

## **Health Scrutiny Committee**

### **Minutes of the meeting held on Wednesday, 23 June 2021**

**Present:** Councillor Green (Chair) – in the Chair

**Councillors:** Nasrin Ali, Cooley, Curley, Hussain, Newman, Reeves, Riasat and Richards

**Apologies:** Councillors Leech and Monaghan

**Also present:**

Councillor Midgley, Executive Member for Health and Care

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

Dr Manisha Kumar, Executive Clinical Director Manchester Health and Care  
Commissioning

Mark Edwards, Chief Operating Officer, Manchester Local Care Organisation

#### **HSC/21/23 Minutes**

##### **Decision**

To approve the minutes of the meeting held on 26 May 2021 as a correct record.

#### **HSC/21/24 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.

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

- Noting the importance of vaccination, especially for older residents to prevent them from becoming seriously ill if they contracted COVID-19;
- An assurance was sought that the supply of vaccines was sufficient to meet the increased numbers of people coming forward for vaccination;
- What were the reasons as to why the infection rates in Manchester were high;
- Noting that residents were being encouraged to obtain their second jab within eight weeks of having the first, what was being done to manage those who had a second appointment booked in twelve weeks and maybe reluctant to cancel that second prebooked appointment;
- An assurance was sought that Learning Disabled citizens were being supported and encouraged to have their vaccination, including those who may reside in a setting provided outside of Manchester;
- Further information was requested on the Community Champions Fund and how this had been allocated;

- Noting that the issue of trust was vital to ensure all communities access their vaccination;
- Noting that COVID deniers and vaccination hoaxers still existed and what was being done to address this; and
- Was planning underway to be able to deliver a seasonal vaccination booster.

In response, the Executive Clinical Director Manchester Health and Care Commissioning informed the Members that evidence showed that for those people contracting COVID following their second vaccination displayed much milder symptoms that could be safely managed at home. She advised that Manchester had enough vaccine to meet current demand and she encouraged all to obtain their second jab when offered. She described that people are being contacted directly to offer them their second jab with advice and information as to where and when this could be obtained, including the promotion of pop services in addition to the national system and that a helpline had been established to guide residents through this process if required. She advised that people should not delay in getting their second jab and then they can always cancel any prebooked second jab via the national NHS booking system.

In regard to Learning Disabled citizens, the Executive Clinical Director Manchester Health and Care Commissioning advised that all avenues of contact and support were being utilised to maximise and support the uptake of the vaccine. She said that General Practitioners records were being used and all relevant and appropriate teams experience knowledge was used to support this activity. She added that bespoke services such as taxis and specifically managed vaccination sessions in appropriate settings had been provided. The Consultant in Public Health Medicine stated that the Disabled Peoples Engagement Board had also helped coordinate and deliver appropriate key messages surrounding COVID-19.

The Consultant in Public Health stated that the high rates of infection rates in Manchester could be explained by a number of factors including structural inequalities, that Manchester was a densely populated city; larger and extended families living in the same household; a large student population and people struggling to self-isolate due to economic circumstances. She stated that the infection rates continued to be monitored and it was difficult to state if the figure had peaked yet, however she stressed that the vaccination was important to tackle COVID-19.

The Consultant in Public Health stated that initially assisted Lateral Flow Testing had been supported in schools with the results reported to the national recording system, however pupils were now being asked to undertake this at home and upload their own results. She stated that they had witnessed a decrease in the number of reported results which could indicate either the tests were not being undertaken or the results were not being reported. She said that to address this they were seeking to re-establish the supported testing in schools. Officers stated that it was vitally important for all residents to undertake a Lateral Flow Test twice a week and upload the results and to continue to observe all Public Health guidance regarding COVID-19.

In response to the specific question regarding the Community Champion Fund the Consultant in Public Health Medicine provided examples of what this fund had been used to support, such as the COVID chat programme and support for refugees and asylum seekers and that she would share further information on this fund following the meeting.

The Consultant in Public Health advised the Committee that she was the co-chair of the Covid Health Equity Manchester (CHEM) group and consideration was given as to how different community groups were engaged with around the issue of COVID and the vaccination. She described that it was recognised and understood that the issue of trust and cultural competence was key to meaningful engagement and the use of trusted and credible people within communities helped support this activity. She continued by stating that access to vaccinations had been recognised as a barrier and as a result pop up events had been promoted and delivered in a range of settings, such as faith buildings. She further commented that it was important to listen to and value the views and concerns of people regarding the vaccination and not to meet this dismissively. She described that it was important to share facts and engage with people regarding their concerns, noting that people who had been resistant to the vaccination were beginning to come forward for these.

The Executive Clinical Director Manchester Health and Care Commissioning reported that she had also continued to engage with patients who were initially hesitant and had expressed concerns regarding the vaccination and she reported that she was witnessing patients now taking up the offer.

The Executive Member for Health and Care stated that if Members required any additional information regarding any the work discussed that they could contact her outside of the formal meetings.

The Chair concluded this item of business by thanking all involved with the vaccination programme for their continued hard work.

## **Decision**

The Committee notes the report and presentation.

## **HSC/21/25 Strategic scene-setting**

The Committee considered the report and accompanying presentations of the Director of Public Health, the Executive Director Adult Social Services and the Deputy Director Adult Social Services that provided an overview of health inequalities and outcomes in Manchester; an overview of the system wide response with a focus on Manchester's Local Care Organisation and an update on Better Outcomes, Better Lives, the Manchester Local Care Organisation's transformation programme for Adult Social Care.

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

- Whilst welcoming the ambitions of Better Outcomes, Better Lives it was important to ensure that residents in need of care received the most appropriate levels of care;
- A Member provided a personal experience of a family member who received care and stressed the importance of appropriate care and support to enable people to live independently;
- Future update reports should include the voice of the patient experience;
- The role of Carers was very important;
- The COVID-19 vaccination programme had demonstrated the successful delivery of a service through collaborative working and this positive experience and learning should be built upon in other areas of service delivery;

The Executive Director of Adult Social Services stated that the ambition of Better Outcomes, Better Lives was to promote and enable independent living and support residents to continue living in their homes and communities. She stated this would be achieved through a strength based approach to the assessment and commissioning of services, with these were designed and delivered 'with' people as opposed to 'for' people. She stated that despite the budget Manchester had invested in this programme of improvement. She further recognised the comment made regarding the important role of carers and suggested that an update report on the Our Manchester Carers Strategy be submitted to the Committee for consideration at an appropriate time.

The Deputy Director of Adult Social Services noted the comments from the Member regarding the information provided in the slide pack regarding the Initial Impact Assessment and provided clarification on the examples and data provided. In response to a question regarding how the Better Outcomes, Better Lives programme connected to the Our Manchester strategy she stated that this information had been included in the report that had been considered by the Committee at the March 2021 meeting. She further stated that information relating to IMPOWER would be circulated outside of the meeting following comments by a Member.

The Chief Operating Officer, Manchester Local Care Organisation stated that the Local Care Organisation was predicated on Public Health ambitions and targets and Key Performance Indicators were agreed and monitored. He stated that the neighbourhood delivery approach of the Manchester Local Care Organisation built on partnerships and community based strengths and knowledge. He stated that Manchester was leading on this model of delivery when compared to other Local Authorities. He stated that he would share the details of the Neighbourhood Leads with the Committee following the meeting.

The Chair stated that the Committee would welcome the opportunity to further scrutinise the Performance Framework and Quality Impact Assessment and this would be considered when planning future agenda items. She commented that a report on the work of the Integrated Neighbourhood Teams would be included on the Committee's work programme. The Chair further added following comments from the Committee that consideration would be given as to the format and content of the reports.

The Executive Member for Health and Care stated that staff working within the integrated teams were the most valuable resource and key to the successful delivery of Better Outcomes, Better Lives work. She stated that feedback from staff was very positive that reflected improved services to residents. She stated that there were a series of videos that could be shared with the Committee that highlighted the positive work that had been developed by developing integrated teams and the multi-agency working approach.

### **Decision**

The Committee:-

- (1) Note the report and presentations.
- (2) Recommend that items on the Our Manchester Carers Strategy and an update on the work of the Integrated Neighbourhood Teams be included on the Committee's work programme and these reports shall include the voice of the citizen.

### **HSC/21/26 Overview Report**

The report of the Governance and Scrutiny Support Unit which contained key decisions within the Committee's remit and responses to previous recommendations was submitted for comment. Members were also invited to agree the Committee's future work programme.

The Chair recommended that the provision of NHS Dentistry, Primary Care access and NHS recovery that were currently listed as to be scheduled should be considered at the September meeting, and the update report on the work of Covid Health Equity Manchester would be considered at the October meeting.

The Chair stated that the July meeting would have a focus on mental health.

### **Decision**

The Committee notes the report and agree the work programme subject to the above amendments.