

HEALTH SCRUTINY
07/12/2021 at 6.00 pm



Present: Councillor McLaren (Vice-Chair, in the Chair)
Councillors Hamblett, Ibrahim and Salamat

Also in Attendance:

Gary Flanagan	CCG
Kaidy McCann	Constitutional Services
Amanda Richardson	Policy
Charlotte Walker	Cluster Lead, Adults Social Care

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Byrne, Cosgrove and Toor.

2 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

3 **MINUTES OF PREVIOUS MEETING**

RESOLVED - That the minutes of the meeting of the Health Scrutiny Committee held on 7th September 2021, as set out in the supplement to the agenda, be approved as a correct record.

4 **URGENT BUSINESS**

There was no urgent business received.

5 **PUBLIC QUESTION TIME**

There were no public questions received.

6 **GREATER MANCHESTER LEARNING DISABILITY STRATEGY UPDATE**

Consideration was given to a report which provided the Committee with an update on the implementation of the Greater Manchester Learning (GMLD) Strategy.

Members were advised that the GMLD Strategy had been in place for over a year and covered 11 work stream areas which also included Covid-19 since the beginning of the pandemic. Reports on the Strategy were submitted to Greater Manchester on a bi-monthly basis for scrutiny and challenge. The work stream areas were as followed:

- Strategic leadership
- Advocacy
- Belonging
- Bespoke commissioning
- Good health
- Homes for people
- Employment

- Workforce
- Early support for children and young people
- Criminal justice
- Covid-19

Members were advised that Good Health, Homes for People, Employment, Early support for children and young people and Criminal Justice were part of joint subgroups of the Greater Manchester Autism Strategy.

Members asked for and received clarification on the following:

- Health checks or lack thereof at individual GPs for residents with learning disabilities. Members were advised that GPs had been directed to focus on Covid-19. However, it was agreed that being given an opportunity to be able to speak to their GPs would significantly improve and help those with learning disabilities.
- Single males being left behind due to housing shortages. It was explained that there was a need to monitor actions plans with more nurses in the Learning Disabilities Team doing home visits. The issue would be brought to the Autism Way Forward Board and referred to the Housing Team in regard to banding issues.
- Council employment of those with learning difficulties and autism. The rate of staff within the Council was low and within Greater Manchester, Oldham was in the bottom end for performance.
- Number of staff and caseload. Members were advised that within the team there were 15 Social Workers and 5 Care Coordinators. There was an average caseload of 25-30 per staff member. With 750-800 cases at any one time. There were also 455 annual review caseloads and dedicated staff for transitions.
- General progression of transitions. Members were advised that progression was positive, and a Multi-Agency Transition Policy was in the process of being drafted. It was explained that those aged 14 plus were invited to the Hub to discuss with Practitioners the key actions to take between the ages of 14 and 18, to align a pathway to enable the young person to do what they want in life.
- The type of work available to individuals with learning disabilities. Members were advised that it all depended on the individual person and their abilities. Close work had been done with the Hospital which was a massive employer in the Borough. Work placements were heavily scrutinised and were required to be paid employment and checks would be made 6 months into the placement.

RESOLVED that the report be noted.

Consideration was given to a report which provided the Committee with a follow up on the recommendations in the report submitted to the Committee in October 2021 which sought to explore a number of issues pertaining to women's disadvantages which included access to mental health services.

It was noted that, amongst the issues identified, women's access to mental health services was regarded as an area of priority and focus, based upon concerns about the impact of the pandemic on mental health, and research in relation to barriers to women's economic empowerment carried out in Oldham by Oxfam and Inspire Women (2019). It had been agreed at the previous meeting that research would be undertaken on the following:

- the collation, analysis and interpretation of any existing data and intelligence.
- the engagement of women with lived experience in the development of this evidence base and
- identification of any future work that may be needed in respond to any issues raised.

The Committee was advised that demand for mental health services had increased during the pandemic and waiting times for people needing to access help had increased. It was felt that this was in part because people couldn't access the same level of support through their GP's during the lockdown. There was no evidence of a gender-bias in this demand. Service provision on the whole not gender specific but responsive to the evidence of need and demand, guided by the principles of person-centred care. In relation to mental health service commissioning, gender-specific service provision for women were focused on perinatal and maternity services.

Within commissioned services, such as TOG mind and Health Minds, women could access women only professional and peer-to-peer support. This was particularly important in providing culturally appropriate and sensitive support for women; supporting women who are experiencing domestic abuse or women who were sex-workers. Evidence also shown that women were more likely to access mental health support through targeted family support and parental wellbeing programmes. Similarly, more women than men (approximately 60/40% split) accessed psychological care in relation to early-stage dementia.

Members were advised that a round-table discussion that would focus on the Council's role in supporting good mental health in the borough was currently being considered by Cllr Chauhan, and Dr Keith Jeffery, Clinical Director for Mental Health for NHS Oldham CCG, mental health care. Whilst there were no details as yet, it was understood that the intention was to raise the profile of services to support mental health and wellbeing in Oldham, discuss work currently being undertaken and future opportunities to improve mental health and wellbeing in the borough.

Members asked for and received clarification on the following:

- The effect of Covid-19 on women's mental health. It was noted that research did point to women suffering more during the pandemic. Work was being done with Inspire Women to identify and tackle the impact of Covid-19 on Mental Health.
- The availability of Health Navigators. It was explained that not everything could be helped with medication. The Mind service had recently opened on Union Street and work was being done with Early Help for non-medication routes.
- Digital exclusion. Members felt that not everyone could navigate themselves online and with more services moving to online only left a huge cohort behind. It was agreed that services could not be digital only and a request for additional funding for older adults had been requested. There was also a 24-hour phone helpline available for users to speak to a mental health professional.

RESOLVED that the report be noted.

8 **HEALTH SCRUTINY WORK PROGRAMME 2021/22**

The Committee received a report inviting consideration of the Committee's Work programme for 2021/22 as at October 2021.

RESOLVED that the Health Scrutiny Work programme 2021/22 be noted.

9 **KEY DECISION DOCUMENT**

The Board gave consideration to the latest Key Decision Document setting our decisions to be made from 1st October 2021

RESOLVED That the Key Decision Document be noted.

The meeting started at 6.00 pm and ended at 7.58 pm