Item 03

MINUTES OF THE GREATER MANCHESTER JOINT HEALTH SCRUTINY COMMITTEE HELD ON 11 JULY 2018 AT CHURCHGATE HOUSE

Present:

Bolton Council Councillor Stephen Pickup

Bury MBC Councillor Stella Smith

Oldham Council Councillor Colin McLaren

Rochdale BC Councillor Ray Dutton

Salford CC Councillor Margaret Morris

Stockport MBC Councillor Keith Holloway

Tameside MBC Councillor Gill Peet

Wigan Council Councillor John O'Brien

(Chair)

Also in attendance:

Lindsay Dunn Governance and Scrutiny Officer, GMCA

Councillor Stewart Gardiner Cheshire East

Warren Hepolette GM HSC Partnership Zoe O'Neil GM HSC Partnership

Jon Rouse GM HSC Partnership – Chief Officer

Jackie Wardle Derbyshire County Council

HSC/15/18 APOLOGIES

Apologies were received from Councillor Anne Duffield (Trafford Council), Susan Ford (GMCA) Councillor Eve Holt (Manchester City Council), Councillor Linda Grooby (Derbyshire County Council), Steven Pleasant (GMCA Lead Chief Executive – Health) and Councillor Sophie Taylor (Trafford Council).

HSC/16/18 ELECTION OF CHAIR

RESOLVED/-

That Councillor John O'Brien be appointed as Chair for the municipal year of 2018-19.

HSC/17/18 ELECTION OF VICE CHAIR

RESOLVED/-

That Councillor Colin McLaren be appointed as Vice Chair for the municipal year of 2018-19.

HSC/18/18 MEMBERSHIP 2018-19

All members were welcomed to the GM Joint Health Scrutiny Committee and were informed of the membership of the committee for 2018-19.

RESOLVED/-

To note the membership.

HSC/19/18 TERMS OF REFERENCE

Lindsay Dunn, Governance and Scrutiny Officer for the GMCA presented members with the current terms of reference for the committee.

RESOLVED/-

To note the terms of reference for 2018-19.

HSC/20/18 DECLARATIONS OF INTEREST

There were no declarations of interest made in relation to any item on the agenda.

HSC/21/18 MINUTES OF THE MEETING HELD 14 MARCH 2018

The minutes of the meeting held 14 March 2018 were presented for consideration.

RESOLVED/-

To approve the minutes of the meeting held 14 March 2018.

HSC/22/18 GREATER MANCHESTER HEALTH AND SOCIAL CARE PARTNERSHIP DELIVERY PLANS 2017-18 AND PLANS FOR 2018-19

Jon Rouse, Chief Officer, GM Health and Social Care Partnership, thanked members for providing him with the opportunity to present an overview of the Partnership's delivery in 2017/18 and plans for 2018/19. He recognised the important role of the Committee and encouraged members to provide judicious scrutiny and challenge as a significant amount of public expenditure was spent on health in GM with over £1m invested in the GM Health and Social Care Partnership Team.

The Committee were informed that the 2018/19 Business Plan would be presented to the GM Health and Care Board on 13 July for approval. An overview of the achievements during 2017/18 were outlined against a range of key performance standards. It was noted that Greater Manchester had delivered a strong financial performance in 2017/18 with a £89m surplus despite the significant financial challenges faced during the year across both NHS and local government sectors in line with pressures faced nationally. It was reported that mature financial relationships existed between local government and NHS organisations across GM and both Wigan and Stockport were highlighted as worthy examples of where both social care and health had achieved financial balance. It was recognised that this position may become unsustainable as there had been a requirement for local authorities to draw on reserves.

Members welcomed the encouraging financial performance and the investment in mental health but highlighted the insufficient resources for CAMHS provision in relation to ADHD for 18-25 year olds. It was acknowledged that more work was required with regard to the implementation of the mental health strategy and a roll out of more extensive crisis care would be fulfilled during 2019/20.

The emerging progress being made across a range of areas was commended along with the range of efficiencies introduced which had resulted in a robust surplus. However, the committee pointed to the challenges and gaps in the workforce and questioned if the position of doing more with less was sustainable.

It was explained to the Committee that NHS England, under its business rules for CCGs in 2017/18, required CCGs to achieve obligatory risk reserves which had contributed to the surplus. It was highlighted that in her recent speech, the Prime Minister set out the long term funding position for the NHS and confirmed an average increase in funding of 3.4 per cent in real terms each year from 2019/20 to 2023/24. Budgets for both social care and public health would be confirmed as part of the forthcoming Spending Review.

The key challenges were outlined to the Committee and it was recognised that the big challenges remain on finance and workforce shortages in key areas. The Chair explained that a key area of focus for the GM Joint Health Scrutiny 2017/18 work plan had been health and social care workforce planning. Members had requested information on the forecasted need for clinical and specialist staff in health and social care sectors and further analysis of the impact of BREXIT on recruitment.

A member raised issues surrounding the Pennine Acute Trusts overall inadequate CQC rating and subsequent borrowing which could have a budgetary impact across GM. It had been recognised that as a result of the CQC inspection, Pennine Acute had developed a stabilisation and improvement plan in order to stabilise the Trust, improve safety and quality of services provided. It had been recognised that unsafe and unreliable levels of staffing at the Trust had required an immediate investment in the workforce and as the Northern Care Alliance under the leadership of David Dalton developed, a long term approach to a balanced workforce would be established.

The Committee raised concern with regard to the number of community nurses across GM and questioned whether there were plans to develop the workforce in this area. It was confirmed that the nursing recruitment campaign was an opportunity to recruit across the whole discipline. Retention rates were also discussed and it was recognised that a model needed to be developed which addressed the requirement to provide a team based approach in order to effectively manage caseloads across the profession.

The Chief Officer highlighted that a significant challenge for the Partnership would be to ensure the increase in pace of health and social care integration including a new model of homecare as part of Local Care Organisations (LCO's) with the aim to keep people well and independent at home. It was noted that examples of best practice existed, however the neighbourhood model needed to be robust as there was still a degree of inconsistency across GM.

A summary of the business plan for 2018/19 and the delivery plan for the third year of *Taking Charge* was outlined to the Committee. It was noted that having agreed the strategy, programmes and investment plans the key focus would be on the implementation stage of improving health of all GM residents, transforming and enabling better care.

A summary of programmes to improve the health of GM residents and the transformation of care and support to enable better care were provided along with the system architecture as a result of the transformational plans.

An overview of the Theme 3 programme, Standardising Acute and Specialised Care was provided to the Committee. The services included within Theme 3 alongside the communication and engagement approach was detailed in the presentation. Members requested that in the re-configuration of hospital services, consideration was provided to the wider engagement and communication with communities in order for them to comprehend the changes taking place. The Committee discussed the utilisation of estate in localities in follow up care. It was confirmed that consolidation of assets in localities would be aligned once the clinical models emerged.

The committee were advised that further work continues with the GM Mayor to align the resources of the public service to improve health and well-being. It was proposed that the moving forward there would be significant focus on areas where significant improvement was needed; Urgent and Emergency Care (UEC), mental health and social care. It was reported that the *Devolution Difference* series of events were up and running across GM and Members requested information with regards to details in localities.

RESOLVED/-

- 1. To note the update provided;
- 2. To note the comments from the Committee with regards to engagement in the re-configuration of hospital services;

3. To provide further details of the *Devolution Difference* series in localities to all Members.

HSC/23/18 DISCUSSION OF COMMITTEE'S PRIORITIES FOR 2018/19

Members provided consideration to the Committee's priorities for 2018/19. It was proposed that the following workstreams could be incorporated into the Committee's work programme for 2018/19;

Digital;
Workforce;
Re-configuration of hospital services - Theme 3
Ambulance Services;
Estates.

A Member suggested that an update on the development and implementation of Local Care Organisations (LCO's) with the inclusion of comparative data would be beneficial for the Committee to receive.

Warren Heppolette, Executive Lead. Strategy and System Development, GMHSCP suggested that the priorities for consideration could reflect the areas of the Business Plan that had been acknowledged as requiring significant improvement. Additional briefings for the Committee to review were suggested for the following workstreams;

Urgent and Emergency Care;
Mental Health;
Social Care.

RESOLVED/-

1. That the Governance Officer update the work programme to reflect comments and include the following potential scrutiny areas –

J	Digital;
J	Workforce;
J	Re-configuration of hospital services - Theme 3
	Ambulance Services;
J	Estates

2. That further briefings be organised to provide additional focus on the improvement plans for, Urgent and Emergency Care; mental health and social care.

HSC/24/18 DATES OF FUTURE MEETINGS

All meetings will take place in the Boardroom at GMCA Offices, Churchgate House. Further briefing session dates will be advised separately.

Wednesday 12 September 2018 10:00 am – 12 noon

 $\begin{array}{lll} \text{Wednesday 14 November 2018} & 10:00 \text{ am} - 12 \text{ noon} \\ \text{Wednesday 16 January 2019} & 10:00 \text{ am} - 12 \text{ noon} \\ \text{Wednesday 13 March 2019} & 10:00 \text{ am} - 12 \text{ noon} \\ \end{array}$