

Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 22 September 2015

Present: Councillor S Kerrison (in the Chair)
Councillors P Adams, E FitzGerald, L Fitzwalter, J Grimshaw, S Haroon, K Hussain, J Mallon, R Skillen and R Walker

Also in attendance: Councillor Andrea Simpson, Cabinet Member Health and Wellbeing
Lesley Jones, Director of Public Health
Linda Jackson, Assistant Director, Communities and Wellbeing
Julie Gonda, Assistant Director, Strategy, Procurement and Finance
Heather Crozier, Social Development Manager
Chloe McCann, Assistant Improvement Advisor
Julie Gallagher, Democratic Services Officer

Public Attendance: 3 members of the public were present at the meeting.

Apologies for Absence: Councillor S Smith and T Pickstone

HSC.337 DECLARATIONS OF INTEREST

There were no declarations of interest.

HSC.338 PUBLIC QUESTION TIME

Councillor Rishi Shori, Deputy Leader attended the meeting to raise concerns highlighted to him on behalf of his constituents in relation to the withdrawal of Physiotherapy services from Radcliffe Primary Care Centre.

A motion was forwarded for consideration from the Radcliffe Township raising concerns about the proposal. Councillor Rishi Shori addressed the meeting highlighting concerns on behalf of local residents.

Members of the Committee discussed the proposed changes and considered a letter received from Mr. Grayson, a patient; a briefing note prepared by the Clinical Commissioning Group; as well as concerns raised by the Healthwatch Chair, Barbara Barlow.

Members of the Committee expressed concerns with regards to the following:

- Lack of consultation with Patients/Patient Cabinet and the Local Authority
- A lack of information in respect of arrangements during the interim period
- Longer waiting times at Fairfield
- Difficulty in accessing Fairfield/costs incurred
- Demographic factors mean that the need for quick and easy access to physiotherapy (as is currently provided) is greater in Radcliffe
- Increased costs

Members of the Committee expressed concerns that in light of the Devolution Manchester proposals and proposed cuts in health service budgets, that this proposed change was highlighted to Elected representatives via local constituents and not raised directly with them by the CCG. Members would want to ensure that there is an open and continuous dialogue between the CCG/healthcare commissioners/providers and the scrutiny committee in respect of any proposed changes in the way services are delivered.

It was agreed:

1. Details of the concerns expressed by Members of the Health Scrutiny above, would be forwarded to the Chair of the Health and Wellbeing Board for consideration at the Board meeting due to be held on the 24th September, where this item is due to be discussed.
2. Members concerns will be highlighted to the Chief Operating Officer of the Clinical Commissioning Group, Stuart North as well as to the Chair of the Clinical Commissioning Group Dr. Patel.
3. The Health Overview and Scrutiny Committee will establish an Overview Project Group to consider Physiotherapy provision across the Borough, the terms of reference of which will be determined at the first meeting.

HSC.339 HEALTH AND WELLBEING BOARD REFRESHED HEALTH AND WELLBEING STRATEGY AND ANNUAL REPORT

The Chair of the Health & Wellbeing Board, Councillor Andrea Simpson, was in attendance to present the Health & Wellbeing Board Annual Report and the Refreshed Health & Well Being Strategy.

The Social Development Manager reported it is best practice for all Health & Wellbeing Boards to produce an annual report; the report for 2014/15 covers the Health & Wellbeing Boards first full year of operation.

All Health & Wellbeing Boards have a statutory duty to produce a Joint Health & Wellbeing Strategy. The refreshed strategy has five overarching priorities and is now a condensed version of the original strategy and is presented as a 'Plan on a page' with Team Bury branding. Bury are the first across Greater Manchester to refresh their strategy and finalise a governance structure to oversee the successful delivery of the strategy.

The Five priorities are:

- Priority 1- Starting Well
Lead- Mark Carriline (Executive Director, Department for Children, Young People and Culture)
- Priority 2- Living Well
Lead- Lesley Jones (Director of Public Health)
- Priority 3- Living Well with a Long Term Condition or as a Carer
Lead- Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing)
- Priority 4- Ageing Well

Lead- Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing)

- Priority 5- Healthy Places

Lead- Pat Jones-Greenhalgh (Executive Director, Department for Communities & Wellbeing).

The Social Development Manager reported that the Board has developed a robust governance structure to underpin the Strategy. Going forward, the Board will further develop a reporting framework to monitor the Health & Wellbeing Strategy, rationalise groups involved in the delivery of the Health & Wellbeing Strategy. As well as refreshing the Joint Strategic Needs Assessment and the Board will oversee delivery of the health & wellbeing agenda under Devolution Greater Manchester.

In response to a Member's question, the Social Development Manager reported that the aim of the Strategy is to present a holistic approach to health and wellbeing by including within the Strategy measures of success in relation to environmental and housing issues.

The Chair of the Health and Wellbeing Board reported that there is no additional money to fund the actions and measures of success contained within the Strategy however the themes identified align with Council and Public Health priority areas.

In response to concerns raised in relation to Public Health Monies, the Director of Public Health reported that as part of the Devolution Manchester proposals a memorandum of understanding has been signed by all the Directors of Public Health within Greater Manchester. The memorandum agrees to establish a single public health system across the region, utilising existing resources. The Department of Health is in the process of consulting in respect of an in-year cut to the Local Authority's Public Health budget; this could equate to £600,000. Discussions are ongoing across Greater Manchester with regards to any potential cuts being re-distributed across the conurbation.

With regards to a Member's question in relation to consultation, the HWB Chair reported that the refreshed H&WB Strategy has undergone significant consultation with members of the H&WB Board (Police, Community & Voluntary Sector, CCG, Healthwatch, NHS England, Cabinet Members, Executive Director for the Department for Communities & Wellbeing, Executive Director for the Department for Children, Young People and Culture and the Director of Public Health). A series of workshops focussing on each priority took place with key internal and partner stakeholders, theme leads and performance officers. The findings from these workshops were then presented at the Health & Wellbeing Board. A Member Development Session and then subsequent Board meeting was set aside to refresh each priority, one per meeting.

In response to a Member's question in relation to social isolation, Councillor Simpson reported that the Council is involved in a pilot scheme to tackle social isolation, if successful this will be rolled out to other areas. The Social Development Manager reported that the Bury Directory also provides a list of community assets and tools to support members of the public with social isolation.

It was agreed:

That the report be noted.

HSC.340 ADULT SAFEGUARDING ANNUAL REPORT

Julie Gonda, Assistant Director, Strategy, Procurement and Finance, Bury MBC attended the meeting to provide Members of the Committee with a update in respect of the Adult Safeguarding Annual Report. The report contained the following information:

Bury Council has responsibility for collecting information about adult abuse within Bury.

Reports of abuse are split into 2 categories:

- 1) an "alert" which is an initial report of abuse and
- 2) a "referral" where the case goes on to be investigated under safeguarding procedures.

Out of the 312 alerts received 126 cases were taken through to investigation (i.e. classed as a referral), 129 referrals were concluded in 2014-2015.

The majority of referrals (71%) involved people over the age of 65. The most prevalent form of abuse this year was "neglect & acts of omission" at 24% - an 11% rise from 2013-2014. This was followed by Physical abuse at 27% which has dropped slightly from 32% the previous year.

One of the core functions of Bury Adult Safeguarding Board is to ensure that vulnerable adults are supported should they ever suffer abuse. The Board has established three key work areas. It is these work areas that the Board will progress over the next year, they are:

- 1) Tackling Loneliness
- 2) Supporting Carers
- 3) Customer and patient led assessment of quality of care

The Assistant Director, Strategy, Procurement and Finance reported that following a recent Supreme Court judgment there has been a 600% increase in the number deprivation of liberty applications. The 2014 judgement stipulated that that a person is deprived of their liberty if they are:

- 1) Under continuous supervision and control and are;
- 2) Not free to leave.

A person can be deprived of their liberty even if the restrictions are in their best interests - even when they or their families are not objecting. A Care/Nursing homes and hospitals must apply to their local authority for authorisation to deprive a person of their liberty.

The Assistant Director, Strategy, Procurement and Finance reported that the Council's main focus is prevention. The Council can and has suspended care providers as a result of safeguarding concerns.

In response to a Member's question, the Assistant Director, Strategy, Procurement and Finance reported that Bury Council do commission 15 minute social care visits, these visits are usually part of a care package and not used to provide personal care.

Members of the Committee expressed concerns in relation to the rise in the number of deprivation of liberty orders and the financial impact this is having on

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the Council. The Assistant Director, Strategy, Procurement and Finance reported that the Law Commission is reviewing the impact of the judgement and the Council has submitted comments as part of that process.

The Assistant Director, Communities and Wellbeing reported that there is a great deal of uncertainty surrounding deprivation of liberty orders and the Council has not received any additional resources from central government to support this large increase.

It was agreed:

The report be noted.

HSC.341 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

The Director of Public Health shared with members of the Board the Public Health Annual Report 2013.14. The report is based around the nine key areas identified in 'Improving the public's health: A resource for local authorities' published by The King's Fund in 2013, together with a tenth looking at 'Health and Social Care'.

Local Authorities are now at the heart of the drive to improve and protect the public's health and reduce health inequalities following the Government's 2012 health and social care reforms.

The Report provides an overview of Bury Council's contribution to public health and includes information and performance in the following areas:

- The best start in life
- Healthy schools and pupils
- Helping people find good jobs and stay in work
- Active and safe travel
- Warmer and safer homes
- Access to green and open spaces and the role of leisure services
- Strong communities, wellbeing and resilience
- Public protection and regulatory services
- Health and spatial planning
- Health and social care

The Director of Public Health Reported that there has been a significant contribution to improving health and reducing inequalities already however challenges remain.

In response to a Member's question, the Director of Public Health reported that a great deal of public health work is being undertaken in respect of alcohol; this includes continued lobbying for a minimum unit price, working with school, and work with devolution Manchester in respect of Licensing issues.

In response to a Member's question, the Director of Public Health reported that the annual report will concentrate on a different theme each year and will be consistent with the Health and Wellbeing Strategy. The Focus next year will be health inequalities.

In response to a Member's question in respect of sexual health, the Director of Public Health reported that there is a great deal of work underway in this area. Teenage conception rates across the Borough have reduced. One in four young expectant mothers is supported by the family nurse partnership, a group that is

currently be reviewed in respect of expanding the scope of the partnership. There is a sexual promotion programme for Adults as well as a newly established healthy schools programme. The Director of Public Health reported that the Borough does have a high rate of late HIV diagnosis and a programme is being developed to review this.

The Director of Public Health reported that the Starting Well Partnership Board has been established with a range of stakeholders to review provision, an action plan has been developed which includes a range of outcomes.

It was agreed:

The report be noted.

HSC.342 URGENT BUSINESS

There was no urgent business reported.

COUNCILLOR SARAH KERRISON
Chair

(Note: The meeting started at 7pm and ended at 9.10pm)