

Health Scrutiny Committee

Minutes of the meeting held on 8 September 2016

Present:

Councillor Craig – In the Chair

Councillors Curley, Mary Monaghan, E.Newman, O'Neil, Stone, Watson, Webb, Wills and Wilson

Councillor Andrews, Executive Member for Adult Health and Wellbeing

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

Jo Purcell, North Clinical Commissioning Group

Professor Matt Makin, Pennine Acute NHS Trust

John Harrop, Deputy Chief Executive and Director of Strategy, Manchester Mental
Health and Social Care Trust

Craig Harris, Executive Nurse, Director of Infection Prevention Control and Director of
City Wide Commissioning and Quality

Councillor S. Collins, Harpurhey ward member

Councillor H. Priest, Charlestown ward member

Apologies: Councillor Hitchen and Paul

HSC/16/41 Minutes

The Chair requested that the information requested in the second recommendation for item HSC/16/38 be circulated to members of the Committee.

Decisions

1. To approve as a correct record the minutes of the meeting held on 21 July 2016.
2. To note the minutes of the meeting held on 6 July 2016 of the Home Care Task and Finish Group.

HSC/16/42 Care Quality Commission – Quality Report Pennine Acute NHS Trust

The Committee considered the report of the Chief Operating Officer, North Manchester Clinical Commissioning Group and Professor Matt Makin, Medical Director, Pennine Acute NHS Trust. The report outlined the key issues regarding the Care Quality Commission (CQC) inspection of Pennine Acute NHS Trust (PAHT). In particular, it focused on the outputs of the inspection of the North Manchester General Hospital (NMGH) site which are the services residents of Manchester, in particular north Manchester residents use. The Committee welcomed Professor Matt Makin, Pennine Acute NHS Trust and Jo Purcell, North Clinical Commissioning Group who introduced the report across its broad themes.

Professor Makin informed the Committee that following the inspection and subsequent rating of 'Inadequate' by the CQC a number of steps had been taken to address the issues identified during the inspection. He described that a new leadership team had been established, led by Sir David Dalton, Chief Executive of Salford Royal NHS Foundation Trust and that an improvement plan had been agreed.

Professor Makin said that the improvement plan had identified 6 main themes which were Fragile Services; Quality; Governance; Management; Work Force and Leadership. He described fragile services as those services that had been identified as being either not safe or experiencing issues of staff recruitment. He said that these fragile services were Maternity Services, Paediatrics, Critical Care and the Emergency Department.

Professor Makin said that the response to support those identified fragile services had been Greater Manchester wide. This had included the provision of staff; advice and leadership from other hospital sites. He described how staff from other hospital sites, such as maternity staff from Central Manchester Foundation Trust Hospital will be supporting staff at NMGH.

Professor Makin said that additional staff including nurses; consultants; clinical care specialist and paediatricians had been recruited to support and improve the services delivered at NMGH. He said that the recruitment of staff will ensure that services are safe and sustainable. He also described the Ward Accreditation scheme that had been introduced to recognise good practice, raise standards and also offer support and clear guidance to poorly performing wards. He said that this will improve the delivery of services and standardise good care and practice across the site.

In response to a question asked about the sustainability of staff recruitment Professor Makin said that a significant amount of money is currently spent on locum and agency staff to deliver services at NMGH. He said that whilst there will always be occasions when this spending will be required; long term it is not sustainable. He said that this staffing arrangement is to be reviewed so that this money can be spent on the recruitment of permanent staff.

Jo Purcell, North Clinical Commissioning Group said recruitment of specialist staff such as children's nurses is a challenge nationally, however the Greater Manchester Health Devolution programme will support the recruitment of staff as a Greater Manchester offer will be more attractive to staff. She said that the continued support from Central Manchester Foundation Trust and Salford Royal NHS Foundation Trust is already beginning to make NMGH attractive to staff as they are both recognised as good organisations to work for.

The Committee discussed the plans for a Single Hospital Service for Manchester which will include NMGH. The Committee expressed their continued support for this development. The Executive Member for Adult Health and Wellbeing welcomed the Committee's support for the Single Hospital Service and said that NMGH is recognised as an important part of this programme of improved health care delivery. A member said that it is important that those services currently delivered at NMGH

should remain pending any decisions on the future delivery of services as a result of the Single Hospital Service.

In response to members' questions regarding the culture that had existed at NMGH Professor Makin acknowledged that the leadership at a Board level had proven to be inadequate. He said that this is acknowledged however it was important to note that the care provided by front line staff had always been of the highest quality and this had been recognised by the Care Quality Commission. He said that the new leadership team is committed to improving the culture within the organisation so all staff are confident and encouraged to report concerns and issues in the knowledge that these will be listened to and acted upon. Professor Makin said that this would be further supported by the establishment of a leadership team at each site which will include medical and nursing directors to ensure the day to day running of services is managed in an appropriate and responsive way.

The Committee welcomed Councillor Sandra Collins, Harpurhey ward member who sought an assurance that both the Midwifery and Emergency Department Service will continue to be delivered at NMGH. Professor Makin responded by saying that there is no intention to remove midwifery from NMGH as it is recognised that there is need for this to be located at this site to meet the needs of the local population and that the intention is to improve the midwifery service at this site. He also said that the intention is to deliver an improved 24/7 Emergency Department at NMGH with additional pharmacy and consultant led support. Jo Purcell, North Clinical Commissioning Group said that the CCG is working closely with the site to understand the implication any closure of Walk In Centres in Bury would have on this site.

The Chair said that there had been a concern that the Emergency Department at NMGH would be downgraded to an Urgent Care Centre and the Committee welcomed the stated commitment to the continued delivery of an Emergency Department at this site.

The Committee welcomed Councillor Hannah Priest, Charlestown ward member who said that residents had complained to her of inconsistent levels of services across the site. Professor Makin said that this had been recognised as an issue as part of their internal review of services and that work was ongoing to address this and reduce variation in patient experience and improve services across the site.

A member said that consideration had to be given to the care and services provided to meet the needs of the older population and recognise that these needs can be varied and complex. Jo Purcell, North Clinical Commissioning Group informed the Committee that a lot of positive work had been undertaken across the city in regard to the needs of the older population, especially around the issue of Dementia.

Professor Makin said that the delivery and design of services should be built around the needs of the patient and ensure that services meet the needs of the population. He said that a lot of research is being undertaken with academic partners in Manchester to help inform this area of design work. The member said that the Manchester Age Friendly Board would support and engage with this work.

A member commented upon the physical appearance of the buildings and the decoration and asked if this could be looked at as part of the wider improvement programme for the site.

The Committee thanked Professor Matt Makin, Pennine Acute NHS Trust and Jo Purcell, North Clinical Commissioning Group for attending the meeting and answering their questions.

Decisions

1. The Committee welcomed the commitment given to maintaining and improving the Emergency Department at North Manchester General Hospital.
2. The Committee expressed their continued support for the introduction of a Single Hospital Service in Manchester.
3. The Committee welcomed the reported improvements described at North Manchester General Hospital.
4. The Committee requested that an update report describing progress made in relation to the areas identified for improvement is submitted for consideration at an appropriate time.

HSC/16/43 Mental Health Services in Manchester

The Committee considered the report of the Strategic Director Adult Social Care; Craig Harris, Executive Nurse & Director of Infection and Prevention Control, Director of City Wide Commissioning & Quality, Executive Director of Safeguarding City Wide, Commissioning, Quality and Safeguarding Team, Manchester's North, Central & South NHS Clinical Commissioning Groups and John Harrop, Deputy Chief Executive and Director of Strategy, Manchester Mental Health and Social Care Trust (MMHSCT).

The report described the process for the transfer of services provided by Manchester Mental Health and Social Care Trust to a specialist Mental Health Foundation Trust, Greater Manchester West within the Greater Manchester footprint, following a competitive selection process managed by the Trust Development Authority. The report was to be considered within the broader context of the Greater Manchester Mental Health Strategy and the transformation of mental health services through the Locality Plan.

The Committee welcomed John Harrop, Deputy Chief Executive and Director of Strategy, Manchester Mental Health and Social Care Trust. Mr Harrop said that following the announcement that Greater Manchester West were to be appointed as the new provider work has been undertaken to consult with staff, both formally and informally from both organisations. He said that this announcement is a positive development as it will deliver a stronger, more sustainable organisation, build a resilience within services that is ultimately better for patients and deliver opportunities for staff development.

The Committee noted that periods of change within any organisation can be unsettling for staff and welcomed the commitment given to meaningful dialogue and engagement with all staff.

A member asked if the services previously identified for retraction will continued to be delivered. Craig Harris re-iterated the commitment given to the Committee at the July meeting (see HSC/16/36) that those services previously identified for retraction would continue to be commissioned, pending any final decisions regarding the future delivery of Mental Health Services following the outcome of the consultation process. He said that the decision had been taken not to consult on services at the same time as staff were being consulted. Mr Harrop informed the Committee that the MMHSCT, as the provider was committed to delivering those services previously identified for retraction pending the outcome of the consultation exercise.

Mr Harris responded to the comments made by members regarding staff engagement by informing the Committee that the commitment to staff was tested as part of the tender process. The Director of Adult Social Care said that significant improvements in the service will be made with staff from both organisations working together.

Mr Harris informed the Committee that another aspect that was tested during the tender process was service sustainability and the provider being able to demonstrate a genuine commitment to integration and support of the One Team care model of service delivery. He said this was successfully demonstrated by Greater Manchester West and he was confident that this will help deliver the integration of health and social care to improve services for Manchester residents, especially those mental health services available to young people.

Decisions

1. To note the report and the progress described.
2. To request an update report be submitted at an appropriate time and to request that representatives from Greater Manchester West be invited to attend the meeting when this is to be considered.

HSC/16/44 Additional membership of Home Care Task and Finish Group

A recommendation was made to appoint Councillor Curley as a member of the Home Care Task and Finish Group.

Decision

To appoint Councillor Curley as a member of the Home Care Task and Finish Group.

HSC/16/45 Health and Wellbeing Update

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

The Chair noted the information provided regarding the Manchester Locality Plan and reminded the Committee that this will be considered as a substantive item at the October meeting.

A member commented on the Care Quality Commission inspection reports and asked a question about a specific Care Home in his constituency. The Executive Member for Adult Health and Wellbeing responded said that both he and officers were fully aware of the situation described and he reassured the Committee that this Care Home continues to be monitored. He said that he would prepare a briefing note and have this circulated to all members. A member asked if a briefing note could be provided for a Care Home in his ward. The Executive Member for Adult Health and Wellbeing agreed that he would do this. The Committee welcomed this.

The Committee discussed the section within the report that provided an update Pre-Exposure Prophylaxis (PrEP). A member questioned the comment within the report that said that the use of PrEP would result in an increase in Sexually Transmitted Infections through a reduction in the use of condoms. He said that studies do not support this position. The Public Health Commissioning Manager, Sexual Health responded by saying that studies in America, where PrEP has been available for a longer time has supported this statement.

Members discussed the funding of PrEP. A member commented that the funding of PrEP is significantly cheaper than the cost of HIV treatment. The Chair said that national funding of PrEP should take into account local demographic variations and those authorities that have a higher number of people identified as being at high risk of exposure to HIV should attract additional funding.

The Chair commented that in the spirit of integration a Greater Manchester case should be submitted for funding of PrEP and that this is supported by the LGBT Network.

The Public Health Commissioning Manager, Sexual Health said that he had noted the comments of the Committee and these will inform the response submitted by the Director of Public Health on behalf of Manchester City Council in consultation with the Executive Member for Adults, Health and Wellbeing to NHS England as part of their consultation exercise.

A member welcomed the reported improved cancer survival rates and said that Manchester has a world leading cancer research and treatment centre, The Christie. The Committee recommended that a report be added to the Work Programme on Cancer Services in Manchester.

Decisions

1. To note the report.

2. To add a report on Cancer Services in Manchester to the Work Programme to be considered at an appropriate time.

HSC/16/46 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.

Decisions

To note the report.