

<i>Our Ref</i>	JG	
<i>Your Ref</i>	HSC/JG	
<i>Date</i>	10 June 2016	Legal & Democratic Services Division
<i>Please ask for</i>	Julie Gallagher	
<i>Direct Line</i>	01612536640	Jayne Hammond LLB (Hons) Solicitor
<i>Direct Fax</i>		Assistant Director of Legal & Democratic Services
<i>E-mail</i>	Julie.gallagher@bury.gov.uk	

TO: All Members of Health Scrutiny Committee

Councillors : P Adams, N Bayley, M D'Albert, J Grimshaw, S Haroon, K Hussain, Kerrison (Chair), O Kersh, J Mallon, A McKay, Sarah Southworth and R Walker

Dear Member/Colleague

Health Scrutiny Committee

You are invited to attend a meeting of the Health Scrutiny Committee which will be held as follows:-

Date:	Monday, 20 June 2016
Place:	Meeting Rooms A&B
Time:	7.00 pm
Briefing Facilities:	If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted.
Notes:	Please note there will be a pre-meeting briefing for Elected Members only commencing at 6pm in meeting rooms A&B



Electronic service of legal documents accepted only at:

E-mail:

legal.services@bury.gov.uk

Fax: 0161 253 5119

**Town Hall
Knowsley Street
Bury BL9 0SW
www.bury.gov.uk**

AGENDA

1 APOLOGIES FOR ABSENCE

2 DECLARATIONS OF INTEREST

Members of Health Scrutiny Committee are asked to consider whether they have an interest in any of the matters on the agenda and if so, to formally declare that interest.

3 PUBLIC QUESTION TIME

Questions are invited from members of the public present at the meeting on any matters for which this Committee is responsible.

4 MINUTES (Pages 1 - 6)

Minutes from the last meeting held on the 17th March 2016 are attached.

5 CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) (Pages 7 - 10)

Karen Whitehead Strategic Lead Health, Families, Partnerships & Complex Care Department for Children, Young People & Culture will report at the meeting. Report attached.

6 DEVOLUTION MANCHESTER A LOCAL AUTHORITY PERSPECTIVE

Chris Woodhouse, Improvement Advisor, Bury MBC will report at the meeting. Report will be sent to follow.

7 WORK PROGRAMME DISCUSSION (Pages 11 - 18)

A report from Julie Gallagher, Principal Democratic Service Officer is attached.

8 URGENT BUSINESS

Any other business which by reason of special circumstances the Chair agrees may be considered as a matter of urgency.

Minutes of: **HEALTH SCRUTINY COMMITTEE**

Date of Meeting: 17 March 2016

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

Also in attendance: Linda Jackson, Assistant Director of Operations (Adult Care)
Julie Gonda, Assistant Director, Strategy, Procurement and Finance
Stuart North, Chief Operating Officer, Clinical Commissioning Group (CCG)
Julie Gallagher, Democratic Services Officer

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence: Councillor L Fitzwalter, R Skillen and T Pickstone

HSC.829 DECLARATIONS OF INTEREST

Councillor Joan Grimshaw declared a personal interest in respect of all items under consideration as a member of the Patient Cabinet.

Councillors Kerrison, Mallon and Walker declared personal interests in respect of agenda item HSC.832 Healthier Radcliffe as patients of associated practices.

Councillor Fitzgerald declared a personal interest in respect of all items under consideration in view of her appointment as a non-executive director at Persona.

HSC.830 PUBLIC QUESTION TIME

There were no questions from members of the public present at the meeting

HSC.831 MINUTES OF THE LAST MEETING

It was agreed:

The minutes of the meetings held on 26th January 2016 be approved as a correct record.

HSC.832 HEALTHIER RADCLIFFE UPDATE

Julie Gonda, Assistant Director Strategy procurement and Finance, attended the meeting to provide members of the Committee with an update in respect of the Healthier Radcliffe programme. The presentation contained the following information:

The Healthier Radcliffe schemes were rolled over in November 2015 to 31 March 2016 this was to allow for a more detailed evaluation and review extended data to understand the real value of the schemes.

A decision will be made by Integrated Health & Social Care Board which is being held on 17 March 2016. Of the 4 schemes, it is proposed that 2 are decommissioned; Domiciliary Medication Optimisation and the Frail Multi Disciplinary Team (MDT) and Targeted Frail Elderly Care Co-ordination.

It is proposed to continue with the Radcliffe & Whitefield Paramedic scheme and the Staying Well service, but to roll it out across Bury with the systematic identification of appropriate patients in place

The Assistant Director Strategy Procurement and Finance reported that learning from the healthier Radcliffe scheme has identified a number of themes including:

- more focus is need to consider evaluation up front, what we think is 'good' and how we measure it, before schemes or services are put in place
- Engagement with, and from, partners and GPs needs to be undertaken differently and much earlier in design
- A different approach is needed rather than the piecemeal approach to schemes, and separate project management has not been as effective as it could have been
- An out of hospital approach / model should be defined that we can commission as one 'out of hospital' service

The Chair invited questions from those present and the following points were raised.

In response to a Member's question the Assistant Director Strategy Procurement and Finance reported that 400 reviews were requested in respect of the domiciliary medication optimisation scheme. In respect of the frail MDT scheme 289 service users were identified of those 98 completed the assessment.

In response to concerns raised by Members, the Assistant Director reported that some of the issues that have led to the services not being recommissioned will be successfully addressed via pooled budgets and the better care fund. The Better Care Fund will allow for greater integration of services and will alleviate some of the problems that have arisen in respect of the recruitment and the retention of staff.

With regards to the decommissioning of the multi disciplinary team, the Assistant Director reported that this is not about how care is delivered but rather the professionals that support the service and the assessment process.

Health Scrutiny Committee, 17 March 2016

In response to a question from the Chair, the Assistant Director reported that liaison and engagement with GPs could have been better. A GP engagement event has recently taken place in respect of working with the primary care workforce which has provided some learning as to how to engage differently.

With regards to the planned extension of the rapid response vehicles, partners are in negotiation with Northwest ambulance service in respect of providing additional resources.

It was agreed:

The Assistant Director, Strategy procurement and Finance and be thanked for their attendance.

HSC.833 DEVOLUTION MANCHESTER

Stuart North, Chief Operating Officer, Bury CCG attended the meeting to provide members with an update in respect of the devolution proposals. The presentation contained the following information:

Greater Manchester Devolution Agreement settled with Government in November 2014; the agreement delegates powers over areas such as transport, planning and housing – and a new elected mayor with £22 billion to be handed to Greater Manchester.

Memorandum of understanding for Health and Social Care devolution signed February 2015 by NHS England plus the 10 Greater Manchester councils, 12 Clinical Commissioning Groups and 15 NHS and Foundation Trusts. Local health and social care decision makers take control of estimated budget of £6 billion from April 2016.

The Chief Operating Officer Bury CCG reported that the devolution is necessary to address some of the poor health outcomes across Greater Manchester;

- more than two thirds of premature deaths in GM are caused by behaviours which could be changed;
- on any day there are 2,500 people in a hospital bed who could be treated at home or in the community
- Four out of ten GM children are not ready to start school when they're five-years-old; and four out of ten leave school with less than five GCSEs
- By 2021 there will be 35,000 people in GM living with dementia; more than 10,000 will have severe symptoms and need 24 hour care

The Chief Operating Officer reported that work is already underway, by the end of December, hubs are operational in each CCG area, providing 7-day access for patients who need medical help across Greater Manchester with further hubs opening early 2016.

£450m has been earmarked to fund improvements known as the Transformation Fund. In response to a Member's question in respect of the transformation fund, the Chief Operating Officer reported that the Local Authority/CCG and partners will bid for the money; the money will be divided into two pots; an innovation fund and a separate amount for time limited dual running of services. Effective and independent management of the Transformation Fund will be critical in ensuring the right projects are funded to deliver the agreed strategy.

In response to a Member's question the Chief Operating Officer reported that Devolution will provide clearer more locally determined decision making. Devolution will allow for the development of common standards across Greater Manchester.

Members expressed concern regarding the need to make 2 billion pounds of savings while at the same time devolving power to Greater Manchester. The Chief Operating Officer reported that the devolution agenda will help to tackle the funding challenge.

The Elected Mayor will not be responsible for health and social care, he/she will be accountable to the ten Council leaders. The commissioning of health and social care will be much more streamlined. Services will be developed in collaboration with partners and stakeholders.

It was agreed:

That a Devolution Manchester update will be considered at a future meeting of the Health Overview and Scrutiny Committee.

HSC.834 PROPOSED LIFESTYLE CHANGE SCHEME

The Chief Operating Officer Bury CCG attended the meeting to provide members of the Board with an update in respect of the proposed changes to the life style scheme.

The aim of the scheme, is to encourage patients who smoke or are above their healthy weight to make a positive lifestyle change before a non-urgent planned surgery, to help them become as fit for possible for their operation (and beyond). There is good evidence that stopping smoking or reaching a healthier weight before surgery reduces complications such as infections, breathing problems and it can also reduce length of stay in hospital.

For appropriate patients, their GP will recommend that they consider delaying their planned non-urgent operation to allow them time to make a lifestyle change and to get them as fit as possible in advance of their operation. Support would be provided by the Council's 'Bury Lifestyle Service'.

The CCG will provide GP Practices with the communications resources needed to support and promote this conversation with patients.

The Chief Operating Officer reported that there is already a limited number of conditions when clinic risk is determined by doctor.

In response to a Member's question, the Chief Operating officer reported that Bury's lifestyle service will offer weight management and smoking cessation support to members of the public.

It was agreed:

That the Chief Operating Officer be thanked for his attendance.

HSC.835 ALTERNATIVE PROVIDER MEDICAL SERVICES

NHS Bury Clinical Commissioning Group (CCG) and NHS England are jointly responsible for local contracting arrangements for GP Practices in the borough. In March 2017, two Alternative Provider Medical Services (APMS) GP contracts are due to end; these relate to the contracts for Rock Healthcare in Bury and The RLC Surgery in Radcliffe.

All registered heads of household for these two GP Practices received a letter at the start of February 2016 to inform them that the contracts were due to come to an end and that as part of a review of the needs of the local population there was a need for us to understand, and for patients to help shape, what should be provided in the future. The period of engagement closed on 29th February 2016.

Over 300 patient responses were received to the survey. We are reviewing all available feedback and options prior to making a decision at our joint Primary Care committee which meets in public.

The contracts aren't due to come to an end until the March 2017 and therefore, no immediate changes will take place, and patients have been reassured that their Practice will remain open and there will be no immediate changes to the services they currently access.

Based on the work the CCG have done to date, there is still a requirement for a GP practice in both of these areas. However, the way that patients access GP services in the evening and at the weekend may change.

It was agreed:

The Health Overview and Scrutiny Committee will be kept informed of the outcome of the period of engagement and any decision in respect of the Alternative Provider Services contracts at the Rock Healthcare and the RLC surgery in Radcliffe.

HSC.836 NOTE OF THANKS

On behalf of the Committee, the Chair thanked Councillor Fitzwalter for her contribution and wished her well in the future.

COUNCILLOR SARAH KERRISON
Chair

(Note: The meeting started at 7pm and ended at 8.50pm)

This page is intentionally left blank

REPORT TO HEALTH SCRUTINY COMMITTEE
--



TITLE:	Healthy Young Minds - Child & Adolescent Mental Health Services (CAMHS)
DATE OF MEETING:	20.06.16
REPORT FROM:	Karen Whitehead, Strategic Lead (Health, Families, Partnerships and Complex Care) CYPC & CWB
CONTACT OFFICER:	Karen Whitehead

1. PURPOSE AND SUMMARY

Key work programme response to Health Overview Scrutiny Priority 1 Mental Health – CAMHS

2. INTRODUCTION

This document is to provide an overview briefing paper to panel with reference to the five year forward CAMHS Local Transformation Plan and stepped care model for services emotional well being offered to schools within the borough. Healthy Young Minds (HYM) is now the new rebranded CAMHS service.

3. BACKGROUND

Bury Local Transformation Plan (LTP) is 5 year forward plan to provide emotional mental health, CAMHS support to children and young people in Bury. The vision to offer the right help and support at the right time to ensure best outcomes for emotional mental health and well being. The focus is not just in developing CAMHS services, but providing an appropriate response for the children and young people who do not meet traditional CAMHS thresholds. One key element of this is the establishment of a single point of access (SPA)for all referrals.

The Local Authority, Bury CCG (Clinical Commissioning Group) and mental health providers have all signed up to this plan.

4. WHAT IS WORKING WELL?

The following information provides an overview of scheme already in existence and working well;-

Single Point of Access – Enhanced Duty System

In order to move towards a stepped model of care (The Thrive model) Healthy Young Minds, in the interim, will be developing an enhanced duty system, all emotional health and wellbeing referrals will come directly to the service, regardless of eligibility for a tier 3 service. All referrals will be screened as usual, however, rather than returning referrals back to the referrer, HYM will re-direct all non CAMHS referrals to the most appropriate service. The plan is the SPA will at this point, be a virtual team, and will require sign up from all services involved. The process, will hopefully, ensure, that all young people, receive the most appropriate care at the right time by the right service. The expectation is that it will also reduce waiting times for treatment/intervention. The enhanced duty system will also offer phone advice and consultation prior to referrals being made. The SPA will be eventually placed in locality Hubs where HYM staff will be situated for a day week on a permanent basis.

The early help offer from HYM will be in the form of, advice, consultation, support and joint assessments. Recruitment is underway to appoint link workers within HYM to be the link for schools and other agencies, offering support and educational sessions where appropriate. HYM currently offer lunch time learning for schools. Staff will work closely with other agencies offering emotional health and wellbeing interventions, with the view of developing, in some instances joint care pathways.

Bury Youth Service

Bury Youth Service offers an Emotional and Wellbeing Package as part of the School Offer to all Bury High Schools. The project is designed for pupils in need of extra support for their personal, emotional and social wellbeing.

The aim of the project is to educate young people, for them to acknowledge and understand their feelings and their behaviour, the dangers they are exposed to, the potential consequences of their behaviour and thereby encourage them to make informed decisions that will have a positive effect for them and the lives they choose to lead.

This year the youth service has delivered the Emotional & Wellbeing Project as part of its offer to the following schools:

Castlebrook – 1 x year 7 group; 1 x year 8 group

Elton – 1 x year 8 group; 1 x year 9 group

Sessions are interactive, including:

My thoughts, feelings & communications, self esteem, my strengths & weaknesses, who I am, diet & exercise, body image and role models, Positive relationships, Substance misuse – (drugs, alcohol and smoking), sexual health.

Safe Project

The SAFE project was developed in 2011 as a response to increasing concerns about Child Sexual Exploitation and internet safety. SAFE is a preventative programme delivered to Year 8/9 pupils in Bury High Schools which aims to help young people understand risk and how to manage it.

Pupils are identified by the school with a focus on those who are thought to be involved or potentially involved in high risk activities e.g. sexual activity, drug and alcohol use, inappropriate use of social media, or likely to be victims of grooming or sexual exploitation.

The maximum number of pupils in each group is 10, all groups are single sex, and the programme lasts for 11 weeks, it has been offered to all High Schools in Bury.

Contents of the sessions cover; Self-esteem, Developing healthy friendships and relationships, Saying 'NO'/ Peer Pressure, Alcohol and Drugs, Sex and the Law, Internet Safety, Grooming and recognising risky situations/developing strategies for staying safe.

SAFE has been delivered in all Bury High Schools. This academic year SAFE has been delivered in EPRU, Phillips High, Bury Church, Prestwich Arts, Woodhey (x2), St. Gabriel's, St. Monica's (boys), Broad Oak, Elton x2 (boys and girls), The Derby. All except 2 of the groups have been girls.

Resilience in Schools – Evidence Base

- One in ten children aged between 5 and 16 years (three in every classroom) has a mental problem, and many continue to have these problems into adulthood. Half of those with lifetime mental health problems first experience symptoms by the age of 14.
- Among teenagers, rates of depression and anxiety have increased by 70% in the past 25 years.
- Ten years ago, detailed estimates put the costs of mental health problems in England at £ 77 billion, including costs of loss of productivity and wider impacts on wellbeing. More recent estimates suggest the costs may be closer to £105 billion.

Children are less likely to suffer from serious mental health difficulties in later life if they receive support at an early age, providing better outcomes and a cost saving to adult mental health services.

Growing evidence indicates that promoting positive mental health also improves a range of positive school outcomes, including enhanced academic progress, better attendance and lower exclusion rates. The CCG have provided additional funding to support this resilience in schools link initiative.

Please find attached a document which provides more information about the scheme.



DRAFT Resilience in
schools brochure 2015

WHAT NEEDS TO WORK BETTER AND WHAT ACTIONS ARE IN PLACE TO ADDRESS THIS?

In order to strengthen further service provision Third Sector organisations have been invited to provide expressions of interest for additional funding to offer within Communities emotional health, well being consultation, awareness raising and one to one support.

These interviews are planned for 22 June 2016, with successful Third Sector organisations notified by mid July.

In addition a multi-agency safeguarding training programme has been funded by the transformation plan to provide bespoke training courses to school teachers, teaching assistants, SENCOs to up skill the workforce and increase their ability to support children and young people in all aspects of emotional health and well being, e.g. bullying, self harm, anxiety management.

5. FUTURE PLANS AND PRIORITIES

The CCG, Local Authority senior officers and current providers of emotional mental health support have a project implementation document which highlight and outlines scale and processes which will embed this step model approach.

List of Background Papers:-

Contact Details:-

Scrutiny Report

Agenda Item	
----------------	--

MEETING: HEALTH AND OVERVIEW AND SCRUTINY COMMITTEE

DATE: June 2016

SUBJECT: DEVELOPMENT OF A WORK PROGRAMME FOR 2015/2016

REPORT FROM: Democratic Services Officer

CONTACT OFFICER: Julie Gallagher

1.0 SUMMARY

This report sets out details of potential items to assist in the development of a Work Programme for 2015/2016.

2.0 MATTERS FOR CONSIDERATION/DECISION

Members of the Health Scrutiny Committee are requested to:

Agree and set an Annual Work Programme for the 2016/17 Municipal year.

3.0 HEALTH OVERVIEW AND SCRUTINY COMMITTEE – TERMS OF REFERENCE.

The terms of reference state (appendix 1), that the primary purpose of the Health Scrutiny Committee is:

- To carry out the Council's statutory obligations in relation to reviewing and scrutinising any matters relating to the planning provision and operation of health services in the area of the Council.
- To oversee the health and wellbeing of the Borough's population.
- To Scrutinise the provision, planning and management of Adult Care Services.
- To monitor the implementation of any scrutiny recommendations accepted by the Cabinet.

4.0 WORK PROGRAMME 2014/2015

- 4.1 The Joint Health Scrutiny Committee is required to set a work programme for 2016/2017 which it will monitor throughout the year.
- 4.2 The Work Programme of the Health Scrutiny Committee will need careful consideration, bearing in mind the resources available, time constraints of Members and also the interests of the local community.
- 4.3 Work undertaken in the municipal year 2014/15
- **Healthier Together**
 - **Infection Prevention Control**
 - **Drug and Alcohol Service Update**
 - **Adult Care Complaints Report**
 - **Infection Control update**
 - **Arriva Patient Transport Service update**
 - **Delayed Discharge Report**
 - **Pennine Acute Maternity Services**
 - **Health and Wellbeing Strategy and Annual Report**
 - **Director of Public Health Annual Report**
 - **Activity and Finance Report I Will if You Will**
 - **Proposed changes to the Deferred Payment Scheme**
 - **Fuel Poverty Update**
 - **Oral Health Strategy**
 - **Quality Assurance Annual Report**

Working Groups (Health Scrutiny)

Physiotherapy Overview Project Group

5.0 TOPICS IDENTIFIED

The topics identified have been split into two categories:

1. Topics that the Health O&S Committee may wish to re-visit
2. Topics not previously scrutinised by the Health O&S Committee

Suggested item	Context	Methodology	Outcome
1. Topics to be revisited or for further consideration:			
Patient Transport Service	<ul style="list-style-type: none"> Arriva Transport Solutions were awarded the contract to provide non-emergency patient transport services in Greater Manchester from 1st April 2013 after undercutting the NHS Northwest ambulance service by £3.5 million. A Manchester Evening News investigation in December 2013 reported that there had been 400 complaints between April and September, four times higher than in other parts of the Northwest where NWAS still provides the service. In January 2014 the Lead Commissioner (NHS Blackpool CCG) issued the transport provider ATSL a Performance Improvement Notice because of the Provider's on-going failure to achieve the standards of performance expected as measured by the Key Performance Indicator. ATSL submitted a performance improvement 	<ul style="list-style-type: none"> Interview representatives from the NWAS in relation to how the organisation plans to improve performance, from the go live date on 1st July 2016. Interview a representative from Blackpool CCG in relation to their commissioning intentions in respect of the proposals. 	<ul style="list-style-type: none"> Improve Member's understanding of the service Improved Patient Experience <p>Representatives attend in July 2016</p>

	<p>plan within 5 days of the commissioner issuing the notice. The Plan identified each area and how they planned to improve it.</p> <ul style="list-style-type: none"> Healthwatch produced a report across Greater Manchester which was very critical of the service provided. 		
Pennine Acute NHS Trust Further reconfiguration proposals	<ul style="list-style-type: none"> The Healthier Together reconfiguration proposals relate to only a small percentage of the necessary reconfiguration proposals. Pennine Acute Trust in line with the Devolution Manchester Proposals will need to review and reconfigure the other services provided Review PAT service transformation strategy. 		
Devolution Manchester	<ul style="list-style-type: none"> Greater Manchester Devolution Agreement settled with Government in November 2014, building on GM Strategy development. Powers over areas such as transport, planning and housing – and a new elected mayor. Ambition for £22 billion handed to GM. MoU Health and Social Care devolution signed February 2015: NHS England plus the 10 GM councils, 12 Clinical Commissioning Groups and NHS and Foundation Trusts MoU covers acute care, primary care, community services, mental health services, social care and public health. To take control of estimated budget of £6 billion each year from April 2016. 	<p>The Strategic Plan and locality plan working groups have proposed that a single framework for locality plans is created and that this should mirror the GM Strategic Plan framework, to enable an aggregate GM position to be collated and enable effective benchmarking.</p>	<p>The Health Overview and Scrutiny Committee reviews the DevoManc Locality plan.</p> <p>Representatives attend in June 2016</p>
Director of Public Health Annual Report			To receive the Director of Public Health's Annual Report.

			Representatives attend in September 2016
Health and Wellbeing Board Annual Report			To receive the Annual Report from the Chair of the HWB Councillor Trevor Holt. Representatives attend in September 2016
Adult Care Complaints Report			Representatives attend in June 2016
Additional items for consideration....			
2. New topics			
Child and Adolescent Mental Health Services	<ul style="list-style-type: none"> A recently published House of Commons report found: “There are serious and deeply ingrained problems with the commissioning and provision of Children’s and adolescents’ mental health services. These run through the whole system from prevention and early intervention through to inpatient services for the most vulnerable young people. The Committee draws conclusions and makes recommendations for action in the following areas: <ul style="list-style-type: none"> The lack of reliable and up to date information about children's and adolescents' mental health and CAMHS focus of funding should be early intervention Increase waiting times and problems with 	Interview representatives from the following partners/stakeholder groups: Local Authority Pennine Care NHS Foundation Trust School Early Break	First representative Karen Whitehead Strategic lead, Bury MBC will attend in June 2016

	referral thresholds <ul style="list-style-type: none"> • Parents have described battles in order to get access to CAMHS particular in some areas of CAMHS provision • Struggling to access Tier 4 services and the young person's safety being compromised while awaiting an inpatient bed. 		
Eating Disorder Service Provision			
The Role of the Care Quality Commission (CQC)			

6.0 CONCLUSION

A well thought out and effective Work Programme, focused on outcomes will strengthen the role of Health Scrutiny within the Council and more widely with partners and stakeholders.

Officer Contact Details
Julie Gallagher
Julie.gallagher@bury.gov.uk
 0161 253660

DRAFT

This page is intentionally left blank