

Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 16 July 2024

Present: Councillor E FitzGerald (in the Chair)
Councillors R Brown, M Walsh, C Boles, D Duncalfe,
J Lancaster, L Ryder, R Gold and M Rubinstein

Also in attendance: Will Blandamer, Deputy Placed Based Lead and Executive Director, Health and Adult Care
Adrian Crook, Director of Community Commissioning
Councillor Tamoor Tariq, Cabinet Member, Health and Wellbeing

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

Apologies for Absence: Councillor J Grimshaw and Councillor N Frith

HSC.1 APOLOGIES FOR ABSENCE

Apologies for absence are listed above.

HSC.2 DECLARATIONS OF INTEREST

There were no declarations of interest made at the meeting.

HSC.3 MINUTES OF THE LAST MEETING

The minutes of the meeting held on 20 June 2024 were agreed as an accurate record.

Councillor FitzGerald reported that all members had received an email regarding the appointment of a nominated Corporate Parenting Champion from each committee. It was explained that the person would receive training and would be responsible for advocating for Corporate Parenting matters at each committee.

Councillor FitzGerald asked for nominations.

It was agreed:

That Councillors Ryder and Walsh would be the Corporate Parenting Champions for the Health Scrutiny Committee.

HSC.4 PUBLIC QUESTION TIME

There were no public questions.

HSC.5 MEMBER QUESTION TIME

There were no member questions.

HSC.6 HEALTH AND CARE UPDATE

Will Blandamer, Deputy Placed Based Lead and Executive Director, Health and Adult Care gave a presentation giving an overview of the Bury Integrated Care Partnership operating model, priorities, NHS performance overview and finance.

The presentation explained that the role of the Health Scrutiny Committee is to;

- review and scrutinise matters relating to the planning, provision and operation of the health service in the area.
- require information to be provided by certain NHS bodies about the planning, provision and operation of health services
- require employees, including non-executive directors of certain NHS bodies, to attend
- make reports and recommendations to certain NHS bodies and expect a response within 28 days
- set up joint health scrutiny and overview committees with other local authorities
- have a mechanism in place to respond to consultations by relevant NHS bodies and relevant health service providers on substantial reconfiguration proposals
- have a mechanism in place to deal with referrals made by local Healthwatch

Bury Integrated Care Partnership describes the joint work of the key partners in Bury to manage and transform the health and care system in Bury and to provide better outcomes for residents and included Bury Council, Northern Care Alliance (inc. Fairfield General, and Community Health Services), Pennine Care Mental Health Trust, Manchester Foundation Trust, NHS Greater Manchester, Primary Care Providers – GPs/pharmacists/dentists/optometrists, VCFA and wider Voluntary Sector, Bury Healthwatch, Persona and other partners.

The Health and Care System in Bury costs about £450 million per year.

Will explained the ambition of the Partnership, set out the Governance arrangements and then explained how the Bury Locality Board fit in with the partnership and the programme of work and priorities for Bury.

There are 10 programmes of work: Urgent Care, Major Conditions including Cancer, Learning Disabilities and Autism, Complex Care, Mental Health, Primary Care, Adult Social Care Transformation, Ageing Well inc. frailty and dementia, Planned care and community services, and End of Life and Palliative Care.

The high level priorities were set out and the 6 obsessions which inform the way the priorities are delivered.

It was explained that an integrated neighbourhood team had been established in each of the towns in the borough creating five neighbourhoods and included adults care, community health services and GPs with plans to expand to include other parts of the health and care system. A model of family hubs was being rolled out within the neighbourhood footprint to support children, young people and families and other public services were being aligned on the same footprint with established public service leadership teams in each neighbourhood.

The presentation gave information on the Supra local footprint which had been developed with the Northern Care Alliance and the 4 localities they serve, Bury, Oldham, Rochdale and Salford as well as a partnership meeting with MTF (Manchester University NHS Foundation Trust), and partnership meetings with the 5 boroughs that Pennine Care Foundation Trust works on.

Information was provided on the GM context including the GM Strategy for Health Care and Wellbeing and the operating model. It was explained that there were financial challenges

across the GM system and work was required to produce a sustainability plan and align arrangements across the GM footprint for provision of services and treatments such as IVF.

The presentation included benchmarking information on how Bury was performing compared to the NHS indicators across GM including A & E attendance, the number of patients in hospital who are kept away from home, access to Children and young people's mental health services, inappropriate adult mental health out of area bed days, the percentage of patients identified as having 20% or greater 10 year risk of developing CVD are treated with statins and waiting time for planned care.

It was explained that the Director of Public Health will attend future meetings of the Health Scrutiny Committee to update on the public health outcomes framework.

It was also noted that the Director of Adult Services will bring forward performance reports on key indicators for ASC.

Councillor FitzGerald explained that she had attended the GMCA Joint Health Scrutiny Committee where the work of the Committee had been discussed. There were 9 meetings scheduled for this municipal year compared to 5 the previous year with teams meetings planned in between.

Councillor FitzGerald explained that the work of the committee included reviewing proposed consultations and the harmonisation of services/thresholds of access (such as IVF) across Greater Manchester. It was suggested that the Health Scrutiny Committee should have the opportunity to input in the work of the GMCA Committee and this could be done by Councillor FitzGerald sharing the Committee papers with members and if required having meetings to discuss.

The Cabinet Member for Health and Wellbeing, Councillor Tariq thanked Will for the presentation and highlighted some of the areas that the committee may wish to look at throughout the year and suggested that members may want to attend a visit to the Irwell Unit at Fairfield Hospital.

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

- Councillor Rubinstein referred to the statistics across GM and asked if there were also national statistics.

It was explained that statistics were measured locally regionally and nationally.

- Cllr Ryder referred to work being done to reduce specific acute non elective admissions and asked whether this was reflective of what was happening in the community.

Will explained that there the active case management processes in place to reduce unplanned admissions seemed to be successful.

Adrian reported that proactive care planning in GP surgeries had created 30,000 more GP appointments, a rapid response service had been established, extra resources had been made available at front of A & E and the implementation of same day emergency care were seeing unplanned admission figures consistently reducing.

- Councillor Gold referred to the fact that Fairfield Hospital was limited in the services it could provide which meant that Bury patients were required to attend other hospitals. He asked how the relationships were between hospitals.

Will explained that there was an excellent working relationship with Fairfield Hospital and across the Northern Care Alliance, there were fortnightly meetings with the NCA Chief Operating Officers as well as regular meetings with North Manchester and Bolton regarding maternity services.

- Councillor Walsh asked if the SEND Improvement Assurance Board had been established in the lead up to the CQC and Ofsted and whether it would continue to meet after the inspections.

Councillor Tariq explained that the long term position to turn around SEND requires Children and Adults services to work together.

Will reported that the Council and ICB will be required to respond to SEND and Pennine Care and the NCA will have input at different stages of the action plan. The ICB will be judged on timely access for supporting families. Will explained that he and the Executive Director of Children and Young People sit together on the Board.

- Councillor Duncalfe explained that Blackburn area health authority were in a similar position to Bury in that they use several hospitals as specialist centres of excellence to treat specific conditions. Blackburn have introduced a free scheduled bus service in between all of the various units in their area.

Councillor Duncalfe enquired as to whether Bury have considered introducing a similar service between sites as elderly and less mobile patients often do not drive and could have difficulty in travel between the various sites.

Will explained that this was not something that Fairfield and the NCA had considered but the NCA had indicated that they would contact Blackburn to find out more information. It was possible that they may consider a pilot scheme depending on the information provided and whether assessment information was available. It was stated that funding would be an issue as this was not something that the NCA could fund.

Councillor FitzGerald asked Members to consider all of the information provided to identify topics for inclusion in the work programme of the Committee:

It was also asked whether the Committee should establish a sub committee to input into the work of the GMCA or to share the agenda's with a view to having Teams discussions.

Councillor Lancaster suggested sharing the agendas with the committee as a first step with a Teams invitation being sent to allow those members that wish to be involved to meet to discuss.

Members were also asked to consider a visit to the Irwell Unit as suggested by Councillor Tariq.

It was agreed:

1. That Will be thanked for the presentation.

2. That the Committee Members would consider the contents of the presentation and email the Scrutiny Officer/ Chair with suggestions for items to include on the work programme.

HSC.7 ELECTIVE CARE WAITING TIMES

Will Blandamer gave a presentation giving an update on the elective care and cancer recovery programme.

The presentation included waiting times for appointments, national standards, waiting times for elective care for Bury patients at all providers and comparisons of RTT (referral to treatment) in specialities over 65 weeks and 78 weeks compared to GM.

It was explained that Dermatology, Trauma & Orthopaedic and ENT still have the highest proportion of total Bury Waiters in April. The highest proportion of 65 plus week waits are in Urology and Gynaecology. The highest proportion of 78 plus week waits are in Urology, ENT, Ophthalmology and other- Surgical Services all with 1 waiter.

There were 23 breaches of the 78 week standard at the end of March 2024, 12 of these were due to patient choice, 8 were capacity breaches and 3 were clinically complex.

Diagnostic services performance was good for Bury residents and the NCA were working through challenges.

With regards to performance in relation to cancer diagnosis and treatment it was reported that the Integrated Care Board were working closely with the NCA on access to treatment over 62 and a higher percentage of patients receiving diagnosis within the 28 day Faster Diagnosis Standard.

Will explained that the teledermatology appointments in Salford had gone live in October 2023, the impact on performance was positive with over 1600 patients attending an appointment

The impact was set out as follows; time to first appointment 13-14 days saved, time to FDS communication 7-8 days saved, FDS performance improved from 49.8% in October to sustained delivery of the standard since December.

The planning objectives and the work programme were set out within the presentation.

Members were given the opportunity to ask questions and make comments and the following points were raised:

- Councillor Duncalfe asked whether GPs were encouraged to refer patients for elective treatment in locality or whether treatment options further afield were considered.

It was explained that there should be no barriers to where elective services were carried out and all options should be considered.

- Councillor Boles referred to the current campaign being promoted reminding patients to bring their own medicine when being admitted into hospital and asked if information around this could be shared with elected members.

Will confirmed that this information would be shared after the meeting.

- Councillor Rubinstein asked whether there was any evidence of figures being manipulated to make it look like waiting times were less than they were.

Will explained that he didn't believe that this kind of practice was happening across the Northern Care Alliance. There was no evidence to suggest that this occurred. Adrian Crook explained that there were 522,000 patients on waiting lists in Greater Manchester, to manipulate the figures would take a considerable amount of work and there would be no benefit to doing so.

Councillor Tariq stated that if patients were concerned that they had been removed from a waiting list they could contact their local Healthwatch who would support them with any issues.

It was agreed:

1. That Will be thanked for the update.
2. That an update be brought to a future meeting of the Committee in 2025.

HSC.8 HEALTH INEQUALITIES UPDATE

This item was deferred to a future meeting of the Committee.

HSC.9 COMPLIMENTS AND COMPLAINTS REPORT

Adrian Crook, Director of Community Commissioning presented a report Providing members of the Health Scrutiny Committee with details of information relating to compliments and complaints within the Adult Social Care Services.

It is a statutory requirement to produce an Annual Complaints Report relating to Adult Social Care Complaints, received by the Corporate Core Department, Bury Council.

The report relates to the period 1st April 2023 – 31st March 2024, and provides comparisons between previous years, as well as detailing the nature, scope and scale of some of the complaints received.

The number of complaints received should be considered in context with the number of people actually having direct contact with Adult Social Care Services (excluding their relatives, friends or carers who might make complaints on their behalf). The number of people to have direct contact with Adult Social Care Services during 2023/2024 was 8,343. It is positive that the proportion of people wanting to make a complaint about the services received from the department is low at only 63.

Out of the 63 complaints received, 4 complaints came back to the department to advise they remained dissatisfied, meaning 59 complaints were resolved after the initial response.

The nature of the complaints were set out within the. There has been a slight increase in complaints relating to 'conduct of social care staff' (from 6 to 9). Whilst there has been a slight increase in this area, no particular service area, team or individuals have been highlighted as a concern.

The number of complaints received was also set out by service area. The report has highlighted a slight increase from previous years in complaints for CAD Hub, Choices for Living Well, Prestwich Integrated Neighbourhood Team and the Safeguarding Team. Although

the report highlights an increase the numbers are still relatively low, which does not indicate any area of concern.

The timescales to respond to complaints were reported. 49% of the complaints received were responded to within the 20 working day timescales, 27% of complaints were responded to outside of the 20 working day timescales, 13% of those were over 40 working days and 3% of complaints were responded to over 40 working days. Of the complaints responded to outside of the 20 working day timescales all complainants were kept updated on the delay, the reason for the delay and provided with a new response date.

The number of complaints investigated by the Local Government and Social Care Ombudsman (LGSCO) has not increased and remained as the previous years of 5 cases in 2023/2024. All five cases received by LGSCO were closed after initial enquiries.

In addition to complaints, the department also records the number of compliments received. The number of compliments received had increased from 601 to 826.

Included within the report were some examples of the positive feedback that had been received.

Members of the Committee were given the opportunity to ask questions and make comments and the following points were raised:-

- Councillor Tariq referred to the report and thanked the Adult Care Services for their commitment and hard work.
- Councillor Rubinstein asked whether departments and teams asked for feedback.

Adrian explained that this was not current practice across the teams but would be something that they were planning to promote.

It was agreed:

1. That Adrian be thanked for his presentation.
2. That the Adult Care Services staff be recognised for their hard work and commitment.

HSC.10 WORK OF THE COMMITTEE

Northern Care Alliance JOSOC

Councillor FitzGerald updated Members on the work of the Northern Care Alliance Joint Overview and Scrutiny Committee. It was explained that Cllr FitzGerald and Councillor Lancaster had attended the last meeting. There was currently one Bury vacancy on the Committee from Labour Group.

Councillor FitzGerald explained that the Committee included Salford, Oldham, Rochdale and Bury working together. She had reiterated the issue in the ToR about decisions should be made with all LAs represented (not agreed) and more clarification on how it fits with the GMCA level scrutiny.

NCA provide services beyond just the acute hospitals – specialist (Major trauma in Salford) and integrated care in localities. It was explained that the objective of the Joint Committee will be: To scrutinise the generic services provided by the Northern Care Alliance relating to the

health of the population in Bury, Oldham, Rochdale and Salford and contribute to the development of policy to improve health and reduce health inequalities in respect of services provided by the hospitals.

GMCA JHOSC

Councillor FitzGerald had attended the GMCA Joint Health Scrutiny. The Committee had looked at the work plan plus the service reconfiguration around Adult ADHD and IVF.

Both of these have come up in this scrutiny meeting and they are the first steps in the harmonisation / alignment of provision being equitable across GM.

It was explained that other areas for review are: children's ADHD, Specialised commissioning cardiac and arterial vascular surgery, specialist weight management, diabetes structured education & children's autism.

Work of the Health Scrutiny Committee

Members of the Committee were asked to discuss the work of the Health Scrutiny Committee.

Councillor Gold referred to Ambulance services and asked whether the work of NWAS was something that the Committee could look at.

Will reported that there was an ongoing piece of work to explore alternatives to admissions. Each of areas work slightly differently. NWAS were carrying out a live audit looking at live admissions. Work was also being carried out with regards to end of life and palliative care with care homes and NWAS and how to work with care homes to allow their residents to die with dignity in their home.

Will reported that urgent care was included within the forward plan.

Other areas highlighted for possible inclusion were;

- End of life care
- National funding to primary care to extend the range of clinicians within GP practices

It was reported that Primary Care was included on the work programme.

COUNCILLOR E FITZGERALD
Chair

(Note: The meeting started at 7.00 pm and ended at 9.25 pm)