



## **Health Scrutiny Committee**

Date: Tuesday, 6 October 2020

Time: 2.00 pm

Venue: Virtual meeting – Webcast at –

[https://manchester-public-i.tv/core/portal/webcast\\_interactive/485359](https://manchester.public-i.tv/core/portal/webcast_interactive/485359)

**There will be a private meeting for Members only at 2pm, Monday 5 October 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 1 September 2020.

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**5. COVID 19 update - To follow**

**6. Seasonal Flu Immunisation Programme 2020/21 - To follow**

**7. Overview Report**

Report of the Governance and Scrutiny Support Unit

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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 includes the Committee's work programme, which the Committee is asked to amend or agree as appropriate.

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, 28 September 2020** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension, Manchester M60 2LA

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## Health Scrutiny Committee

### Minutes of the meeting held on 1 September 2020

**This Scrutiny meeting was conducted via Zoom, in accordance with the provisions of The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020.**

**Present:**

Councillor Farrell – in the Chair  
Councillors Clay, Curley, Holt, Newman, Riasat and Wills

**Apologies:** Councillors N.Ali and Mary Monaghan

**Also present:**

Councillor Craig, Executive Member for Adults, Health and Wellbeing  
Lindsey Bowes, Senior Primary Care Manager (Dental) Greater Manchester Health & Social Care Partnership  
Emma Hall-Scullin, Consultant in Dental Public Health  
Don McGrath, General Dental Practitioner in Manchester, and Chair of the Local Dental Committee  
Jon Slattery, General Dental Practitioner in Manchester  
Adam Young, Associate Director of Operations GMMH  
Mark Edwards, Chief Operating Officer MLCO  
Dr Manisha Kumar, Executive Clinical Director MHCC  
Dr Veronica Devlin, Chief Transformation Officer MFT

**HSC/20/32                      Minutes**

**Decision**

To approve the minutes of the meeting held on 21 July 2020 as a correct record.

**HSC/20/33                      Manchester's 10 Point COVID-19 Action Plan**

The Committee considered a report of the Director of Public Health that presented the 10 Point Action Plan that built on the Prevention and Response Plan that had been considered by the Committee at their meeting of 21 July 2020 (See HSC/20/28). The report set out the key actions that had been progressed over the month of August, noting that many of the actions in the 10 Point Plan would continue throughout September and the plan would be updated regularly.

The Consultant in Public Health delivered a presentation that included the latest available comparative data and intelligence.

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

- What work was being done to address the concerns of residents living in areas that also housed large numbers of students who would be returning to the city;
- Noting that guidance issued by Government to schools had been issued late;
- Thanking all of the staff working in Public Health on behalf of the residents of the city;
- Was it anticipated that the reported increase in positive COVID-19 cases would translate to an increase in hospital admissions;
- Noting that the messages issued regarding local lockdown changes issued by Government was confusing for residents;
- Appropriate funding should be allocated by central government to support and increase local testing and tracing services;
- Was it appropriate to establish a test centre at the Abraham Moss site noting it's close proximity to both the school and the leisure centre;
- Questioning the validity of the statement that residents would be no more than twenty minutes walking distance from a testing site;
- How many of the national track and trace cases were referred to the local service, and how many of those resulted in contact being made with individuals;
- What guidance was provided to chilled or frozen food businesses;
- What advice had been provided to schools regarding staggering start and finish times;
- Noting the recent press reports regarding the transmission of COVID-19 cases connected to a flight destined for Wales, what work was being undertaken with the aviation industry to mitigate the risk of further infection; and
- What work was being done with care homes to ensure contact with family members was maintained with residents in such settings.

The Consultant in Public Health advised the Committee that work was underway with the local Universities and the Student Partnership to prepare for the imminent return of students. She further acknowledged that this was a concern for some residents with students moving into communities from other areas of the country. She advised that communications regarding the work undertaken with the student population would be shared with residents and this would also be provided to local Members.

In regard to the number of positive cases identified in Manchester, the Consultant in Public Health stated that the increase in cases could be linked to the relaxation of lockdown restrictions and this trend was reflected nationally. She stated that the increase of positive cases were related to community and household transmissions, rather than transmissions in settings such as care homes as had previously been witnessed. She said that the effect of COVID-19 on younger people did not appear to be as severe and hence these cases did not translate into hospital admissions, however the risk remained that this could then be spread to older / more vulnerable people that could then result in an increase in hospital admissions. She stated that this landscape continued to be closely monitored, both locally, nationally and internationally, especially as the winter and flu season approached.

With reference to the testing centre located at the Abraham Moss site, the Consultant in Public Health informed the Committee that the decisions as to where to locate these sites was undertaken in consultation with Public Health Teams, the Department for Health and Social Care and the Council and all facilities had been

appropriately risk assessed. In response to the specific question regarding the number of cases referred to the local tracing service from the national service, she stated that approximately 50% of cases were referred from the national service, and of these, 99.5% had resulted in a successful contact. She further stated that whilst the local service were able to utilise their local knowledge and contacts, the ability to undertake additional test and tracing would require adequate resourcing.

In regard to national guidance, the Consultant in Public Health stated that this was updated regularly on the Public Health England website and advised that she would enquire as to any specific guidance for frozen food businesses. With reference to staggered start and finishing times for schools she advised that all schools would plan to mitigate the risk of infection and had been supported to devise plans that were most appropriate to their setting.

The Consultant in Public Health advised that Public Health England were working nationally with the aviation industry to ensure the correct advice and information was provided to both staff and passengers, and that appropriate contact details were obtained to assist with track and tracing in the event of an outbreak.

The Deputy Director, Adult Social Services addressed the issue of care homes by stating that whilst the importance of maintaining family contact was acknowledged the challenges that COVID-19 had on the ability of sites in maintaining this was recognised. He described that regular contact was made with individual settings and providers to ensure they were adequately supported at this time. He advised that care homes had facilitated visits in a number of imaginative ways, such as using video calls, supporting visits at a safe distance where appropriate and facilitating socially distant visits in parks. He advised that good practice would continue to be shared between sites to help support this activity. In regard to the specific issue raised by a Member he advised that this would be looked into following the meeting, adding that staff absence could impact on a settings ability to safely manage and facilitate a visit.

The Executive Member for Adults, Health and Wellbeing advised the Committee that she was pleased to advise that there had been no significant issues reported over the bank holiday weekend. She paid tribute to the residents of the city for adhering to the lockdown restrictions and thanked all of the staff working in the Public Health team for effectively communicating key messages.

The Executive Member for Adults, Health and Wellbeing advised that the 10 Point COVID-19 Action Plan helped Manchester manage and respond locally, noting the importance of local decision making. She further stated that the Government needed to commit to fully resourcing all local Council's in recognition of the financial demands and pressures COVID-19 had placed on already pressured budgets.

## **Decision**

To note the report.

[Cllr Wills declared a personal and non prejudicial interest as he is employed by the Manchester Metropolitan University.]

## **HSC/20/34                      Recovery of NHS Services**

The Committee considered a report of Manchester Health and Care Commissioning, Manchester Foundation Trust, Manchester Local Care Organisation, Greater Manchester Mental Health NHSFT and Greater Manchester Health and Social Care Partnership that provided an update on the reinstatement of NHS services following changes in service provision as a result of the impact of Covid-19.

The main points and themes within the report included: -

- Acute Services (including Cancer);
- Community health services;
- Mental Health services;
- Dental services; and
- Primary Care (GP practices).

In attendance at the meeting were representatives from each respective service.

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

- Expressing the Committee's gratitude and appreciation to all staff working in the NHS;
- Noting that recovery of services was within the context of a continued response to COVID-19;
- Would there be an increased pressure placed on Primary Care to manage a medical condition, or if a patient's condition begins to deteriorate when surgery was delayed due to COVID-19;
- Noting the challenge and limitations of telephone / video consultations, especially when assessing patients with mental health issues;
- Noting that in Manchester cancer treatment had continued to be delivered, however nationally this had not been the case;
- What did 'partially stopped' service mean;
- Noting that the imminent winter pressures would place additional pressures on services;
- Noting the impact that COVID-19 would have on people's mental health and the increased demand for mental health services, adequate funding should be allocated by central government to deliver such services;
- Recognising the important role of the voluntary, community and social enterprise sector (VCSE) in supporting people with mental health issues;
- When would the 'No 93' Health and Wellbeing Centre in North Manchester be reopening;
- Where were the 92 Urgent Dental Care sites to meet the needs of any patients of practices currently restricted in their delivery located.
- Would the ability to treat a reduced number of patients in NHS dental practices and the NHS contract arrangements result in practices only treating private patients; and
- A person centred approach was required when delivering care and services.



Dr Veronica Devlin, Chief Transformation Officer MFT advised the Committee that patients who's surgery had been deferred due to COVID-19 would continue to be provided with advice and information as to how to manage any condition with advice on what to do if the condition deteriorated. She advised that patient waiting lists were regularly reviewed to prioritise patients based on clinical need.

Dr Devlin further stated that whilst the delivery of cancer treatment services had continued in Manchester throughout COVID-19, the anticipated challenge related to the testing for cancer and the impact this would have on the service as patients had not been attending for testing due to fears surrounding COVID-19. She advised that to address this consideration and planning had been given to increasing access to testing and delivering safe diagnosis pathways.

Mark Edwards, Chief Operating Officer MLCO reported that services would continue to be re-established and to support this process and to ensure that services could restart safely MLCO had established a Recovery and Programme Board that oversaw the processes. He acknowledged that the ability of the MLCO to deliver services and patient care impacted on the demand on secondary care services, so it was important that services resumed as quickly and as safely as possible. He further advised that where services had been partially withdrawn, those had been clinical decisions taken in consultation with patients with appropriate advice provided.

Adam Young, Associate Director of Operations GMMH informed the Committee that the Trust continued to monitor and map requests for services, and currently this was in line with planning, however this continued to be reviewed daily. In terms of resources to deliver mental health services he advised that Greater Manchester would be submitting a funding bid. With reference to the 'No 93' Health and Wellbeing Centre in North Manchester he stated that work continued to reopen this site as soon as was safely possible and added that staff had continued to work with patients and maintain contact whilst the site had been closed.

Emma Hall-Scullin, Consultant in Dental Public Health informed the Committee that the details of the 92 Urgent Dental Care sites would be circulated to Members following the meeting.

Jon Slattery, General Dental Practitioner in Manchester responded to the question regarding a practices ability to treat a reduced number of NHS patients and the NHS contract arrangements result in practices only treating private patients by stating that he did not recognise this as a concern. The Chair commented that the topic of NHS Dentistry provision across the city would be revisited by the Committee at an appropriate time.

With regard to the video and telephone consultations, all of the professionals present all reported that these had been received positively by both patients and practitioners, whilst recognising that for certain assessments 'face to face' meetings were preferable.

## **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. Members were also invited to agree the Committee's future work programme.

**Decision**

To note the report.

**Manchester City Council  
Report for Information**

**Report to:** Health Scrutiny Committee – 6 October 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
- Work Programme

### **Recommendation**

The Committee is invited to discuss the information provided and agree any changes to the work programme that are necessary.

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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 **25 September 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
Equilibrium Healthcare Limited	Oakland House Nursing Home 290-292 Dickenson Road Longsight Manchester M13 0YL	<a href="https://www.cqc.org.uk/location/1-121484482">https://www.cqc.org.uk/location/1-121484482</a>	9 September 2020	Nursing Home	<b>Overall: Good</b> Safe: Good Effective: Good Caring: Outstanding Responsive: Good Well-led: Good

Standwalk Ltd	St James House Danes Road Manchester M14 5LB	<a href="https://www.cqc.org.uk/location/1-121992613">https://www.cqc.org.uk/location/1-121992613</a>	11 September 2020	Residential Home	<b>Overall: Requires Improvement</b> Safe: Requires Improvement Effective: Requires Improvement Caring: Good Responsive: Good Well-led: Requires Improvement
Mr Bradley Scott Jones & Mr Russell Scott Jones	Russley Lodge 276 Wilbraham Road Manchester M16 8WP	<a href="https://www.cqc.org.uk/location/1-3475060739/contact">https://www.cqc.org.uk/location/1-3475060739/contact</a>	9 September 2020	Residential Home	<b>Overall: Requires Improvement</b> Safe: Requires Improvement Effective: Good Caring: Good Responsive: Good Well-led: Requires Improvement
	We Care Solutions Chorlton 517 Wilbraham Road Manchester M21 0UF	<a href="https://www.cqc.org.uk/location/1-2514906753/contact">https://www.cqc.org.uk/location/1-2514906753/contact</a>	8 September 2020	Home Care Agency	<b>Overall: Inadequate</b> Safe: Inadequate Effective: Requires Improvement Caring: Good Responsive: Good Well-led: Inadequate

**Health Scrutiny Committee  
Work Programme – October 2020**

<b>Tuesday 6 October 2020, 2:00pm (Report deadline Thursday 24 September 2020)</b>				
Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Covid-19 Activity Update	This report will provide an update to the Committee on activity relating to public health and adult social care.	Cllr Craig	David Regan / Bernadette Enright	
Winter flu planning	This report will provide an update on winter flu planning.	Cllr Craig	David Regan	
Overview Report				

<b>Tuesday 3 November 2020, 2:00pm (Report deadline Thursday 22 October 2020)</b>				
Item	Purpose	Lead Executive Member	Strategic Director/ Lead Officer	Comments
Budget Related item	Precise details to be confirmed.	Cllr Craig	David Regan Bernadette Enright	
Overview Report				

<b>Items to be Scheduled</b>				
Item	Purpose	Executive Member	Strategic Director/ Lead Officer	Comments
Care Workers and the Care Sector	To receive a report on the work undertaken to improve wages and conditions within the care sector.	Cllr Craig	Bernadette Enright	
Addressing Health Inequalities	Noting the disproportionate impact that COVID-19 had on BAME citizens, vulnerable residents and areas of socio-economic deprivation, to receive a report on the work undertaken to address these health inequalities. This report is to include an update of the work of the Neighbourhood Teams.	Cllr Craig	David Regan / Bernadette Enright / Nick Gomm	