

**Minutes of: HEALTH SCRUTINY COMMITTEE**

**Date of Meeting:** 22 July 2021

**Present:** Councillor T Holt (in the Chair)  
Councillors J Grimshaw, M Hayes, K Hussain, S Walmsley,  
C Birchmore, R Brown, J Lewis and T Pilkington

**Also in attendance:** Councillor A Simpson, Cabinet Member for Health and Wellbeing

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

**Apologies for Absence:** Councillor S Haroon and Councillor C Tegolo

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#### **HSC.1 DECLARATIONS OF INTEREST**

Councillor Pilkington declared a personal interest in any item relating to Manchester Foundation Trust as he was employed by them as a fundraiser for Royal Manchester Children's Hospital.

#### **HSC.2 MINUTES OF THE PREVIOUS MEETING**

**It was agreed:**

That the Minutes of the last meeting held on 13 April 2021 be approved as a correct record and signed by the Chair.

#### **HSC.3 MATTERS ARISING**

Councillor Walmsley referred to a question that had been asked of Dr Schryer in relation to prescription charges for women who required two courses of antibiotics to treat water infections. Councillor Walmsley asked whether an answer was available.

Will reported that an answer had been received and would be circulated to the Members of the Committee.

#### **HSC.4 PUBLIC QUESTION TIME**

Debbie Walker, a Bury resident and mother of a young adult with complex needs asked in relation to the all age disability service that was being proposed whether there was a working group for parents/carers of young people who were transitioning from Children's Social care into Adults Social Care that would take on board the views of a young person. Debbie explained that the transition that her family had experienced hadn't been good and had been difficult.

Adrian Crook, Director of Adult Social Services and Community Commissioning explained that he was aware that there was room for improvement and a recent consultation exercise had been undertaken to look into this issue. Adrian explained that the Council had been exploring co production and if the

consultation work highlighted that this was desirable then work would be undertaken to bring together options for improving services, one of which may be integrating the assessment and social work functions. It was explained that this would be done working alongside colleagues from Children with disabilities services, the CCG, adult social work and their CCG equivalents. Adrian stated that there would be working groups looking into what should be done better or differently.

Debbie also explained that she had attended a meeting recently where an officer, Jon Hobday had been listening into the meeting, Jon had picked up on some issues that she had raised and had taken those issues and had set up some reasonable adjustments to help. Debbie stated that this was just from a comment and sometimes all that was lacking was communication. She had asked that Jon be thanked for the help he had provided.

## **HSC.5 MEMBER QUESTION TIME**

Councillor Pilkington referred to the Autism Strategy for England and asked whether this had been launched yet.

Adrian reported that the strategy had not yet been launched.

Councillor Lewis asked whether there had been any further discussion in relation to the decision taken around Spurr House.

It was reported that this issue was on the agenda for this evening's meeting.

## **HSC.6 COVID-19 UPDATE**

Lesley Jones, Director of Public Health reported that case rates of covid within the borough were rising again after plateauing with the most recent figures being just under 600 per 100,000 which was high. The ranking against Greater Manchester and England was falling but this was because case rates in other areas were going up faster.

Evidence was showing that the current spile could be attributed back to the Euro 2020 football tournament and also due to restrictions being lifted in England.

Transmission was linked to a wide range of settings and distributed across the borough and mostly among young adults.

Lesley reported that hospital admissions were rising, and this was expected to continue. The system was already highly pressured with non covid related illnesses and backlog. It was likely that there would be better outcomes and shorter stays. There had been no Covid related deaths reported over the last week.

Lesley stated that it would be hard to predict what will happen next, but it was anticipated that there would be a peak in cases towards the end of July with hospital admissions up by mid August. The case rates would come down more slowly as previously as when there had been a surge in the past this had been

quickly followed by a lockdown. A further surge in cases was also expected in Autumn.

It was also reported that the potential for long covid should be recognised and the impact that this will have on the communities across the borough as well as other issues such as business continuity.

Lesley asked that everybody continue to be cautious and wear masks where possible and carry on with hand washing and social distancing and undertaking regular testing.

The vaccination uptake was at 80% amongst adults for first dose and 64% for second doses.

Uptake for the over 40's age group was good but not so good for younger age groups.

Work was being carried out to help people feel motivated to have the vaccination. Convenience was an issue that had been considered so evening sessions had been put in place as well as pop up sessions.

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

- Councillor Birchmore asked about deaths in care homes and the figures relating to Bury being higher than some larger boroughs in Greater Manchester and asked what the reason for this was.

Lesley Jones explained that Gorsey Clough Care Home had established a dedicated unit within the home that supported Covid patients following discharge from hospital and allowed them to see their families at the end of their life and prevent discharge into other care homes. This provision helped prevent onward transmission in other care homes and provide a comfortable end of life with their family around them.

Adrian Crook explained that this was a decision that was made very early on in the pandemic to commission care for Covid positive people that had been identified as being at the end of life. There were 34 deaths in the care home at beginning of pandemic and this was seen as a vital service.

Adrian reported that if those numbers were taken out then the deaths in care homes for the population size of Bury was average for Greater Manchester.

Bury has slightly more care home beds per population than other towns such as Salford.

- Councillor Holt referred to recent legislation stating that all care home staff had to be vaccinated against Covid and asked how this would work in Bury care homes.

Adrian explained that the law that Councillor Holt was referring to hadn't been passed yet therefore he hadn't received the details relating to this or any

guidance. It was anticipated that the legislation would come in at the end of autumn and care homes would be given a 16-week grace period in which to get their staff vaccinated. Adrian explained that the timescales had been considered and staff would need to begin receiving vaccinations in September to ensure compliance in time.

The Vaccine Task Force are currently holding individual meetings with the care home staff who are reluctant. Progress is being made. Bury are currently at 90% of care home staff have had first or first and second dose. This is the highest figure in Greater Manchester. Business continuity plans were being drawn up in relation to staff that refused to receive the vaccination.

**It was agreed:**

That the update be noted and Lesley Jones and Adrian Crook be thanked.

**HSC.7 ADULT CARE ANNUAL COMPLAINTS REPORT FOR 2019 - 2020**

Adrian Crook presented the Adult Care Annual Complaints Report which provided members of the Health Scrutiny Committee with details of information relating to Adult Social Care Services.

The report relates to the period 1st April 2019 – 31st March 2020, and provides comparisons between previous years, as well as detailing the nature, scope and scale of some of the complaints received.

It was explained that the council is required to operate a separate Statutory Complaints and Representations procedure, in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which was laid before Parliament on the 27th February 2009 and came into effect on 1st April 2009.

The complaints mentioned in this report typically relate to issues where customers, their families or carers feel that the service they have received have not met their expectations. In these cases, the Council will always have endeavoured to resolve any concerns or dissatisfaction before a formal complaint has been received. Complaints, therefore, usually arise when the customer does not agree with the Council's interpretation of events or, in some cases, where policy delivers an outcome which they do not agree with.

Within the regulations which govern the complaints process, the Council adopts a flexible approach which prioritises local resolution. However, where complainants remain dissatisfied, they have the option to take their case to the Local Government & Social Care Ombudsman.

The Complaint Procedure is not intended for dealing with allegation of serious misconduct by staff. These are covered by and dealt with through the Council's separate disciplinary procedures.

Adrian had sent a summary in a presentation form to all Committee Members. It was explained that timescales had been moved by Government and therefore the report related to 2019/2020 before the pandemic.

Adrian asked that thanks to Louise Carroll be recorded for her hard work and dedication in supporting the complaints procedure.

The total number of complaints received in 2019/2020 has slightly reduced from the previous two years - 67 in 2017/18 and 74 in 2018/2019. Therefore, although the way services are being delivered has changed significantly and service pressures have increased for the department, the figure for 2019/2020 indicates that customers have complained less about the services they have received.

Common themes were highlighted including struggles with communication and the quality of care/services.

212 compliments had been received mostly relating to Choices for Living Well, Intermediate Care Reablement/Killelea

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

- Councillor Brown referred to paragraph 8.1 of the report and the increase in the figures relating to Choices for Living Well, Intermediate Care Reablement/Killelea.

It was explained that this figure referred to the number of compliments received. Complaints relating to this service had been recorded as 7 this year and 6 the previous year. The service works with an average of over 300 customers per month.

- Councillor Lewis asked whether access to services remained the same throughout the pandemic?

Adrian Crook explained that the period of the report ended in March 2020 which was before the pandemic. The complaints report relating to the time period following the start of the pandemic was currently being worked on. Adrian reported that there was a spike at the start of the pandemic relating to the quality of care, particularly anxiousness caused by the need for PPE and whether care staff had the correct equipment.

- Councillor Hayes referred to the fact that one complaint to the Local Government Ombudsman had been upheld and asked what this was in relation to.

Adrian Crook explained that there had been confusion in regard to explaining the charges to somebody and then they hadn't done very good job of apologising afterwards.

- Councillor Pilkington referred to the fact that following changes in service provision no complaints had been received, Councillor Pilkington asked how this cross referenced with how many changes there had been at the same period of time.

Adrian explained that this report related to Adult Social Care and things such as care packages where there could be the possibility of a change of provider at short notice or a required move to a different provider. For the time scale that this report related to there had been no provider failures, so no complaints had been received.

- Councillor Birchmore stated that the number of complaints received had reduced but the number of those complaints upheld had increased and asked whether there was a reason for this.

Adrian explained that the culture in complaints processing had changed following feedback and the service was more minded now to apologise.

- Councillor Birchmore explained that she was currently going through the complaints procedure with Salford Council and it had been a long and drawn out process which was now going through the Local Government Ombudsman and communication throughout had been terrible. Councillor Birchmore asked what Bury had in place to ensure that complainants were kept updated on progress and that information was provided in a timely fashion.

Adrian explained that there was a dedicated Complaints Officer, who as soon as a complaint was received would allocate a manager to investigate. All responses would then be tracked to ensure a timely response. Adrian reported that he held weekly meetings with the Complaints Officer where he reviews the responses.

- Councillor Hussain asked whether the change in culture and apologising more would open up the service to litigation.

Adrian reported that there had be no change in relation to litigation.

- Councillor Holt referred to compliments received in relation to the Rapid Response Team and the number of compliments decreasing by almost a third. He also referred to the Older People Staying Well Team and the compliments decreasing by more than half compared to the previous year. Councillor Holt asked if there was any information as to why?

Adrian explained that the Rapid Response Team was a very busy service so maybe didn't remember to ask for feedback. The Team's workload had increased from 50 customers to 250 customers per month.

Adrian explained that the Staying Well service was excellent, and he never received negative comments in relation to the service.

**It was agreed:**

1. That the contents of the report be noted.
2. That Adrian be thanked for the report
3. That the hard work of Louise Carol be recognised.

## **HSC.8 PROPOSED SAVING OPTIONS FOR ADULT SOCIAL CARE: OUTCOMES OF THE PUBLIC CONSULTATION**

Adrian Crook presented a report setting out the outcomes of the public consultation in relation to the proposed saving options for Adult Social Care.

It was explained that as a result of the reductions in public spending and the impact of the recent pandemic, Bury Council must reduce its spending significantly over the coming years. The council's overall aim is to keep providing the current level of service but find less expensive and better ways of doing this.

Over the next three years Adult Social Care (ASC) propose to make savings of just over £12 million out of the current ASC budget of £52 million. This will be achieved in a number of ways: looking at what and how ASC buy care and support for those who need it, transforming services and working towards a multi-generational disability service.

As a large part of the Adults Social Care budget (£12,393,409 per annum) is spent on Persona Care and Support Limited (Persona), this contract has had to be reviewed and reduced to help achieve the savings. The current savings target for Persona is £2.5m over two financial years 2021/22 and 2022/23, which equates to just over 20% of the Persona budget. Adults Social Care are working with Persona to address the consequences of the financial challenge

Given some of the proposals may have a direct impact on current and future Persona customers, a public consultation was undertaken. This report outlines the details, findings, and recommendations from the public consultation.

The public consultation focussed on five elements.

- Reduce the number of unused places in the day care services, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy.
- Reduce the number of unused places in the short stay residential care service, close Spurr House leaving Elmhurst open for short stay residential care.
- Develop a multigenerational disability service therefore providing one assessment and care management service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability and offering seamless transition to adulthood.
- Questions about participants use of Adult Social Care transport to inform future policy development.
- An opportunity for people to suggest any alternative saving suggestions they may have.

A six-week public consultation was undertaken starting Monday the 24th May 2021 concluding on Friday 2nd July 2021. Several methods were used to try to

maximise the opportunity to capture views of people who use Persona services, their families and carers, our partners, along with the public and future users.

It was reported that the report had been presented to Cabinet on 21 July and the following proposals had been approved:

**Proposal 1 – day care**

- As proposed reduce the number of unused places in the day care service. Close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy.

**Proposal 2 – short stay/ respite**

- As proposed reduce the number of unused places in the short stay service, closing Spurr House leaving Elmhurst open for short stay care.

**Proposal 3 – all age disability services**

- As proposed further explore a multigenerational disability assessment and care management service and if co-production indicates bring forward an options paper

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

- Councillor Simpson, Cabinet Member, Health and Wellbeing explained that this was not something that the Council wanted to do but there were no other options as the Government would not provide the funding for Adult Social Care to enable that the services are provided in their current form.
- Councillor Lewis referred to that fact that the aging population was only going to rise and asked what would happen in 5 to 10 years with regards to care provision. Councillor Lewis mentioned that the number dementia diagnoses were increasing and that social isolation was more common and also increasing.

Councillor Simpson explained that the Council had a duty of care to provide care services but more people were looking to receive that care in their own homes. Grants have recently been distributed to every ward in Bury to help deal with social isolation and different ways of working were being considered particularly within community groups.

Adrian Crook explained that 20 years ago as people got older they might choose to move into a care home where they would stay for the last 10 years of their lives. The demand to live in care homes has continued to reduce year on year and was not now the popular choice as a care option in older age. People were now choosing to stay in their own homes with support and may only require the use of a care home facility at the very end of their life. This type of care would be very specialist nursing and more complex and this type of provision is not something that could be given at Spurr House

- Councillor Lewis asked if the data relating to this could be sent to him.
- Councillor Birchmore explained that she had telephoned Spurr House to find out about the services they provided.

Councillor Birchmore explained that she had first-hand experience of care services as her mother had been diagnosed with dementia. Councillor Birchmore explained that her mother had been stuck in hospital as there was nowhere for her to be moved to and had she been a Bury resident she could have been moved into Spurr House and not had to spend Christmas in hospital.

Councillor Birchmore also asked whether it was possible that people did not know about Spurr House?

Adrian explained that all respite care unless self-funding is accessed and arranged through the social worker teams who are all aware of Spurr House. Adrian explained that the emergency admissions had been changed in Bury over the last 18 months and all emergency placements went to intermediate care facilities where there were doctors, nurses, physiotherapists, and occupational therapists. This was the best practice model and had further reduced the demand for Spurr House as this was a standard residential care home.

- Councillor Brown referred to paragraph 2.4 of the report relating to Grundy Day Care Centre and Spurr House and reducing the number of unused places in the day care services and reducing the number of unused places in the short stay residential care service. Councillor Brown asked for assurance that what would be left would cover the needs of the residents in this borough.

Adrian reported that the capacity that Adult Care would continue to buy from Persona which was 27 beds would be able to consume all of the respite activity that was previously provided by Elmhurst and Spurr House.

- Councillor Birchmore referred to the statement that Councillor Simpson had made in relation to 77% of the respondents that had voted against the recommendation had actually been multiple votes from the same people. Councillor Birchmore asked how this could be identified. Councillor Birchmore also stated that multiple respondents could live together at the same address.

Councillor Simpson explained that this could be identified by the users IP addresses. The IP addresses were anonymous, but it could be shown that small number of devices answered the survey multiple times and more than twice.

- Councillor Hayes asked whether the other GM boroughs were experiencing similar reductions in the use of these type of facilities and were they also making closures?

Adrian explained that Adult Care Services had a duty to make sure that the provision of care was sustainable. There were currently a large number of standard residential care vacancies across the whole of Greater Manchester which was resulting in home closures as a response to under occupancy.

Other boroughs don't provide in house respite services in the same way that Bury do as Bury purchase from our own provider rather than from private providers.

- Councillor Brown referred to short stay residential care homes and asked whether residents crossed borough boundaries to move into them?

Adrian explained that this would be a personal choice. If a resident from Bolton wanted to stay in a home in Bury they could do, but most of the time the placements were made by social workers so they were more likely to look in their local borough.

- Councillor Lewis referred to the consultation process and the statement that the consultation process was carried out in a way that would maximise the responses received but there were only 117 responses which seems very low. Councillor Lewis asked how the consultation was carried out as he hadn't heard about it. He also asked whether packs were posted out to residents?

It was explained that 701 consultation documents were posted by hand to Persona customers, engagement was carried out with Healthwatch, Age UK Bury and all health providers, all Bury Councillors were sent an email setting out the consultation, the information was available in the Bury Times on the Council website and social media. Focus groups were held and Zoom conferences.

- Councillor Lewis explained that he was concerned by the low level of responses that were received.

Councillor Simpson explained that despite all of the work done to promote the consultation she was not surprised by the low number of responses as it was generally unusual to get high responses to consultations relating to social care.

- Councillor Birchmore stated that the email to Councillors was sent before the bank holiday so this could have meant that it was missed.
- Councillor Holt referred to Bury People First and asked what this was.

It was explained that Bury People First is an organisation that was commissioned to carry out the consultation sessions with people with a learning disability and they provide an excellent service and captured some really good feedback.

- Councillor Pilkington stated that it was regrettable that a decision like this had to be made but given that the numbers of people accessing the facilities were decreasing it was something that had to be done, Councillor Pilkington stated that it was vital that there was a joined-up approach and that there was a quality offer from the voluntary sector across the authority.

**It was agreed:**

1. That the contents of the report be noted.
2. That all those present be thanked for their input.
3. That regular updates be brought back to the Scrutiny Committee.

## **HSC.9 MENTAL HEALTH UPDATE**

Kez Hayat introduced himself and explained that he was the Mental Health Programme Lead at Bury CCG/OCO and lead on Mental Health provision in Bury. Kez explained that the last time he had attended the Health Scrutiny Committee was just before the pandemic had hit. At that time the Thriving in Bury Strategy had been drafted and was about to be implemented, this didn't happen at that time as priorities changed significantly in relation to the effect that the pandemic was having on mental health both locally and nationally. Guidance from NHS England in relation to the pandemic was integrated into the services offered and provided. Support and guidance was sought from a number of different partners including the voluntary and faith sectors.

It was reported that all mental health services including clinical and voluntary and faith services continued to operate during the pandemic and despite the pressures on the staff no services shut during this period which was a testament to the staff supporting them.

The digital services and support that was available was well received and worked well.

As lockdown restrictions had begun to be lifted, services were starting to see an increase with mental health related issues, but it was felt that the mental health service provision in Bury was in a good position to be able to cope. Work was being carried out in partnerships across Greater Manchester to provide support.

Work was ongoing to develop pathways and it was reported that the next six months will be challenging, and additional resources may be required to support services and to provide more help.

Kez reported that he would be more than happy to attend a future meeting to provide an update,

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

- Councillor Pilkington referred to inequalities in services provided by the voluntary sector that there may be across the borough between areas of affluence and deprived neighbourhoods and asked what was being done to ensure that services were accessible and equitable across the whole borough.

Kez explained that information was available in relation to neighbourhoods. He reported that services weren't commissioned at a place based level rather than neighbourhoods. Going forward the work that had been carried out in relation to localities and neighbourhoods would allow for services to be commissioned closer to neighbourhoods. The Living Well Model will be the bridge between those that are doing well and thriving and those that need support. This will be provided by

specialist community teams and not just clinical but socioeconomic support as well.

- Carol Birchmore asked how a person was referred to then receive support.

Kez explained that there were a few referral processes, most would be through a GP into secondary care and community services. There were also direct referrals which would be low level support which could be accessed over the phone.

Adrian also explained that if someone Googled Bury Mental Health or Bury Healthy Minds all of the different routes to access support and services were there also self-referral.

Kez also stated that this information was available on the online Bury Directory.

- Councillor Lewis asked whether different age groups were looked at differently in relation to mental health service provision and whether they were targeted differently.
- Councillor Lewis also asked whether there was early prevention services available which could help with lifestyle issues such as better sleep advice or exercise referral.

Kez explained that there was a CYP lead that worked with 0 – 16/17 and then adults services which are 18 +. There were issues with transitioning from Children's services to adults and work was ongoing around working together to make it more streamlined. Data was collected and broken in relation to age groups and different services required so that priorities could be targeted.

Will Blandamer reported on the work that was being carried out by the integrated neighbourhood teams to better understand their communities and to recognise vulnerabilities and bring together services. This gives staff across different teams and providers the opportunity to know each other, connect and work together. This is in the 'Let's Do It Strategy' across the five footprints. This work allows for shared understanding and capacities.

- Councillor Lewis referred to the strategy and asked that the support would be tailored for each individual as one size does not fit all. Councillor Lewis also expressed his worry that there seemed to be a reliance on anti-depressants and asked if enough preventative work was being undertaken.

Kez referred to the Strategy and the initial approach which focused on coping and thriving which would look at alternatives to clinical support. The strategy looks to identify the determinants of poor mental health and what solutions were needed such as lifestyle changes and wellbeing support without clinical intervention.

- Councillor Hayes asked about Police involvement in mental health incidents and asked if the training that the Police received was aligned with the work that the CCG and Council were doing.

Kez stated that there was the Bury Police Partnership Group that he attended along with other partners and Mental Health Leads. There were a lot of pressures

on Police Services as well as other services, but it was about working together in partnership. Work would continue to ensure that support was there.

Adrian explained that there were Section 136 suites which were located across the borough, and these could be used as required.

**It was agreed:**

1. That Kez be thanked for his presentation.
2. That all of the officers be thanked for their input.

**COUNCILLOR T HOLT**  
**Chair**

**(Note: The meeting started at 6.00 pm and ended at 8.00 pm)**