# **Health Scrutiny Committee**

# Minutes of the meeting held on 26 May 2016

### Present:

Councillor Craig – In the Chair

Curley, Hitchen, T.Judge, Mary Monaghan, E.Newman, O'Neil, Paul, Stone, Webb, Wills and Wilson

Nick Gomm, Head of Corporate Services, North, Central and South Manchester Clinical Commissioning Groups

Joanne Newton, Chief Finance Officer, North, Central and South Manchester Clinical Commissioning Groups

Debbie Thomas, Service Manager, Central Manchester Foundation Trust Hospital Julie Gallagher, Clinical Nurse Manager, Central Manchester Foundation Trust Hospital

Dr Hilary Natusch, Consultant Sexual & Reproductive Health, Central Manchester Foundation Trust Hospital

Dr Chitra Babu, Consultant & Clinical Lead Genitourinary Medicine & HIV, Central Manchester Foundation Trust Hospital

Dr Ashish Sukthankar, Consultant in Genitourinary Medicine & Associate Clinical Head of Division (Specialist Medical Services), Central Manchester Foundation Trust Hospital

**Apologies:** Councillor Watson

### HSC/16/20 Minutes

## **Decisions**

- 1. To approve as a correct record the minutes of the meeting held on 25 February 2016.
- 2. To note the minutes of the meeting held on 22 March 2016 of the Trafford Borough Council and Manchester City Council Joint Health Scrutiny Committee A New Health Deal for Trafford.

# HSC/16/21 Draft Terms of Reference and Work Programme for the Home Care Task and Finish Group

The Committee considered the report of the Governance and Scrutiny Support Unit that provided members with the proposed terms of reference and work programme for the Home Care Task and Finish group. Members were invited to comment upon the proposals and agree the membership.

## **Decisions**

- 1. To agree the Draft Terms of Reference and Work Programme for the Home Care Task and Finish Group.
- 2. To agree the membership of the Home Care Task and Finish Group as Councillors Craig, Watson and Wilson.

## HSC/16/22 Quality Accounts 2015 / 2016

The Committee considered the report of the Governance and Scrutiny Support Unit which provided members with the Committee's formal responses to the Quality Accounts submitted by Central Manchester NHS Foundation Trust, the University Hospitals of South Manchester Foundation Trust and Manchester Mental Health and Social Care Trust.

## **Decision**

To note the responses to the Quality Accounts submitted by Central Manchester NHS Foundation Trust, the University Hospitals of South Manchester Foundation Trust and Manchester Mental Health and Social Care Trust.

# HSC/16/23 Manchester Clinical Commissioning Groups' finances

The Committee considered the report of the Chief Finance Officer, North, Central and South Manchester Clinical Commissioning Groups (CCG). The report provided the Committee with an overview of Clinical Commissioning Groups finances and detailed the income of each CCG for 2016/17; how the income is being spent during this financial year; allocations for the years 2016/17 to 2017/20 and the development of a locality financial plan. The Committee welcomed Joanne Newton, Chief Finance Officer, North, Central and South Manchester Clinical Commissioning Groups who introduced the report.

Ms Newton explained to the Committee that a national funding formula is applied to determine each CCGs funding allocation. She said that new national policy requires that by the end of the financial year all CCGs are to be within 5% of their funding allocation. She said that to achieve this 5% target funding had been released.

In response to a members question she said that this funding formula is reviewed approximately every 3 years to take into consideration the different weightings that are applied to the formula. She said that any changes in the funding allocation following this review of the formula are introduced over a period of time.

Ms Newton further explained that in 2016/17 CCGs had taken on responsibility for the co-commissioning of Primary Care which had previously been managed by NHS England. Ms Newton said the money is spent on a range of commissioned services with approximately 50% of funding spent on acute hospital services. She said that some specialist services, such as The Chrisite NHS Foundation Trust is funded separately by NHS England.

In response to a members question she said that CCGs have had to make efficiency savings due to the funding shortfall. She said that this had been achieved through genuine efficiency savings, such as reviewing the number of unnecessary follow up patient appointments and reducing expensive out of area care placements for mental health patients. She said that as well as saving money, this is much better for patients and their families. In response to a members question she said that when any decision to implement an investment or a disinvestment an Impact Assessment is undertaken and reiterated that the savings achieved had been delivered in line with NICE guidance.

Ms Newton explained developments in the arrangements to pool budgets with the Local Authority and that this will continue as part of the wider integration of health and social care agenda. She said that they have the CCG funding figures for the next three years and indicative figures for the two years following, however this will present a challenge to manage this in an efficient way. She described this financial plan will be developed by working with the Local Authority and partners to deliver the Locality Plan and this will help plan and deliver the collective efficiencies that will be required.

Members said that whilst they welcomed the reported savings made as a result of efficiency savings described they were concerned that the future funding will result in cuts to services. A member commented that it was his opinion that efficiencies compromised patient safety and negatively impacts on staff. The member sought an assurance that patients will not be adversely affected by efficiency savings. Ms Newton said that the implementation of the CCG efficiency savings planned for the year will not adversely impact on patients.

Members commented that the allocation for mental health services appeared to be relatively low when compared with the demand placed on this service across the city. Ms Newton responded by saying that compared with other core cities, Manchester spends more on mental health services and they continue to invest in services such as Improving Access to Psychological Therapies (IAPTS).

She said a requirement of NHS Planning Guidance is that a percentage of the CCG funding is spent on mental health services. She said that this spending and activity is regularly reported and reviewed in a similar manner to the way spending on acute services is monitored. Members requested that when they consider mental health services at their September meeting that information is provided that explains the allocation of funding for all mental health services.

A member sought assurance that the residents of North Manchester will not be disadvantaged as a result of future funding allocations. Ms Newton said that the growth funding had been released and allocated to North Manchester CCG. She said that this money is ring fenced for spending in North Manchester. She said that this funding accounts for the reserve that is currently reported for North Manchester CCG and that an investment plan is being developed and it is the responsibility of the North Manchester CCG Board to agree how this funding is to be spent. She said that with the development of pooled budgets the intention will be to protect budgets specifically for north Manchester to meet the health needs of the local population.

The Chair noted that the financial positions of the Hospital Trusts was not within the remit of the report, however said that this was an important consideration when discussing the Locality Plan and pooled budgets. She requested that information on the individual Hospital Trusts financial position is provided to members of the Committee. A member requested that a report is submitted for consideration at an appropriate time that provides information on the use of agency staff at each of the Manchester Hospital Trusts.

### **Decisions**

- 1. To note the report.
- 2. The Committee requested that further information regarding the Locality Plans efficiency savings and the impact of these on services are provided to members of the Committee.
- 3. The Committee requested that further information on the individual Hospital Trusts financial position is provided to members of the Committee.
- 4. That the Committee receives information regarding funding of mental health services at the September meeting when they consider an item on the future delivery of Mental Health Services in Manchester.
- 5. The Committee requested that a report is submitted for consideration at an appropriate time that provides information on the use of agency staff at each of the Manchester Hospital Trusts.

## HSC/16/24 Sexual Health

The Committee considered the report of the Director of Public Health. The purpose of the report was to provide an overview of the redesign and procurement of specialist sexual and reproductive health services in Manchester, following the Council's budget options consultation process which concluded in March 2015. The Public Health Commissioning Manager, Sexual Health introduced the report across its broad themes. The Director of Public Health informed the Committee that despite the significant financial challenges he was confident that the new service will help improve the delivery of and access to sexual and reproductive health provision across the city.

The Committee then welcomed Debbie Thomas, Service Manager; Julie Gallagher, Clinical Nurse Manager; Dr Hilary Natusch, Consultant Sexual and Reproductive Health; Dr Chitra Babu, Consultant and Clinical Lead Genitourinary Medicine and HIV and Dr Ashish Sukthankar, Consultant in Genitourinary Medicine and Associate Clinical Head of Division (Specialist Medical Services) from Central Manchester Foundation Trust Hospital. They collectively delivered a presentation which provided the Committee with an overview of the plan to establish and deliver the new service from 1 July 2016, and then responded to questions from the Committee.

The presentation described that the new model of service delivery will provide an improved service for residents of Manchester. The Committee were informed that this will be achieved through an improved access arrangements; improved access including a mixture of walk-in and booked appointments; improved mechanism for reporting results linked to a new electronic patient record system; increase in the number of dual-trained nursing staff; and the introduction of online and kiosk vending of self-sampling kits. Members were informed that the introduction of the electronic patient records system will be much quicker, cost effective and ultimately provide a better service for the patient.

The Committee were informed that the ability to access self-sampling kits will allow those people not displaying symptoms to access screening without the need for traditional formal appointments. This will be much quicker and more efficient for people and will help manage demand. The use of kiosks and online services will further relieve the pressure experienced at reception where people who can not access the web will still be able to attend in person and make an appointment.

In response to a question from a member regarding the reported increase in Gonorrhoea, Dr Sukthankar said that the screening kits will test for Gonorrhoea and Chlamydia.

Dr Sukthankar said that the introduction of self sampling kits will make it easier for residents to obtain a screen, improving detection and treatment of infections. In addition to this the Committee were informed that a programme of assertive outreach work will be delivered across the city to access vulnerable and at risk groups. In response to a question from the Chair, Dr Babu said that they will be working closely with a range of voluntary organisations and responding to their specific needs to promote and deliver screening and contraception advice to high risk and vulnerable groups. This approach will also assist with helping people access other sources of help and support, such as drug counselling.

A member commented about the reported increase in Sexually Transmitted Infections (STI) amongst older people. Dr Sukthankar acknowledged this was the case and stated that the service will support everyone, regardless of age. He further commented that due to improvements in treatment, people with HIV are living longer with the condition.

Members then discussed the issue of contraception. Ms Gallagher informed the Committee that they are promoting the use of long-acting methods of contraception such as hormone implants or the coil implant, especially amongst younger people. She said that these are more effective as these methods are not reliant on the individual. Ms Gallagher advised that GPs and local nurses are also trained in the administration of these methods of contraception.

Members were informed that the service will be delivered using a 'hub and spoke' model. These sites will provide routine, intermediate and specialist care across the city. The Public Health Commissioning Manager, Sexual Health described that the 'hubs' will be located in North Manchester Hospital, the Hathersage site and Withington with the 'spokes' located in Wythenshawe Forum and sites in Cheetham Hill and Harpurhey. Dr Natusch commented that the configuration of clinic locations

and opening times are still being considered. In response to a request from a member who asked for a provision in her ward the Public Health Commissioning Manager, Sexual Health said that he would look into the issues raised by the member. The Chair welcomed this comment and asked that when services are being realigned that affected ward members are included in these discussions. A member asked if the conception figures for Under 16 year olds is available. The Public Health Commissioning Manager, Sexual Health advised that the figures are available and a briefing note will be circulated to members outside of the meeting.

## **Decisions**

- 1. To thank the representatives form Central Manchester Foundation Trust Hospital for attending the meeting.
- 2. To note the report and the presentation.

# HSC/16/25 Health and Wellbeing Update

The Committee received a report which provided an overview of developments across Health and Social Care and the local NHS.

#### Decision

To note the reports.

## HSC/16/26 Overview Report

A report of the Governance and Scrutiny Support Unit which contained key decisions within the Committee's remit and responses to previous recommendations was submitted for comment. Members were also invited to agree the Committee's future work programme.

The Committee noted that it would be discussing the work programme for the forthcoming year in more detail in a private session following the meeting, and that an updated work programme reflecting this discussion would be circulated as normal in the papers for the next meeting.

### Decision

To note the report and approve the work programme.