

**Minutes of: HEALTH SCRUTINY COMMITTEE**

**Date of Meeting:** 23 January 2019

**Present:** Councillor S Smith (in the Chair)  
Councillors J Grimshaw, N Jones, Smith, R Walker and  
S Wright

**Public Attendance:** 2 members of the public were present at the meeting.

**Apologies for Absence:** Councillor S Haroon, Councillor T Holt, Councillor  
O Kersh and Councillor Susan Southworth

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**HSC.321 DECLARATIONS OF INTEREST**

Councillor Lucy Smith declared a personal interest in all matters under consideration as her partner is employed at the Christie NHS Hospital Trust.

**HSC.322 PUBLIC QUESTION TIME**

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

**HSC.323 MINUTES**

**It was agreed:**

That the minutes of the meeting held on 7<sup>th</sup> November 2018 be approved as a correct record.

**HSC.324 TRANSFER OF PENNINE CARE COMMUNITY SERVICES**

Margaret O'Dwyer - Director of Commissioning & Business Delivery/Deputy Chief Officer attended the meeting to provide members with an update in respect of the transfer of Bury's community services currently provided by Pennine Care Foundation Trust to the Northern Care Alliance.

A copy of the presentation had been circulated to members prior to the meeting. In December 2018, the Pennine Care Board approved the "Trust Strategy 2019-22: Maximising Potential". The strategy provided details of the Trust plans to focus on mental health and well-being and community services to be fully divested by April 2020.

Bury CCG has invited the Locality Care Alliance to identify a preferred Partner, Northern Care Alliance (NCA) is the preferred partner. It is envisaged that the transfer date will be Quarter 2 of 2019/20.

The Director of Commissioning & Business Delivery/Deputy Chief Officer reported that issues under consideration will include:

- Resources for NCA to undertake the transfer.

- Current process underway for community staff to work as part of neighbourhood teams under single line management.
- Communications to all Bury Community Staff continue to be issued to provide assurance and be supportive.

Those present were invited to ask questions and the following issues were raised.

Members of the Committee discussed communication with staff. The Director of Commissioning reported that information was shared with staff in December (2018). The transformation agenda will direct and potentially create more work in the community as monies transfer from the Acute sector into the neighbourhoods. By having the Northern Care Alliance as the provider and the employer (formally Salford Royal) it is hoped that this will provide staff with greater certainty and assurance.

Responding to a Member's question with regards to the decision to waiver the procurement process, the Director of Commissioning reported that the CCG and the Council have received legal advice in respect of the procurement process. An agreement has been reached amongst the CCGs in the north east sector to waiver the procurement rules for 2 years. This will provide an opportunity to assess what is required going forward and test the market in a more transformational way and avoid services continuing to be commissioned in the same way. The Director of Commissioning reported that it is highly unlikely that the services will be re-tendered earlier as the LCA will need time, to develop and embed.

The Director of Commissioning reported that Salford Royal has just been award, for the second time, a CQC rating of outstanding. The Trust has been commissioned to deliver community services for other providers for eight years.

Due diligence will be undertaken, there are a number of back office functions currently undertaken by Pennine Care that will need to be un-picked and divested from the Trust.

The Director of Commissioning reported that each of the three CCG's will invest money in the project in addition to some transformation monies made available from the Greater Manchester health and social care partnership.

Bury's CCG Board have agreed the transfer the community services to the Northern Care Alliance, the Director of Commissioning reported that the community services will continue to be provided and the public will not see any difference in service delivery.

**It was agreed:**

Margaret O'Dwyer - Director of Commissioning & Business Delivery/Deputy Chief Officer be thanked for her attendance.

**HSC.325 URGENT CARE TRANSFORMATION UPDATE**

Kath Wynne-Jones - Chief Executive LCA presented a report updating Members on the work being undertaken in relation to Urgent Care.

The transformation of Urgent Care is a key programme within the Locality Plan for Bury.

The LCA Chief Executive reported that the challenges in Bury echo that in most other health systems with rising demand for urgent care services, increasing numbers of 999 calls, A&E attendances and non-elective admissions. The urgent care system has multiple entry points and it can be confusing to patients with a tendency to default to A&E.

Bury Locality Care Alliance providers have been working with commissioners to develop a more integrated urgent care system for Bury.

This is a long term programme but three projects were identified as priorities:

- 1) A paramedic Green Car – NWS is the provider and the aim of the Green Car is to provide an expanded local see, treat and connect response to lower acuity 999 calls. The service operates 7 days a week 12 hours a day.
- 2) An Integrated Virtual Clinical Hub [IVCH] – to provide local telephone based clinical assessment and where required direct booked access to GP and OOH appointments. The provider is BARDOC and the service operates 7 days a week during the out of hour's period.
- 3) An Urgent Treatment Centre at Fairfield General Hospital. The UTC operates as a minor injury and illness unit and is a partnership between Northern Care Alliance, BARDOC and Bury GP Federation. It operates 7 days a week, 12 hours a day – 08.00 – 20.00.

The Phase 1 pilot of the UTC opened on 5 November 2018. It is open 08.00 – 20.00 seven days a week and is staffed by a GP, Advanced Nurse Practitioner and Emergency Nurse Practitioner. All patients who attend the FGH A&E department are clinically assessed and those with a minor injury or illness are streamed to the UTC. Up to 60 patients a day have been seen and treated in the UTC. This has eased the pressures over winter within the ED for this cohort of patients.

Those present were invited to ask questions and the following issues were raised.

Responding to a Member's question the LCA Chief Officer reported that it was initially envisaged that it would take the UTC 6 months to be fully operational however this took effect after only 6 weeks.

With regards to readmission rates following a green car visit, the LCA Chief Officer reported that she did not have this information to hand but could circulate this information following the meeting.

Members discussed the out of hospital offer. The LCA are in the process of developing a new offer, one which it is hoped will operate without organisational boundaries. This will include integrated neighbourhood teams, intermediate services, rapid response teams and end of life services.

Responding to a question with regards to whether the new urgent care schemes will generate savings and efficiency's; the LCA Chief Officer reported that the demographic changes as a result of an ageing population as well as rising levels of acuity, mean it is difficult at this current time to take money out of the Acute system whilst the demand continues to grow. Money will be invested in

community services via GM Transformation funding. There is a strong evidence base that by investing in intermediate services this will lead to a shift in demand, away from the Acute sector. The same evidence base does not currently exist for investment in the Integrated Virtual Clinical Hubs– wider work will need to be undertaken which will including building resilience in the system.

**It was agreed:**

The LCA Chief Officer be thanked for her attendance.

**HSC.326 HEALTH SCRUTINY UPDATE**

Councillor Stella Smith, Chair of Health Scrutiny Committee presented a report providing members with an update on information discussed at the most recent meetings of Joint Hospital Overview and Scrutiny Committee for the Pennine Acute Trust and GMCA Health Scrutiny on which she is the Council's representative.

The Chair reported at the JHSOC, Managers from the Northern Care Alliance gave an update on the progress of recruitment and retention in the workforce of the Trust, an ongoing project as well as a finance update with predictions. Jon Rouse, Chief Officer of the Greater Manchester Health and Social Care partnership updated the committee on the progress of the transaction, namely the splitting of Pennine Acute Trust between the Manchester Hospital Trust and the Northern Care Alliance. This is a long and difficult process and is progressing quite slowly.

The Chair also attended the GMCA Health Scrutiny Meeting, held on Wednesday January 16<sup>th</sup>. The Committee considered work undertaken by Warren Heppolette in compiling a county wide survey of voluntary and social enterprise groups. There are many thousands, including about 1500 in Bury. As well as a presentation on the redesign of Primary care by Dr Tracy Vell, which was primarily concerned with the re-organisation of GP practices into groups or clusters, to cover extended hours and expanded services.

**It was agreed:**

The Chair be thanked for her update.

**HSC.327 WORK PROGRAMME UPDATE**

Members discussed the revised work programme report.

**It was agreed:**

The following items will be considered at future meetings of the Health Scrutiny Committee:

- GP Extended Access to Primary Care Services (March)
- Persona Update (March)
- Adults Care Complaints Report (March)
- Delayed Discharge (April)
- Substance Misuse Services (April)
- Commissioning of Health Visitors (April)

**COUNCILLOR S SMITH**  
**Chair**

**(Note: The meeting started at 7.00 pm and ended at 8.20 pm)**