

HEALTH SCRUTINY
15/11/2018 at 6.00 pm



Present: Councillors Ball, Leach, Williamson, McLaren and Phythian

Also in Attendance:

Ed Francis	Assistant Director Safeguarding and Partnership, Oldham Metropolitan Borough Council (OMBC)
Dr. John Patterson	Chief Clinical Officer and Deputy Accountable Officer, Oldham Cares
Dan Grimes	Managing Director, Oldham Cares
Dr. Keith Jeffery	GP Partner and Oldham Clinical Director for Mental Health, Clinical Commissioning Group (CCG)
Gary Flanagan	Senior Commissioning Business Partner – Mental Health, Learning Disability and Dementia, CCG
James Mallion	Acting Consultant in Public Health, OMBC
Julie Holt	Public Health Specialist, OMBC
Andrea Entwistle	Principal Policy Officer Health and Wellbeing
Fabiola Fuschi	Constitutional Services Officer, OMBC

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Taylor and Toor. Councillor Phythian attended the meeting as a substitute for Councillor Taylor.

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 11th September 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 26th June 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 held on 11th July 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 26th June 2018 be noted

9 **MINUTES OF THE JOINT SCRUTINY PANEL FOR
PENNINE CARE MENTAL HEALTH TRUST**

RESOLVED that the minutes of the Joint Scrutiny Panel for Pennine Care Mental Health Trust meeting held on 12th July 2018 be noted.

10 **RESOLUTION AND ACTION LOG**

RESOLVED that the resolution and action log for the meeting of the Health Scrutiny Sub-Committee held on 11th September 2018 be noted.

11 **MEETING OVERVIEW**

RESOLVED that today's meeting overview be noted.

12 **ELECTED MEMBER SAFEGUARDING TRAINING**

Consideration was given to a report of the Assistant Director for Safeguarding and Partnership on a new member training package that had been developed to bring together an overview of safeguarding of children and adults and Prevent (i.e.: part of the Government's counter-terrorism strategy). A further review of the training content had been requested. The Sub-Committee was asked to approve an information gathering exercise to identify the safeguarding concerns that elected members were presented with in carrying out their function.

The author of the report attended the meeting to present the information and to gather elected members' view on what additional topics should be included in the training.

It was reported that, so far, 35 members had attended the training session on safeguarding. On the evaluations received following the training, the majority had indicated that the training was both useful and relevant. However, several attendees had commented that the two hour session limited the opportunity for more in depth consideration. Those members who already had an understanding of the topic commented that they would like to focus more on particular issues. Feedback had also indicated that training needed to be more tailored to the safeguarding concerns that were being raised specifically with members by their constituents or issues that emerged as they discharged their duties.

Members would be asked to outline the safeguarding scenarios that they were presented with while discharging their function.

Members sought and received clarification / commented on the following points:

- Training sessions delivered in stages and advanced training focussing on specific safeguarding issues - It was explained that the revised training would take into consideration these requests.
- The training sessions would need to be repeated periodically – It was explained that the training sessions would be revised and delivered every so often.
- Members found helpful the visit to the MASH (Multi-Agency Safeguarding Hub) facility.
- To develop a step programme to allow members to develop knowledge and understanding of different aspects of safeguarding and issues that the community was facing and the work of other agencies.

The Health Scrutiny Sub-Group was prepared to endorse a member wide consultation exercise and to work to encourage a greater take up of the safeguarding training.

RESOLVED that:

1. The Sub-Committee support a follow up review of member safeguarding training;
2. Members consider the safeguarding scenarios that they are presented with and provide this information to the Local Safeguarding Children Board training sub-group for consideration;
3. The evaluations of the new training package and the outcome of the information gathering exercise be presented to the Member Training Working Group;
4. Consideration be given to separating the current safeguarding input into individual sessions for members, giving priority for each within the member's training calendar.
5. Consideration be given to the possibility of involving Group Leaders to encourage elected members to engage more readily with the revised safeguarding training package.
6. A progress report be presented to the Health Scrutiny Sub-Committee in June 2019.

13

URGENT CARE

Consideration was given to a progress report of the Director of Commissioning, Oldham Cares, on the development of plans for urgent primary care. The report also sought to inform the Sub-Committee of the winter planning progress for Urgent Care services in Oldham. This information followed a presentation that had been received by the Sub-Committee at its meeting on 3rd July 2018 on the draft Urgent Care Strategy.

The Chief Clinical Officer and the Managing Director, Oldham Cares, attended the meeting to present the information and to address the enquiries of the Sub-Committee.

It was reported that Accident & Emergency (i.e.: A&E) continued to support patients who required primary care services. The service was available 7 days a week from 11am until 11pm. Walk in centres continued to operate from 8am until 8pm and

they would remain in place until an alternative offer was available in the community. Work was in progress to develop Urgent Care Hubs as an alternative to the current walk in service offer. This would support urgent care demand in the community and work with a cluster model. Plans were in place to start an area pilot in Oldham in early 2019. The workforce had been identified and work was progressing on the IT element of the project. A data sharing agreement was already in place.

Another aspect of developing urgent care in the community to release pressure at A&E was the Visiting Service; this looked at a team of talents brought to residential settings to make decisions that, currently, were taken at A&E.

With regard to winter planning, the Sub-Committee was informed that, in order to manage the increased demand that had been experienced in December 2017, the plans for 2018/19 focussed on the following areas:

1. Supply: provision of additional beds for adults and children, contingency plans for Christmas and Bank Holidays, community providers supporting discharge from hospitals, weekly reviews for patients who stayed in hospital longer than seven days. Focus on alternative ways of delivering discharges and patients' choice.
2. Capacity: maintain assessment capacity and bed availability to keep pace with emergency admission. Create bed capacity in the community. Work with families to assist children at home when this was feasible.
3. Seasonal pressures: make plans for increased pressure on Mondays, Christmas and early January.

Members sought and received clarification / commented on the following points:

- Positive experience on triage and acute medical unit but care was at times inconsistent;
- Future of Integrated Care Centres (ICC) – It was explained that the Walk in Centre was not a model for the future; every neighbourhood would try to bring health and social care expertise together around the patients.
- Out of order x-ray machine at the ICC's? – It was explained that the lack of sufficient resilience would be addressed.
- Where urgent primary care services could be accessed in Oldham on Sundays? – It was explained that the seven day services moved around the various GP surgeries in the Borough. Currently, it was based in Royton.
- Access service to GP appointments – It was explained that via 111, patients could be directed to the 7 day GP surgery. This service could also be accessed at the GP receptions.
- Alternatives to A&E – It was explained that a very high percentage of patients who used A&E could have their issues addressed by pharmacists or physiotherapists.
- Significant reorganisation in progress, ability to identify work force implications – It was explained that, although the requirement for the work force was identifiable, there

was a significant shortage of GPs and nurses. Commissioners in Oldham were trying to make the job offer more attractive to avoid using agency work force to cover extra hours.

- Urgent Care Learning exercise on 6th- 8th December 2018 at Royal Oldham Hospital – It was explained that the objective of the exercise was to identify resource requirements and ability to meet the urgent care demand.
- North West Ambulance Service and issue about not being able to discharge patients at the hospital – It was explained that, in the North East, there was a different offer compared to the rest of Greater Manchester and this needed to be recognised. In the winter period, it was necessary to identify dedicated nursing support for ambulances in order to release queues.

RESOLVED that:

1. The progress report on Urgent Care be noted.
2. The Director of Commissioning, Oldham Cares, inform the Health Scrutiny Sub-Committee of the arrangements for the learning exercise on 6th-8th December 2018 at Royal Oldham Hospital , with a view to have two representatives from the Sub-Committee attending the session.

At this point in the proceedings, Councillor Ball left the meeting.

14

ADULT MENTAL HEALTH

Consideration was given to a report of the Senior Commissioning Business Partner - Mental Health, Learning Disabilities and Dementia, Oldham Clinical Commissioning Group (CCG) – Oldham Cares on the current status and plans for adult mental health in Oldham, including the Mental Health Concordat and the 5 Ways to Wellbeing.

The author of the report, accompanied by the Oldham CCG Clinical Director for Mental Health and the Acting Consultant in Public Health attended the meeting to present the information and to address the enquiries of the Sub-Committee.

It was reported that, with regard to Mental Health, Oldham was performing well compared to the other local authorities in Greater Manchester. In the United Kingdom, one in six adults experienced a common Mental Health problem such as anxiety or depression. Researches showed that people affected by Mental Health issues, lived 15 – 20 years less than those who were not affected by this condition. Mental disorder represented 23.6% of disease burden, but only 9.6% of the NHS budget.

With regard to mental wellbeing in Oldham, it was reported that at least 3,800 children had a mental health problem. Depression and anxiety were higher than national level. Lower employment rate was reported in those with mental illness compared to the general population. Mental health problems cost the Oldham economy a significant amount of money.

Prevention was the key message. The Prevention Concordat had been signed by a wide range of partners and stakeholders to promote good Mental Health and preventing Mental Health problems. The strategy was accompanied by a set of resources to support local interventions.

In Oldham, the multi-agency leadership approach had attracted funding from the Department for Education (DfE). Programmes and initiatives underpinned by the Prevention Concordat and those funded via the Opportunity Area were outlined.

It was also reported that, currently, people with Mental Health issues who experienced a crisis in the evening, or at week-ends, or on Bank Holidays could only access A&E. As a part of the Five Year Forward View for Mental Health, Crisis Safe Heaven had been established in Oldham. The service was located at Forrest House and it was a calm and safe environment staffed with clinical and non-clinical team which provided an alternative to hospital admissions and would alleviate pressure on wards. Members of staff would work closer with social workers to address the needs of the patients.

Members sought and received clarification / commented on the following points:

- Mental Health patients with alcohol and drugs dependency and impact of Mental Health on domestic violence – It was explained that this was a complex issue as these patients needed intense support. A new provider had been commissioned in Oldham and Rochdale – Turning Point – to improve links between Alcohol and Drugs Misuse providers and Mental Health providers. With regard to domestic violence, alcohol and drugs were symptoms of underlying Mental Health issues. A project implemented in Leeds to tackle this specific issue had given positive outcomes and it would be followed in Oldham.
- Because of its complexity, Members would like to see this item in future agendas of the Health Scrutiny Sub-Committee.
- New plan to improve access and flow for patients with Mental Health problems, could current situation about workforce shortage across Greater Manchester undermine the plan? – It was explained that early identification of mental health and offer of solution as well as being creative in using the workforce (e.g.: Healthy Minds and MIND) had been included to support access to all clinical services; this was more difficult for clinical wards where Mental Health nurses were necessary. A coordinated Greater Manchester strategy would be needed to address this issue.
- Prevention and joint approach – It was explained that a significant part of the transformation work was focussing on physical health and people managing their own condition. Also an increased link between Thriving Communities and social prescribing was noted.

- Need to promote awareness and reduce the stigma – It was explained that one of the outcomes of the Five Year Forward View for Mental Health was to measure the number of people with severe Mental Health in employment. Currently, in Oldham, this figure was very low. When this improved, it would mean that the system worked.

RESOLVED that:

1. The content of the presentation be noted;
2. A progress report be presented in November 2019 with more information on prevention.

15

COUNCIL MOTIONS

Members were informed that, at the last meeting of Full Council on 7th November 2018, two motions relating to health issues had been approved and one had been rolled over. The Sub-Committee would be informed at the next meeting if any issues in connection with these motions had been referred for its consideration.

RESOLVED: the information be noted.

16

MAYOR'S HEALTHY LIVING CAMPAIGN

Consideration was given to a briefing on the activities undertaken by the Mayor as part of the Mayor's Healthy Living Campaign.

RESOLVED that:

1. The content of the briefing be noted.
2. Support be given to the Mayor's Healthy Living Campaign during his time in office.

17

HEALTH SCRUTINY FORWARD PLAN

Consideration was given to a copy of the Health Scrutiny Forward Plan distributed at the meeting.

A request was raised to include Public Health, Primary Care and some considerations on Mental Health in a future meeting of the Sub-Committee.

RESOLVED that the work plan for 2018/19 be noted.

At this point in the proceedings, Councillor Leach left the meeting.

18

EXCLUSION OF THE PRESS AND PUBLIC

RESOLVED that, in accordance with Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they contain exempt information under paragraph 3 of Part 1 of Schedule 12A of the Act, and it would not, on balance, be in the public interest to disclose the reports.

19

ALL AGE OBESITY IN OLDHAM

Consideration was given to a report of the Public Health Specialist on overweight and obesity, the scale of these issues in Oldham and the recent activities undertaken to prevent and address the problem.



The author of the report accompanied by the Acting Public Health Consultant attended the meeting to present the information and to address the enquiries of the Sub-Committee.

RESOLVED that:

1. The content of the report be noted;
2. A template be developed to outline existing and future plans to tackle overweight and obesity in adults and children in Oldham. The following information be included in the template:
 - a. Current barriers to progress;
 - b. Legal framework;
 - c. Prevention;
 - d. Joined-up approach with partners, including schools and the community, voluntary and third sector;
 - e. Comparative work of neighbouring authorities;
 - f. Publicity and promotion;
3. Links be developed with the Mayor's Healthy Living Campaign 2019/20 to promote existing and future programmes to tackle overweight and obesity in adults and children in Oldham;
4. A presentation/workshop on this theme be delivered to the Members of the Overview and Scrutiny Board by 26th March 2018 and offered to all Councillors;

The outcomes of these combined actions will identify further opportunities to address obesity to enable a paper to be submitted to Oldham Council and to Oldham Clinical Commissioning Group.

The meeting started at 6.00 pm and ended at 8.53 pm