

Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 11 September 2014

Present: Councillor P Bury (in the Chair)
Councillors P Adams, E FitzGerald, L Fitzwalter, J
Grimshaw, S Haroon, K Hussain, S Kerrison, J Mallon, S
Smith and R Walker
(in the Chair)

Also in attendance: Tom Henderson, Healthier Together
Lesley Jones, Director of Public Health, Bury Council
Stuart North, Chief Officer at Bury CCG
Dr Kiran Patel, Chair of Bury CCG, and;
Dr Martin Vernon, Healthier Together

Public Attendance: Four members of the public were present at the meeting.

Apologies for Absence: Councillor T Pickstone

HSC.245 DECLARATIONS OF INTEREST

There were no declarations of interest made at the meeting.

HSC.246 PUBLIC QUESTION TIME

There were no questions asked by the members of public present at the meeting.

HSC.247 MINUTES OF THE LAST MEETING

It was agreed:

That the Minutes of the last meeting held on 22 July 2014 be approved as a correct record and signed by the Chair.

HSC.248 MATTERS ARISING

Councillor Walker reported that the Dentistry Sub Group had held its first meeting and had met with a Greater Manchester representative from Public Health England. The meeting had set the scene in relation to NHS dentistry provision across Bury but there were more in depth statistics required.

Councillor Walker referred to Minute HSC.175, Infection Control and stated that he would like to receive more information about Intra-health, the company that were providing the Infection Control service in the interim period.

Councillor Walker also asked if it would be possible to have a breakdown of funding for Public Health.

HSC.249 APPOINTMENT OF DIRECTOR OF PUBLIC HEALTH

It was reported that Lesley Jones the Interim Director of Public Health for Bury Council had recently been appointed the Director of Public Health on a permanent basis.

It was agreed:

That Lesley be congratulated on her appointment.

HSC.250 HEALTHIER TOGETHER UPDATE

Stuart North, Chief Officer at Bury CCG, Dr Kiran Patel, Chair of Bury CCG, Tom Henderson, Healthier Together and Dr Martin Vernon, Healthier Together attended the meeting to answer questions in relation to the Healthier Together consultation which was currently taking place across Greater Manchester.

It was explained that the Committee had already received presentations and reports relating to Healthier Together in the lead up to the consultation commencing.

The Members of the Committee received the consultation pack which set out the need for change across Greater Manchester, proposed changes to primary care, Community based care and hospital services.

Work had already started in relation to extended GP opening hours with Radcliffe residents having access to their GP from 8am to 8pm weekdays and weekend appointments to 6pm. This was also due to be rolled out across Bury from December 2014.

Dr Martin Vernon explained that the Healthier Together consultation was clinically led and had been developed following input from Doctors, Nurses and other clinicians across Greater Manchester who were concerned that there was not a consistent service across the conurbation. It was also explained that no hospital in Greater Manchester met all of the standards set out in relation to acute medicine or surgery.

It was explained that there had been many factors considered when coming up with the proposals contained within the consultation document;

- The amount of money needed to set up and run a local General and a Specialist Hospital;
- The number of doctors and nurses available to work in each single service;
- The travel time to get to Specialist Hospitals and how it will affect patients; and
- The hospital buildings, wards and operating theatres that are available.

The consultation document contained eight options. There were 12 hospitals across Greater Manchester and of these 12 three had already been designated as specialist hospitals due to their location and the services they currently offered, they were;

Manchester Royal Infirmary (MRI)
Salford Royal Hospital

Royal Oldham Hospital.

MRI and Salford Royal must be specialist hospitals to continue to provide services that are not provided anywhere else – specialised paediatric at Royal Manchester Children's Hospital (Located within the MRI) and the adult neuroscience service at Salford Royal.

Trafford General Hospital and Rochdale Infirmary do not provide any of the services that are being considered within the review so they will not be considered within the review.

Three had been identified as local General hospitals; North Manchester General Hospital, Fairfield General Hospital and Trafford General Hospital. These sites had already been designated as Local Generals due to the service provision already agreed with their local CCGs.

This leaves four hospitals to be considered; Royal Bolton Hospital, Royal Albert Edward Infirmary (Wigan), Stepping Hill Hospital (Stockport) and Wythenshawe Hospital. The options within the consultation document were whether one or two of the remaining four are chosen to become Specialist Hospital Sites.

The consultation document included tables setting out specific factors relating to each option and scoring that had been undertaken in relation to these options.

Those present were given the opportunity to ask questions and make comments and the following points were raised:-

- Councillor Bury asked whether there was a difference between mortality rates at different times of the day and week.

It was explained that the days of the week, critical care capacity and the seniority and experience of staff all had an effect on the standard of care received. By ensuring that all relevant people were at one site this would ensure that the best care was available when it was required.

- Councillor Mallon referred to the £20m shortfall and asked whether this should be taken up as a regional issue.
- Councillor Mallon also highlighted that fact that public transport could not be relied upon. There was work being carried out to upgrade the Metrolink network and this one issue was causing problems across the whole network. There had also been concerns raised with Arriva who were providing the Patient Transport Service.

Stuart explained that Healthier Together was across Greater Manchester and not just Bury. Some GM authorities were funded appropriately.

The Patient Transport Service would not be used to transport the patients to the specialist sites that were being discussed. The patients concerned would be taken by emergency ambulance provided by NWS. These types of emergencies would

only affect a very small number of the population. The rest would see no change or improved services.

- Councillor Walker referred to the Primary Care Standards set out within the consultation document as being fundamental to the plans. Councillor Walker asked where the funding for this would be coming from and where this was set out within the document.

The funding for Community Services would be coming from the hospital sector as this is where the services were currently carried out. It was explained that there would a better care fund submission, pre consultation exercises had been undertaken and all hospital sites had been reviewed. This information was available on the Healthier Together website.

- Councillor Cassidy asked how Doctors would be monitored in relation to the standards.

It was explained that joined up working and sharing of information (which patients will be able to access) would help with this as well as all GP practices performance being measured alongside local and national measurements.

It was also explained that new technologies would make access to some services and patients much easier.

- Councillor Fitzwalter explained that a lot of work had been done in previous years to help people learn how to use the internet, it seemed that this sort of provision had reduced and Councillor Fitzwalter asked what was being done about this.

Councillor Bury explained that the Councils Digital Inclusion Group were working on this area and there were a lot of projects being rolled out.

It was also explained that back office technologies will be able to monitor and track health and social care data and show where any variances are and where more work is required.

- A question was asked in relation to the amount of consultation that had been carried out with the staff concerned.

It was explained that all staff had had input into the consultation document and the proposals within it. The consultation was clinically led from the outset and there were regular meetings with all involved.

- It was asked how long it would take to implement the changes once they had been agreed.

Stuart explained that it would be a gradual process some of which had already started which would take up to 2 years.

- Councillor Grimshaw asked who would make the final decision on whether there will be four or five specialist hospitals.

It was explained that the Committees in Common would make the final decision. This was a group representing all of the CCGs across Greater Manchester and they would meet to discuss the feedback from the consultation. The meeting would be held in public.

- Councillor Walker stated that he felt that Cheshire and Rossendale should also be consulted on the proposals.

Dr Patel explained that representatives from Cheshire, Derbyshire and East Lancashire had been formally invited to attend the meetings as it was recognised that any decisions would affect some of their population.

- Councillor Mallon asked whether the implementation plan could be shared with Health Scrutiny.

Dr Patel explained that the pre consultation business case was already available on the Healthier Together website and that the process map could be shared once the decision had been confirmed.

- It was asked whether every residence in Greater Manchester would receive a consultation pack.

It was explained that this had been discussed but it had been agreed not to do so.

**COUNCILLOR
Chair**

(Note: The meeting started at 6.00 pm and ended at 7.30 pm)