

Health Scrutiny Committee

Minutes of the meeting held on 22 May 2018

Present:

Councillor Farrell – in the Chair

Councillors Battle, Curley, Holt, Karney, Lynch, Mary Monaghan, Paul, Riasat, Smitheman, Wills and Wilson

Councillor Craig, Executive Member for Adult Health and Wellbeing

Nick Gomm, Director of Corporate Affairs, Manchester Health and Care Commissioning

Apologies: Councillor Reeves

HSC/18/16 Minutes silence

The Committee and all those present observed a minute silence to commemorate the victims of the Manchester Arena terrorist attack on this day a year ago.

HSC/18/17 Minutes

Decision

To approve as a correct record the minutes of the meetings held on 27 February 2018.

HSC/18/18 Manchester Population Health Plan

The Director of Population Health and Wellbeing introduced the report and accompanying Manchester Population Health Plan that he had submitted to the Committee for consideration. He referred to the main points of the report which were:

- The Plan had been agreed by both the Manchester Health and Wellbeing Board and the Manchester Health and Care Commissioning Board in March 2018.
- The Plan identified the following five priority areas for action:
 - Improving Outcomes in the first 1000 days of a child's life.
 - Strengthening the positive impact of work on health.
 - Supporting people, households and communities to be socially connected and make changes that matter to them.
 - Creating an age-friendly city that promoted good health and wellbeing for people in mid and later life.
 - Taking action on preventable early deaths.
- The report also described the delivery plan for 2018/19.

Some of the key points that arose from the Committee's discussions were:-

- Welcoming the plan and recommended that Health Scrutiny Committee monitor the progress and improvements in the key priorities identified;
- Consideration needed to be given to translate the plan into radical actions at a local level to influence long term cultural behaviour change to improve health outcomes;
- An explanation was sought regarding the incidents of teenage pregnancy and infant mortality;
- More emphasis needed to be given to tackle the impact of fuel poverty on health outcomes;
- The levels of cancer screening needed to be improved;
- The improvements in health outcomes for residents was predicated on improvements in a range of other services, such as transport;
- What was being done to support homeless people access services;
- Utilising physical assets across the city to improve health outcomes, such as schools and parks, needed to be considered;
- The need to acknowledge the strengths and positive impact of parents and families to influence cultural change to improve health outcomes; and
- The need to improve Air Quality.

The Director of Population Health and Wellbeing responded to the Committee's comments by stating that the performance progress of the priorities were reported and reviewed quarterly and this information would be shared with the Committee. He said that the Local Care Organisation (LCO) would help deliver the required improvements at a local level by working in partnership and strengthening relationships with a range of services. This would include local GPs, health professionals, partners and the Voluntary and Community Sector to provide a mixed skills set and help develop a knowledge of local assets and resources to improve health outcomes of the local population and improve school readiness. He said the LCO would also work with Housing Providers to help address issues such as fuel poverty and reach out and engage with those communities and residents who did not, or found it difficult to access services and support.

In response to the comments regarding the difficulties experienced by homeless peoples accessing GP services the Director of Population Health and Wellbeing said that the ambition was to reduce the variation in the Primary Care offer across the city. He informed Members that training and support was provided to all GP practices across the city to improve this situation and mystery shopping exercises were undertaken to monitor this. He said that with GPs working alongside a range of partners within the LCOs to coordinate care and support this would address the concerns raised.

The Director of Population Health and Wellbeing said that following the publication of the report a new data set of figures relating to teenage pregnancy had been published that showed a reduction in numbers. He said that in relation to infant mortality he acknowledge that this needed to improve and that every child death was reviewed to understand and analyse the cause. He further informed the Committee that NHS England held responsibility for screening services, however devolution presented an opportunity to improve this offer and increase the incidents of screenings.

The Director of Population of Population Health and Wellbeing informed the Committee that the issue of Air Quality was recognised as an important issue that had a significant impact on the health of residents, in particular respiratory conditions in young children. He commented that the Executive Members for the Environment was leading on this issue, alongside colleagues to formulate a local and a Greater Manchester response to this issue. He said that a further report on the response to Air Quality and Health would be submitted to the Committee for consideration at an appropriate time.

The Executive Member for Adult Health and Wellbeing said that the success of improving the health outcomes of residents was dependent on a number of wider improvements in services and infrastructure, for example improvements to the public transport system so that residents could travel easily around the city and access required services and appointments. She said that she was meeting with Transport for Greater Manchester to ensure that health was considered as part of their wider programme of work and encouraged all Members to raise the issue of improving health outcomes at every opportunity.

The Executive Member for Adult Health and Wellbeing acknowledged the comments raised regarding the need for, and importance of localised area health plans to respond to and meet the health needs of the local population. She said that Neighbourhood Health Plans would be developed with local Members and further acknowledged a comment made regarding the need to use appropriate language when communicating these plans to residents.

The Director of Corporate Affairs, Manchester Health and Care Commissioning responded to a request by a Member to comment on the recent media reports that had expressed a view on the effectiveness of Clinical Commissioning Groups (CCGs) nationally. He replied that in Manchester the implementation of the Manchester Health and Care Commissioning, a partnership between Manchester City Council and NHS Manchester CCG was a positive development for Manchester that presented greater opportunities by pooling budgets and delivering services in an efficient manner to improve services and health outcomes for all Manchester residents.

Decisions

The Committee:

1. Welcomes the stated commitment to the development and implementation of area based health plans to respond to and meet the needs of local communities.
2. Recommends that area based health plans recognise the different needs of local communities and are designed to respond to, and meet these to best support residents and improve the health outcomes of all Manchester residents.

HSC/18/19 The Manchester Local Care Organisation

This item of business was deferred to the next meeting of the Committee.

HSC/18/20 NHS Quality Accounts 2017 / 2018

The Committee considered the report of the Governance and Scrutiny Support Unit that provided the Committee with the responses to the draft Quality Accounts provided by the Manchester University NHS Foundation Trust and Greater Manchester Mental Health NHS Foundation Trust.

The draft Quality Accounts had been circulated to Members for comment and a response had been drafted by the Chair.

Decision

To note the responses.

HSC/18/21 Re-establishment of the Public Health Task and Finish Group

The Committee considered the report of the Governance and Scrutiny Support Unit that provided Members with the current terms of reference and work programme of the Public Health Task and Finish Group. The Committee was invited to re-establish the group and agree the membership, terms of reference and work programme.

The Chair of the Task and Fins Group, Cllr Wilson said that he would review the Work Programme to include smoking, diet and physical inactivity following consideration of the Manchester Population Health Plan (see item HSC/18/18).

Decisions

The Committee:

1. Agrees the Work Programme subject to the above amendment;
2. Agrees the Terms of Reference subject to the above amendment; and
3. Agrees the membership of the Task and Finish Group as Councillors Curley, Holt, Lynch, Mary Monaghan, Riasat, Wills and Wilson (Chair).

HSC/18/22 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 municipal year in further 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.