

## **Health Scrutiny Committee**

### **Minutes of the meeting held on Wednesday, 20 July 2022**

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

**Councillors:** Appleby, Bayunu, Curley, Karney, Newman, Reeves, Riasat, Richards and Russell

**Apologies:** None received

**Also present:**

Councillor T. Robinson, Executive Member for Healthy Manchester and Adult Social Care

Councillor Rawlins, Executive Member for Environment and Transport

Councillor Shilton Godwin, Chair of Environment and Climate Change Scrutiny Committee

Sir Richard Leese, Chair, Greater Manchester Integrated Care

Mark Fisher CBE, Chief Executive Designate, Greater Manchester Integrated Care

Ed Dyson, Executive Director of Strategy & Deputy Chief Accountable Officer, Manchester Health and Care Commissioning

Jemma Hynes, FoodSync

Julie Taylor, Director of Strategy (Manchester), NHS Greater Manchester Integrated Care

Lee Hay, Director of Strategy, Manchester University NHS Foundation Trust

Catherine Hollingsworth, Partnership Account Manager, Slimming World

### **HSC/22/82 Urgent Business - The Recent Heatwave**

The Chair introduced an item of urgent business by inviting the Director of Public Health, the Executive Director of Adult Social Services and the Chief Operating Officer of the MLCO to address the Committee on the response to the unprecedented recent heatwave.

Officers reported that across the wider health system, all services had worked together and planned for the imminent heatwave following the announcements from the Met Office. An update was provided that described the measures taken to support both residents and staff in a range of settings, noting that despite the additional pressures experienced the system had coped.

The Executive Member for Healthy Manchester and Adult Social Care thanked all staff involved in protecting and supporting residents. He further thanked the residents of Manchester for adhering to the public health messages during the heatwave.

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

- That the impact of climate change could not be ignored and the Government needed to do more immediately to address this;

- Recognising the invaluable service that the public sector provided at such times of crisis;
- More information was sought on the approach to communications with vulnerable groups;
- Noting the impact of Covid and people's reluctance to access medical assistance it was important to reiterate that if residents were experiencing symptoms, they should seek appropriate medical assistance; and
- Noting that the impact of the heatwave on people's health would be felt in the coming weeks and months.

The Chair stated that the Committee had given a commitment to regularly consider the relationship between climate change and health and recommended that the next quarterly report focused on the impact of the heatwave and resilience building across the system. The Chair further commented upon the impact of the heatwave on mental health, noting that this was in the context of other global existential threats.

### **Decision**

To note the update and recommend that the next report that considers the relationship between health and climate change focuses on the impact of the heatwave, including physical and mental health and resilience building across the system.

### **HSC/22/83 Minutes**

#### **Decision**

To approve the minutes of the meeting held on 22 June 2022 as a correct record.

### **HSC/22/84 Manchester University NHS Foundation Trust Service Change Proposals**

The Committee considered the report of the Director of Strategy (Manchester), NHS Greater Manchester Integrated Care and the Director of Strategy, Manchester University NHS Foundation Trust (MFT) that described service change proposals for Clinical Haematology and Fetal Medicine that formed part of the agreed plans to disaggregate services for the legacy Pennine Acute Hospital Trust (PAHT) and integrate North Manchester General Hospital (NMGH) services into Manchester University NHS Foundation Trust.

Key points and themes in the report included:

- Providing an overview of the strategic context for change;
- The approach to developing and assuring service change proposals;
- An overview of the service change proposals; and
- Key areas of focus highlighted during the engagement process.

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

- The importance of considering public transport costs incurred by residents when proposing changes to the location of the delivery of services;
- An assurance was sought that the proposals reported did not amount to asset stripping from North Manchester General Hospital;
- Consideration needed to be given to the language within the reports submitted to the Committee to ensure that plain English was used throughout so that they were accessible to the lay reader;
- Did the proposals in regard to Fetal Medicine represent a wider reorganisation of maternity services or was it a more discrete proposal; and
- Noting that the Health Scrutiny Committee retained the right to refer any proposed substantial variation to the Secretary of State if satisfied that the criteria had been met.

The Executive Member for Healthy Manchester and Adult Social Care stated that NHS partners were aware of the rights of the Health Scrutiny Committee to refer any proposed substantial variation to the Secretary of State, however he reassured the Committee that NHS partners did consult with him on a regular basis, and this provided political oversight and input. He advised that he further pressed and challenged NHS partners to explicitly report the considerations given to the impacts on residents. He further noted the comments regarding the use of plain English.

The Director of Strategy, Manchester University NHS Foundation Trust reassured the Committee that the Fetal Medicine service were currently delivered at the Royal Oldham hospital site and did not represent any asset stripping from the North Manchester General Hospital. He further advised that this was not part of a systematic redesign of the delivery of maternity services.

The Chair stated that she was reassured by the statement provided by the Executive Member for Healthy Manchester and Adult Social Care and was satisfied with the reported consideration given to travel and digital inclusion. She asked that any future proposals were submitted to the Committee at the earliest opportunity so that the Committee could comment on these.

## **Decision**

To note the report.

## **HSC/22/85 Climate Change - Food and Health**

The Committee considered the report of the Director of Public Health that described the strategy and actions of the Manchester Food Board (MFB) to achieve a positive alteration in the food system within the city and, at the same time, address climate change, alongside an update of recent actions and priorities for 2022.

Key points and themes in the report included:

- Providing an introduction and background, noting that the current MFB was set up in 2019 as a multi-sectoral partnership capable of driving systemic, strategic change in the food system for Manchester;
- The key over-arching priority for MFB was now addressing the environmental and climate change issues related to food production and consumption;
- Describing the specific aim to reduce environmental impacts throughout the food system with a focus on food waste and a shift to more ecological practices;
- Noting that the Food for the Planet Strategy is aligned with the Manchester Climate Change Framework;
- Describing the action for 2022; and
- Describing future actions.

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

- Noting the impact of the cost of living crisis, more needed to be done with supermarkets in deprived wards to ensure people had access to healthy food options;
- Discussing the provision of school meals and how providers could be influenced;
- What was the relationship between the Food Board and local community providers;
- Business Rates should be used to encourage businesses providing healthy food options;
- What consideration had been given to the provision of free drinking water access points across the city to reduce people purchasing bottled water;
- The need to engage young people on the issue of fast food and healthy choices; and
- Council owned land should be released to community groups to support the planting and growing of food.

The Committee welcomed Councillor Shilton Godwin, Chair of the Environment and Climate Change Scrutiny Committee who discussed the relationship between food consumption, particularly meat, food production and carbon emissions. She stated that the National Food Strategy for England had failed to address the issue of supermarket practices.

Jemma Hynes, FoodSync discussed the challenges experienced when attempting to engage with supermarkets. She stated that local branches of supermarkets had little or no autonomy to make decisions. She contextualised the issue by explaining that food was traded globally as a commodity with complex supply chains, adding that the full implications of the war in the Ukraine on global food supplies was yet to be realised. She further commented that the greatest profits to supermarkets were achieved through the sale of processed foods, not fruit and vegetables. However, despite this they continued to lobby at a national level to influence change with regard to national chains. She stated that they focused a lot of their limited resources on working with the local independent food sector. With regard to the discussion regarding the cost of living crisis she commented that the Food Board did contribute to the Council's Family Poverty Strategy. She further commented that the distribution of free food also needed to consider the quality of the food, noting that the priority during the pandemic had correctly been to ensure that people were fed, however

consideration now had to be given to the nutritional value of the food that was distributed to families in crisis.

Jemma Hynes, FoodSync stated that they did advocate bringing the provision of school meals back into the control of local authorities and advised that the Food Board did work closely with the Council's Education Department. She described that school budgets were pressured, noting that the increased costs of fuel bills would add to this situation. She commented that a consequence of this would potentially be for providers of school meals to source produce from other countries where this was cheaper, however the associated food miles contributed to carbon emissions. She further added that Business Rates was a complex system and they advocated a change to this, including the establishment of a grants system to support local, sustainable businesses.

Jemma Hynes, FoodSync stated that the issue of releasing council owned land to community groups to grow food was not as simple as it first appeared, noting that issues of soil toxicity, the required initial capital investment in infrastructure and ongoing maintenance funding all had to be considered, noting that competition for land was very fierce across the city. She stated that 'grow your own' work with community groups and residents was delivered, often through working with partners such as local housing providers, adding that a one size fits all approach was not appropriate.

The Executive Member for Environment and Transport advised the Committee that the Manchester Food Board were represented and contributed to the Manchester Climate Change Framework, noting that the Manchester Climate Change Framework (2020-25) was the city's high-level strategy for tackling climate change. She supported the call for behaviour change regarding food choices and the need for meaningful engagement with all residents on this important issue. She encouraged all Members that this should be included in each respective ward's Climate Change Action Plans. She further advised that she would circulate the latest Food Board Newsletter and encouraged all Members to subscribe to this.

The Chair stated that she would speak with the Executive Member for Environment and Transport to agree how the Committee could contribute to and comment on the refresh of the Manchester Food Board Strategy.

A Member recommended that a future update report be provided that informed Members on the actions and initiatives undertaken by the Manchester Food Board to engage with local supermarkets in the most deprived wards in the city.

## **Decisions**

1. The Committee note the report and the Manchester Food Board strategy and action plans.
2. The Committee recommend that a future update report is provided that informs Members on the actions and initiatives undertaken by the Manchester Food Board to engage with local supermarkets in the most deprived wards in the city.

## **HSC/22/86 Adult Weight Management Services**

The Committee considered the report of Director of Public Health that provided an update on the delivery of weight management services in the city and introduced the *Food Active!* Healthy Weight Declaration. It provided evidence of the work delivered by commissioned weight management service providers and wider system partners such as physical activity providers.

Key points and themes in the report included:

- Noting that in Manchester 63% of adults (Active Lives Survey 2018) and 41% of children aged 10-11 years (National Child Measurement Programme (NCMP) 2020) were overweight or obese even prior to the COVID-19 pandemic, higher than the national average;
- The Population Health Team was responsible for the overall Healthy Weight Strategy and the commissioning of services that delivered obesity prevention in Adults and Children;
- The strategy took a whole system, partnership approach to tackling obesity in the city and was developed across four key themes; Food & Culture, Physical Activity, Environment & Neighbourhoods and Support & Prevention;
- The Strategy was launched in September 2021 following the pandemic;
- Describing the commissioning of services at Tier Two and Tier Three;
- Describing the role of the Project Manager who had been appointed to work across neighbourhoods to support the delivery of the Healthy Weight Strategy and embed referral pathways for weight management support; and
- Describing the Food Active! Healthy Weight Declaration and the key pledges.

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

- With reference to the discussion on the previous agenda item, it was important to recognise the impact of the cost of living crisis on residents and the food options that were available to them;
- Whilst noting the work of Slimming World, it was important to recognise that a one size fits all approach was not appropriate;
- The need to engage with, and ensure services were appropriate for the diverse population and communities across Manchester;
- Consideration should be given to the use of Council owned buildings and lease arrangements to support community groups to support and build upon the activities described;
- Appropriate consideration needed to be given to the support and interventions for the different types of diabetes, noting that they were distinctly different; and
- How the impact of the services described was measured.

The Director of Public Health described that despite the challenges described in relation to the grant funding, a range of free services had been provided for residents. The Commissioning Manager advised that Slimming World was an example of the offer provided and quality assurance monitoring of this service was undertaken. He

described that the Slimming World offer was part of a wider suite of services designed to support people, making reference to the work of the Parks Team, local neighbourhood activities and Manchester Active.

Catherine Hollingsworth, Partnership Account Manager, Slimming World provided an overview of the service offered by Slimming World, noting that this would be tailored to the individual needs of the person as it was recognised that a 'one size fits all' approach was not appropriate. She described that the programme encouraged and supported a person to develop a healthy and positive relationship to food.

The Director of Public Health advised that the need to deliver appropriate, inclusive services, delivered in a safe environment was understood and taken into consideration, noting that culturally appropriate and tailored interventions had been delivered and the success and learning from these would be built upon to maximise their reach across all communities. A Member requested that any future update report should include information relating to the quality assurance and monitoring of those commissioned services that delivered obesity prevention in neighbourhoods.

### **Decisions**

1. The Committee note the report and support the Food Active! Healthy Weight Declaration.
2. Recommend that any future update report should include information relating to the quality assurance and monitoring of those commissioned services that delivered obesity prevention in neighbourhoods.

### **HSC/22/87 [11.30-11.55] Integrated Care Systems**

The Committee considered the report of the Executive Member for Healthy Manchester and Adult Social Care that provided an update on the UK Government's reforms to health and social care to establish Integrated Care Systems, including at the level of Greater Manchester.

Key points and themes in the report included:

- Integrated Care Systems (ICS) were being established nationally as part of the next phase of health and social care integration;
- The national aims for ICS, noting that ICS included a strong focus on place-based partnership working;
- From 1 July 2022, Clinical Commissioning Groups (CCGs) would be disestablished across England, and ICSs would be established in line with legislation set out in the Health and Care Act 2022;
- In Manchester, the statutory responsibilities of NHS Manchester CCG would transfer to Greater Manchester Integrated Care (NHS GM) alongside those of the other nine Greater Manchester (GM) CCGs;
- The Manchester Partnership Board would lead the development of Manchester's future operating model for health and social care integration;

- Joanne Roney OBE had been appointed by NHS GM as the Place-Based Lead for Manchester, in addition to her role as Chief Executive of Manchester City Council; and
- Next steps, noting that Manchester and the other nine GM localities were developing their own place-specific locality models.

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

- Were the Board and related structures within the organisation reflecting the diversity of the city;
- Were local health professionals supportive of the new arrangements;
- What influence would the new structural arrangement have at a national level;
- A visual representation of the new structure should be provided;
- Had staff been supported during the transition to the new arrangements;
- An assurance was sought that the issue of safeguarding remained; and
- What examples could be provided to articulate the benefits of the new arrangements for Manchester residents.

Sir Richard Leese, Chair, Greater Manchester Integrated Care stated that the organisation did reflect the diversity of the city. He advised that the Integrated Care Systems would have a mechanism to feed directly into Government and meetings with Ministers would also be convened. Mark Fisher CBE, Chief Executive Designate, Greater Manchester Integrated Care stated that the Greater Manchester Integrated Care Systems was the second largest in the country, that gave it the responsibility and authority to articulate the needs and ask of Greater Manchester.

Sir Richard Leese, Chair, Greater Manchester Integrated Care stated that in Manchester health professionals were supportive of the new arrangements, adding that this had been achieved as a result of the existing strong relationships that had been developed over the previous years through the devolution process. In response to the issue raised regarding safeguarding he commented that the existing arrangements would remain.

Sir Richard Leese, Chair, Greater Manchester Integrated Care provided examples of the benefits that would be realised as a result of the new arrangements. He described that this would enable providers to work collaboratively across Greater Manchester to address strains on the system, using all resources and capacity efficiently and effectively. It provided the opportunity to manage the health system as a whole and the Integrated Neighbourhood working model that had been initiated in Manchester to great success could be rolled out and implemented across Greater Manchester.

Mark Fisher CBE, Chief Executive Designate, Greater Manchester Integrated Care stated that the new arrangements had come into effect from 1 July 2022 and he was satisfied that staff and teams were fully informed of the new arrangements and the transition had been successful, with all functions operating. He said that this had been achieved through rigorous planning and communications with all staff. He further commented that a diagram that visually described the new organisation could be circulated to the Committee for information following the meeting.



The Chair stated that any future update report should include how success was to be measured, including Key Performance Indicators, and particularly the work to address health inequalities. The Chair noted that the Committee would be considering health inequalities at the Marmot themed October meeting and asked that officers include information in the reports to be considered at that meeting that considered how the Greater Manchester Integrated Care arrangements contributed to this important area of work.

The Chair further noted that when this item was to be considered again an invitation would be sent to Joanne Roney Chief Executive of Manchester City Council who had been appointed by NHS GM as the Place-Based Lead for Manchester.

## **Decision**

To note the report.

## **HSC/22/88 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.

A Member commented that consideration should be given to scheduling the item listed as 'Health Inequalities and Older People'. The Chair stated that she would consider this.

In response to a question regarding a vaccination for monkeypox the Director of Public Health stated that information on this would be provided in the next update. He further advised that negotiations were ongoing as to the future of the community vaccination facility in Wythenshawe and an update on this would be provided when available.

A Member of the Committee described his recent positive experience of accessing the Virtual Covid Ward following testing positive for Covid. He stated that access had been predicated on testing and registering his results. Noting that that the provision of free testing had been removed he reiterated the call, made previously by the Committee for the immediate reintroduction of free Covid tests.

The Chair welcomed the updates that had been provided to the Committee's previous recommendations.

## **Decision**

The Committee notes the report and agrees the work programme.

