

**Minutes of: HEALTH SCRUTINY COMMITTEE**

**Date of Meeting:** 28 November 2024

**Present:** Councillor E FitzGerald (in the Chair)  
Councillors J Grimshaw, R Brown, M Walsh, C Boles,  
D Duncalfe, J Lancaster, N Frith, R Gold, M Rubinstein,  
U Farooq and A Arif

**Also in attendance:** Will Blandamer (Executive Director Health and Adult Care)  
David Lathan (Senior Programme Manager at NHS Bury),  
Matthew Logan (Strategic Lead for Integrated Commissioning)

**Public Attendance:** Sarah Jones

**Apologies for Absence:** Councillor L Ryder

---

**HSC.21 APOLOGIES FOR ABSENCE**

Apologies for absence are listed above.

**HSC.22 DECLARATIONS OF INTEREST**

There were no declarations of interest.

**HSC.23 MINUTES OF THE LAST MEETING**

The minutes of the meeting held on 18<sup>th</sup> September 2024 were agreed as an accurate record.

There were no matters arising.

**HSC.24 PUBLIC QUESTION TIME**

Sarah Jones asked Whether the cabinet member agree with me, that a defibrillator on Holcombe Hill is necessary due to the amount of residents and visitors who walk in this isolated area on a daily basis. And particularly since the death of a young man due to cardiac arrest which happened on 7th November 2024.

Councillor Tariq explained that this is a great question and point raised and will look to follow this up at looking at how electricity and permission can be granted to get this set up for the defibrillator.

**HSC.25 MEMBER QUESTION TIME**

There were no member questions.

**HSC.26 URGENT CARE AND WINTER PREPAREDNESS**

An update on Urgent Care and Winter Preparedness began with David Lathan, Senior Programme Manager at NHS Bury, presenting an update on current performance and winter planning activities. He provided an overview of how Bury is managing urgent care and preparing for the winter season.

David highlighted several key performance metrics. Bury's performance in October for the 4-hour target was 67.3%, which is below the national target of 76%. However, Bury is the second-best performing locality in Greater Manchester when compared to other sites with fully functioning A&E departments. In terms of A&E attendances, Bury is the fifth best in Greater Manchester, with 33.7 attendances per 1,000 patients. For non-elective admissions, Bury is also fifth in Greater Manchester, showing a downward trend. The efficiency of discharging patients has significantly improved, with a reduction in the number of patients classified as "days kept away from home" (DCAP), consistently below planned targets. The number of 12-hour waits in A&E has been reduced from 924 in April to 517 in September. Additionally, the decision to admit has improved from 197 in January to 28 in September.

David then outlined the winter planning activities. Bury has a winter plan and subgroup that has been meeting bi-weekly since August, involving all stakeholders, including the Hospice. The local operational planning and escalation levels (OPEL) system ensures that Bury has never reached the highest level of crisis (OPEL 4). Over 30 admission avoidance schemes have been refreshed and included in the plan. The NHS 111 Directory of Services has been updated for all services in Bury. Communication and training for core managers have been provided, and the local system meets twice a week, with plans to increase to daily meetings as winter approaches.

David mentioned ongoing and future initiatives, including significant investment in staffing at Fairfield and the reconfiguration of the A&E department. A new streaming tool is being implemented, and the Same Day Emergency Care (SDEC) service is increasing the number of patients treated and discharged on the same day. These efforts aim to improve the overall performance and efficiency of urgent care services.

Several questions and comments were raised during the meeting. A councillor acknowledged the improvements but emphasized the need for continued progress, especially in reducing 12-hour waits and improving discharge efficiency. Councillor Brown asked why people apply for jobs they do not want and how the Council deals with time-wasters and no-shows. David explained the centralized recruitment support to address this issue and improve efficiency. Another councillor inquired about the strategy for international recruitment, and David confirmed active pursuit of international recruitment and updated contract monitoring.

Councillor Lancaster asked about the start date and current status of Bury Flex. David explained that Bury Flex had been running for 18 months and highlighted its positive impact. Councillor Gold asked about the winter plan's key elements and any unmet goals. David highlighted staffing and reconfiguration as key elements and mentioned the need for investment in ambulance service pilots.

A councillor inquired about the involvement of Age Concern and advice for residents during winter. David confirmed ongoing support from Age Concern and plans to provide advice to residents. Another councillor asked about the impact of gritting on reducing falls and A&E admissions. David acknowledged the issue and agreed to discuss proactive steps with colleagues.

Acknowledgments were made of the progress made and the need for continued efforts to improve urgent care and winter preparedness. The committee expressed appreciation for the detailed report and the tangible positive outcomes achieved.

**It Was Agreed:**

- The Report and Presentation be noted

## **HSC.27 ADULT SOCIAL CARE PROVIDER WORKFORCE SUPPORT**

Matthew Logan, the Strategic Lead for Integrated Commissioning, presented an overview of the support for the adult social care provider workforce. He expressed gratitude for the opportunity to share the progress made with partners and hoped to deliver a positive update.

Matthew highlighted the structure of the adult social care provider market in Bury, noting that there are 93 commissioned providers, with two-thirds being small or medium-sized local organizations. These providers employ 4,600 people in Bury, including 2,500 in care homes. He emphasized the importance of having a robust and vibrant care market to meet the growing demands of the sector, especially with the projected increase in the elderly population.

The government funding received was aimed at market sustainability and improvement activities. To determine the best use of these funds, the Council committed to co-designing the Adult Social Care Workforce Support Programme with providers. The programme focused on three main priorities: attraction, process improvement, and retention.

Attraction involved strategies to bring more people into the sector, including capital support for recruitment. Process improvement aimed to enhance recruitment processes, making them more efficient and effective. Retention focused on creating clear career pathways to keep experienced staff within the sector.

The Workforce Support Programme comprised three main components. The first was the centralized recruitment function, which allowed providers to share their open care roles. A team was responsible for advertising, screening, and developing candidate lists, thus relieving registered managers from the burden of handling numerous applications.

The second component was the Care Development Programme, which involved collaboration with Bury College and health and social care education departments. This programme aimed to streamline the transition of students into social care providers, offering them work experience and training resources. A leadership development programme for registered managers was also developed to support succession planning.

The third component was Bury Flex, a shared workforce initiative designed to reduce reliance on agency staff. Bury Flex provided ready-to-work care and support workers to fulfil urgent demands. Unlike traditional agencies, there was no cost to providers for accessing these staff members.

Matthew shared the positive impact of these initiatives, noting an increase of 400 staff in adult social care in Bury, a decrease in the vacancy rate from 12.9% to 8.5%, and a reduction in the leaver rate from 44% to 27.1%. The use of agency staff had also decreased, and the quality of care had improved, with a higher percentage of good and outstanding care ratings.

Looking ahead, Matthew discussed plans to expand Bury Flex across Greater Manchester and establish a framework for student work experience. The goal was to develop an independent provider workforce strategy for Bury, fostering a culture of collaboration with providers.

A councillor congratulated Matthew for his leadership and the significant improvements achieved. They emphasized the importance of the relationship between the Council and providers and the progress made in workforce stability.

Councillor Brown expressed appreciation for the report and noted the impressive improvement in how Bury has coped with workforce challenges. He asked why people apply for jobs they do not want and how the Council deals with time-wasters and no-shows.

Matthew acknowledged the issue and explained that the centralized recruitment support was commissioned to address it. He noted that improving the efficiency of recruitment processes was crucial and that the Council was working with partners to ensure applications were from genuinely interested candidates.

A councillor inquired whether the strategy included international recruitment, noting its potential positive impact. Matthew confirmed that international recruitment was being actively pursued by several providers. He mentioned that the Council had updated its contract monitoring to ensure compliance with licensing requirements and was working with providers to make the process sustainable.

Councillor Lancaster asked about the start date of Bury Flex and its current status. Matthew explained that Bury Flex had been running for 18 months and had gained traction over time. He highlighted the positive impact it had on filling vacancies and reducing reliance on agency staff.

Acknowledgments of Matthew's leadership and the significant improvements achieved. The committee expressed their appreciation for the report and the positive outcomes from the work done.

**It Was Agreed:**

- The Report and Presentation be noted

**HSC.28 OTHER EXTERNAL BODIES STANDING ITEM**

Councillor Fitzgerald gave an overview of the Other External Bodies standing items. It was detailed emphasizing that the work being scrutinized was not their own but rather the work of others. They highlighted the increased activity and the establishment of various bodies over the past two years, contrasting it with the previous situation where there was minimal activity between scrutiny committee meetings.

There was a focus on the sustainability plan and mentioned attending a meeting about the evolution of combined authorities across the country. The Greater Manchester Combined Authority (GMCA) Health Scrutiny meeting on October 15th covered topics such as dealing with the deficit and the growth in demand due to poor population health. An update from Health Innovation Manchester was also provided.

It was noted that every locality must submit its own plan by December, and the committee decided to scrutinize Bury's localities plan in January. This plan would include contributions from hospital trusts and address issues related to various illnesses and conditions.

It was also mentioned the importance of service reconfiguration in achieving sustainability and highlighted the role of Health Innovation Manchester in initiatives like virtual wards and the use of data for better healthcare outcomes.

Councillor Fitzgerald informed the committee she attended a Joint Health Reviews Group meeting for the Northern Care Alliance, where issues such as virtual wards and the demand for services were discussed. The group also raised concerns about the lack of prevention and its impact on increasing demand. It was suggested that this issue should be further explored in future meetings.

Another group, the Test and Finish Group on gender-based violence, was mentioned. This group, which emerged from the combined authority's overview and scrutiny, focuses on women's health and crime. The presenter noted the importance of addressing safety in travel as part of this group's work.

It was informed attended a national Combined Authority chairs meeting, which discussed the scrutiny protocol for combined authorities, holding mayors accountable, and the English devolution. The meeting emphasized the need for proper scrutiny at the combined authority level and the challenges of achieving political balance in these groups.

The update concluded by highlighting the importance of understanding national changes and their potential impact on local scrutiny processes. It was stressed the need for the committee to stay informed and involved in these developments.

Councillor Gold raised a point about the use of acronyms in reports, suggesting that the first instance of an acronym should be accompanied by its full form. The presenter agreed to work towards this.

Another member emphasized the importance of aligning Bury's submission to the GMCA sustainability plan with the locality plan for health and care transformation. They highlighted the ongoing efforts to improve population health, reduce unnecessary hospital admissions, and enhance the quality of care.

There was also a discussion on the role of Healthwatch in providing feedback and ensuring quality in health and care services. It was acknowledged the valuable contributions of Healthwatch and the importance of continued collaboration.

It was Agreed:

- The update be noted

## **HSC.29 URGENT BUSINESS**

There was no urgent business

**COUNCILLOR E FITZGERALD**  
**Chair**

**(Note: The meeting started at 7.00 pm and ended at 8.50 pm)**