

Health Scrutiny Committee

Minutes of the meeting held on 9 March 2022

Present:

Councillor Green – in the Chair

Councillors Appleby, Curley, Hussain, Newman, Reeves, Riasat and Richards

Apologies: Councillor Monaghan

Also present:

Councillor Midgley, Deputy Leader

Councillor Reid, Ward Councillor for Gorton and Abbey Hey

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

Jay Patient, Be Well Service Manager, Big Life Group

Ian Green, PCN Coach, Big Life Group

Steve Quinlan, Link Worker, Big Life Group

Lynne Warburton, Pathways CIC

George Ramsay, citizen of Manchester

Gaynor Heaton, citizen of Manchester

HSC/22/13 Minutes

Decision

To approve the minutes of the meeting held on 9 February 2022 as a correct record.

HSC/22/14 Living Safely and Fairly with Covid

The Committee considered the report of the Director of Public Health and the Medical Director, Manchester Health and Care Commissioning that described that following recent national announcements the Director of Public Health, council colleagues and other partners had been developing the local Manchester Living Fairly and Safely with Covid draft plan. This draft plan had been circulated to Members for consideration in advance of the meeting.

Key points and themes in the plan included:

- Summary of our Covid-19 response so far;
- Covid-19 Inequalities;
- Epidemiology, including possible future scenarios;
- National Living Safely with Covid-19 Strategy key information;
- Building a shared understanding of what 'living safely and fairly with Covid-19' meant for Manchester – our approach, what we would do and inequalities considerations;
- Local Governance arrangements;
- Our 12-point plan for Living Safely and Fairly with Covid-19 in Manchester; and
- Resource requirements.

The Committee further considered the joint presentation of the Director of Public Health and the Medical Director, Manchester Health and Care Commissioning, that had been circulated to all Members in advance of the meeting that provided an update on COVID-19 activity.

Key points and themes in the presentation included:

- The latest headline figures for the 7 days ending 1 March 2022; and
- An update on the vaccination programme with particular reference to actions taken by Neighbourhood Teams to increase uptake across Wards, vaccine breakdown by ethnicity, case studies and feedback.

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

- To welcome the local Manchester Living Fairly and Safely with Covid draft plan, noting that it included actions to address inequalities and fairer access to services;
- Welcoming the information relating to the newsletter and the inclusion of the trusted voice that had been used to promote the vaccination in local communities, adding this model needed to be rolled out across other areas;
- Noting the prevalence of Covid cases in Manchester and how this could be related to increased social mixing and testing behaviours;
- Was there capacity within the existing teams to respond to any future wave of a Covid variant;
- Noting the removal of free testing and the importance of recognising that Omicron was still present;
- Were Officers confident that Care Home settings were supported to manage any future outbreaks;
- The challenge in monitoring COVID-19 in future and the need to clarify how the Committee would scrutinise this; and
- Further information was sought on the Pakistani Sounding Board.

The Director of Public Health advised that the relaxation of the national restriction rules and the subsequent increase in social mixing would result in an increase in positive cases, adding that the vaccination was the best way to protect people from serious illness. He advised that following the decline in testing the team were now reliant on ONS (Office for National Statistics) data, noting that there were challenges associated with how this data was reported. He advised that the intention was to establish a bespoke local system to accurately monitor infection rates. He advised that a further national announcement was expected in the week commencing 21 March 2022 regarding the provision of LFT testing for vulnerable people, adding that all hospital staff; social care staff and hospital patients continued to be tested. In response to the questions raised regarding Care Homes, he stated that any patient to be discharged into a care home from a hospital was tested and good relationships had been established in Manchester to respond quickly and effectively to any outbreak in a Care Home setting. He further added that this area of work and locally developed response would be subject to a peer review as it had been recognised nationally as good practice.

The Public Health Consultant advised that the Health Protection Team and the Response Hub would be retained in the event they were required as a result of a further wave or variant. She stated that when not in a response mode these teams would continue their work on wider health protection projects. She commented that the local helpline would be retained to offer advice and guidance to both residents and schools.

The Consultant in Public Health Medicine provided a response to the comment raised regarding the Pakistani Sounding Board by stating that it had been the decision of the members of the Board who had agreed to extend the Board to include members of the South Asian population. She added that following discussions, it was decided to establish a specific Pakistani Sounding Board which was established last year.

The Deputy Leader stated that the Manchester Living Fairly and Safely with Covid draft plan was a comprehensive document that reflected and built upon the learning and good practice developed over the previous two years. She paid tribute to everyone involved in the production of the plan and supported the work described to address inequalities. She reiterated her call to Government for a fair, sustainable funding plan to ensure that the city could deliver on its ambitions for the city and improve the health outcomes for all Manchester residents.

Decision

To note the report.

HSC/22/15 Future Delivery of Social Prescribing

The Committee considered the report of the Director of Public Health that provided an overview of delivery of social prescribing in Manchester.

Key points and themes in the report included:

- Providing an outline of how the Be Well service worked;
- Examples of good practice in the delivery of social prescribing;
- Highlighting case studies of the benefits of the service for Manchester residents;
- A summary of the findings of the independent evaluation of Manchester's Prevention Programme, and other social prescribing initiatives currently being developed and delivered within both Manchester and Greater Manchester; and
- Describing the next steps in developing and delivering Manchester's social prescribing and wellbeing support provision within the context of the Population Health Covid-19 Recovery Plan and Manchester's Wellbeing Model.

The Committee further received a presentation from Jay Patient, Be Well Service Manager, Big Life Group that provided an overview of:

- The aims and values of the Be Well Service;
- Access;
- Pathways within Be Well;
- Progression within service since initial commissioning;

- Outcomes;
- Examples of good practice; and
- Aims for 2022.

The Committee then heard from George Ramsay and Gaynor Heaton, residents of Manchester. Both spoke eloquently of their experience of engaging with the Be Well service. They articulated the circumstances which led them to engage with the service and the range of positive outcomes that they had achieved as a result. The Chair on behalf of the Committee thanked both contributors for attending the meeting and sharing their experiences.

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

- Recognising the important work of the Be Well service and paying tribute to all of the staff involved;
- What work was being done to support BAME residents;
- Noting that the number of males accessing the Be Well service was relatively low and what was being done to address this;
- Were Coaches Trauma Informed trained and how would they support an individual who was neurodivergent (defined as differing in mental or neurological function from what was considered typical or normal);
- Stating that the term 'disparities' should not be used when referring to health outcomes, adding that the term 'inequalities' was the preferred term and this was supported by Professor Michael Marmot;
- Noting that from April 2020, 10 of Manchester's 14 PCNs had made formal arrangements for Big Life Group to employ and manage their social prescribing link workers, how would the patients of the 4 that had not made the formal arrangement access social prescribing opportunities;
- The importance of a wider understanding of social prescribing across other services: and
- Concern about access to mental health services in the city and, while welcoming the benefits of social prescribing, commenting that it was important that this was not used to cover up gaps in mental health provision.

Jay Patient, Be Well Service Manager, Big Life Group advised that there were many positive examples of where informal support groups had been developed that had built upon local connections and resilience, making particular reference to the South Asian Woman's Group in Longsight. She further clarified that the data in the presentation for the number of referrals for Central and South were combined. In regard to the point raised regarding the relatively lower number of male referrals to the service she advised this was recognised and consideration was being given as to how best promote this service and target the male audience. She further added that they would review the literature that was provided to encourage the take up amongst the male population. The Consultant in Public Health Medicine commented that this gender disparity was reflected across the wider health service and this was not unique to the Be Well service.

Jay Patient, Be Well Service Manager, Big Life Group further advised that the Coaches were from a wide variety of different professional and ethnic back grounds with a broad skills set. She stated that they were Trauma Informed trained. She

added that they had established relationships with specialist providers and services to refer anyone who was identified as neurodivergent to ensure that they were signposted to the most appropriate source of support.

The Consultant in Public Health Medicine stated that people could be referred to the Be Well service from other services and not just GPs, adding that the 4 PCNs that had not made formal arrangements for Big Life Group could still refer a patient if they felt it was appropriate. She further commented that it was anticipated that referrals to and demand for this service would increase, noting the impact of the pandemic and other recent global issues on people's mental health. She stated that consideration needed to be given to how this service could be commissioned in future years and build upon the success reported. She reported that a Mental Wellbeing Strategy would be developed during the year, looking at what could be done to support people's mental health outside of clinical mental health services. She advised that a lot of other things could be done to improve mental health, including for people who had clinical anxiety or depression, in addition to ensuring that the clinical mental health services were available where these were needed, noting that some people would benefit from both social prescribing and talking therapies.

In concluding this item of business, the Chair reiterated the Committee's appreciation to all of the invited guests for attending the meeting and sharing their personal experiences. She stated that the Committee would be inviting a future update report on the service with particular reference to any environmental programmes that were offered, noting the important relationship between green spaces and mental health.

Decision

To note the report and presentation and recommend that a future update report is added to the Committee's Work Programme for consideration at an appropriate time.

HSC/22/16 The Gorton Hub

The Committee considered the report of the Strategic Lead Neighbourhoods, Sarah Lake, Integrated Neighbourhood Lead for Gorton and Levenshulme (MLCO) and the Head of Corporate Estate and Facilities Management that provided an update on the Gorton Hub, a new Health and Care Hub in the heart of Gorton.

The Hub would provide a real opportunity to make a significant improvement in the management and delivery of public services through co-location and integration within a modern, innovative and efficient environment.

Key points and themes in the report included:

- Describing how the Hub would provide an opportunity to make a significant improvement in the management and delivery of public services through co-location and integration within a modern, innovative and efficient environment;
- Progress with the partnership working underpinning the integration of services in the Hub;
- Construction and property update; and
- Noting that the Hub was due to open in October 2022.

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

- What areas would this provision serve and would all elected Members concerned be regularly informed regarding the development of this site;
- How would the success of this model of service delivery be assessed; and
- This positive model needed to be replicated across the city.

The Strategic Lead Neighbourhoods advised that this site would serve residents from the Gorton, Longsight, Levenshulme and Clayton & Openshaw wards, adding that meetings with those ward Members would be convened. He advised that the success of this development would be assessed across three strands, first being a range of Key Performance Indicators to be agreed to measure progress against wider health deterrents, the second against improvements in bringing partners together in the Hub, and third, the benefits realised through the land released from the colocation of services. He stated that this would be reported to the Committee at the appropriate time along with a general update on the delivery of the Hub.

The Committee heard from Councillor Reid, Ward Councillor for Gorton and Abbey Hey. She provided a background to the development and the challenges that were presented as a result of the pandemic. She reassured the Committee that despite this and other challenges the site was being progressed with very positive relationships being established with all the multi-agency partners who would eventually occupy the site. She stated that she supported a recommendation that the Committee continue to receive regular progress reports on this project.

Decision

To note the report and recommend that a future update report is added to the Committee's Work Programme for consideration at an appropriate time.

HSC/22/17 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 other than the Covid-19 update report the May 2022 meeting would be dedicated to the annual Work Programming Session.

Decision

The Committee notes the report and agrees the work programme, noting the above comment.