

HEALTH SCRUTINY
19/02/2019 at 6.00 pm



Present: Councillor McLaren (Chair)
Councillors Ball (Vice-Chair), Taylor, Toor and Williamson

Also in Attendance:

Karen Maneely Associate Director Mental Health & Specialist Services –
Oldham Borough

Barry Williams External Partnerships Manager (Strategy & Planning),
Northern Care Alliance

Andrea Entwistle Principal Policy Officer Health and Wellbeing

Sian Walter-Browne Constitutional Services

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Leach.

2 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

3 **URGENT BUSINESS**

There were no items of urgent business received.

4 **PUBLIC QUESTION TIME**

There were no public questions received.

5 **MINUTES OF PREVIOUS MEETING**

RESOLVED that the minutes of the Health Scrutiny Sub-Committee meeting held on 18th December 2018 be approved as a correct record.

6 **MINUTES OF THE HEALTH AND WELLBEING BOARD**

RESOLVED that the minutes of the Health and Wellbeing Board meeting held on 13th November 2018 be noted.

7 **MINUTES OF THE GREATER MANCHESTER JOINT HEALTH SCRUTINY COMMITTEE**

RESOLVED that the minutes of the Greater Manchester Joint Health Scrutiny Committee meeting held on 14th November 2018 be noted.

8 **MINUTES OF THE JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE FOR PENNINE ACUTE HOSPITALS NHS TRUST**

RESOLVED that the minutes of the Joint Health Overview and Scrutiny Committee for Pennine Acute Hospitals NHS Trust meeting held on 15th October 2018 be noted.

9 **MINUTES OF THE JOINT SCRUTINY PANEL FOR PENNINE CARE (MENTAL HEALTH) TRUST 4 OCTOBER 2018**

RESOLVED that the minutes of the Joint Scrutiny Panel for Pennine Care (Mental Health) Trust meeting held on 4th October 2018 be noted.

10 **RESOLUTION AND ACTION LOG**

RESOLVED that the Resolution and Action Log for the meeting held on 18th December 2018 be noted.

11 **MEETING OVERVIEW**

RESOLVED that the today's Meeting Overview be noted.

12 **PENNINE CARE FOUNDATION TRUST – CQC INSPECTION**

The Sub-Committee gave consideration to a report and supplementary update of the Associate Director Mental Health and Specialist Services – Oldham Borough, which informed them of the progress made by Pennine Care Foundation Trust (PCFT) against their CQC improvement action plan.

Karen Maneely, Associate Director Mental Health & Specialist Services – Oldham Borough, attended the meeting and highlighted the following from the latest inspection report:

- CQC inspected PCFT across all 5 of the domains
- Still overall: Requires Improvement
- Good progress made since 2016 report by the time they were re-inspected in August 2018
- Some challenges re care of male patients – have now re-opened refurbished male ward (Oak Ward)
- Single gender wards now – Aspen (female) and Oak (Male)
- Significant challenges previously re funding for staffing – Commissioners have now invested across Oldham adult and older adult inpatient wards. Multi-disciplinary standards have improved in all wards.
- Therapy hub is now an outstanding facility
- Staff also have a range of physical skills as well as mental health skills base
- Now have a female lounge on Cedars Ward
- Therapeutic offer on ward massively improved
- Workforce development and recruitment/engagement at a GM and local level – making PCFT the best place where people would want to work.

Members asked for and received clarification of the following:

- Support for potential staff who want to come back to work/have families/caring needs - It was explained that the Trust offered options lot to encourage people to work for them including flexible working that was open and accessible for all staff. There was a need to ensure the wards were covered as necessary and the Trust tried to accommodate flexible working requests where possible. Newly qualified health professionals were supported in their development.
- Concerns about staffing shortages in light of current national picture – It was explained that, as well as improving recruitment, the Trust had a good record of staff retention and had looked to make the Trust a good place to work and remain, including offering rotation

patterns for staff development. A new Executive Director of HR and Workforce had been recruited and it was accepted staffing would be a challenge in the future.

- Areas for improvement – It was acknowledged there were still issues around data as some areas were still using paper records. The PCFT was moving towards all-electronic records and three more areas in Oldham had gone live this week. In relation to Mental Health, progress was being made and there were two practitioners to support and teach people at a local level re mental health law and legislation. This was a standard agenda item at the forum meetings so progress could be tracked.
- Were electronic records going to be accessible to all staff – The Trust had moved to mobile working where each practitioner had a personal tablet they could use to access the system remotely.
- Progress made as part of the transitional change – It was explained that Community Services were the subject of formal consultation with the proposal that they move to a new provider. The Trust was working hard from HR/Finance perspective to confirm what would stay or move. It was clarified that a Trust-wide action plan would be available from 1 April 2019 which would set out the action plan.
- Budget management – It was recognised that the Trust had fewer resources than other organisations and the Board were working to improve their bids for funding to ensure parity. The Board were focusing on gaining extra investment.
- Action Plan – Confirmation would be sought that the action plan due on 1st April could be shared. Action: Action Plan to be brought back in June 2019 (pending agreement by PCFT)

Members agreed they would to take up the offer of a visit to the improved facilities.

RESOLVED that the progress as outlined in the report be noted.

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NORTH EAST SECTOR CLINICAL SERVICES STRATEGY

The Sub-Committee gave consideration to a report and presentation led by the Head of Public Affairs, NHS Oldham CCG and the External Partnerships Manager, Northern Care Alliance NHS Group, which provided them with a narrative that set out why the NHS was changing in Oldham, Rochdale and Bury, and set the scene for current and future service change in the North East Sector of Greater Manchester.

The session set out the local NHS services and why they are what and where they were. It clarified the national, regional and local drivers for change, and the work completed so far to introduce new ways of working and models of care. It showed how services may start to feel different in the future and how this may affect patients, using case studies. The Sub-Committee

noted some 'myth busters' about common misconceptions about the NHS.



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Members were informed that the update had been developed by the North East Sector Clinical Services Transformation Programme Board as the basis for communications and engagement work with local people (including public and patients, local leaders and influencers and staff) to prepare them for future change. This could at a future point entail formal consultation.

Members asked for and received clarification of the following:

- When using the central booking line (choose and book), most people would the hospital with the shortest wait time, regardless of where that hospital was, but this was not so easy if reliant on public transport – It was explained that this was being considered. The aim was to reduce the need to go to a hospital in the first place, but consideration would also be given to reducing the need to travel.
- Lack of discharge planning – This would be further investigated and should not have happened. Discharge planning should start from the moment a patient entered a ward. Patients should be safe and supported when they went home.
- GP clusters/Neighbourhood Hubs – some of the areas did not follow natural neighbourhoods and residents did not understand how the different areas had been linked. This would be raised with CCG colleagues and an explanation requested.
- Speed of test results, GP surgeries were not getting the results as quickly as they could – It was explained that IT issues were being considered with a view to results being reported more quickly.
- Northern Care Alliance timeframe – It was clarified that strategic plans were due to be submitted, however there were no firm dates. Once the strategic plans were accepted, business cases would be worked up. There was currently no firm timeframe.
- Management of the voluntary sector – It was explained that the model used is being used in Rochdale would be followed. Champions linked to GP surgeries would interact with the voluntary organisations. When a GP identified a patient who might benefit, they would refer to the champions who will make the links between the patient and the community organisations.
- Statement re 'fragmented services, unfilled vacancies, antiquated estates and struggle to balance the books'. How would the plan fill the vacancies whilst also addressing the deficit – It was clarified that the Trust was looking at different ways to fill vacancies and support staff – helping them to secure housing, supporting aspiring staff to grow/achieve, working with local communities to engage and offering apprenticeships.

- Publicity and simple messages to help the public understand the changes – It was explained that Communications teams were working collaboratively to develop a range of marketing and comms materials, taking a multi-layered approach. The message would be as concise as possible, with further detail available. The offer of assistance from Members was appreciated and the time for going out with messages had not yet been reached.
- Use of facilities at community centres – It was explained that this would be considered as part of the locality plan, which would identify resources and how best to use them.
- Next steps – When the strategic plans had been submitted, this would act as catalyst for further work. An update on the position would be provided in July 2019.

RESOLVED that the contents of the report, presentation and discussion be noted and an update be provided to the meeting of the Health Scrutiny Sub-Committee in July 2019.

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OUTCOME OF PUBLIC CONSULTATION ON PROPOSED IVF CHANGES

The Sub-Committee gave consideration to a report of the Head of Public Affairs, NHS Oldham CCG, which informed them of the methodology and outcome of Oldham CCG's recent consultation on the funding of In Vitro Fertilisation (IVF) and the subsequent decision of the CCG Governing Body on IVF Funding.

RESOLVED that:

1. Consideration of the item be deferred with a view to arranging a separate meeting. The outcome of that discussion would be brought back to the meeting in March under the work programme item.
2. The CCG be requested to review the decision as soon as possible and the Health Scrutiny Sub-Committee updated on an annual basis.

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COUNCIL MOTIONS

The Sub-Committee gave consideration to a report of the Principal Policy Office – Health and Wellbeing, which provided a summary of a health-related motion in relation to Sustainable Health Funding that was discussed and agreed by Council on 12th December 2019 and an update on the actions to date.

RESOLVED that the update as outlined in the report be noted.

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MAYOR'S HEALTHY LIVING CAMPAIGN

The Sub-Committee considered a progress report of the Principal Policy Officer – Health and Wellbeing on recent activities undertaken by the Mayor of Oldham in connection with the Mayor's Healthy Living Campaign to promote and divulge the message of healthy living across the Borough.

RESOLVED that:

1. The update be noted;

2. Continuous support to the Mayor's Healthy Living Campaign be provided by the Sub-Committee.



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HEALTH SCRUTINY FORWARD PLAN

Consideration was given to the Health Scrutiny Forward Plan for 2018/19. Members agreed that the workload of the Sub-Committee was increasing consistently and ways to manage the greater workload needed to be explored.

RESOLVED that the Health Scrutiny Forward Plan for 2018/19 be noted.

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DATE OF NEXT MEETING

RESOLVED that it be noted that the next meeting of the Health Scrutiny Sub-Committee would be held on Tuesday 26th March 2019 at 6 p.m.

The meeting started at 6.10 pm and ended at 7.45 pm