

Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 28 January 2026

Present: Councillor E FitzGerald (in the Chair)
Councillors S Haroon, C Boles, L Ryder, M Rubinstein,
L McBriar, D Duncalfe and K Simpson

Also in attendance: Councillor J Grimshaw, Councillor K Hussain, Councillor
J Lancaster, Councillor G Marsden and Councillor C Birchmore

Will Blandamer, Jon Hobday, Jeanette Richards, Wendy Young,
Dr Cathy Fines, David Latham, Sandy Bering, Christina Mlrray,
Trudy Delves, Joanne Burns, Violet Eadington

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

Apologies for Absence: Councillor N Frith, Councillor I Rizvi, Councillor R Brown,
Councillor A Arif, Councillor D Berry and Councillor
U Farooq

HSC.97 APOLOGIES FOR ABSENCE

Apologies for absence are listed above.

HSC.98 DECLARATIONS OF INTEREST

There were no declarations of interest.

HSC.99 MINUTES OF THE LAST MEETING

The minutes of the meeting held on 27 November 2025 were agreed as an accurate record.

Matters arising: The Chair advised members that the Supplementary Planning Document for the Local Plan has been approved at Cabinet. Members had agreed to support this at the previous meeting.

HSC.100 PUBLIC QUESTION TIME

Member of the public, Kiran Hampson asked 'Can the Council explain why Bury does not currently provide access to a dedicated dietitian service for neurodevelopmental children, despite the well-evidenced links between autism, ADHD, restrictive eating, issues and nutritional deficiency, and given that Bury Paediatrics do not provide qualified dieticians in this expertise area, What support are families currently expected to rely on, how does this provision compare with neighbouring authorities, and what concrete steps are being taken to commission or provide an appropriate service, including timescales'

Will Blandamer, Executive Director (Health and Adult Care) advised that it wouldn't be for the council to provide the service and that it would be for NHS GM to provide. At this moment in time, we are not aware that we provide a dedicated service with that cohort however we will take it away and review and return in due course.

Sandy Bering, GM Strategic Lead Clinical Commissioner – Mental Health & Disabilities advised that across the country it is not mandated as a special service. There is an eating disorder service that has been rolled out. Manchester and Trafford did pilot one of the early services and this is something that we want to expand, although details haven't been agreed yet.

Member of the public Keira Delaney asked 'Can the Committee explain what formal mechanisms are now in place to ensure that information from neurodiversity assessments is shared appropriately between services, so that children and families experience a single, coordinated system rather than multiple disconnected ones? In practice, many families are still required to repeatedly share the same complex and sometimes traumatic histories with different professionals because services do not effectively communicate with each other. This leads to delay, distress and inconsistent support. What measurable actions, with clear timescales, are being taken to improve cross service communication, reduce duplication for families, and ensure that assessment outcomes in health lead to timely, joined up planning in education and social care?'

Will Blandamer, Executive Director (Health and Adult Care) advised that we are keen that there should be a multi agency approach. More details will be covered on this topic when the committee receive the report on neuro-diversity pathways.

Jeanette Richards, Executive Director Children and Young People advised that work is ongoing across the children's department to put families first including multi agency family help and family help teams out in localities. There is also work ongoing to scale up the family hub offer which will bring together experts in one place.

HSC.101 MEMBER QUESTION TIME

Councillor Birchmore asked 'Please can you provide an update on the CAMHS waiting list for children and young people and explain what is being done to reduce the current wait times?'

Will Blandamer, Executive Director (Health and Adult Care) advised that core CAMHS waiting times in Bury compare comparatively favorably across Greater Manchester with an anticipated waiting time of around 10 weeks. CAMHS colleagues continue to try and improve their management of the service to secure further improvement, and as a whole system we are working hard to support children and young people with their mental health and wellbeing and this reduce the need for CAMHS intervention through initiatives like my happy mind and also the mental health teams in schools. Our position in Bury was supported by NHS GM investing over £1m in the service a couple of years ago which closed a 16-18 year historic gap in provision.

However our waiting times for CAMHS in relation to autism and ADHD assessment are unacceptably long – nearly 2 years for both pathways. The steps being taken to address this are contained in the item on the agenda relating to Neuro diversity pathways and I am sure officers will be happy to provide further detail following presentation of this item.

HSC.102 NEURO-DIVERSITY PATHWAYS

Will Blandamer, Executive Director (Health and Adult Care) introduced the report and advised that we are making good progress in some areas and benchmark relatively well against GM.

However there are some challenges around waiting times for ADHD and autism which is an issue nationally. The waiting times are not acceptable and work is taking place locally and nationally to address this.

A standardised process has been designed to assess the needs of children and young people referred for suspected ADHD and Autism, through a multi-agency approach. This has been approved through NHS GM governance.

In Bury, we are working to establish neuro-diversity hubs an looking at system navigation and support regardless of the need for mental health diagnosis. The hubs will support with relatively early stages of intervention

The Council understands this is a challenging time for parents and NHS GM have coproduced a really good pack of info for parents and carers which was circulated to member.

The team are really keen to listen and engage with children, families and young people as we develop over time. Valuable feedback has already been received from parent care board and Bury Together

Bury Healthwatch are developing Bury Youth Watch with the SEND agenda and looking at neuro-diversity pathways/hubs as a focal point.

Sandy Bering advised that we now have a better understanding of issues and many people have some characteristics. It's important now that we have a mechanism to identify who has most severe needs and ensure they don't get lost in the system. All individuals are entitled to help irrespective of diagnostic assessment

Councillor Rubenstein asked a question around autism presenting differently in women and young girls compared to boys and whether there is a danger of people who may be diagnosed but don't want help.

Sandy Bering confirmed that lots of research has been done on boys. Triage can do face to face and check what requirements are required and we need to ensure individuals have the right support in place at the right time.

Councillor Lancaster queried what the changes to the autism and ADHD process would look like for those already on the waiting list and how we will make sure they are not pushed back further

Sandy Bering confirmed that we need to ensure people are treated fairly. A large sum of money has been identified to support trusts to review their waiting lists to ensure they remain up to date. This could take up to 18 months to complete.

Sandy Bering confirmed that all trusts had been written to asking for them to provide the details of their waiting lists which will then help to create the timeline for moving forwards.

Councillor Lancaster queried autism and ADHD being classed as a disability and where this sits with protected characteristics?

Sandy Bering confirmed that it is illegal to use diagnosis as a way to restrict access and that additional support and adjustments can be put in place

Joane Burns, Union representative for schools queried what happens to those completing the paperwork today/tomorrow? She went on to explain that it feels like sometimes we are not in this together and there is no clear distinction around who will be referrer? She also highlighted that she can't see how we can put more work into schools, there are already concerns around referrals going missing

Will Blandamer responded saying that we all know that the system is broken and we are working to attempt to improve it but it requires a whole partnership endeavour.

Violet advised that on the BeeHeard Group in Manchester which is a youth voice focus group that work on mental health there mental health passport being developed. She also queried how we will manage the risk of worsening symptoms, for example, checking those who were doing ok yesterday but today might be on the brink of being lost?

Chris advised that we can't change things immediately. This is about designing how we improve things and communication is important. Around the query of how do we monitor people; they should be contacted regularly, ensure they have a plan in place and know that the door is never closed and that they can return.

Joanne Burns queried whether the paperwork was going to be streamlined for parents and whether it could be in dual language. She also highlighted that we can only advocate for people if we know there has been a problem/breakdown

Councillor Fitzgerald stated it would be helpful to understand what the communications would be and how people can get involved to make recommendations?

Will Blandamer advised that there are lots of ways to engage with people and that all providers have been challenged to strengthen and improve their engagement and connection with parents.

Councillor Smith stated that we need coproduction and partnership which is being worked on.

Jeanette Richards, Executive Director Children and Young People advised that it is difficult to progress change when practically all aspects of the system are broken. The team have met with the Department for Education to discuss reforms and the need to pivot the system to deliver for schools and children

Councillor Smith highlighted that this is about how we wrap services around family and children as early as possible and it is important that we get it right

Councillor Fitzgerald stated that everyone knows the system is broken and everyone wants to improve it. Reflecting on the timeframe, it has taken 2 years to get to this point and we need to ensure that people understand where we are and where we're going

Will Blandamer thanked all members for discussion and confirmed would return to provide:

- Confirmation on and clarification of how we are engaging and listening across the partnership
- Update that describes detail of how it will look
 - Triage process
 - Maturity of community offer
 - Routes of referral

HSC.103 MATERNITY SERVICES UPDATE

Councillor Fitzgerald reminded members this report was being discussed following a request by members.

Dr Cathy Fines introduced the report and reminded members that Bury don't commission maternity services but we want to make sure the experience for Bury ladies is as good as possible.

Jon Hobday, Director of Public Health advised members that there is a pretty steady birth rate and highlighted ambitious targets to reduce smoking during pregnancy, although Bury's figures are at an all time low as well as being in front of GM and lower than national average. Jon also highlighted low birth weight and that this broadly aligns with areas of deprivation

David Latham highlighted the national and GM priorities as well as the GM system performance measures.

Trudie advised members on the infrastructure that Bolton provide for Bury ladies including community midwives who provide support. Midwives have recently attended training on pregnancy circles which is a different way of providing antenatal care. Ladies see midwives in a group and through this method have more hours of midwives time and develop relationships/peer support groups. There have been IT issues which the teams have been working on resolving.

Councillor Rubenstein queried what we could draw from the performance information?

David Latham advised that colleagues do quality and performance management of the trust and Manchester and Bolton are on track to score 10 out of 10 full compliance.

Dr Cathy Fines advised that the Maternity voices partnership is national way we review journey across GM partnership and providers

Councillor McBriar queried how we could reduce smoking in pregnancy to zero?

Jon Hobday confirmed it was a challenge. More funding has been received to do more innovative work including earlier education with the younger generation

Councillor Boles queried how can we be assured that those voices of BAME women who are 3 times more likely to die in childbirth, and Asian women who are twice as likely to die in childbirth, are included in service redesign?

Dr Cathy Fines confirmed that Healthwatch did some work a couple of years ago and found there were pockets of ladies who weren't booking early. Some of this was due to culture and work has been done to improve outreach and education.

Councillor Boles also queried the responsibility of hospitals as well?

Trudie confirmed this was very much high up on agenda including annual cultural training, providing dual languages and encouraging ladies to speak in their preferred language.

Councillor Ryder expressed concern at some of the statistics, which underlines the importance of getting Family hubs in place to provide support. She also queried when we will start to see more refreshed data to reflect family hubs having improving impact?

Jon Hobday advised it depends on the individual data sets using but confirmed we are using the most up to date data available to us.

Councillor Fitzgerald queried the adverse relationship between children underweight and overweight when they finish KS2 and how do we see what we are doing is having impact?

Jeanette Richards confirmed that we are taking opportunity to bring partners together. Focus is from point of conception and bringing support services together but optimistic that we will see some impact.

Councillor Simpson queried whether data on vaping was included?

Jon Hobday confirmed that this data is specifically related to smoking. Work is being done to encourage young people to stay away from vaping; this is a public health issue that we need to do more work on.

Councillor Simpson also queried whether we take similar action on vape shops as we have with fast food?

Councillor Fitzgerald confirmed this was something we could take away and reminded members that young people did a motion on disposable vapes.

Councillor Smith advised that nationally there is a move to licensing vape shops, and when it comes through will be able to monitor shops more effectively.

Councillor Fitzgerald thanked everyone for attending and the presentation.

HSC.104 BURY ADULTS SAFEGUARDING ANNUAL REPORT

Adrian Crook, Director of Community Commissioning introduced the report and reminded members that the Care Act 2014 was the first act that made safeguarding statutory. The report contains an overview of performance of team in Bury and contains learning from 3 Safeguarding Adults Reviews and Operation Vardar.

Councillor Boles queried assurance for young people transitioning to adult services.

Adrian Crook, Director of Community Commissioning advised that the report is about safeguarding and not all adults need to be transitioned. Adults definition of safeguarding is at risk or has experience of abuse or neglect. Need to look at how we make sure we don't lose them. There are different approaches between children's and adults

Jeanette Richards, Executive Director Children and Young People confirmed that at Children and Young People scrutiny, they look at complex safeguarding. There is some joint work on transitional safeguarding as there are some individuals who are over 18 who we still have responsibility for

HSC.105 URGENT BUSINESS

There was no urgent business.

COUNCILLOR E FITZGERALD
Chair

(Note: The meeting started at Time Not Specified and ended at Time Not Specified)

