



## **Health Scrutiny Committee**

Date: Tuesday, 23 June 2020

Time: 2.00 pm

Venue: Virtual meeting - Webcast at [https://manchester.public-i.tv/core/portal/webcast\\_interactive/485356](https://manchester.public-i.tv/core/portal/webcast_interactive/485356)

**There will be a private meeting for Members only at 2.00pm, Monday 22 June 2020 via Zoom. A separate invite will be sent to members with joining details.**

### **Advice to the Public**

The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020

Under the provisions of these regulations the location where a meeting is held can include reference to more than one place including electronic, digital or virtual locations such as internet locations, web addresses or conference call telephone numbers.

To attend this meeting it can be watched live as a webcast. The recording of the webcast will also be available for viewing after the meeting has concluded.

## **Membership of the Health Scrutiny Committee**

**Councillors** - Farrell (Chair), Nasrin Ali, Clay, Curley, Holt, Mary Monaghan, Newman, O'Neil, Riasat and Wills

## Agenda

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**1. Urgent Business**

To consider any items which the Chair has agreed to have submitted as urgent.

**2. Appeals**

To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

**3. Interests**

To allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.

**4. Minutes**

To approve as a correct record the minutes of the meeting held on 3 March 2020.

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**5. Update on COVID19 activity - To follow**

**6. COVID19 Care Homes Update Report - To follow**

**7. Manchester Test and Trace Service - To follow**

**8. NHS overview - To follow**

**9. Overview Report**

Report of the Governance and Scrutiny Support Unit

13 - 20

This report includes a summary of key decisions that are within the Committee's remit as well as an update on actions resulting from the Committee's recommendations.

The report also contains additional information including details of those organisations that have been inspected by the Care Quality Commission (CQC) within Manchester since the Health Scrutiny Committee last met.

## Information about the Committee

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Scrutiny Committees represent the interests of local people about important issues that affect them. They look at how the decisions, policies and services of the Council and other key public agencies impact on the city and its residents. Scrutiny Committees do not take decisions but can make recommendations to decision-makers about how they are delivering the Manchester Strategy, an agreed vision for a better Manchester that is shared by public agencies across the city.

The Health Scrutiny Committee has responsibility for reviewing how the Council and its partners in the NHS deliver health and social care services to improve the health and wellbeing of Manchester residents.

The Council wants to consult people as fully as possible before making decisions that affect them. Members of the public do not have a right to speak at meetings but may do so if invited by the Chair. Speaking at a meeting will require a video link to the virtual meeting.

Members of the public are requested to bear in mind the current guidance regarding Coronavirus (COVID19) and to consider submitting comments via email to the Committee Officer. The contact details of the Committee Officer for this meeting are listed below.

The Council is concerned to ensure that its meetings are as open as possible and confidential business is kept to a strict minimum. When confidential items are involved these are considered at the end of the meeting and the means of external access to the virtual meeting are suspended.

Joanne Roney OBE  
Chief Executive  
3rd Floor, Town Hall Extension,  
Lloyd Street  
Manchester, M60 2LA

## Further Information

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For help, advice and information about this meeting please contact the Committee Officer:

Lee Walker  
Tel: 0161 234 3376  
Email: [l.walker@manchester.gov.uk](mailto:l.walker@manchester.gov.uk)

This agenda was issued on **Monday, 15 June 2020** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Mount Street Elevation), Manchester M60 2LA

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## Health Scrutiny Committee

### Minutes of the meeting held on 3 March 2020

#### Present:

Councillor Farrell – in the Chair  
Councillors N. Ali, Clay, Curley, Holt, Mary Monaghan, Newman, O'Neil, Riasat and Wills

#### Apologies:

#### Also present:

Councillor Craig, Executive Member for Adults, Health and Wellbeing  
Councillor Ilyas, Assistant Executive Member for Adults, Health and Wellbeing  
Nick Gomm, Director of Corporate Affairs, Manchester Health and Care Commissioning  
Mark Edwards, Chief Operating Officer, Manchester Local Care Organisation  
Vicky Isaac, Manager, Manchester Community Response  
Dr Jane Eddleston, Medical Director, Manchester University NHS Foundation Trust  
Sophie Hargreaves, Director of Strategy, Manchester University NHS Foundation Trust

### HSC/20/14                      Urgent Business – Coronavirus Update

The Chair introduced an item of urgent business by inviting the Director of Population Health to provide an update on Coronavirus.

The Director of Population Health informed the Committee that it was an emerging situation and at this time he could report the Government had issued an action plan that morning, following the emergency Cobra committee meeting, held Monday 2 March 2020. He described that the current approach to the virus was containment and delay, noting that the UK was in the containment stage of management with people being advised to regularly wash their hands and to catch it, bin it, kill it (sneeze/cough into tissue then put in bin) with a national public health campaign to be rolled out. He described that if the status was escalated to delay, measures such as self-isolation, social distancing and working from home would be introduced to protect vulnerable groups.

The Director of Population Health advised that if the UK was required to go into the mitigation stage the proposal was for legislation to be introduced that would allow for additional measures to be implemented to mitigate the risk of infection, such as closing schools and cancelling large scale events. He stated that currently the World Health Organisation was not classifying Coronavirus as a pandemic, however it was an imminent Public Health emergency, commenting that 14000 people had been tested nationally with 40 positive results identified, with one case being recently diagnosed in Greater Manchester (GM).

The Director of Population Health informed the Members that the Manchester Locality Planning Group were meeting regularly to monitor the emerging situation

and reviewing key actions and this activity would continue to be reported to the local Health and Wellbeing Board and at a GM level. He stated that information and updates would also be cascaded to Members. He described that the local response would include mobilising staff to implement community testing services. He further described that policies and practices were in place at the airport site to monitor arrivals from identified countries.

The Executive Member for Adults, Health and Wellbeing stated that it was important at this time to listen to the advice of health experts and communicate information in a responsible and honest manner to avoid misinformation. She further stated that if Members had specific questions or concerns they should contact her directly.

Members thanked the Executive Member for Adults, Health and Wellbeing and the Director of Population Health for providing the update. Members further paid tribute to all of the staff working in the delivery of health services.

### **Decision**

To note the update.

### **HSC/20/15            Minutes**

### **Decision**

To approve the minutes of the meeting held on 4 February 2020 as a correct record.

### **HSC/20/16            Update on the mobilisation of Manchester Community Response**

The Committee considered a report of the Director of Adult Social Care, Manchester City Council and the Chief Operating Officer, Manchester Local Care Organisation (MLCO) that provided an update on the work of health and social care staff in the Manchester Community Response (MCR) services.

Officers referred to the main points and themes within the report which included: -

- Providing an introduction and background to the MCR;
- Describing the overarching aims of the MCR;
- Providing a description of the teams that comprised the MCR;
- Describing what the MCR aimed to deliver;
- The MCR and MLCO operating model;
- Data on the number of avoided admissions to hospital as a result of the MCR; and
- Case studies.

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

- Welcoming the introduction of integrated teams and the positive outcomes this had delivered for residents of Manchester,

- Did teams experience challenges in regard to recruiting to post and stability of teams to deliver continuity of care;
- The importance of recognising and responding to the wider determinants of health;
- What were the challenges to patient discharge from hospital;
- How many patients that were discharged from hospital readmitted;
- Did the pressures experienced by Accident and Emergency Departments at hospitals influence the decision to discharge patients;
- Were the financial savings achieved by avoiding unnecessary patient admissions to hospital calculated and reported; and
- Was the Crisis Response service restricted to the number of hours they would engage with a patient.

In response to the above comments and questions officers informed the Committee that the wider determinants of health were understood and the establishment of multidisciplinary teams allowed for services to work together and make appropriate referrals to best meet the health needs of residents and avoid escalation and unnecessary hospital admission, as it was recognised that people had better outcomes if they could be supported to remain in their homes. The Chief Operating Officer, Manchester Local Care Organisation stated that the financial savings were calculated and reported.

In response to the question raised regarding barriers to discharging patients from hospital, the Director of Adult Social Care stated that they continued to work with acute settings to ensure that people were discharged, once medically optimised, to their home or other place of residence rather than remaining in hospital. The Chief Operating Officer, Manchester Local Care Organisation further stated that the pressures experienced at Accident and Emergency Departments did not influence the decision to discharge patients and free beds. He stated that alternative bed managements practices would be implemented, such as cancelling elective surgery. He further commented that people still attended Accident and Emergency Departments when other sources of assistance, such as General Practice or Pharmacy's would be more appropriate and this resulted in additional pressures across Accident and Emergency Departments. In response to the specific question regarding the rates of re-admittance following discharge he advised that the analysis of this would be circulated following the meeting.

In response the question asked regarding the number of hours a person would receive the Crisis Response service, the Manager, Manchester Community Response stated that they would support the person as long as was required. She further commented that whilst teams had experienced challenges in regard to recruitment to posts, this was a national issue. She described that teams worked together and shared care plans to ensure a continuity of care was maintained.

### **Decision**

To note the report.

The Committee considered a report of the Director of Population Health that summarised the key messages from the 'The Marmot Review – 10 Years On' that was published on 25 February 2020'. It further provided an initial assessment of how plans, programmes and activities in Manchester relate to the key recommendations contained in the review report.

The Director of Population Health referred to the main points and themes within the report which included: -

- Providing an introduction and background to the six priority objectives identified by Sir Michael Marmot in his report published February 2010 entitled 'Fair Society Healthy Lives';
- Detailing the key messages from the review that were presented to a national conference on 25 February 2020;
- Describing the work of the Manchester Public Health Team to respond to the recommendations.

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

- The report presented the political choices that had been taken over the previous years;
- Noting that the Black Report, published in 1980 had reported similar conclusions regarding the link between social and economic factors and health outcomes;
- The report represented a failure by Government to adequately fund the National Health Service and Adult Social Care (ASC), noting that current indications suggested that future ASC budgets would be reduced;
- Noting the impact of austerity on people's mental health;
- Expressing concern that the data that reported that among women in the most deprived 10 percent of areas, life expectancy fell between 2010-12 and 2016-18;
- Noting the response in Manchester to protect the most vulnerable residents; and
- All Scrutiny Committees needed to understand and consider the wider determinants of health.

The Executive Member for Adults, Health and Wellbeing stated that the reports demonstrated the direct link between austerity and health outcomes and life expectancy. She stated the report clearly identified and recognised the wider determinants of health and commented that health was a social justice issue and she called for adequate funding from the Government. She stated that despite the continued budget cuts, Manchester had responded by adopting policies, such as the Family Poverty Strategy, to protect the most vulnerable residents. She further commented that mental health was not an isolated issue, and needed to be understood in a wider social and economic context, and mental health had the same parity of esteem with physical health in Manchester. She described that a whole system approach was required and the Council needed to consider health when making all decisions and adopting policies, including planning, licensing and housing. The Chair recommended that he would speak on this issue at Council when he was invited by the Mayor to move the minutes.

In response to the population health data released in December 2019 the Director of



Population Health stated that he hoped to see continued improvements in the data. He stated that local data would also assist with identifying any groups or communities that required further or additional health interventions. The Executive Member for Adults, Health and Wellbeing suggested that Committee may wish to schedule a report on inclusive health when Members met to consider the work programme in the new municipal year. Members noted that the recommendations indicated that a national response was required, however expressed reservations that those would not happen. The Director of Population Health commented that these would require national policy changes.

The Director of Population Health informed the Committee that the Chief Executive of Manchester City Council, Joanne Roney, was a member of the National Advisory Group for the review and had played a leading role in bringing the Marmot Review Team to work with partners in Greater Manchester (GM), adding that Greater Manchester had been a designated Marmot City Region. He described that work would continue to influence wider GM policies and this in turn would inform the ask of government from the city region.

A Member recommended that the Committee should receive an annual update on the work to address the findings of the review. The Director of Population Health stated that this could be addressed through the annual population health update report.

## **Decisions**

The Committee;

1. Note the report; and
2. Recommend that the Chair, when invited by the Mayor to move the minutes at the next meeting of Council, address Council and emphasise the importance of considering health when making all decisions and adopting policies.

## **HSC/20/18                      Manchester Foundation Trust Clinical Service Strategy Programme Update**

The Committee considered a report of the Group Medical Director and Director of Strategy that described that Manchester University Foundation Trust was created in 2017 following the merger of Central Manchester Foundation Trust and University Hospital South Manchester Foundation Trust and Clinical teams and services across the hospital sites had now been integrated. The report further provided an update on this work and to outline some of the proposals the merged clinical teams had identified to improve services further.

The report authors referred to the main points and themes within the report which included: -

- Information on the Single Hospital Service;
- An update on what had been achieved following the merger;

- Examples of improvements realised pose merger;
- An overview of the Clinical Service Strategy Programme;
- Information on the engagement undertaken during the development of the strategy;
- Information on patient engagement and equality impact assessment; and
- Next steps.

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

- What was the relationship between Healthier Together and the Single Hospital Service (SHS);
- What were the management arrangements at North Manchester General Hospital (NMGH) to prepare for the absorption into the Manchester SHS;
- Were patient records accessible across the different sites; and
- An update was requested on the seven day service at the hospital sites.

Dr Eddleston stated that the Healthier Together decision had been taken into consideration when designing the SHS and that the SHS model was informed by sound clinical rationale.

In response to questions regarding NMGH, Dr Eddleston stated that an effective senior management team had been established at the site, pending the transfer of NMGH into the SHS. The Chair commented that he had experienced improvements with the leadership team at the site, noting that they had driven improvements at the hospital and demonstrated local accountability. Dr Eddleston welcomed these comments and added that this had also proven positive for the staff working at NMGH by providing leadership to deliver improved services for the benefit of local residents.

In response to the question asked regarding patient records, Dr Eddleston stated that across the SHS patients had a unique patient identifier so that records could be accessed across all sites. She stated that the intention was to introduce a system by September 2022 that allowed patients to access their own records and provide patients with certain functionalities, such as booking and amending appointments.

Dr Eddleston confirmed that clinical services were delivered seven days a week.

## **Decision**

To note the report and recommend that an update report is submitted for consideration at an appropriate time.

## **HSC/20/19                      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.

**Decision**

To note the report and approve the work programme.

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**Manchester City Council  
Report for Information**

**Report to:** Health Scrutiny Committee – 23 June 2020  
**Subject:** Overview Report  
**Report of:** Governance and Scrutiny Support Unit

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### **Summary**

This report provides the following information:

- Recommendations Monitor
- Key Decisions
- Items for Information

### **Recommendation**

The Committee is invited to discuss and note the information provided.

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**Wards Affected:** All

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### **Contact Officers:**

Name: Lee Walker  
Position: Scrutiny Support Officer  
Telephone: 0161 234 3376  
E-mail: l.walker@manchester.gov.uk

### **Background document (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

None

## 1. Monitoring Previous Recommendations

This section of the report contains recommendations made by the Committee and responses to them indicating whether the recommendation will be implemented, and if it will be, how this will be done.

There are currently no recommendations outstanding.

## 2. Key Decisions

The Council is required to publish details of key decisions that will be taken at least 28 days before the decision is due to be taken. Details of key decisions that are due to be taken are published on a monthly basis in the Register of Key Decisions.

A key decision, as defined in the Council's Constitution is an executive decision, which is likely:

- To result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates, or
- To be significant in terms of its effects on communities living or working in an area comprising two or more wards in the area of the city.

The Council Constitution defines 'significant' as being expenditure or savings (including the loss of income or capital receipts) in excess of £500k, providing that is not more than 10% of the gross operating expenditure for any budget heading in the in the Council's Revenue Budget Book, and subject to other defined exceptions.

An extract of the most recent Register of Key Decisions, published on **12 June 2020**, containing details of the decisions under the Committee's remit is included below. This is to keep members informed of what decisions are being taken and, where appropriate, include in the work programme of the Committee.

Decisions that were taken before the publication of this report are marked \*

Decision title	What is the decision?	Decision maker	Planned date of decision	Documents to be considered	Contact officer details
Carers Strategy (2019/08/22A)	Allocation of Our Manchester Funding to support the Our Manchester Carers Strategy over a period of two years.	Executive	16 October 2019	Report to the Executive	Zoe Robertson z.robertson@manchester.gov.uk

**Subject** Care Quality Commission (CQC) Reports  
**Contact Officers** Lee Walker, Scrutiny Support Unit  
Tel: 0161 234 3376  
Email: l.walker@manchester.gov.uk

Please find below reports provided by the CQC listing those organisations that have been inspected within Manchester since the Health Scrutiny Committee last met:

Provider	Address	Link to CQC report	Published	Types of Services	Rating
Community Integrated Care	The Peele 15a Walney Road Benchill Wythenshawe Manchester M22 9TP	<a href="https://www.cqc.org.uk/location/1-1212453059">https://www.cqc.org.uk/location/1-1212453059</a>	28 March 2020	Nursing Home	<b>Overall: Good</b> Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good

Park View Medical Centre	Park View Medical Centre 66 Delaunays Road Crumpsall Manchester M8 4RF	<a href="https://www.cqc.org.uk/location/1-566796375">https://www.cqc.org.uk/location/1-566796375</a>	25 March 2020	Doctors / GP	<b>Overall: Good</b> Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good
Skin Medical Ltd	Skin Medical Manchester 20 St Ann's Square Manchester M2 7HG	<a href="https://www.cqc.org.uk/location/1-123558251">https://www.cqc.org.uk/location/1-123558251</a>	1 April 2020	Doctors / GP	<b>Overall: Good</b> Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good
EHC Moston Grange Ltd	The Fallowfield Project 2 Clifton Avenue Fallowfield Manchester M14 6UB	<a href="https://www.cqc.org.uk/location/1-143921745">https://www.cqc.org.uk/location/1-143921745</a>	1 April 2020	Supported Living	<b>Overall: Outstanding</b> Safe: Good Effective: Good Caring: Outstanding Responsive: Outstanding Well-led: Outstanding
The Care Company Plus Ltd	The Care Company Plus Limited MAC House 47-49 Carnarvon Street Manchester M3 1EZ	<a href="https://www.cqc.org.uk/location/1-248053115">https://www.cqc.org.uk/location/1-248053115</a>	3 March 2020	Homecare Agency	<b>Overall: Good</b> Safe: Good Effective: Good Caring: Good Responsive: Good Well-led: Good



Zinnia Healthcare	Yew Tree Manor Nursing and Residential Care Home Yew Tree Lane Northern Moor Manchester M23 0EA	<a href="https://www.cqc.org.uk/location/1-283360594">https://www.cqc.org.uk/location/1-283360594</a>	30 April 2020	Nursing Home	<b>Overall: Requires Improvement</b> Safe: Good Effective: Good Caring: Requires Improvement Responsive: Good Well-led: Requires Improvement
Potensial Ltd	Cornish Close 1 Cornish Close, Off Staithes Road Manchester M22 0GJ	<a href="http://www.cqc.org.uk/location/1-4467735060">http://www.cqc.org.uk/location/1-4467735060</a>	2 May 2020	Homecare agencies, Residential homes, Supported living	<b>Overall: Requires Improvement</b> Safe: Requires Improvement Effective: Good Caring: Good Responsive: Requires Improvement Well-led: Requires Improvement

### 3. Item for Information

**Subject:** Response to the Draft Quality Account submitted for comment by Greater Manchester Mental Health NHS Foundation Trust.

Provide below is the responses to the draft Quality Accounts for Greater Manchester Mental Health NHS Foundation Trust.

10 June 2020

Dear Mr Thwaite,

#### **Manchester City Council Health Scrutiny Committee - Response to Greater Manchester Mental Health NHS Foundation Trust Quality Account 2019/20**

As Chair of Manchester City Council's Health Scrutiny Committee I would like to thank you for the opportunity to comment on your Trust's Draft Quality Account for 2019/20. Copies of the draft quality account were circulated to members of the committee for consideration and comments received have been included below. We would like to submit the following commentary to be included within your final published version.

At this unprecedented and challenging time the Committee would first like to take this opportunity to express our sincere gratitude and appreciation to all of the staff working at the Trust, both frontline and back office for their continued professionalism and dedication to ensure services continue to be delivered and vital support offered to Manchester residents. The Committee would be grateful if this appreciation could be communicated to all staff.

We acknowledged that the opening statement from the Chief Executive sets a tone of directness and transparency in the draft Quality Account and the statement identifies key achievements and priorities for the coming year and acknowledges the important work and contribution of both staff and volunteers.

In the current circumstances we note and fully support the decision taken by the Trust to maintain the existing Quality Improvement Priorities for 2020/21, which were agreed and set out in last year's Quality Account.

The Committee welcomes this document as a positive draft Quality Account with evidence included such that chronological and organisational comparisons may be made across a range of activities and services, and where appropriate areas for improvement are identified and clearly described.

The Committee welcomes the overall rating of 'Good' by the Care Quality Commission following their inspection and we note the actions identified to address the area rated as 'Requires Improvement'. The Committee were satisfied that throughout the report evidence was presented to demonstrate efficient governance arrangements are established at the Trust.

The report further describes a range of initiatives and the rationale for these, such as

the work with those individuals who may be a risk of self-harm or suicide and the adoption of the national 'Freedom to Speak Up' policy. The Committee support the inclusion of case studies to describe a range of actions and progress against identified Quality Improvement Priorities; Quality Indicators and performance against Key National Priorities.

The Committee further welcomed the inclusion of anonymous comments and feedback from service users and note that when feedback was received where people were dissatisfied, governance arrangements were established to acknowledge these and where appropriate effectively respond to them.

The whole report is written in a clear and concise manner with the accompanying narrative and data, across a range of activities is presented in an accessible format. We note and welcome the inclusion of a list of acronyms that had been provided and commented that this is useful to assist the lay reader to understand the document. The Committee note that the draft document presented for consideration adequately fulfils the requirement that a Quality Account to be a mechanism for a local NHS service to report on quality and show improvements in the services they deliver to local communities and stakeholders.

We felt that overall the Quality Account was very positive and reflected the successful operation of a complex organisation that serves and responds effectively to service users, patients, their carers and families in an efficient and compassionate manner.

The Committee will continue to monitor the work of the Trust on behalf of the residents of Manchester and we will welcome you to a future meeting of the Health Scrutiny Committee where Members will have an opportunity to discuss and question you regarding the important work that you deliver.

Yours sincerely,

**Councillor John Farrell**  
**Chair of the Health Scrutiny Committee**

**Health Scrutiny Committee  
Work Programme**

<b>Tuesday 1 September 2020, 2pm (Report deadline Wednesday 19 August 2020) ** To take account of the August Bank Holiday**</b>				
Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Overview Report	The monthly report includes the recommendations monitor, relevant key decisions, the Committee's work programme and any items for information.		Lee Walker	