

HEALTH SCRUTINY COMMITTEE

30 JANUARY 2020

PRESENT

Councillor Dr. K. Barclay (in the Chair).

Councillors S. Taylor (Vice-Chair), Dr. S. Carr, Mrs. D.L. Haddad, B. Hartley, J. Lloyd and D. Acton (ex-Officio)

In attendance

Diane Eaton	Corporate Director of Adult's Service, Trafford Council
Martyn Pritchard	Accountable Officer NHS Trafford and Clinical Commissioning Group (CCG)
Eleanor Roaf	Interim Director of Public Health, Trafford Council
Audrey Haworth	NHS England
Dr Ann Harrison	Medical General Practitioner
Fabiola Fuschi	Governance Officer, Trafford Council

Also Present

Councillor Harding, Executive Member for Adult Social Care

Councillor Slater, Executive Member for Health, Wellbeing and Equalities

43. ATTENDANCES

Apologies for absence were received from Councillors Akinola, Thomas and D. Western.

44. DECLARATIONS OF INTEREST

Councillors Dr. Carr, Hartley and Taylor declared a general interest in so far as any matter related to their employment.

Councillor Lloyd declared a personal interest in item 6 of the agenda – Coverage on Cancer Screening Programmes in Trafford by virtue of her previous role as portfolio holder for Public Health and support to applications for funding for cancer screening and diagnosis.

45. URGENT BUSINESS (IF ANY)

There were no items of urgent business received.

46. QUESTIONS FORM THE PUBLIC

The Chair of the Committee read out the following public question received via email on 27th January 2020:

“As you may know, the CCG has decided not to recommission this service - which is entirely their decision to make.

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I am a member of staff at TCC living in Sale West.

The service ends on 30th June but we have not been given any information about what plans are in place to ensure that the support currently provided to the vulnerable elderly will be transitioned seamlessly to another provider, and the vulnerable adults will not be significantly disadvantaged or placed at risk.

I understand that this matter is being brought to Council at a meeting on 30th January.

Would it be possible for you and your colleagues to gain robust assurances from the CCG that they actually have a plan in place, and obtain details of what that plan consists of?"

The Chair read out the following answer provided by Trafford Clinical Commissioning Group:

"Exit discussions have taken place with DXC Technologies who deliver the Trafford Coordination Centre following the Trafford CCG Governing Body decision on the 7th Jan 2020 not to extend the TCC contract.

Summary of the discussions and agreement is below:

- All elements of the service currently delivered by the TCC will remain in place up until the 30th June. A review of all services delivered by the TCC has already been undertaken as part of the independent review of the TCC.
- The CCG has been working with DXC the provider of the TCC and Mastercall Healthcare who are subcontracted by DXC to deliver the Care Co-ordination aspect of the TCC, to ensure a robust exit strategy is in place.
- On 30/1 the CCG and the TCC will commence a joint programme of work to start the transition of services currently provided by the TCC where appropriate and initiate the full communications plan.
- Every patient currently under care coordination service will be reviewed by the clinical team to identify any further clinical and non-clinical interventions which need to be put in place before the end of June.
- Both the CCG/TCC will engage with all existing service providers and stakeholders – Trafford Local Care Organisation Community Services, the Voluntary Community & Social Enterprise Sector, North West Ambulance Service, One Trafford Response, Care Navigators to identify existing patients under the care of the TCC who require on-going support.
- Each patient will continue to receive telephone a contact from the TCC between now and the end of June to advise what the patient should do from July. For clinical issues this will be primarily to contact their GP, unless they are already under the care of another clinical service. A written communication will be issued to all patients setting out contact details of other non-clinical services which the patient may need to access.

•All members of staff at the TCC have now received formal communication about the decision and DXC / Mastercall are leading on this based on the contracts they hold with the staff members.”

The Chair requested that a copy of the answer be sent to the questioner.

47. MINUTES

RESOLVED that the minutes of the Health Scrutiny Committee meeting held on 20th November 2019 be approved as a correct record.

48. COVERAGE OF CANCER SCREENING PROGRAMMES IN TRAFFORD

The Committee gave consideration to a report of the Director of Public Health which provided an overview of the three cancer screening programmes in Trafford and described related improvement activity.

The author of the report accompanied by a representative from NHS England, a medical general practitioner and the Executive Member for Health, Wellbeing and Equalities attended the meeting to present the information and address the enquiries of the Committee.

Officers reported that, in Trafford and across the UK, three cancers screening programmes were delivered: cervical screening, bowel screening and breast screening. Eligible people were invited to complete the tests. The screening programmes reduced mortality rate significantly. However, inequalities in screening uptake were an important public health consideration. In Trafford, areas of deprivation had higher incidence and higher mortality from cancer compared to the more affluent areas. The range of screening coverage by practice in Trafford varied with the lowest coverage in the North of the borough. Amongst the measures that Public Health was putting in place to address inequalities, a piece of work had taken place with Black and Minority Ethnic groups and as a result 110 women had their first appointment for cervical cancer screening. Furthermore, the Council had agreed that women could access cervical screening during work time and a pharmacy led programme was taking place in the North of the borough to increase the uptake of breast screening. NHS England was reviewing its commissioning process to ensure that more specialist services could be provided than those currently available at GP's surgeries.

Members asked what they could do to help to promote cancer screening programmes especially in those areas of the borough with a low uptake. Officers explained that talking to residents and having posters on display in public buildings were effective ways to spread the message that cancer was more treatable if diagnosed earlier. Members discussed having a link to Jo Trust (cervical cancer charity) on the Council's web-site. The Committee queried whether there was a model of delivering screening programmes that worked better; officers explained that they targeted GP practices that were not performing well. Training, mentorship and a clinical enquiry line were in place to support GP practices with cervical screening tests. Members asked whether exception reporting continued to receive invite. Officers explained that this depended on the type of exception. With

regard to breast screening and variation in GP practices, Members asked whether the population was aware that there were only female radiographers. The Committee also discussed screening accessibility for people with learning difficulties and was reassured that health inequalities were top priorities for NHS England. Members discussed the opportunity to publicise prostate cancer screening and officers explained that this was a diagnostic test and not part of the prevention programme as the mortality rate for this type of cancer was low, although it affected many men. Members discussed the options to have pop up clinics in the north of the borough; officers explained that this was being considered and members would be involved. Training would be available for members. Members also discussed screening accessibility in terms of moving away from 9-5 service provision as well as ensuring that letters to patients were written in “plain English”. Members and officers talked about the importance of peer to peer conversations, especially about men and bowel cancer screening. Members were reassured that work was ongoing to improve engagement, uptake and understanding of bowel screening and health providers had started seeing new groups of users such as men from BME communities. Local support groups and community champions were important resources for those people who did not go to GP practices. Members also queried about the format and languages available for information in cervical screening. Officers explained that for breast and bowel screening there was a Freephone line and on line information, going forward, systems would be able to exchange information and invites would be sent in the most appropriate format for the patient. Text messages would be added to invite letters and NHS England was requesting this element from providers. NHS England was also working towards the possibility to change appointment on line and expanding the sexual health offer in primary care.

RESOLVED:

1. That the report be noted;
2. That training on cancer screening programmes be provided to elected members to support them to divulge the message that early detection could save lives;
3. That a link to Jo Trust (cervical cancer charity) be added to the Council’s web-site;
4. That elected members support pop up clinics offering cancer screening;
5. That a progress report be presented in January 2021 to inform of measures in place to enhance accessibility and uptake of cancer screening programmes.

49. STRETFORD MEMORIAL

Members had requested information on the latest plans for Stretford Memorial Hospital. This was a health facility in Stretford managed by Central Manchester University Hospitals NHS Foundation Trust. The hospital had been closed since 2015. Trafford CCG Accountable Officer explained that the site was owned by Manchester University NHS Foundation Trust (MFT) which had formed in October 2017, after the merger of Central Manchester University Hospitals NHS Foundation Trust and University Hospital of South Manchester NHS Foundation Trust. MFT would be best placed to provide an update about the site.

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Members were also interested to know more about the plans for the health and social care provision for the North of the borough.

RESOLVED that contact be made with MFT to request information about the plans for Streford Memorial Hospital's site.

50. UPDATES ON ADULT SOCIAL CARE, LEARNING DIFFICULTIES BOARD AND SUICIDE PARTNERSHIP

The Committee received a presentation of the Executive Member for Adult Social Care on the services that comprised her portfolio and the link with the work of other Executive Members on areas such as Public Health, Children's Services and Strategic Housing. The increasing complexity of the health and social care needs of the population and the growing demand for adult social care services set a difficult scenario, made even more challenging by the current financial constraints in local and national government.

The Executive Member went on explaining that to address these challenges, Trafford Council worked with Greater Manchester Combined Authority and other partners and stakeholders to focus on prevention, the population's health and wellbeing and to ensure that people could live independently in their homes for longer. The Executive Member added that she would be willing to come back to provide the Health Scrutiny Committee with any further information on topics and matters concerning the health and social care provision for Trafford.

The Committee also considered a progress report on the Suicide Prevention Plan and the actions that had been taken by Public Health to address the recommendations agreed by the Committee in September 2020.

The Committee commented that social care provision would need to be joined across hospital sites. Members also draw attention on the transition services for young people moving into Adult Services and the challenges in service provision for children with Special Educational Needs and Disabilities. Members commented on the scope for proactive work to look at the high proportion of people who did not access mental health services and attempted suicide. The Executive Member for Adult Social Care explained that a small grant had been accessed and it would be used to divulge information on suicide prevention through a conference and a photographic exhibition on the "Many Faces of Trafford".

The Chair thanked the Executive Member for her presentation and welcome her presence at future meetings of the Committee.

RESOLVED that the progress report be noted.

51. HEALTH SCRUTINY WORK PLAN 2019/20

The Committee gave consideration to the work plan for the current Municipal Year and noted that they wished to review the following items:

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- Provision for alcohol and substance misuse;
- Hospital provision in the North of the borough

RESOLVED that the comments of the Committee Members about future items for the work plan be noted.

52. EXCLUSION RESOLUTION (REMAINING ITEMS)

The meeting commenced at 6.30 pm and finished at 8.58 pm