



## **Health Scrutiny Committee**

Date: Tuesday, 9 March 2021  
Time: 2.00 pm  
Venue: Virtual Meeting - Webcast at -  
<https://vimeo.com/514225697>

**There will be a private meeting for Members only at 2pm, Monday 8 March 2021 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, Doswell, Hitchen, 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 the 9 February 2021.

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

**6. Better Outcomes, Better Lives - To follow**

**7. Manchester University NHS Foundation Trust (MFT) COVID-19 Related Service Changes - To follow**

**8. City Health Walk-in Centre and COVID-19 - To follow**

**9. Overview Report**

Report of the Governance and Scrutiny Support Unit

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This monthly report includes the recommendations monitor, relevant key decisions, the Committee's work programme and items for information. The report also contains additional information including details of those organisations that have been inspected by the Care Quality Commission.

## 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, 1 March 2021** 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 9 February 2021

**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 N. Ali, Clay, Curley, Doswell, Hitchen, Holt, Mary Monaghan, Newman O’Neil, Riasat and Wills

**Apologies:** None received

#### **Also present:**

Councillor Craig, Executive Member for Adults, Health and Wellbeing  
Councillor Ilyas, Assistant Executive Member for Adults, Health and Wellbeing  
Councillor Igbon. Member for Hulme ward  
Councillor Ahmed Ali, Member for Rusholme ward  
Councillor Akbar, Member for Rusholme ward  
Dr Manisha Kumar, Executive Clinical Director Manchester Health and Care Commissioning (MHCC)  
Charles Kwaku-Odoi, Caribbean and African Health Network  
Donna Miller, BHA for Equality  
Sharmila Kar, Director of Workforce and Organisation Development MHCC and Co-Chair CHEM  
Jackie Driver, Strategic Lead: Inclusion, MHCC

### **HSC/21/07                      Minutes**

The Chair requested that Councillor Riasat be recorded as being in attendance at the previous meeting.

#### **Decision**

To approve the minutes of the meeting held on 12 January 2021 as a correct record, subject to the above amendment.

### **HSC/21/08                      COVID Health Equity Manchester (CHEM)**

The Committee considered the report of the Director of Workforce and Organisation Development, Manchester Health and Care Commissioning (MHCC) and the Consultant in Public Health Medicine, Manchester City Council/MHCC that reflected on how the pandemic had affected different communities in the city and the actions being taking to reduce disparities in severe disease and death for those ‘at risk’ communities.

The main points and themes within the report included: -

- Describing the identified Covid risk factors;
- Analysis of Manchester hospital data;
- Known Covid infection rates in Manchester;
- Geographic and economic considerations;
- The objectives of CHEM;
- The purpose and remit of the CHEM programme; and
- An update on the Manchester bid for the Community Champions Fund, a fund made available to support people shown to be most at risk from COVID-19.

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

- Noting that the report highlighted the health inequalities and outcomes and the disproportionate impact that COVID-19 had on BAME and disabled citizens, residents in vulnerable situations and areas of socio-economic deprivation;
- Noting the failure of the government to acknowledge or respond to the issues described;
- Manchester had recognised the issue and was actively responding to this;
- Providing examples of the fear experienced by BAME residents as a result of COVID-19;
- Noting the valued and important role of the many Voluntary Community and Social Enterprise (VCSE) groups;
- Recognising the importance of Covid Community Champions and all activity to meaningfully engage with the different communities that existed across the city;
- Consideration needed to be given to raising awareness regarding COVID-19 and offering appropriate advice for those residents living in multigenerational households;
- Consideration needed to be given as to how myths surrounding the COVID-19 vaccination were addressed so as not to perpetuate them, especially when using social media;
- Consideration should be given to utilising the lessons learnt from previous Public Health campaigns, such as the smoking cessation campaign to support this activity;
- Were all groups and existing established communities engaged with, such as young people, East European, South Asian and Carers;
- Noting the recent media attention that had been given to the Marcus Rashford campaign, consideration should be given to replicating this approach to promote the vaccination programme;
- The existing relationships that existed between social landlords and their tenants should be utilised to promote the vaccination, noting the importance of using all existing trusted relationships in this activity;
- Noting the importance of building and maintaining trust with local communities; and
- Was vaccination take up data available at a ward level.

The Committee welcomed Charles Kwaku-Odoi, Caribbean and African Health Network who stated that they were working with CHEM and key trusted community contacts to promote this work. He stated that the BAME community had experienced

racism and inadequate health experiences over many years that had resulted in a mistrust of services. He stated that by working in partnership, sharing local knowledge and experience they were collectively seeking to address this and improve the experience and health outcomes for BAME citizens. He described that a number of webinars had been delivered that had been well attended, hosted by GPs from the BAME community to discuss the issue of the vaccination. He informed the Committee that these had provided credible and evidence-based information to those attending and addressed the many misconceptions surrounding the vaccination, adding that the feedback obtained indicated these events had been very successful.

The Committee then welcomed Donna Miller, BHA for Equality who supported the comments from the previous speaker by recognising the importance of being honest and transparent so as to develop trust and confidence in services amongst BAME citizens. She described the importance of credible, competent and trusted figures in the community to deliver this message, noting that this included faith leaders, schools and local GPs. She described that BHA also worked closely with the local CCG to articulate the voice of the BAME community.

The Consultant in Public Health Medicine, Co-Chair of the Covid Health Equity Group acknowledged the comments regarding the need to ensure the messenger is as important as the message and appropriate consideration was given to this when seeking to engage with the many different community groups. She described that it was understood that digital platforms and social media were not always the most appropriate medium to reach groups, noting that other methods, such as direct phone calls, using the appropriate language had been used to reach out to people. She further described that they were working closely with the local Neighbourhood Teams and welcomed any information or support that Members could offer as she acknowledged that Members had relationships and contacts with local groups that could be utilised to support this important work.

The Consultant in Public Health Medicine, Co-Chair of the Covid Health Equity Group thanked the Committee for all of their constructive comments and support for the work that was being undertaken. She stated that all of the issues and suggestions raised to progress this work would be taken away from the meeting and discussed by the group.

The Director of Workforce & Organisation Development, MHCC & Co-Chair of Covid Health Equity Group stated that this would be an ongoing, long term piece of work that included activities and projects to ensure all community groups, including young people, carers, the Chinese and East European community were included and consulted, adding that it was recognised that different groups experienced different health outcomes and had different needs. She stated that an Impact Report would be produced and reported to the Committee at the appropriate time that would evidence and report on this activity.

The Director of Workforce & Organisation Development, MHCC & Co-Chair of Covid Health Equity Group further advised the Committee that vaccination take up data was being collated and analysed that would inform appropriate targeted campaigns. The Executive Member for Adults, Health and Wellbeing stated when available this information would be shared with local Members.

In concluding this item of business, the Chair on behalf of the Committee acknowledged the importance of this work and thanked all of the officers and the VCSE guest for attending. He stated that the scale and challenge of this work was recognised, and the Committee would welcome a progress report at an appropriate time.

## Decisions

The Committee;

1. Note the disproportionate impact that COVID-19 has on BAME and disabled citizens, residents in vulnerable situations and areas of socio-economic deprivation, and progress to date on tackling these disproportionalities.
2. Endorse the recommendation that respective partner organisations prioritise supporting the objectives of this programme as part of their response to Covid.

## **HSC/21/09                      Adult Social Care and Population Health Budget 2021/22**

The Committee considered the report of the Chief Executive Manchester Local Care Organisation and Executive Director of Adult Social Services that detailed the service and financial planning and associated budget strategy work that was taking place for adult social care with partners across the health and care system.

It detailed the identified and proposed opportunities to make savings in 2021/22 aligned to the remit of the Health Scrutiny Committee, to support the City Council to achieve a balanced budget in 2021/22.

The Committee was invited to comment on the report prior to it being considered by Executive.

The main points and themes within the report included: -

- Describing the 2021/22 Budget proposals in the context of the 2021/22 Budget;
- Providing a background and context;
- Information on the Covid-19 pandemic and the Adult Social Care (ASC) Improvement Programme, noting the context and impact on ASC;
- Identified budget pressures and efficiency proposals; and
- An overview of the Better Outcomes Better Lives programme.

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

- Clarification was sought on the overall total reduction in the Public Health budget since 2016;
- Consideration needed to be given to describing what was meant by the term wellbeing services in future reports;
- Stating that the government had repeatedly failed to adequately fund Adult Social Care over a period of many years;



- Noting that the funding cuts imposed upon the city had impacted most on the poorest residents who already experienced the worst health outcomes; and
- That despite these continued cuts Manchester had sought to defend the most vulnerable residents across the city.

Officers informed the Committee that the impact on Manchester's public health funding was a £8.652m reduction by 2019/20 and provided the year on year reduction figures. The Executive Member for Adults, Health and Wellbeing stated that whilst there had been a reduction in the funding from central government there were no proposals to reduce public health services.

The Executive Member for Adults, Health and Wellbeing stated that the government must adhere to the promise made at the beginning of the pandemic that they would reimburse the Council for the additional costs incurred as a result. She further stated that the government had repeatedly failed to adequately fund Public Health and Social Care over a period of many years, however despite this Manchester had responded to protect the most vulnerable residents in the city and would continue to do so.

### **Decision**

The Committee note the report and endorse the budget proposals as described to the Executive.

### **HSC/21/10                      COVID-19 Update**

The Committee considered the joint presentation of the Director of Public Health and the Executive Clinical Director Manchester Health and Care Commissioning that provided an update on COVID-19 activity that included the latest available information on data and intelligence; information on Variants of Concern in Manchester and the response to this; an update on the Manchester COVID-19 Vaccination Programme and testing and contact tracing.

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

- The Committee expressed their confidence and appreciation to teams responding to deliver surge testing in central/south Manchester;
- Noting the need to reassure local residents at this time and praising the response of local Neighbourhood Teams in providing advice and support to both local residents and Members;
- What was being done to ensure that people who worked in these areas, but did not live in the area were tested, including those in household bubble arrangements;
- Was the surge testing in central/south Manchester available to local business owners and their employees;
- Were young people and housing providers involved regarding supporting the promotion of the vaccination programme;
- Noting that there had been some concern expressed regarding the advice given to housebound residents and the timing of their vaccination;

- Noting that due to the Primary Care Network arrangements some residents had been offered appointments for a vaccination some distance from their home address;
- Providing a positive example of a GP working with local asylum seekers;
- Stating that those who were destitute or not registered with a GP should not be excluded from receiving a vaccination;
- Information on the vaccination should be available in different languages; and
- What was the approach taken by GPs to ensure that unused vaccinations were not wasted.

The Director of Public Health responded to questions by stating that it was important to reiterate that at this stage there was no evidence that vaccines were less effective against the existing Kent variant and he encouraged all to continue to attend an appointment for their vaccination. He said that various teams, including Youth Services, local Housing Providers and Early Years Teams were actively engaged with work to promote testing and vaccination, adding that this work was complimented by a comprehensive communications strategy.

The Director of Public Health confirmed that the surge testing in central/south Manchester was available to local businesses and employees. He further acknowledged the comment regarding the issue of household bubbles and informed the Committee that an approach to this was to be discussed and agreed.

The Executive Clinical Director MHCC stated that for those residents who had not attended or taken up the offer a vaccination appointment they would be contacted, including a telephone call and the take up rates would continue to be monitored. She commented that the take up rate of the vaccination overall was very good.

In relation to housebound patients and the issue raised by Members, the Executive Clinical Director MHCC advised that the issue had arisen as a result of the physical management of the vaccination and the challenges this had presented to administer it safely. She stated that a process had subsequently been agreed to ensure that the vaccination could be delivered in a clinically safe manner and work was currently underway to vaccinate anyone who might not have received it.

The Executive Clinical Director MHCC acknowledged the comment made regarding Primary Care Network arrangements and appointment offers by stating this was acknowledged and work was underway to address this by offering vaccination appointments in a range of different settings. She stated that it was important to raise awareness of the vaccination and encouraged all to take up an offer as a way to combat COVID-19 and work was underway with a range of VCSE organisations to promote this and engage with citizens. She further stated that all citizens should be encouraged to register with a GP as it was important for all aspects of their health.

In regard to the question regarding unused vaccinations the Executive Clinical Director MHCC advised that the approach was that no vaccination should be wasted once the vial had been opened and practices would be responsible for managing their reserve list.

The Executive Member for Adults, Health and Wellbeing praised the work that was being delivered across the city on behalf of the residents.

**Decision**

The Committee notes the report and pays tribute to all of the staff and volunteers involved in this important activity.

**HSC/21/11                      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 agree the work programme.

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**Manchester City Council  
Report for Information**

**Report to:** Health Scrutiny Committee – 9 March 2021  
**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 **1 March 2021**, 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:

There are no updates to report since the Committee last met.

**Health Scrutiny Committee  
Work Programme – March 2021**

<b>Tuesday 9 March 2021, 2pm (Report deadline Thursday 25 February 2021)</b>				
<b>Item</b>	<b>Purpose</b>	<b>Lead Executive Member</b>	<b>Strategic Director/ Lead Officer</b>	<b>Comments</b>
COVID-19 Update	This report will provide an update to the Committee on activity relating to public health and adult social care in response to COVID-19.	Cllr Craig	David Regan Bernadette Enright	
Better Outcomes, Better Lives	To receive a report on the Better Outcomes, Better Lives programme.	Cllr Craig	Sarah Broad	
Hospital Changes & COVID	To receive a report on the projected impact on delayed elective care; moving of outpatient care between sites in order to provide Covid-secure environments and measures to mitigate impact on patients; and in particular changes to maternity/ante natal services between the Oxford Road Campus and Wythenshawe.	Cllr Craig	Nick Gomm Caroline Davidson James Allison	
City Health Walk-in Centre and COVID-19	To receive a report on the closure to visitors to the Walk In Centre located within Boots the Chemist, Cross Street, Manchester.	Cllr Craig	Nick Gomm Dr Kumar	
Overview Report	The monthly report includes the recommendations monitor, relevant key decisions, the Committee's work programme and items for information. The report also contains additional information including details of those organisations that have been inspected by the Care Quality Commission.		Lee Walker	



<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	
NHS 111 Service	To receive a report on the delivery of the NHS 111 Service. This report is to include specific reference to the activities to support the delivery of the Urgent and Emergency Care by Appointment model.	Cllr Craig	Nick Gomm	
Urgent and Emergency Care by Appointment	To receive an update report, post COVID, on the Urgent and Emergency Care by Appointment model. This report with include any evaluation of the service following its implementation in December 2020..	Cllr Craig	Nick Gomm Sian Goodwin	Previously considered at the meeting of 1 Dec 2020.

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