Chair's Report on External Bodies

Since the last Health Scrutiny Meeting, I have attended 3 other committees as part of my role and have continued to attend the GMCA Task and Finish Scrutiny Group on Gender Based Violence.

1. NCA Joint Health Scrutiny (informal) – 19th December

This meeting was held in place of the formal committee following the decision by Salford to leave the committee leaving only Bury, Oldham and Rochdale involved. Cllr Gold also attended.

The committee agreed we would continue to meet and go back to Salford to say they would be welcome to rejoin.

The next meeting is 27th February and Democratic Services will confirm if we need to have a motion at Council to manage the constitutional change of removing Salford from the committee or if this can just be noted.

2. Health & Wellbeing Board (H&W Board)- 16th January

As this is a Council Board, I wouldn't usually provide an update following the meeting. However, at the last meeting we discussed the scope of the work for 2025 and I raised the issue of Housing and in particular the quality and stability of homes (and the large Private Rental Sector in Bury) as a determinant of Health.

We discussed whether there was the evidence that poor quality housing leads to poor health outcomes and whether we have a gap in Bury by not looking at the Private Rental Sector (including HMOs) and its impact on our residents' health.

I note I am the Deputy Member for Housing so would have to step down from the Chair if this was discussed but would members of committee want a report on this topic or a as part of a wider report on Housing's impact on Health?

3. GMCAHealth Scrutiny – 21st January

The agenda for the committee is here: (Public Pack)Agenda Document for Greater Manchester Joint Health Scrutiny Committee, 21/01/2025 10:00

The main topics for discussion were updates on the Ongoing Service Reconfiguration and Workforce.

a. Service Reconfigurations:

- i. The Diabetes Engagement has started <u>Project: Diabetes Education | Greater</u> <u>Manchester Integrated Care Partnership</u>.
- ii. There is a 'Fit for the Future' consultation on 29th January about Health Inequalities – link <u>https://www.tickettailor.com/events/nhsgm1/1507462</u>
- iii. There was an update about the review of 'Procedures of limited clinical value'. Following the decision to pause the planned suspension of a number of procedures with limited clinical value, without ICP approval on a case-by-case basis, we were told that these will now be monitored and audited, and all of the associated Commissioning Statements will be reviewed (this is the document stating when the procedure should be done). An engagement exercise will start in Feb 25, and interim report will come back to committee in June. Towards the end of the summer we would be expecting to see the start of any engagement with residents about specific procedures. The procedures included are shown from page 46-59 in the document.

- iv. The committee also noted that it was good to see that the engagement was in places like supermarkets and shopping centres as the procedures are wide ranging.
- b. Workforce
 - i. Committee had an update on the governance of workforce management operationally and strategically. This work is 3 months into a new plan following a review by the Good Governance Institute.
 - ii. We heard that for the first 6 months of the year, agency costs (1.9% of wages versus 3.2% target) and turnover (10.6% versus 10.9% target) were on track but that sickness absence was higher than targeted (5.9% versus a 5.1% target).
 - iii. Committee also heard about the risks around:
 - 1. Increased Employer's NI contributions for those in the Hospice, Primary Care, Social Care and VCSE Sectors
 - 2. The cost of the Real Living Wage
 - 3. How to ensure equality is still a priority with the level of recovery work.
 - 4. The reduction in the take up of bank shifts due to a reduction in bank rates for nurses
 - 5. That the workforce efficiency programme won't achieve its target because of a lack of capacity within organisations engaged in the programme.
 - 6. Reduced transparency of decision making because of the challenges of engaging with all the improvement programmes.
 - iv. Committee noted that the results of the NHS survey will be available soon but noted that this does not cover all health workers, i.e. Social Care.

4. Gender Based Violence Task and Finish Group – focus on travel and transport.

We are in the discovery phase so there is no update unless any questions or comments from the committee.