

Health Scrutiny Committee

Minutes of the meeting held on 8 November 2023

Present:

Councillor Green – in the Chair
Councillors Curley, Hilal, Karney, Muse and Riasat

Apologies: Councillors Bayunu, Cooley, Reeves and Wilson

Also present:

Councillor T. Robinson, Executive Member for Healthy Manchester and Adult Social Care
Councillor Chambers, Deputy Executive Member for Healthy Manchester and Adult Social Care
Councillor Akbar, Executive Member for Finance and Resources
Councillor White, Executive Member for Housing and Development
Charlie Norman, Chief Executive of Mosscare St. Vincents
Steve Campbell, Extra Care Scheme Manager
Mary Moylan, resident of Elmswood Extra Care Scheme
Dr Scott Mather, Consultant Geriatrician, Manchester University NHS Foundation Trust
Dr Sarah Follon, Ancoats Urban Village Medical Practice
Andy Needle, Manchester People First
Richard Hughes, Manchester People First
Joanne Oakes, Greater Manchester Lead Nurse
Laura Foster, Director of Finance, Manchester Local Care Organisation
Sally Ferris, Dementia Together Support
Hazel Savage, The Alzheimer's Society
Jeff Seneviratne, Dementia United Expert Carer Reference Group
Ann Booth, Dementia United Expert Carer Reference Group

HSC/23/45 Minutes

Decision

To approve the minutes of the meeting held on 11 October 2023.

HSC/23/46 Revenue Budget Update 2024/25

The Committee considered the report of Deputy Chief Executive and City Treasurer that described that the Council was forecasting an estimated budget shortfall of £46m in 2024/25, £86m in 2025/26, and £105m by 2026/27. After the application of approved and planned savings, and the use of c£17m smoothing reserves in each of the three years, this gap reduced to £1.6m in 2024/25, £30m in 2025/26 and £49m by 2026/27. This position assumed that the savings approved as part of the Medium-Term Financial Strategy in February 2023 of £36.2m over three years were delivered.

This report provided a high-level overview of the updated budget position. Each scrutiny committee was invited to consider the current proposed changes which were

within its remit and to make recommendations to the Executive before it agreed to the final budget proposals in February 2024.

Key points and themes in the report included:

- Updates on the refreshed position including progress in reaching a balanced budget, reflecting preliminary savings and investment options;
- The government was expected to announce the Autumn Statement on 22 November 2023, but no major changes were expected;
- Government funding for 2024/25 would be confirmed in the provisional finance settlement, expected late in December 2023;
- The accompanying report set out the priorities and officer proposals for the services within the remit of this committee. This included a reminder of the savings proposals identified as part of last year's budget setting process (£36.2m across three years) and additional savings for consideration (£2.5m from 2024/25). As far as possible these were aimed at protecting the delivery of council priorities and represented the least detrimental options; and
- There remained a forecast shortfall of £1.6m next year. Any further reduction to the underspend this year would reduce the need to top back up General Fund reserve in 2024/25 and help bridge this shortfall. In addition, the Collection Fund position would be finalised in January and the final levy amounts from GMCA confirmed.

The Executive Member for Finance and Resources stated that Manchester had been subject to unfair budget cuts over the previous fourteen years. He stated that the decision to reduce budgets to cities like Manchester had been an ideological decision taken by the government. He described that the financial situation of local authorities across the UK was very precarious, stating that it had been estimated by the Local Government Association that there would be a £4billion shortfall in total next year. He stated that he endorsed the ask of the Leader in her recent letter to the Chancellor of the Exchequer ahead of the Autumn Statement. He called for an end to last minute provisional settlements, but rather long term, fair and stable funding arrangements for all local authorities.

The Executive Member for Healthy Manchester and Adult Social Care stated that the government had shown nothing but contempt for Manchester, however despite this Manchester had continued to ensure that the residents of the city were at the heart of all decisions taken. He said that despite the challenges presented by government, Manchester continued to be innovative in how it worked for all residents.

The Deputy Executive Member for Healthy Manchester and Adult Social Care referred to the recent visit undertaken by members of the Committee to the Control Room. The Control Room was the integrated hub for supporting flow out of hospital into the community. The Control Room was responsible for ensuring the safe and timely discharge of citizens across hospitals and to support the system to work together to achieve the best outcomes for people. She stated that this was one positive example of the many innovations developed in Manchester to support residents despite the cuts imposed on the city. The Committee expressed their appreciation to the staff at the Control Room for facilitating the visit from Members.

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

- Paying tribute to all workers across the Council and the NHS for the work they undertook on behalf of the citizens of the city;
- Thanking the Executive Members and the Directors for their continued dedication in supporting residents, recognising the difficult financial landscape they had to navigate;
- Condemning the government's policy of austerity and the impact this had on all Mancunians;
- Welcoming that residents were central to all decisions taken; and
- The Committee expressed the opinion that they retained their confidence in the Executive Member, the Director of Public Health and the Executive Director of Adult Social Services.

Decision

To note the report.

HSC/23/47 Public Health Budget 2024-27

The Committee considered the report of the Director of Public Health that set out the proposals for the Public Health budget for 2024/25 to 2026/27.

Key points and themes in the report included:

- An overview of Public Health services and key priorities;
- A detailed overview of the budget;
- An update on Making Manchester Fairer;
- The gross 2023/24 budget was £50.471m and the net budget of £43.211m;
- Income of £7.260m included use of reserves £3.753m, Better Care Fund £0.960m, contributions from NHS partners £0.805m and from other local authorities £0.853m and government grant £0.889m;
- The latest 2023/24 global monitoring report to the Executive outlined a £0.8m underspend. Savings of £0.730m had been achieved in full. There were underspends across the staffing budgets due to vacant posts and the maximisation of external funding, and underspends on other indirect staffing costs;
- There were no additional savings for 2024/25; and
- Planned non recurrent use of reserves in 2023/24 of £0.330m was replaced in 2024/25 with the planned use of headroom in the budget set aside for contract uplifts as detailed in the report to Health Scrutiny February 2023. The approved savings schedule for 2024-26 were detailed in appendix 1.

A Member discussed the proliferation of 24/7 alcohol delivery services and the detrimental impact alcohol had on the health outcomes of residents. The Director of Public Health stated that a report on the Drugs and Alcohol Services was scheduled to be submitted to the January 2024 meeting and consideration of this would be included in that report.

Decision

To note the report.

HSC/23/48 Adults Social Care Budget 2024-27

The Committee considered the report of the Executive Director of Adult Social Services that set out the proposals for the Adults Social Care budget for 2024/25 to 2026/27.

Key points and themes in the report included:

- An overview of Adult Social Care services and key priorities and positioning within the Manchester Local Care Organisation; and
- A detailed overview of the budget, including:
 - The significant financial challenges on the 2023/24 budget and requirement to resolve them ahead of incorporating the 2024/25 budget proposals;
 - The update to budget growth assumptions for the service as set out in the Council's Medium Term Financial Plan;
 - Confirmation of an unchanged savings plan 2024-26 at this stage pending further work underway;
 - Future risks and opportunities including significant budget considerations in 2025/26;
 - The gross 2023/24 budget was £280.764m and the net budget of £215.260m;
 - Income of £65.504m included client fees £30.416m, Better Care Fund £17.787m, contributions from NHS partners of £10.428m and other income of £6.873m which includes grants and use of reserves. This included the integration reserve, which was drawn down in accordance with the plan agreed for the year with NHS Greater Manchester – Manchester locality;
 - The base budget for 2023/24 was £211.947 and the key change to the budget in the year was the addition of the Market Sustainability and Improvement Fund (MSIF) workforce grant of £4.055m. This was also reduced by a pensions budget adjustment of £-0.602m and Directorate transfers of £-0.140m;
 - The latest global monitoring report to the Executive outlined a £3m ASC 2023/24 overspend and that the underlying recurrent pressure in the long term care budget were significantly more challenging at c£9m. This was being offset non-recurrently in 2023/24 through the approved use of reserves, employee underspends and applying Better Care Fund (BCF), Adult Discharge Fund (ADF) and Market Sustainability and Improvement Fund (MSIF) against eligible costs. In summary, new demand were running at a higher run rate than demographics and preventative programmes. This was compounded by significant price pressure in the care market, and the complexity of need for clients discharged through hospital;
 - A recovery plan had been initiated to fully mitigate the budget pressure without further need for a new savings programme and from the additional resources proposed as part of this budget process; and
 - Savings of £4.4m were approved for 2024-26 and were detailed in Appendix 1. Implementation plans were being developed and at this stage, there were no proposed amendments to this programme.

Decision

To note the report.

HSC/23/49 Update on Dementia Developments

The Committee considered the report of the Director of Public Health and Executive Director of Adult Social Services that described the progress made in the last six months around key developments of the Dementia Action Plan, with specific focus on the early commission of the Manchester Dementia Alliance, led by Alzheimer's Society, with Manchester Carers Forum and Together Dementia Support. Noting that at the Health Scrutiny Committee meeting of 8 March 2023, the first progress report on the developments across the Dementia pathway had been presented. (See minute ref. HSC/23/19 Dementia Developments in Manchester).

Key points and themes in the report included:

- The development of the Manchester Dementia Alliance and early work and achievements to date;
- An update on Delirium work in Manchester, noting that as part of the Greater Manchester Dementia United work, delirium had been a particular focus and Manchester University NHS Foundation Trust (MFT) had been at the forefront of this work, led by Dr Scott Mather, Consultant Geriatrician;
- An update on the forward plan on the next 6 months priorities, aligned to the Dementia Action Plan; and
- Reference to a new Extra Care Scheme in the development pipeline specifically focused on Dementia Care with our partners, Irwell Valley Homes.

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

- Were the number of patient admissions in Manchester with delirium comparable with other regions;
- Was delirium only experienced by older citizens;
- Were some groups of residents more susceptible to experiencing delirium; and
- Supporting the next step to have this comprehensive approach to delirium in all settings and supporting the discussions with Manchester Local Care Organisation and clinical leads at the GM Integrated Care Board about rolling it out to care homes.

Dr Scott Mather, Consultant Geriatrician, Manchester University NHS Foundation Trust stated that the improved coding of patients had helped correctly diagnose incidents of delirium, adding that rates in Manchester were comparable with other regions. He advised that delirium could affect all ages, however, it was more prevalent in older citizens as they became more vulnerable to this condition. He stated that this was also exacerbated by infections, constipation and/or dehydration. He also commented that a change in settings could also contribute to incidents of delirium. He also stated that some patient cohorts, including those for whom English was not their first language or had an existing condition such as Korsakoff syndrome were also more susceptible to experiencing delirium, adding that this demonstrated the importance of correct early diagnosis and care.

Hazel Savage, The Alzheimer's Society, informed the Committee that the Dementia Changemakers had held another meeting since the report had been published. She advised that they planned to meet again in January 2024 and the focus of that meeting would be Home Care. She stated that the Professionals Workshop had met in October. The aim of that workshop was to collate feedback of current Dementia services within Manchester, from the professionals' point of view; to map out current service offers; and to see if the service offers aligned with the views/needs of service users. She commented that this had been a very positive and empowering experience. She stated that the feedback from this event would be collected and evaluated. Jeff Seneviratne, Dementia United, commented that this had been important as it represented the first steps to developing a holistic model of dementia care that reflected upon the recommendations of the All-Party Parliamentary Group on Dementia.

The Director of Public Health stated that Manchester benefited from an established clinical network who were committed to the issue of dementia, and this foundation would strengthen and inform the local strategy. He further paid tribute to the Manchester Dementia Steering Group, adding that it was an example of genuine partnership working. He further commented that diagnosis rates of dementia were higher than the national average. The Assistant Director Commissioning MLCO added that a person-centred, strength-based approach was taken to assess an individual's needs and this would be reviewed by social workers to ensure that they were receiving the correct care in the correct setting.

The Executive Member for Healthy Manchester and Adult Social Care stated that he had welcomed the frank and open discussions he regularly had with Dementia Together Support. He commented that he had reservations about national policy in relation to dementia and he would continue to lobby on this issue. He reassured the Committee that discussions were ongoing locally with the Greater Manchester Integrated Care Partnership with the view to replicating the good practice witnessed in Manchester across Greater Manchester.

The Chair commented that the Committee would be considering a report on End of Life Care at the February 2024 meeting and themes that had been discussed in the report and at the meeting today would be included in that report.

The Chair further requested that when the Manchester Dementia Alliance Newsletter was available this should be circulated to all Councillors.

The Committee expressed their gratitude to all guests for attending the meeting and contributing to the meeting.

Decision

To note the report.

HSC/23/50 Update on Extra Care Housing Developments

The Committee considered the report of the Executive Director of Adult Social Services that described the latest developments around Extra Care Housing.

Key points and themes in the report included:

- Information on the completion of the housing needs analysis providing an indicative increase in the number of additional units/schemes required by 2043;
- An update on the recent survey by Healthwatch with people currently in Extra Care Housing;
- Information on the Enabling Independence Accommodation Strategy (EIAS) and how this would impact on the further growth of Extra Care Housing in the city; and
- The recently published Housing Learning and Improvement Network (HLIN) case study on Neighbourhood Apartments.

The Committee heard from Charlie Norman, Chief Executive of Mosscare St. Vincents who discussed the importance of the Extra Care Housing Strategy and how they worked collaboratively with both Strategic Housing and Adult Social Care. She spoke of the many benefits of the Elmswood Extra Care Scheme that had opened in 2020, including reducing social isolation and supporting independent living in a safe, inclusive and vibrant environment. She stated that she was proud to be working on behalf of the residents of the city, at a neighbourhood level that reflected the Our Manchester strategy. She commented that scheme offered 72 high quality one and two bedroom, low carbon apartments that were all offered at 100% social rent.

Steve Campbell, Extra Care Scheme Manager reiterated the many benefits of Extra Care Housing that had been articulated by the Chief Executive of Mosscare St. Vincents. He added that this model of housing also reduced the need for residents to go into costly residential care. He added that care could be stepped up or stepped down as appropriate in a safe setting.

The Committee heard from Mary Moylan resident of Elmswood Extra Care Scheme who spoke of their experience of living in Extra Care Housing. She described her home as lovely, and said she felt safe and secure. She added that the environment was very supportive and there were many opportunities to socialise and take part in activities. The Committee expressed their gratitude to Mary for attending the meeting and contributing to the meeting.

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

- Welcoming the delivery of 100% social rent accommodation at the Elmswood Extra Care Scheme; and
- Welcoming Extra Care Schemes and recognising the benefits these had for residents.

The Assistant Director – Commissioning commented that the Housing Needs Analysis that was described in the report used a variety of data sets to inform future planning. She commented that the findings indicated that an additional 15 Extra Care Home Schemes would be required, a doubling of the existing offer. She added that 11 of the 12 current schemes were all offered at 100% social rent, with the remaining one being mixed tenure. The Commissioning Manager, Strategic Housing added that

providing Extra Care Schemes supported people to safely right-size and this released larger family homes into the market.

The Assistant Director – Commissioning responded to a comment from a Member regarding the possibility of delivering Extra Care Housing for a mixture of citizens, such as Learning Disabled citizens and an intergenerational offer by stating that consideration could be given to this and building upon the positive model that Extra Care offered.

The Executive Member for Healthy Manchester and Adult Social Care commented that Health partners were working collaboratively with colleagues in Strategic Housing and the ambition was to increase the number of Extra Care Schemes across the city.

The Committee expressed their gratitude to all guests for attending the meeting and contributing to the meeting.

Decision

To note the report.

HSC/23/51 Adult Learning Disability Services

The Committee considered the report of the Executive Director of Adult Social Services that described the key developments across Health and Social Care in Manchester relating to Adult Learning Disability services.

Key points and themes in the report included:

- Policy and Strategy, namely developments surrounding the recently approved Manchester Local Care Organisation (MLCO) Commissioning Strategy for Adults with a Learning Disability (2023 – 2028), and Housing Needs Analysis for Adults with a Learning Disability and Autism (2023 – 2033);
- Recommissioning and Transformational activity including the developments surrounding the ‘My Way, My Life’ programme;
- Health Care, including local developments surrounding the NHS Greater Manchester and Manchester University Hospitals Foundation Trust Transforming Care agenda and NHS Learning Disabilities oversight group; and
- Preparation for Adulthood, also known as Transition.

The report was accompanied by a video presentation that highlighted key developments over the last 12-18 months across a range of areas including housing, social care, and health. This video was recently presented at the recent Greater Manchester Learning Disability conference and captured a range of views from citizens with lived experience.

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

- Recognising and welcoming the work undertaken by Manchester People First;

- Noting the theme of the importance of staff being caring and kind had been identified during engagement events with Learning Disabled citizens as part of the process of drawing up a new Learning Disability strategy; and
- What was being done to ensure that vulnerable citizens with a learning disability and/or autism did not remain in hospital under the care of the Mental Health Act for any longer than they need to be.

The Head of Strategic Commissioning (Adult Learning Disability & Autism) stated that the Housing Needs Assessment had been used to plan for future Learning Disability housing need. He advised that findings of this Assessment were described at section 3.2.5 of the report. In summary, approximately 430 additional places of supported accommodation, general needs accommodation and shared lives services would be needed in the city over the next 10 years. There would need to be a structured programme of work to deliver the housing requirements of adults with a Learning Disability, working with strategic partners including Strategic Housing, Registered Landlords and the Adult Social Care Market Providers.

The Head of Strategic Commissioning (Learning Disability and Autism) advised 90 of those places would be needed to provide new accommodation for citizens within the current Manchester City Council in-house provision, to ensure existing citizens had access to better quality and efficient accommodation types. He also advised there was a significant programme of work underway over the next 3 years or so to review the range of in-house services, and to ensure that the in-house service accommodated citizens with more complex needs, which may mean that some citizens with lower level needs may need a more independent offer.

The Head of Strategic Commissioning (Adult Learning Disability and Autism) also commented that he was proud to inform the committee of the launch of the new Manchester Local Care Organisation Adult Learning Disability and Autism Commissioning Strategy (Plan), which had been produced with people who had lived experience. This set out the Council's commissioning strategy (plan) for Adults with a Learning Disability over the next five years.

The Adult Social Care Assistant Director, Complex Needs informed the Committee that an oversight group had been established to regularly review citizens with a learning disability who were admitted to hospital to ensure they were in the correct care setting and to plan for their appropriate transfer of care. She stated that the integration of Health and Social Care supported this partnership approach to ensure the best outcomes for the citizen. She stated that the individual would be supported once discharged from a hospital setting to prevent them from being readmitted.

The Adult Social Care Assistant Director, Complex Needs described that a value-based approach to staff recruitment had been developed, adding that this involved asking questions that explored the values of candidates and explored their lived experiences. She stated that people with lived experience contributed to interview panels, and this had been a very positive development.

The Committee heard from Andy Needle and Richard Hughes from Manchester People First, a self-advocacy group for adults with a learning disability. Mr Needle commented that the inclusion of people with lived experience being involved with the

recruitment of staff to ensure the correct values were demonstrated was a very important and welcome development. He further acknowledged the importance of the publication of the easy read version of the Action Plan.

The Executive Member for Healthy Manchester and Adult Social Care paid tribute to all the staff working within the Learning Disability Team.

The Committee expressed their gratitude to all guests for attending the meeting and contributing to the meeting.

Decision

To note the report.

HSC/23/52 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.

Decision

The Committee notes the report and agrees the work programme.