Health Scrutiny Committee

Minutes of the meeting held on Tuesday, 3 September 2019

Present:

Councillor Farrell (Chair) – in the Chair Councillors Clay, Curley, Holt, Mary Monaghan, Newman, O'Neil, Riasat, Watson and Wills

Also present:

Councillor Craig, Executive Member for Adults, Health and Wellbeing Cllr Ilyas, Assistant Executive Member for Adults, Health and Wellbeing Andrew Gilliver, Pride in Practice / Community Involvement Coordinator, LGBT Foundation Julia Stephens-Row, Independent Chair Manchester Safeguarding Adults Board Lynne Stafford, Chief Executive Gaddum Dave Williams, Chief Executive Manchester Carers Forum Reko Smith, Carer

HSC/19/14 Minutes

Decision

To approve the minutes of the meeting held on 16 July 2019 as a correct record.

HSC/19/15 Discussion Item: Pride in Practice

The Committee welcomed Andrew Gilliver, LGBT (lesbian, gay, bisexual and trans) Foundation who had been invited to the meeting to discuss Pride In Practice.

Mr Gilliver delivered a presentation that described that the LGBT Foundation's Pride in Practice was a quality assurance and social prescribing service that strengthened and developed primary care services relationships with their LGBT patients within the local community.

LGBT people had told the LGBT Foundation that it was important to them to be open and honest about their sexual orientation, gender identity, trans status and lives with their GPs. Service users wanted to feel confident that health professionals understood and could respond to their specific needs. Pride in Practice was a simple way for practitioners to inform their patients that they understood them and they could trust them.

Pride in Practice aimed to ensure that all LGBT people had access to primary care services that were inclusive and understanding of the needs of diverse communities. Through Pride in Practice, LGBT people highlighted the health and care inequities they had experienced across primary care services, as well as sharing many

examples of best practice around LGBT inclusion in primary care. These experiences helped demonstrate the project's impact on the design and delivery of LGBT inclusive services, highlighting the simple but important changes that could be made by health care providers to help reduce health inequalities and improve the health and wellbeing of our communities.

The Committee were informed that Pride in Practice was suitable for all Primary Care Services, including GP Practices, Dentists, Pharmacies and Optometrists and endorsed by The Royal College of GP's.

Members heard that Pride in Practice was a support package that enabled health professionals to effectively and confidently meet the needs of LGBT patients. It further supported practitioners in meeting the requirements of their Clinical Commissioning Group, the Care Quality Commission and other bodies that they worked with.

Pride in Practice provided Practices with an accreditation award, including a wall plaque and Pride in Practice logos for letterheads and websites. This enabled Practices to promote their equality credentials, and demonstrated their commitment to ensuring a fully inclusive, patient-centred service.

Members were informed that over 5000 healthcare professionals had received training, with 97% of those feeding back that their confidence in regard to this area had increased and 98% stating that they felt better informed.

Mr Gilliver informed the Committee that this project that had started in Manchester was beginning to be rolled out in areas of London and West Yorkshire.

A Member reflected upon his own personal experience when accessing health care and noted the positive improvements that had been achieved and enquired what were the challenges today. Mr Gilliver stated that the current challenge related to trans patients, stating that citizens had to wait a significant period of time to access specialist services and health professional had little or no training in the area of gender diversity.

He further commented that the LGBT Foundation would seek to train and support health professionals in this area and training could be tailored to suit the needs of different providers. He further commented that the LGBT Foundation served as a signposting service for wider sources of support, including specials support in recognition of our diverse communities that could assist both patient and their families.

In response to a comment from a Member regarding GP Practices that did not engage with this project, Mr Gilliver stated that if they received a complaint regarding the service received they would seek to engage with the Practice Manager and enter into a dialogue to promote this project and offer training and support. In response to a question from the Chair regarding turnover of staff in GP Practices, Mr Gilliver confirmed that they would refresh the training as and when required and remained a point of contact for support and advice for Practice Managers. The Executive Member for Adults, Health and Wellbeing informed the Committee that the Manchester Health and Care Commissioning Board had agreed that this offer was to be mandatory for all GP Practices.

The Chair thanked Mr Gilliver for attending the meeting and discussing the project with the Committee. He informed Members that the LGBT Foundation would be invited back to attend the December meeting to discuss specific health improvement interventions for LGBT communities in Manchester, including the Greater Manchester Trans Health Service and Pride in Ageing.

Decision

1. To thank Mr Gilliver for attending the meeting and addressing the Committee.

HSC/19/16 Our Manchester Carers Strategy

The Committee considered the report of the Executive Director of Adult Services that provided an update on progress to implement the Our Manchester Carers Strategy since the last update to the Health Scrutiny Committee at the meeting held 17 July 2018. (See minutes of the Health Scrutiny Committee ref. HSC/18/31)

Officers referred to the main points of the report which were: -

- Providing a definition of a carer;
- The estimated number of carers in the city, noting that studies suggested that up to 25% of Carers provided care in excess of 50 hours per week and that 1 in 9 employees across the city were balancing work commitments with caring responsibilities;
- Describing the vision for Manchester Carers;
- The objectives of the Our Manchester Carers Strategy;
- Information on the biennial carer survey and its findings;
- Information on Young Carers, noting the Young Carers Operational Working Group had been established and would refresh the strategy with the aim to increase the identification and support for Young Carers and improve pathways.
- Information on the seven areas of action for the Strategic Action Plan for Young Carers;
- An update on the Greater Manchester Carers Strategy and the Greater Manchester Exemplar model for Carer Support
- Providing an update on the Manchester Carers Network;
- Providing an update on the work of the Gaddum Centre, who manage the Manchester Carers Network which included 20 voluntary organisations providing information, advice and support to Carers' (including an existing helpline delivered through Manchester Carers Centre.);
- An overview of the funding arrangements and the progress made in respect of additional funding to implement the offer to improve the lives of Manchester Carers;
- Governance arrangements; and
- The voice of Carers, noting that the voice of Carers was important to this work on the basis of "nothing about us, without us" being a core philosophy.

The Committee heard from Reko Smith, a carer who spoke eloquently about his own lived experience as carer for his mother. He spoke of the challenges he had experienced, particularly at the time of transition from Young Person to Adult Services and of the various sources of support, both formal and informal.

The Chair thanked Mr Smith for attending the meeting and noted that due to time constraints he was unable to remain for the duration of the item. He recommended that Mr Smith be invited to a future meeting to allow enough time for Members to learn of his experience and discuss this with him in further detail. The Committee supported this recommendation.

The Committee heard from the Chief Executive Manchester Carers Forum who spoke of his own lived experience of being a carer. He stated that it was important to recognise the significant contribution that carers made to the city, noting that it had been estimated that if carers stopped caring this would result in an additional £854m cost to the Council. He further commented that it was important to understand the positive motives of carers and not to view them as victims. He stated carers chose to care for their loved ones and they should be supported in this role.

A Member acknowledged this statement and commented that all services, such as transport, housing and education should be designed with this taken into consideration. The Commissioning Development Specialist stated that work was also ongoing to raise awareness of carers with employees so that their policies and practices recognised and accommodated the needs of carers.

Members then discussed the challenges and support offered to Young Carers. The Chief Executive Manchester Carers Forum stated that the conservative estimate is that there was in excess of two thousand young carers across Manchester. The Strategic Lead (Commissioning) stated that a lot of work was undertaken with education establishments to help identify and offer appropriate support to young carers, adding that an officer was dedicated to coordinating and overseeing this area of work. The Chief Executive Manchester Carers Forum stated that work was also underway at a Greater Manchester level to address the support needs of Young Carers.

Members discussed the issue of people self-identifying as carers and young carers being reluctant to access support for fear of negative consequences for them and their families.

The Executive Member for Adults, Health and Wellbeing informed the Committee that reports on the initiatives to support to Young Carers had been regularly considered by the Children and Young People Scrutiny Committee and these would be circulated to the Committee for information. The Strategic Lead (Commissioning) responded to a question from a Member by confirming that the report referred to that had been published following research on Young Carer's experience of transition would be circulated to Members for information.

The Strategic Lead (Commissioning) stated that the Our Manchester Carers Strategy would drive out inconsistencies and standardise the advice and information offer to

carers. She said consideration would be given to how this was promoted to ensure it was appropriate. The Chief Executive, Gaddum acknowledged that sources of support had been fragmented in the past and stated that the establishment of the Single Point of Contact, that would provide a gateway for all Carers to be triaged and supported to the most appropriate services, advice and information they required at an early stage would address any inconsistencies and standardise the offer. She further stated that this would also assist professionals across a range of partner identify carers.

A Member commented on the importance to carers of the provision and availability of respite care, noting the relatively low cost of this offer compared to the cost of longer term, full time care. The Strategic Lead (Commissioning) acknowledged this comment and stated that respite care was now referred to 'replacement care'. She descried that the intention was to commission a service that would enable Carers to be able to buy (using a Personal Budget approach) short term occasional support to help them have a break, attend appointments, knowing that the cared-for person is adequately supported and provided with the necessary care.

In response to a specific question regarding a reported underspend the Executive Member for Adults, Health and Wellbeing stated that this was related to staffing posts, and would be accounted for once posts had been filled.

Decisions

The Committee: -

1. Note the report.

2. Recommend that Mr Smith be invited to a future meeting of the Committee to learn of his experience as a young carer.

HSC/19/17 Annual Report of Manchester Safeguarding Adult Board April 2018 - March 2019

The Committee considered the report of the Executive Director of Adult Services and the former Independent Chair of Manchester Safeguarding Adults Board. It provided Members with an overview of the work of the Board for the period from April 2018 - March 2019.

The Independent Chair of Manchester Safeguarding Adults Board referred to the main points of the report which were: -

- Noting the priorities of the Board that were rolled forward from 2017/18 into 2018/19;
- Noting the key activities described in 2018/19; and
- Future challenges and improvement.

The Executive Director of Adult Services paid tribute to the former Independent Chair of the Manchester Safeguarding Adults Board for her commitment and diligence in safeguarding adults in Manchester.

The Executive Director of Adult Services stated that in recognition of the reconfiguration of services in Manchester new safeguarding arrangements were due to be announced in September and information on these would be shared with the Health Scrutiny Committee.

A Member commented that the use of the word 'customer' in the context of Domestic Violence was inappropriate. The Independent Chair of Manchester Safeguarding Adults Board acknowledged this comment and stated that this would be corrected prior to the reports formal publication.

A Member commented that the report referred to the Learning from Reviews Subgroup and noted that it stated 'It had been a challenge to secure regular and consistent attendance from all agencies and the subgroup had three different Chairs which had led to some inconsistency and slow progress at times.' and asked what was being done to address this. The Independent Chair of Manchester Safeguarding Adults Board informed the Committee that the new Chair of the Subgroup was addressing this issue and Learning from Reviews would continue within the new arrangements. She said this would be aligned with the Learning and Improvement Subgroup, and she was confident that this new arrangement would improve this situation.

The Executive Director of Adult Services commented that the new safeguarding arrangements would strengthen learning reviews and ensure that the right action was taken at the right time by the right partner.

In response to a question regarding the number of, and costs of legal challenges and how this was monitored and reported, the Independent Chair of Manchester Safeguarding Adults Board stated that it was not the role of the Board to consider any legal challenge and responsibility for that rested with the relevant partner. She further stated that the Board were satisfied with the approach taken to The Deprivation of Liberty Safeguards (DoLS). The Executive Director of Adult Services informed Members that she met with legal officers on a monthly basis to review and monitor any challenges.

The Executive Director of Adult Services responded to a comment from the Chair who noted that the membership list of the Board was predominantly statutory health providers and there appeared to be little or no representation from the Voluntary and Community Sector, and asked if this was typical. She advised that the levels of representation would be reviewed and workshops around this had been delivered with the intention to include both statutory and non-statutory bodies represented on the Board. She further stated that the recently appointed Director of Homelessness would be joining the Board.

Decisions

The Committee: -

1. Note the publication of the Manchester Safeguarding Adults Board Annual report 2018–2019.

2. Recommend that the word customer is removed and replaced with a more appropriate term when referring to Domestic Violence.

[Cllr Watson declared a prejudicial interest in this item of business and withdrew from the meeting.]

HSC/19/18 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.

The Chair informed the Committee that the report on Access to Primary Care was to be deferred to the November meeting, with invitations sent to Healthwatch. He further stated that the report on the Supporting People Housing Strategy would be deferred to a later meeting, with the date to be confirmed following discussions with the Executive Member. He further reiterated that the LGBT Foundation would be invited back to attend the December meeting to discuss specific health improvement interventions for LGBT communities in Manchester, including the Greater Manchester Trans Health Service and Pride in Ageing.

Decision

To note the report and approve the work programme subject to the above amendments.