

Health Scrutiny Committee

Minutes of the meeting held on 26 June 2024

Present:

Councillor Green – in the Chair

Councillors Cooley, Curley, Hilal, Johnson, Judge, Karney, Marsh, Muse and Sarwar

Apologies: Councillor Reeves

Also present:

Karen Howell OBE, Chief Executive, Greater Manchester Mental Health NHS Foundation Trust

John Foley, Chief Operating Officer, Greater Manchester Mental Health NHS Foundation Trust

Maria Nelligan, Chief Nurse, Greater Manchester Mental Health NHS Foundation Trust

Bridget Hughes, Associate Director of Operations, Greater Manchester Mental Health NHS Foundation Trust

Sarah Williamson, Associate Director of Nursing and Quality, Greater Manchester Mental Health NHS Foundation Trust

Dr Nishan Bhandary, Associate Medical Director, Greater Manchester Mental Health NHS Foundation Trust

Dan Stears, Service User

Louise Honour, Designated Nurse Safeguarding Adults Manchester

David Moores, Greater Manchester Police

Neil Walbran, Chief Officer, Healthwatch Manchester

Susan Harrison, Manchester Safeguarding Partnership Manager

HSC/24/21 Minutes

Decision

To approve the minutes of the meeting held on 22 May 2024.

HSC/24/22 The Shanley Report: An Independent Review into the care and treatment provided by Greater Manchester Mental Health NHS Foundation Trust

The Committee considered the report of the Greater Manchester Mental Health NHS Foundation Trust that provided details of the learning from the NHS England commissioned Independent Review of Greater Manchester Mental Health NHS Foundation Trust (GMMH) and outlined the GMMH response to the Review findings. The Review had identified eleven recommendations for improvement, nine of which related to GMMH.

Key points and themes in the report included:

- Providing an introduction and background;

- Providing a summary of the independent review that had been chaired by Professor Oliver Shanley; and
- Noting that the Review findings had been presented to the GMMH Board in February 2024, following which the Board had held a dedicated development session to consider the Review findings, the learning from the Review and the recommendations for improvement.

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

- Expressing the shock that still resonated from the revelations that were reported in the BBC Panorama programme;
- The Trust's Senior Leadership Team and Board were ultimately culpable for those reported events;
- Reiterating that patients and patient care needed to be central to all considerations and decisions taken by the Trust;
- Noting that the Committee had established a Task and Finish Group to consider the Trust's Improvement Plan in detail;
- Reiterating the importance of organisational culture and how this impacted on all aspects of patient care;
- The need for connectivity and communication between patients and senior management and the Board to improve the quality of care and culture across the organisation;
- What were the initial impressions of the Chief Executive on the Trust's Improvement Plan;
- Managers should have clinical experience;
- Recognising the importance of service user and carer engagement, and how was the voice of hard-to-reach people captured;
- The importance of diversity across the leadership team;
- Had the Trust engaged with the patient representative group CHARM;
- Noting the importance of staff recruitment and retention;
- The appointment of Non-Executive Board members was an opportunity to attract individuals with a wide range of experience, knowledge and skills; and
- Future reports should include information on Community Mental Health Teams.

The Committee welcomed Dan Stears, who spoke of his lived experience during his engagement with the Trust. He commented that he genuinely felt that patients and carers were listened to, their opinions valued and appropriately responded to. He commented that the Trust had changed for the positive and provided many examples of this, including but not restricted to and increased number of PLACE (Patient Led Assessment of the Care Environment) visits to units where staff were accompanied by people with lived experience; the ability for patients to speak openly about their care and to receive feedback; the increased use of peer support workers that helped foster a culture of trust and openness. He commented that this approach also facilitated the ability to reach and engage with hard to reach cohorts of people. He said that whilst there was still more to do, he commented that there were many examples of good practice and improvements across the Trust.

The Chief Nurse, Greater Manchester Mental Health NHS Foundation Trust made reference to the Our Together Strategy that had been developed with service user

involvement with the intention to strengthen advocacy for service users by adopting a Ward to Board model accompanied by 'You Said We Did' reporting and feedback mechanism; Patient Advisory Liaison Service (PALS) posts had been reintroduced; a Trust wide service user Forum had been established, with the Chair of that Forum appointed to the Board; and the implementation of safer staffing reviews undertaken across all units and community teams. She commented that service users had been actively involved with and coproduced the Community Transformation Programme. She reiterated the point previously made regarding the importance of utilising people with lived experience. She also commented that the Trust continued to engage with CHARM to consider and discuss different models of care and made reference to an event that had been held recently to facilitate these ongoing discussions. She concluded by stating that the service user voice was part of everything that they did.

The Chief Executive, Greater Manchester Mental Health NHS Foundation Trust commented that despite having only being in post for a relatively short period of time she was impressed by the progress to date on delivering the Improvement Plan. She said it was recognised that there was still much to do but she was confident that improvements were already being made, and this programme of improvement had oversight from NHS England and the sector regulator. She commented that service users and carers were involved in the staff recruitment process, including the appointment of senior roles such as Chief Executive and the Board, and this was essential as it allowed the testing of a candidate's values. Dan Stears affirmed that service users' views were listened to, valued and taken into consideration during the recruitment process.

The Associate Director of Operations made reference to the 'Our Care Matters' initiative to support the improved dialogue with service users by delivering a carer led group that enabled service users and carers the opportunity and space discuss what mattered to them about their mental health care from GMMH, with staff. Further she made reference to the establishment of the 'Waiting Well Hub', a facility for individuals to access support pending allocation of dedicated Care Coordinator that had arisen directly from a service user suggestion.

The Chief Nurse, Greater Manchester Mental Health NHS Foundation Trust stated that staff recruitment and retention was a national issue, however with the support of NHS England steps were being taken to address this locally, including the establishment of professional development pathways for both clinical and non-clinical staff. She added that Manchester as a city was an attractive consideration for people choosing to live and work and they intended to capitalise on this. She also referred to the Workforce Plan that had been supporting the appointment of nurses and clinicians into senior and leadership posts. In response to comments regarding support for staff she said that it was recognised that mental health could be a difficult and challenging environment to work in and forums had been established for staff to talk and express the emotional demands of the role. She said this, in conjunction with other developments such as pastoral support for staff from overseas; a strengthened induction programme for new staff; professional and leadership development opportunities; the staff survey and the 'Freedom to Speak Up' facility had seen an improvement in staff retention rates and the Trust sought to build on this.

In concluding this item of business, the Chair acknowledged the amount of important and positive work that was presented in the report and she thanked all those involved. She commented that whilst recognising that strategies and planned programmes of activity were important, future update reports to the Committee should include tangible examples of the impact and outcomes of these.

Decision

To note the report and reiterate the opinion that it was the Senior Leadership and Board who were responsible for the culture that pervaded throughout the Trust that resulted in the failings that were reported.

HSC/24/23 Manchester Safeguarding Partnership Annual Report 2022-2023

The Committee considered the report of the Executive Director of Adult Social Services that provided a summary update on the Manchester Safeguarding Partnership (MSP) Annual report 22/23.

Key points and themes in the report and accompanying presentation included:

- Providing an introduction and background, noting that the Manchester Safeguarding Partnership's (MSP) aim had been to strengthen safeguarding leadership across children and adult services and improve multi-agency safeguarding practice in the Manchester;
- Noting that the annual report aimed to illustrate how the MSP continued to develop an integrated approach to safeguarding across the life course with equal accountability between the three statutory partners (Greater Manchester Police, Manchester City Council and Greater Manchester Integrated Care Board) together with wider agencies and in cooperation with children and adults;
- Information relating to the Partnership arrangements;
- Information relating to:
 - Communication and engagement.
 - Safeguarding Effectiveness and Scrutiny.
 - Safeguarding practice reviews.
 - Learning and improvement.
 - Neglect.

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

- Safeguarding was everyone's responsibility;
- Noting the seriousness and harm associated with dependent drinking, noting that the Committee may wish to return to this specific area of concern;
- Discussing the complex socioeconomic reasons for knife crime and the devastating impact this had on individuals, their families and communities;
- The issue of vulnerable individuals who live in communities but may not be known to services who were susceptible to cuckooing (Cuckooing is a practice where people take over a person's home and use the property to facilitate exploitation);

- The message that it was okay for neighbours to be inquisitive about people's welfare and wellbeing, noting that during the pandemic this was witness across communities;
- What was the approach to out of area / cross border Safeguarding Adults Reviews (SAR).

The Executive Director of Adult Social Services acknowledged the comment made stating that safeguarding was every professional's responsibility and prevention work and intervention was vital, adding that this was why a partnership approach had been adopted in recognition of this. She said a culture of professional curiosity was fostered and encouraged on the issue of safeguarding with appropriate training provided. She added that safeguarding training would also be provided to Councillors.

The Assistant Director Adult Social Care addressed the issue of dependent drinking and commented that this was a complex issue that required the appropriate support systems and wrap around care to support those individuals affected. He informed the Committee that the Council had a designated drug and alcohol team that was supported by health partners.

The Assistant Director Adult Social Care informed the Committee that they did work collaboratively, using all available resources across the Greater Manchester borders when dealing with Out of Area SARs.

David Moores, Greater Manchester Police noted the concerns raised by Members in relation to the issue of knife crime. He said that this was a national issue and not unique to Manchester. He said that communities needed to be confident to speak up about this issue and report concerns, adding that this was why Neighbourhood Policing was important to build these trusted relationships with local residents. Susan Harrison, MSP Manager commented that the Community Safety Partnership were also considering the issue of knife crime as a specific area of concern.

In concluding this item of business, the Chair acknowledged the amount of important and positive work that was presented in the report, and she thanked all those involved. She commented that in future reports the Committee would like to see examples of the impact and outcomes of this activity, including the outcomes and impacts of subgroups established to consider specific subjects.

Decision

To note the report.

HSC/24/24 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 recommendation was made to include a report on the implementation plan of Right Care Right Person at the appropriate time. This was agreed by the Committee.

Decision

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