

Health Scrutiny Committee

Minutes of the meeting held on Tuesday, 21 July 2020

Present: Councillor Farrell (Chair) – in the Chair

Councillors: Nasrin Ali, Clay, Curley, Holt, Newman, Riasat and Wills

Apologies: Councillor Mary Monaghan and O'Neil

Also present:

Councillor Craig, Executive Member for Adults, Health and Wellbeing
Nick Gomm, Director of Corporate Affairs, Manchester Health and Care Commissioning

Peter Blythin, Group Executive Director of Workforce and Corporate Business, Manchester University NHS Foundation Trust

Ed Dyson, Executive Director of Strategy, Manchester Health and Care Commissioning

Stephen Gardner, Programme Director, Single Hospital Service, Manchester University NHS Foundation Trust

Michelle Humphreys, Director of Strategic Projects, Manchester University NHS Foundation Trust

Sharmila Kar, Director of Workforce & Organisation Development, Manchester Health and Care Commissioning

HSC/20/26 Minutes

Decision

To approve the minutes of the meeting held on 23 June 2020 as a correct record.

HSC/20/27 COVID-19 Update

The Committee considered a report of the Director of Adult Social Care and the Director of Public Health that provided a brief summary of the current situation in the city in relation to COVID-19 and an update on the work progressing in Manchester in relation to areas within the remit of this committee.

The main points and themes within the report included: -

- An update on the current Public Health response;
- Information relating to the current Adult Social Care response; and
- Planning ahead for the recovery.

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

- Noting the high number of patient discharges from Wythenshawe hospital;
- How would an outbreak of COVID-19 be managed in a care home;

- Following the relaxing of lockdown rules and the increase in the number of people travelling into the city centre from neighbouring authorities for work, was there any concern if this would impact on the number of COVID-19 cases; and
- Requesting a briefing note on the reported safe and well calls, delivered by in house provider services to support citizens.

The Director of Public Health provided the Committee with an update on the figures provided within the report by stating that currently there were 3041 confirmed cases of COVID-19 in Manchester, which represented 553 per 100,000 of the population, and the number of recorded deaths was 413, with no further deaths recorded in care home settings. He added that data on the number of deaths were reported based on Office for National Statistics figures.

The Director of Public Health stated that as the lockdown was eased there was a need to shift the focus of local COVID-19 monitoring systems towards the early identification of any emerging 'second wave' of coronavirus in Manchester. He stated that all data sets available would be closely monitored and reviewed to manage such an event occurring. He referred to the local powers to manage such events and teams were working with local businesses to support them comply with the national COVID-19 guidance and advice. He stated that whilst the compliance teams would take action if necessary against a business to protect the public, however the approach currently was one of engagement and encouragement.

With reference to managing an outbreak of COVID-19 in a care home setting, the Director of Public Health stated that any such occurrence would be managed appropriately and sensitively. He stated that the current situation was significantly more stable than it had been and systems were established to ensure appropriate notifications were received and outbreak control meetings were regularly held to monitor and review the situation.

The Director of Adult Social Care addressed the comments made regarding patient discharge by saying that this was only ever done if the patient was medically fit to do so and managed using an appropriate care pathway. She further agreed to circulate a briefing note to all Members on safe and well calls as requested.

Decision

To note the report.

HSC/20/28 Local Prevention and Response (Outbreak) Plan

The Committee considered a report and presentation of the Director of Public Health that detailed the Manchester COVID-19 Local Prevention and Response Plan that had been published on the Council's website and had been endorsed by the Health and Wellbeing Board.

Members were advised that the plan was structured in line with national guidance and all other nine Local Authority areas in Greater Manchester had developed their own plans and had also contributed to the establishment of the Greater Manchester Integrated Contact Tracing Hub.

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

- Requesting the latest data on the R number for the North West;
- Was there any improvement in the quality of data provided to identify and manage any emerging trends were they to occur;
- Noting the disproportionate impact of COVID-19 on BAME citizens and areas of socio-economic deprivation;
- Noting the prevalence of BAME citizens in certain occupations, with specific reference to taxi drivers and the risk of infection this presented to them;
- An assurance should be sought that any supplier the Council held contracts with were supplying appropriate Personal Protective Equipment (PPE) equipment for their staff and ensuring their working environments were COVID safe and compliant;
- Whilst recognising the initial requirement to accommodate individuals experiencing street homelessness to protect them during the pandemic, it was important to acknowledge and support the hidden homeless;
- Consideration needed to be given to including the specific needs of the older LGBT community within the plan;
- Noting that for certain residents with health conditions it was difficult to adhere to COVID-19 guidance, such as observing social distancing rules;
- What support was available to children who were asylum seekers; and
- Despite the relaxation of lockdown measures it was important to emphasise that COVID-19 had not gone away and still presented a significant public health risk, especially as many people infected were asymptomatic.

The Director of Public Health responded to Members by stating that he was confident that local arrangements to trace individuals who may be at risk of infection following a positive test were suitable, however stressed that to do this effectively appropriate resources and capacity needed to be allocated to this function.

The Director of Public Health acknowledged the comments regarding BAME citizens and occupations and stated that whilst not currently mandatory, good practice was for all taxi passengers to wear a face mask. He stated that all taxi operators should be risk assessing their drivers and providing the appropriate PPE, and support was available for this. He further advised that the Head of Compliance, Enforcement and Community Safety was working with partners across Greater Manchester and the North West to ensure a consistent approach was taken by the taxi trade.

With reference to the older LGBT community, the Director of Public Health stated whilst this was not explicit within the plan, he reassured Members that a significant amount of work had been undertaken around that issue. He further reassured the Committee that work was also underway to support all people experiencing, or at threat of homelessness. He further stated that COVID-19 advice and guidance was available to all contract service providers.

The Director of Public Health acknowledged that for some individuals understanding and complying with COVID-19 guidance would be difficult, however the intention would never be to prosecute in those circumstances. He further described that care homes would seek to manage this in a compassionate and appropriate manner.

The Director of Public Health reiterated the importance of continuing to comply with all of the Public Health advice and guidance regarding COVID-19 to prevent a second wave, particularly as we move out of summer and into the winter period and flu season.

The Executive Member for Adults, Health and Wellbeing informed the Committee that unaccompanied asylum seeking children would be considered as 'Looked after Children' arrangements. She described that discussions were ongoing with the providers of the emergency asylum accommodation to prevent evictions if an individual were to receive a favourable Home Office decision as to their status.

Decision

To note the report.

HSC/20/29 Addressing Inequalities

The Committee considered a report of the Director of Workforce and Organisation Development, MHCC and the Director of Policy, Performance and Reform Manchester City Council that described that clear evidence had emerged that COVID- 19 was having a disproportionate impact on some communities who already experienced health inequalities in our city. BAME (Black, Asian and minority ethnic), disabled and people in poverty were more likely to contract Coronavirus and had poorer mortality outcomes. The longer term health impacts were not known yet but it was expected that the socio-economic impacts and impacts of higher mortality rates not directly linked to COVID- 19 would also be within these communities, unless there were radical changes to the approach to health and social care.

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

- How the pandemic had affected different communities in the city and the actions that were to be taken to respond to this;
- Describing the strategy for planning ahead and describing the workstreams that had been identified to progress the city's recovery;
- Each workstream involved a significant portfolio of work, and each was in the process of identifying short, medium and longer term priority actions;
- Describing the requirement to continue to meet the statutory duty under the Equality Act 2010 to consider equality implications when reviewing policies and practices and introducing new ones through an equality impact assessment;
- Equality Impact Assessments would be used against each of the Council's relevant practical recovery actions;
- Describing that actions identified across Health and Care to address inequalities and provided a summary of the 'Community Cell' that had been established to lead the out of hospital/care system within the City during the period of COVID-19 response and recovery;
- The Manchester COVID-19 Response Group ("the CRG") (previously called the Manchester COVID-19 Locality Planning Group (MCLPG)) fulfilled the role of the Manchester Health Protection Group, which was the established group for all health protection issues in Manchester;

- Addressing inequalities/Health Equity was a key workstream under this group, with the purpose of that workstream was to improve experiences of, and outcomes for, communities that suffered disproportionate adverse impacts from COVID-19;
- The report described the governance and reporting arrangements.; and
- Workforce specific measures, noting staff risk assessments were being undertaken across MHCC, MCC, MLCO and other partner organisations to address the need to ensure that 'at risk' staff, including BAME staff were protected.

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

- Consideration needed to be given to the messages and imagery used when discussing older residents to ensure this was done in a dignified manner;
- Noting the disproportionate impact of COVID-19 on BAME citizens and areas of socio-economic deprivation;
- Consideration needed to be given to ensure all sources of advice and information was accessible to all citizens;
- Welcoming the reported governance arrangements; and
- What were the barriers and challenges to progressing this important area of work.

The Equalities Lead noted the comment regarding the representation of older people and stated that the Age Friendly Board had met with the Chief Executive and Leader to ensure any communications were positive and age friendly and this had been accepted. He further stated that all of the national COVID-19 data and analysis undertaken of factors such as incidents of deaths within BAME communities, gender, socio-economic indicators and lifestyle factors would be reviewed and used to inform the local understanding and response.

The Equalities Lead further stated that emergency Hub had been established very quickly as the pandemic emerged, however acknowledged the comment regarding inclusive accessibility. He reassured the Committee that a review of this had been undertaken and the lessons learnt would inform any response in the event of second wave.

The Executive Member for Adult Health and Wellbeing stated that this area of work was not just a health matter but rather a wider issue that incorporated a range of factors and considerations, such as housing, planning and employment opportunities. All of which influenced and determined the health outcomes of residents, and as such needed to be considered in all strategies, plans and decisions. Further noting the detrimental impact that any economic down turn would have on the city and its residents.

The Director of Workforce & Organisation Development, Manchester Health and Care Commissioning stated that this was a very substantial and complex issue with many contributing factors, with consideration also needing to be given to the issue of racism when planning and considering next steps. She described that the work described was not a 'box ticking' exercise, but rather an opportunity to inform and direct the design and delivery of services. She stated that it was important that this agenda was kept at the forefront of all partners and organisations and was

maintained as a key priority. She stated the Health and Wellbeing Board had recently considered the report and had agreed to review progress as a regular item.

The Chair stated that the Committee similarly recognised the importance of this work and would continue to review progress against this activity. He advised that update reports would be scheduled on the Work Programme for consideration at an appropriate time.

Decision

To note the report.

HSC/20/30 North Manchester General Hospital Update

The Committee considered a report and presentation of the Executive Director of Workforce and Corporate Business, Manchester University NHS Foundation Trust and the Executive Director of Strategy, Manchester Health and Care Commissioning that provided an update on progress in relation to delivering the future strategy for North Manchester General Hospital (NMGH), including the planned acquisition of NMGH by Manchester University NHS Foundation Trust (MFT) as part of a Single Hospital Service (SHS) in Manchester; the delivery of the wider site strategy; and the Health Infrastructure Plan capital redevelopment of the site.

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

- Providing a background and information on the development of the SHS;
- An update on the interim arrangements for incorporating NMGH into the SHS, including management arrangements; and
- Describing the ambitions and delivery of the wider site strategy that set out how the capital redevelopment of the NMGH site could provide improved health and care facilities, act as a catalyst for local regeneration and support improved health outcomes for local people.

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

- Welcoming the plans and ambitions for the site and the benefits this would deliver to the wider area and community;
- Noting the significant progress to date;
- Recognising the evident commitment to the site and the improvements in the management arrangements at NMGH; and
- Welcoming the recognition that NMGH is an important site to deliver specialist services, both for the city and the North West.

The Group Executive Director of Workforce and Corporate Business, Manchester University NHS Foundation Trust stated that careful consideration continued to be given to the project spend and discussions continued with the Treasury. He said that he was confident that the Treasury remained committed to the project and the case for change was strengthened by the existing relationships across a range of partners in Manchester to deliver a broader scheme and deliver wider improvements and

economic benefits to the area. He further stated that staff continued to be informed and consulted with as the plans progressed,

The Executive Member for Adult Health and Wellbeing stated that she wished to place on public record her thanks and appreciation to all involved in this project. She recognised the progress made to date, despite the challenges presented by COVID-19. This sentiment was supported by the Chair on behalf of the Committee.

The Executive Member for Adult Health and Wellbeing stated that north Manchester Councillors would be consulted with regarding the Strategic Regeneration Framework and when this was to be considered again by the Committee, Members may wish to consider inviting the Chair of the Economy Scrutiny Committee to attend and contribute to the discussion.

Decision

To note the report.

HSC/20/31 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.

The Chair noted that the Members would be meeting in private following this meeting to discuss the work programme.

Decision

To note the report.