

HEALTH SCRUTINY COMMITTEE

1st March 2023

PRESENT

Councillors: M.P. Whetton (in the Chair), S. Taylor (Vice-Chair), A. Akinola, J.E. Brophy, S.J. Gilbert, J. Leicester, J. Lloyd.

In attendance

Judie Collins	Altrincham Campaigner
Diane Eaton	Corporate Director Adults and Wellbeing
Nathan Atkinson	Corporate Director Adults & Wellbeing
Eleanor Roaf	Director of Public Health
Helen Gollins	Deputy Director of Public Health
Jilla Burgess-Allan	Consultant in Public Health
Cathy O'Driscoll	Associate Director of Delivery & Transformation
Gareth James	Deputy Place Lead for Health and Care Integration
Stephanie Ferraioli	Governance Officer

1. ATTENDANCES

An apology for absence was received from Councillor Acton, Hartley, Haughey, O'Brien and Western.

2. DECLARATION OF INTEREST

Councillor Leicester and Brophy disclosed their roles in the NHS along with colleagues from the NHS present tonight.

3. QUESTIONS FROM MEMBERS OF THE PUBLIC

In attendance tonight was Mrs Judie Collins, campaigner for Altrincham who presented two questions to Members of the Committee: 1) What are the reasons for the continued closure of Altrincham Minor Injuries Unit; 2) Highlighting the major problems with hospital discharge in Trafford.

1) Extra clinics were promised but they have not been delivered, various meetings have also taken place but no answers are available as of yet.

2) Care UK and Age UK are very concerned about patients discharged in Wythenshawe. The situation is not working.

The Chair echoed the comments made and informed that he was aware of a lot of complaints for the area of Altrincham.

Councillor Young remembered that she became a Councillor in 2004 and efforts were being made back then to save Altrincham General. She would like the next Committee to sort the problems at Altrincham for good.

Councillor Slater thanked Mrs Collins and stated that it had been helpful to talk about the unit but clarified that the hospital is not closing and that the minor injury unit is closed only due to staff shortages. At this moment in time MFT are saying it is not safe to open and we would not want to endanger our residents.

Councillor Lloyd asked how many people return after a discharge and the data present seemed to substantiate the pressure on the hospital to remain open. However delaying the discharge is not a safe option, those discharges where they present a worry are tracked and if necessary this is continued for as long as needed.

4. MINUTES

RESOLVED - That minutes of the meeting held on 18th January 2023 be noted as a true and correct record.

5. ICS UPDATE

The Deputy Place Lead referred to the paper shared with Members which has gone to the Locality Board last week and confirmed that significant progress had been made in terms of the operating model at GM level relating to who does what and where in the locality.

In March there will be the final consultation so the transition in terms of governance can start subject to formal agreement from the ICB board. In a nutshell, we will be making decision on delegated functions, taking them through the Locality Board and all care partners.

Councillor Lloyd referring to the list at the end of the paper presented today, enquired whether it was realistic to expect to achieve all and what timeframe they were working towards. The Deputy Place Lead confirmed this was a huge challenge for 2023/24 to be able to deliver all. Staff and GPs leaving is a big factor affecting delivery.

Councillor Brophy commented that in terms of objectives (page 14) on the health check target, Trafford is doing really well one of the best in the country. She queried

the budget provision in GM for people with learning difficulties. The Corporate Director for Adults and Wellbeing agreed to discuss this in the next municipal year.

RESOLVED – That the update be noted.

6. TRAFFORD LA AND TRAFFORD IBC – JOINT WORKING UPDATE

The Corporate Director for Adult and Wellbeing gave reassurance of the collaborative and quality assurance work carried out by the team and that training on safeguarding, and learning with disabilities was taking place.

The team is strong on ensuring people are reviewed on a regular basis, making sure their care plan is in line with the individual's needs and in a timely manner. She informed that part of the learning and development for the team revolves around what they term the discharge bed plan which they are improving on.

The Corporate Director informed that this was the second year they worked collaboratively with NHS Trafford, local GPs and mental health partners. They now have introduced following national guidance, a dedicated GP per care home who get to know people a lot better and also introduced the safe step programme. This has helped increase the number of people in homecare.

Cllr Akinola queried the spike in the number of mental health cases last April. The Corporate Director explained that the spike was more of a technical thing as opposed to an actual spike. They had started coding everything and that resulted in the apparent change. The model of care for mental health discharge cases has to be quite different and can require longer periods say for instance up to six months recovery period and for people with learning difficulties it takes even longer.

Councillor Taylor thanked the team and stated that this was an excellent way of working and should be publicised. The Corporate Director informed that local recruitment events took place and have helped but unless one uses social care one does not get to really know.

RESOLVED – That the update be noted.

7. BREAST SCREENIGN UPDATE

Members were informed of the great amount of work that had gone into recovery and now improvement was visible. Cancer screening, breast cancer, is the most common cancer in the UK.

The team are confident that from next year they will be able to deliver breast screening from Partington which will be helpful in reducing some of the health inequalities in the area.

The Trafford uptake is up 61.6%, doing better than GM and North West just slightly. Some of the challenges faced are around recruitment.

The Chair referred to Appendix 1 of the report and queried whether there were lessons to be learnt from Manchester, Salford and Tameside. He was informed that this would be looked into and any observations learnt will be shared with Members at the next opportunity. In the first instance, the obvious difference is that services are provided by different providers and this may be a deciding factor. The question can be put to NSH England who commissioned the work.

Screening is an individual choice and chasing the 30% who currently do not turn up for screening is going to prove difficult which is why people are targeted at an early age.

Although pretty rare for men to attend a screening, it is indeed possible for men to receive a screening also. A lot more work is needed though to spread awareness and ensure men are aware and recognise the symptoms. A national campaign would be beneficial.

RESOLVED – That the update be noted.

8. ANTE-NATAL CLASSES – IMPACT OF THE CESSATION OF SERVICE PROVISION AND WHAT ARE THE ALTERNATIVES

The Ante-Natal classes used to be run by MFT. Now, a lot of work is done online such as surveys and seminars, however this does not work for everyone so MFT is working very closely with Manchester and Trafford Safety Board Partnerships looking at face to face seminars and ante natal projects to educate parents. MFT have also secured funding for universal education parenting education across all of sites at MFT ensuring a multidisciplinary approach.

Councillor Gilbert queried the universal term and was informed that in terms of the universal funding what is meant is that there will be one midwife overseeing the delivery, a more customer focused, overarching approach which will be offered to all perspective parents.

Involving the voluntary sector is being considered, perhaps some advertising in practices could be trialled. A further update can be provided at future meetings.

RESOLVED – That the update be noted.

9. HEALTH INEQUALITIES – ADDRESSING HEALTH INEQUALITIES IN TRAFFORD

The impact of the health inequalities is mostly on the poor and the team have taken a deep dive looking into cross bar partnership organisation to make a real difference.

Councillor Brophy referred to page 44 of the report stating that it is the same Ward and the same places in Trafford that are the most deprived. She queried how the comparison was going to differ now the boundaries are going to change. How is the team going to be able to track attendances. She was told that there will be some referencing back to explain where the boundary came from. Also, the team is acutely aware of the huge impact and the high mortality rate and that Trafford performed very badly on this. Obesity, mental health, smoking rates in that population are very high so to improve their behaviour we need to ensure there is really good access to health care, education and employment.

Covid has had a real impact in communities particularly for the elderly who have been isolated and not been able to have conversations and developed dementia for example. Further updates will be provided at next Committee meetings.

RESOLVED – That the update be noted.

10. LEVEL OF ACCESS TO GPs IN TRAFFORD

A verbal update was provided by the Chair who along with other Members present today, formed the Health Task and Finish Group to look at the issue of Access to GPs across Trafford.

The Chair informed Members that the group had issued surveys to both local residents and to practices as well. The work of the group was somewhat rendered more difficult due to the late start in the process and the local By-Election of Stretford and Urmston. A very good response was received from local residents; a less somewhat positive response was received from practices. Nonetheless the data gathered was very informative and served its purpose of informing the draft report which will be presented at Council and Executive later this month. Members agreed the issue was of particularly high relevance for the residents of Trafford.

RESOLVED – That the update be noted.

11. URGENT BUSINESS (IF ANY)

There was no urgent business to discuss, however the Chair used this opportunity to thank Diane Eaton and Eleanor Roaf who are leaving the Authority and who have been outstanding officers with their timely contribution and constant hard work.

12. EXCLUSION RESOLUTION (REMAINING ITEMS)

There were no items to consider under the Exclusion Resolution.