, and accessing drug and alcohol support or harm reduction.



Creative and meaningful activities

Supporting people to find new things that bring enjoyment, purpose and routine — creative groups, physical activity, community clubs, walking groups, cooking, gardening or music. This includes helping people build confidence, explore what interests them, and develop new skills that may lead to volunteering or employment opportunities where appropriate.



Support in moments of crisis

Help to manage crises early and respond quickly. This includes immediate practical help, safety planning, harm reduction, urgent mental or physical health support, and rapid access to the right partners.



Staying safe

Support to stay safe at home and in the community, including safety planning, harm reduction, managing risks of exploitation, domestic abuse or violence, and navigating justice, probation or court processes when needed.



Housing and stability

Support to find and keep safe accommodation, resolve housing issues and prevent homelessness. This may include help with applications, temporary accommodation, tenancy sustainment, landlord conversations, supported housing and managing the risk of eviction.



Strengthening wellbeing and resilience

Support to understand and manage mental health, build coping strategies and prevent crises. This may include psychological or trauma-responsive support, therapy, emotional regulation, advocacy and help with medication management.



Healthy relationships and social connection

Support to build or rebuild safe, healthy relationships, strengthen social networks and feel part of a community. This may include befriending, coaching, carers' support or help staying safe in relationships.



Building positive futures

Exploring strengths, interests and hopes for the future. This can involve trying new activities, reconnecting with passions, accessing education, training, volunteering or work when the person is ready. It may also include engaging in creative co-production processes to shape and improve the system.



Illustrative personas

The following illustrative personas bring the enhanced Live Well offer to life.

While not real individuals, they are grounded in the real experiences, insights and evidence shared through the existing multiple disadvantage support programmes. They reflect the kinds of journeys people take — and the impact that consistent, relationship-based support can make.

Maria



Maria, 43, lives in Oldham after years of unstable housing, domestic abuse and long-term alcohol use.

She had repeatedly been “bounced” between services because her needs didn’t neatly fit thresholds. Like many women experiencing multiple disadvantage, she felt judged and was reluctant to work with male workers, shaped by trauma and child removal in the past.

Through the enhanced Live Well offer, Maria was introduced to a women-only key worker with lived experience. Their early meetings involved simple, relationship-building activities — a brew, a chat, a walk — giving Maria space to decide what she wanted to focus on rather than being pushed towards a service-led plan.

When Maria finally felt ready to reduce her drinking, the team acted immediately. Her key worker coordinated an MDT meeting, secured an appointment with drug and alcohol services, and helped her move into safer temporary accommodation. Acting at the right moment was critical, preventing a return to crisis.

‘Having “one trusted person who doesn’t give up” allowed her to believe change was possible.’

Today, Maria is sustaining her tenancy, attending women’s peer support, and has rebuilt contact with her daughter. She says having “one trusted person who doesn’t give up” allowed her to believe change was possible.



Darren



Darren, 32, has lived in Wigan all his life. He experienced childhood trauma, poor mental health, and periods of rough sleeping.

Known to several services, he struggled to engage and often appeared “non-compliant” — a common challenge for people whose trauma shapes how they trust and connect with professionals.

Enhanced Live Well allocated Darren a key worker with a small caseload who had time to build a slow, steady relationship. Much of their early work involved everyday connection — chatting over Xbox and a brew. This informal support eventually led Darren to disclose a major trauma he had never spoken about before, something that only surfaced because the relationship felt safe.

When Darren later faced a housing crisis, the team coordinated rapid MDT support. Housing colleagues, primary care and substance use workers came together, preventing eviction and securing a harm reduction plan tailored to his needs.

‘Darren disclosed a major trauma he had never spoken about before, something that only surfaced because the relationship felt safe.’

Although Darren’s progress hasn’t been linear, he remains stably housed and now initiates conversations about his goals — a shift his worker attributes to persistence, “no such thing as not engaging,” and a genuinely person-led approach.

Aamina



Aamina, 28, lives in East Manchester. After years of sofa surfing, anxiety, and problematic drug use, she frequently attended A&E in crisis.

Her GP, concerned about repeated unplanned appointments and the lack of coordinated support around her, pulled in the right support, tapping into the local enhanced Live Well offer.

Through the enhanced Live Well offer, Aamina was welcomed via a warm handover at her GP practice and connected immediately to a key worker based within the practice. They began with what mattered to her: feeling safe and gaining stability. Her worker supported her to engage consistently with primary care, complete benefits forms, and attend appointments together — practical, everyday help that built trust.

A coordinated MDT wrapped support around her. Housing colleagues helped her move into supported accommodation; mental health partners offered input when she felt ready; and a peer mentor from a lived experience organisation encouraged her to join creative and social groups that helped reduce isolation.

'Enhanced Live Well began with what mattered to her: feeling safe and getting some stability.'

A year on, Aamina has not presented at A&E for six months, is managing her anxiety with support, and volunteers weekly at a women's community space. She describes Enhanced Live Well as "the first time my GP, my key worker and everyone else felt like one team."



Learning in real time

Enhanced Live Well is an emergent, evolving offer — shaped through years of learning across programmes such as Housing First, Supporting Families, Working Well, Focused Care and Changing Futures. Together, these programmes have built a rich foundation of practice and insight across Greater Manchester, each contributing valuable approaches to supporting people experiencing multiple disadvantage.

Enhanced Live Well builds on this collective strength, bringing greater alignment and coherence so that people can expect a consistent, joined-up, preventative offer wherever they live. By drawing on what works, grounding the model in lived experience, and working collaboratively across sectors and localities, we can shape a shared framework that grows stronger through real-time learning, co-design and iteration across GM.

The following resources provide further guidance, evidence and inspiration. They show how the principles of Enhanced Live Well are already being put into practice — and how, together, we can keep growing a system that is truly community-led and system-enabled:

- [Read the Live Well Hallmarks Document](#)
- [Learn more about Unseen Voices Panel \(Lived Experience Forum\)](#)
- [Find out more about the Housing First Programme](#)
- [More details about Changing Futures](#)
- [Dual Diagnosis | Greater Manchester Mental Health NHS FT](#)