

## Health Scrutiny Committee

### Minutes of the meeting held on 5 September 2017

#### Present:

Councillor Farrell – in the Chair  
Councillors Curley, Midgley, Mary Monaghan, Smitheman, Stone, Wills and Wilson

Councillor Craig, Executive Member for Adult Health and Wellbeing

Nick Gomm, Director of Corporate Affairs, Manchester Health and Care  
Commissioning  
Judith Adams, Chief Delivery Officer, Salford Royal NHS Foundation Trust  
Michael McCourt, Interim Chief Executive, Manchester Providers  
Dr Sohail Munshi, Clinical Director, Manchester Providers  
Dr Cordelle Mbeledogu, Consultant in Public Health Medicine  
Janine Dyson, Senior Regional Officer, Royal College of Nursing  
Hamish Kemp, Manchester Central branch Chair Royal College of Nursing  
Councillor Karney, Member for Harpurhey Ward  
Councillor Battle, Member for Bradford Ward  
Councillor Hitchen, Member for Miles Platting and Newton Heath Ward  
Councillor Lanchbury, Member for Higher Blackley Ward  
Councillor Siddiqi, Member for Gorton North Ward

**Apologies:** Councillors O'Neil and Webb

**HSC/17/35                      Minutes**

#### Decision

To approve as a correct record the minutes of the meeting held on 18 July 2017.

**HSC/17/36                      North Manchester General Hospital – Presentation**

The Committee welcomed Judith Adams, Chief Delivery Officer, Salford Royal NHS Foundation Trust who delivered a presentation that described the progress of the Pennine Improvement Plan at North Manchester General Hospital following publication of the Care Quality Commission's inspection report dated August 2016.

The presentation described that the Pennine Improvement Board had been established to oversee the improvements in the service areas that had been identified as requiring improvement by the CQC. The presentation detailed activity and improvements around the services that had been identified as 'Fragile Services', Urgent Care; Maternity Care and Paediatrics.

Ms Adams concluded her presentation by saying that it was recognised that attracting and retaining staff was an important aspect to delivering the ongoing improvements. She said that recruitment of staff was a national issue however work

continued to ensure the North Manchester Hospital fosters a positive culture to attract and retain good quality staff across all services.

The Committee thanked Ms Adams for her presentation, however commented that a written report, submitted in advance of the meeting would have been more appropriate to allow Members enough time to consider all of the information provided. Members further commented that the presentation contained graphs and information that were illegible. The Chair said that at any future meeting where this item was to be considered a representative from the clinical team should be in attendance to contribute and inform the discussion.

Members welcomed the reported progress that had been made at the site and sought an assurance that services provided for residents in North Manchester would not be reduced. Ms Adams said that a Strategy Board had been established to look at the delivery of services, in line with the development of the Single Hospital Service. She said that all of the decision making was transparent and providers and commissioners were involved in any decisions regarding services provided at the hospital.

The Committee welcomed Councillor Karney, Member for Harpurhey Ward. He said that the hospital management team should engage with local Councillors as they provided a connection to the local residents that the hospital serves. He further sought an assurance from the Hospital that they would convene a meeting with local Councillors following the next inspection from the Care Quality Commission. The Committee agreed to formally agree this as a recommendation.

The Executive Member for Adult Health and Wellbeing welcomed the reported improvements and said that the publication of the CQC inspection report had acted as an impetus for change and improvement at the hospital. She said that Councillors were important to help inform and design local health services provided to residents. She said Members would continue to be fully consulted and briefed as services were designed and commissioned.

The Committee welcomed Councillor Hitchen, Member for Miles Platting and Newton Heath. Councillor Hitchen asked how North Manchester General Hospital was addressing the issue of recruitment and sought clarification on the number of deaths in the Maternity Service. Ms Adams responded by saying that the number of deaths in that service area had reduced and she would provide these specific figures. She also said that the number of overall deaths at the hospital had reduced. She said that each patient death was reviewed to ensure that any lessons to be learnt were captured. In response to the issue of recruitment she said that they were actively seeking to recruit permanent consultants and reduce the reliance on locum staff.

## **Decisions**

1. To note the presentation and request that an update report is submitted to the Committee for consideration at an appropriate time.
2. The Committee requested that when this item is considered at a future meeting that a report is submitted in advance of the meeting.

3. The Committee recommended that when this item is considered at a future meeting that a representative from the clinical staff attend.
4. The Committee recommended that the management team at North Manchester General Hospital convene a meeting with local Councillors following the next inspection by the Care Quality Commission.

### **HSC/17/37                      Delayed Transfers of Care**

The Committee considered the report of the Executive Director Strategic Commissioning and Director Adult Social Services. The report detailed the current situation with Delayed Transfers of Care (DToC) within Manchester's acute hospital system city wide, and provided information on actions taken within Adult Social Care (ASC) to improve performance. The Head of Adult Social Care introduced the report.

A Member sought clarification about the reported plans to have experienced social workers embedded within ward teams as well as within discharge teams, and asked where they would come from and if this would impact on other teams. The Head of Adult Social Care said that funding had been identified within the Adult Social Care grant to recruit additional social workers on fixed term contracts. This money would also fund Placement Officers in hospitals and the locality teams to help facilitate patient discharge from hospital. She said they were also seeking to increase the number of Reablement Officers across the city and they were also working with sheltered accommodation providers to support individuals leaving hospital.

In response to a comment from a Member regarding IT systems, the Head of Adult Social Care said that this was an important element to improving the service for patients. She said that a shared system would allow for health professionals to record and share patient information and reduce duplicate information. She said that they had a system that they wish to trial and if this was successful this would be rolled out.

The Joint Director of Health and Social Care Integration said that a Digital Strategy Group had been established to develop an integrated system that would allow shared access for health professionals and create a single patient record.

The Executive Member for Adult Health and Wellbeing acknowledged the excellent work of staff to help improve the situation however acknowledged the financial pressure and context that the system was under.

### **Decision**

To note the report.

### **HSC/17/38                      New Models of Care**

The Committee considered the report of the Interim Chief Executive, Manchester Providers and the Executive Director, Strategic Commissioning. The report described that the process for Manchester Health and Care Commissioning (MHCC) to procure out-of-hospital services had entered the Strategic Dialogue process with Manchester

Providers. MHCC had set out the expectation that in year one, starting April 2018, the priorities for go live were directly provided Adult Social Care Services, Primary Care and Community Health Services. In order to deliver the priority outcomes for Manchester, as per the Locality Plan, Investment Agreements, and the Strategic Dialogues process, an integrated set of new models of care were required. These would be predominantly neighbourhood-based and include entry points to services, the development of integrated neighbourhood teams, wellbeing and prevention, and new models of Primary Care.

The Interim Chief Executive, Manchester Providers introduced the report. He said that the ambition was to improve services and improve health outcomes for all Manchester residents. In response to a question from the Chair he described that Manchester Providers brought together leaders of providers across the city to reduce fragmentation in the provision of service and that they had produced a prospectus that described their vision for the next ten years.

In response to a comment from a Member regarding the role of the Voluntary and Community Sector (VCS), the Interim Chief Executive, Manchester Providers said that the VCS were very important stakeholders and were represented on the Provider Board. He said that their views were sought to understand the views and needs of residents and they were involved in the coproduction and design of services. Dr Cordelle Mbeledogu, Consultant in Public Health Medicine said that they were working closely with statutory and non-statutory organisations to design and deliver appropriate services at a neighbourhood level.

A Member asked for further information regarding the background and qualifications of the Health Development Coordinators that they were seeking to recruit. Dr Sohail Munshi, Clinical Director, Manchester Providers responded by saying that in the spirit of partnership working they had recruited four staff using a recruitment panel that consisted of GPs and VCS representatives. He said that the successful applicants would have a back ground in community development and an interest in public health improvement.

Members then discussed the Citizen Portal, an online system where individuals can access personal budgets with online self-assessments, providing an online personal record where people can see their support plan, an electronic marketplace to purchase goods, online advice and information and a virtual wallet where people can manage their personal budgets. In response to a question from a Member the Director of Adult Social Care Development, Manchester Providers said that this was available in plain English and also in a range of languages. She further said that for those individuals unable to access services online people can contact a dedicated telephone number and staff would be available to assist residents. She further said that trained staff would be available in neighbourhoods to assist and support people by using facilities in community settings, such as libraries. A Member said that if the ambition was to eventually use library staff to assist residents that appropriate training should be given to library staff.

## **Decision**

To note the report.

### **HSC/17/39                      New Models of Home Care**

The Committee considered the report of the Head of Strategic Commissioning. The report described that Home Care provided vital support to Manchester's citizens, enabling them to safely live independently in their own homes. The Council, in collaboration with the Greater Manchester (GM) Adult Social Care Reform team, was progressing an intelligence led commission of home care services, adopting a co-production approach to ensure the new services meet the needs of citizens and the health and care system.

The City's plans for new home care services aim to align Greater Manchester developments to support people at home and reflect current and anticipated future needs for Manchester citizens within an Our Manchester approach and a transformed health and social care system.

Detailed project plans, setting out core deliverables, work streams, resource and other considerations, was being finalised, in collaboration with the GM Care at Home Project, and the work stream focussing upon Residential and Nursing Care, with the intention of the models and specification being procured during 2018/19.

The Committee was informed that the Council was working with local providers to ensure sufficiency of high quality home care to enable people to safely live independently in their own homes. The Head of Strategic Commissioning introduced the report.

The Head of Strategic Commissioning said that an overall model for the delivery of home care was being developed and that within this there would be consideration given to particular population health needs, such as residents with dementia. In response to comments from the Members regarding the numbers of providers the Joint Director of Health and Social Care Integration said that it was recognised that the home care provider market was complex and the work underway was to ensure that the commissioning of these services was correct to meet the needs of people and to support them to live in their own home and community. She said that work was also underway at a GM level to look at funding of these services.

The Executive Director Strategic Commissioning and Director of Adult Social Care Services said that it was important to stabilise the provider market by ensuring the commissioning strategy of these services were correct. She said that it was important that staff delivering this care were offered permanent contracts of employment.

The Executive Member for Adult Health and Wellbeing acknowledged the work of the Home Care Task and Finish Group and she informed the Committee that work was underway to translate the recommendations and principles of the group into delivering the preferred models of home care, both for residents and workers who provide this care. In response to a comment from a Member she said that providers of home care should recognise trade unions, and conversations were ongoing with providers to adopt Unison's Ethical Care Charter.

## **Decision**

To note the report.

### **HSC/17/40            Health and Wellbeing Update**

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

The Consultant in Public Health informed the Committee that the Manchester Macmillan Local Authority Partnership (MLAP) had attracted a £1m investment from Macmillan. The Chair recommended that a report on MLAP be submitted to the Committee for consideration at a future meeting.

Further to the information provided in the report the Executive Member for Adult Health and Wellbeing informed the Members that the Harpurhey Wellbeing Centre had received significant investment from the Greater Manchester Mental Health NHS Foundation Trust and was not at risk of closing.

## **Decisions**

1. To note the report.
2. The Committee recommended that a report on the Manchester Macmillan Local Authority Partnership be submitted to the Committee for consideration at an appropriate time.

### **HSC/17/41            ‘Scrap the Cap’ – Presentation**

The Committee welcomed Janine Dyson, Senior Regional Officer, Royal College of Nursing and Hamish Kemp Manchester Central branch Chair Royal College of Nursing who delivered a presentation on the Scrap the Cap campaign against the 1% public sector pay cap for NHS staff.

Members of the Committee expressed their support for the campaign.

## **Decisions**

1. To note the presentation.
2. To recommend that the Executive Member for Adult Health and Wellbeing make representations when appropriate to support the campaign and the issue of student bursaries.
3. To recommend that the Executive Member for Adult Health and Wellbeing make representations to help support the Royal College of Nursing in their campaign activities in Manchester.

4. To request that the Executive Member for Adult Health and Wellbeing make appropriate arrangements for campaigning activities in and around the Town Hall to support the campaign.

### **HSC/17/42            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.

A Member recommended that a Task and Finish Group be established to look at the issues of Public Health and prevention initiatives. The Chair recommended that Councillor Wilson would Chair this group and that a report would be submitted to a future meeting of the Committee with the proposed Terms of Reference and Work Programme. The Committee agreed these recommendations.

### **Decisions**

1. To note the report and approve the work programme.
2. The Committee agreed to establish a Public Health Task and Finish Group.
3. The Committee agreed to appoint Councillor Wilson as Chair of this Task and Finish, and the Terms of Reference and the Work Programme will be submitted to a future meeting of the Committee.