

**JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE FOR
NORTHERN CARE ALLIANCE**
11/07/2024 at 2.00 pm



Present: Councillor
Councillors Adams (Oldham), Dale (Rochdale) Fitzgerald (Bury),
Hamblett (Oldham), Lancaster (Bury) and McLaren (Oldham)

Also in Attendance:

Rebecca Fletcher	Director of Public Health (Oldham)
Moneeza Iqbal	Northern Care Alliance -NHS
Andrew Mather	Constitutional Services
Jayne Ratcliffe	Director of Adult Social Care (Oldham)
Jack Sharp	Northern Care Alliance

1 **ELECTION OF CHAIR**

As Salford and Bury had not yet appointed all their members to this committee the appointment of Chair was for this meeting only. An appointment for the remainder of the municipal year would be made at the next meeting.

Resolved:

That Councillor Hamblett be appointed as Chair for this meeting.

2 **ELECTION OF VICE CHAIR**

As Salford and Bury had not yet appointed all their members to this committee the appointment of Chair was deferred to the next meeting.

3 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Joinson (Rochdale) and Taylor (Rochdale).

4 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

5 **PUBLIC QUESTION TIME**

No public questions had been submitted.

6 **TERMS OF REFERENCE**

Members considered the Terms of Reference for the Overview and Scrutiny Committee which had been circulated to Partner Authorities. It was reported that Bury Council had proposed that the Quorum be amended to include at least one representative from each of the four authorities

It was also pointed out that some issues would still more appropriately be dealt with by individual authority health overview and scrutiny committees rather than the Joint Overview and Scrutiny Committee.

Resolved:

That any further suggestions for changes to the Terms of Reference be notified to Constitutional Services and be considered at the next meeting.

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NORTHERN CARE ALLIANCE -UPDATE

Moneeza Iqbal, Director of Strategy and Jack Sharp, Chief Strategy Officer at Northern Care Alliance , attended to give an overview and update to members on the organisation and operation of the Alliance.

The Group organisation included 4 hospitals, 4 sets of community services and provided hyper-services, district wide community services, hospital and acute care and complex services for Greater Manchester. The Alliance employed over 21,000 people and had a turnover of £1.7 billion.

Key performance issues included the improvement of urgent care performance to meet the 4 hour standard and reducing wait times for elective and Community services.

In common with the NHS the Alliance has a large structural deficit of £175m. A cost improvement plan had been agreed with NHS England to close the gap over 3 years, with £86 million to be found in the current year.

The Alliance was seeking transformation across its services for example providing joined up services, integrated care plans, and service specific improvements in areas such as maternity, 0-19 services, dermatology, and major trauma.

The public had understandable concerns in travelling out of their immediate area for specialist medical services. However, the level of specialism and volume of patients meant that the full range of service cannot be provided in every locality. For example, there is only one specialist centre for neurology, for the region. In terms of treatment and outcomes, the benefits of centres of excellence and specialist units are evident. Waiting lists were the key area of frustration and the biggest issue facing the Alliance.

Mr Sharp referred members to the 'Vision 10' document which had recently been agreed by the NCA Board. Vision 10 set out the mission of the Alliance and its vision for the next 5 to 10 years which was to be the safest and most effective organisation in the NHS and the place where people want to work. We are passionate about tackling inequalities, and improving health outcomes and experiences in all our Places.

In response to questions from Members concerning the relationship of the NCA with community services, both NCA and Local Authority managers stressed their commitment to working in partnership to prevent ill health and to help people get out of hospital and stay out.

Resolved:

That Jack Sharp and Moneeza Iqbal be thanked for their presentation.



Oldham
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DATES AND TIMES OF FUTURE MEETINGS

Members discussed the dates and times of future meetings and whether a more convenient start time could be found which could better fit with members work and travel. It was also suggested that a virtual or hybrid format could be considered. The location of meetings was also considered and Northern Care Alliance offered to host meetings if required.

Resolved:

1. The dates of future meetings on 26th September, 19th December 2024 and 27th February 2025 be confirmed.

2. That, following the appointment of members by Salford, the Secretary consult members on the most convenient start time for the majority of members.

3. Further consideration be given at the next meeting to holding meetings at other venues or holding hybrid meetings.

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WORK PROGRAMME 2024/25

Members considered the work programme for the Committee. Suggestions put forward included:

Visits to NCA facilities;
Meeting with Board members;
Workshops with staff and patient representatives;
Focusing on specific service areas e.g. young people 0-19, women's care, and public health and prevention;
Benchmarking;
Performance monitoring.

In relation to performance monitoring NCA officers suggested bringing the Dashboard which was reported to the Board to future meetings.

Resolved:

That NCA and Local Authority officers jointly produce a draft work programme.