## HEALTH SCRUTINY COMMITTEE

### 28 JANUARY 2021

### PRESENT

Councillor Dr. K. Barclay (in the Chair). Councillors S. Taylor (Vice-Chair), Mrs. D.L. Haddad, B. Hartley, J. Lloyd, D. Acton (ex-Officio), D. Western (ex-Officio), R. Chilton and M. Cordingley

### In attendance

Dr. Mark Jarvis	Medical Director, NHS Trafford Clinical Commissioning Group (CCG)
Diane Eaton	Corporate Director for Adult Services, Trafford Council
Martyn Pritchard	Accountable Officer NHS Trafford CCG
Dan Lythgoes	Interim Managing Director Trafford Local Care Organisation
Joanne Bryan	Programme Manager, Public Health, Integrated
	Commissioning, Trafford Council
Helen Grant	Strategic Manager, Crime and Anti-Social Behaviour, Trafford Council
Samantha Fisher	Chief Executive, Trafford Domestic Abuse Services
Joanne Gibson	Head of All Age Commissioning, Trafford Council
Catherine O'Connor	Business Change Analyst Health and Social Care Recovery and Reform, Trafford Council
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

### Also in attendance

Heather Fairfield Healthwatch Trafford

# 1. ATTENDANCES

Apologies for absence were received from Councillors A. Akinola and Dr. S. Carr.

### 2. DECLARATIONS OF INTEREST

There were no declarations of interest received.

## 3. QUESTIONS FROM THE PUBLIC

There were no public questions received.

## 4. MINUTES

**RESOLVED** that the minutes of the meeting held on 12<sup>th</sup> March 2020 be approved as a correct record.

## 5. ACCESSIBILITY OF PRIMARY CARE SERVICES IN TRAFFORD

The Committee received an update from the Accountable Officer and the Medical Director for Trafford Clinical Commissioning Group (CCG) on the accessibility of Primary Care Services within the Borough.

The Senior Officers informed the Committee that Covid-19 pandemic had brought significant changes in the provision of primary care services. Following NHS England guidance, General Practitioners (G.P.s), started to adopt and implement a Remote Total Triage System to reduce avoidable footfall in the practices and protect staff and patients from the risk of infection. The system enabled practices to use an online consultation system to gather clinically relevant information from patients and triage patient contacts in order to respond with the most appropriate modality to meet the patient's needs.

The Clinical Director informed that, currently, most patients in Trafford used a digital system (i.e.: Ask My GP) to access their G.P. and a small percentage used the telephone line. All patients received a consultation within 24 hours from contacting their G.P. The implementation of the new system across practices in Trafford and its standardisation would give access to data and information which could be utilised to further improve services.

The Clinical Director informed that patient contact had dropped significantly at the beginning of the pandemic but, following a national media campaign to encourage people to report health issues to their G.P. when these occurred, patient contact had increased of 15%.

The Clinical Director also reported about the vaccination programme and the four priority groups who would receive the first dose of the vaccine by 14<sup>th</sup> February 2021. These first four cohorts would include over 28,000 in Trafford.

The Committee sought and received clarification about the digital system and assurance of quality of care for patients, the risk for those residents who did not have access to the internet, the proportion of G.P. consultations delivered face to face, via video conference or telephone call, balancing the need to make safe decisions with the risk of patients attending face to face appointments, collaboration and sharing best practice between all G.P. practices in Trafford and implementation of the video consultation system, permanent use of new consultation methods to provide the most suitable form of communication for patients. Members also sought and received reassurance about the distribution and level of usage of the vaccine across vaccination centres in Trafford. Further discussion took place regarding the new system for the electronic delivery of prescriptions to the patient's pharmacy of choice, the need to proactively contact patients who were on a special register to ensure continuity of care and possible risks of the new on line consultation system and their mitigation.

The Committee expressed its thanks to Trafford CCG representatives for their attendance at this evening's meeting. The Committee extended its thanks to all members of staff in primary care for their commitment, dedication and hard work in particular at this difficult time.

**RESOLVED** that the verbal update on the accessibility of Primary Care Services in Trafford be noted.

# 6. DOMESTIC ABUSE IN TRAFFORD DURING THE COVID-19 PANDEMIC

The Committee considered a joint report of the Strategic Manager Crime and Anti-Social Behaviour and the Programme Manager for Public Health which outlined the latest information and statistics about Domestic Abuse in Trafford during the Covid-19 Pandemic.

The report authors were in attendance accompanied by the Executive Member for Health, Wellbeing and Equalities and the Chief Executive for Trafford Domestic Abuse Service (TDAS), a registered charity organisation which offered support to individuals and families who suffered domestic abuse.

The report authors informed the Committee of the latest figures concerning domestic abuse incidents in the Borough. Data provided by Greater Manchester Police showed an increase in reported incidents during the first lockdown, introduced in March 2020. However, data was not always consistent during the periods which coincided with the introduction of other restrictive measures in Greater Manchester.

Members learned that the number of high risk domestic abuse incidents discussed at the Multi-Agency Risk Assessment Conference (MARAC) had risen in the period April – December 2020; in the same period, the number of repeat cases had also increased. A very similar trend was evidenced in the number of referrals received by a joint initiative between Greater Manchester Police and Talk, Listen and Change registered charity to support households where a domestic abuse incident had been reported but no crime had been logged.

Members also learned that TDAS which offered victim support services and domestic abuse refuge provision in Trafford for high and medium risk cases, had seen a surge in referrals. The trend also showed the difficulty that victims of domestic abuse experienced to access services during lockdown. TDAS had also reported an increase in the complexity of case with victims presenting multiple issues such as substance misuse, mental health and domestic abuse. These circumstances were worsened by the isolation caused by the measures to manage the pandemic.

Officers proceeded to inform of the measures that the Council and its partners had put in place to support the victims of domestic abuse since the pandemic and to mobilise joint initiatives quickly across agencies. Members also learned of new funding available to local authorities in conjunction with the Domestic Abuse Act coming into effect in April 2021. Resources would be utilised to support data analysis to compile the Joint Strategic Needs Assessment which would inform commissioning strategies.

Members sought and received clarification on whether services were sufficiently resourced to meet the increased demand and the additional complexity of cases caused by multiple needs, in particular substance misuse and mental health. Members also queried about the funding opportunity for the Perpetrator Support Programme and existing strategies for sharing information between GMP and schools when incidents occur. The Committee also asked whether there were specific segments of the community more affected by domestic abuse and whether a domestic violence policy was in place for employees of the Council. TDAS representative explained that funding provided to respond to the surge in demand for services caused by the pandemic needed to be long term in order to sustain service provision.

## **RESOLVED**:

- **1.** That the content of the report be noted;
- 2. That an update be provided on service progress in particular with regard to the offer for the Perpetrator Support Programme and resources for victim support services.

# 7. LESSON LEARNED REPORT FOR COMMUNITY RESPONSE HUBS

The Committee received a presentation of the Head of All Age Commissioning which showed how Council's services collected the lesson learned during the pandemic to formulate the next steps for the community hubs and the recovery and reform of health and social care in Trafford.

The officer was accompanied by the Executive Member for Adult Social Care and the Business Change Analyst Health and Social Care who attended the meeting to answer the questions of the Committee.

The officers informed the Committee of the various organisations which took part in the work of the Community Hubs in Trafford and their contribution to the lesson learned exercise which informed the development of a new neighbourhood model based on the importance of working locally utilising and developing local resources; the neighbourhood model also contributed to shape Trafford's Recovery and Reform Programme. This approach led to four areas of work: Development of place-based working, a partnership wide information and advice offer, promoting equalities by reducing health inequalities and a strong and healthy voluntary sector in the Borough.

The Community Hubs Service User Survey provided important information on the cohorts who accessed the hubs, the referral methods, ongoing need for services, preferred methods to receive information and valuable demographics data.

The Portfolio Holder highlighted the main strengths of this new way of working such as collaboration, partnership to formulate solutions for the community, use of data and resources such as the Joint Strategic Needs Assessment (JSNA) to target intervention. An important aspect was how each hub was different as it reflected a different community.

Members observed that digital literacy was essential to access on line resources and support services.

The Committee sought and received clarification on possible additional functions and responsibilities of the community hubs to address issues such as loneliness, digital literacy, home schooling and empowering people to take action and "do their bit" and the role of ward councillors to promote this opportunity. Members received reassurance on the existing data and resources to adequately support the modelling of locality work.

## **RESOLVED:** -

- **1.** That the update be noted;
- **2.** That the report about the Information Advise Sub-Group regarding accessing data be shared with the Health Scrutiny Committee.

## 8. URGENT BUSINESS (IF ANY)

There were no items of urgent business received.

# 9. EXCLUSION RESOLUTION (REMAINING ITEMS)

### None

The meeting commenced at 6:30 p.m. and finished at 8:45 p.m.