HEALTH SCRUTINY COMMITTEE

14TH SEPTEMBER 2022

PRESENT

Councillor M.P. Whetton (in the Chair),

Councillors S. Taylor (Vice-Chair), A. Akinola, J. E. Brophy, S.J. Gilbert, B. Hartley, S. J. Haughey, J. Leicester, J. Lloyd, T. O'Brien, Mrs. P. Young, G. Coggins, D. Acton (ex-Officio) and D. Western (ex-Officio).

In attendance

Acting Corporate Director for Adult Social Care (Mrs. D. Eaton)
Programme Director Health and Care (Mr. T. Maloney)
Director of Commissioning Health (Ms. N. Ledwith)
Interim CEO WTWA, MFT (Ms. S. Perkins)
Director of Nursing (Ms. J. Gerswhin)
Director of Strategy MFT (Mr. J. Wareing)
Director of Finance NHS Trafford (Mr. J. Gareth)
Consultant in Public Health (Ms. H. Gollins)
Altrincham Campaigner (Mrs. J. Collins)

1. ATTENDANCES

Apologies for absence were received from Councillor Akinola, Lloyd, Slater and Western.

2. DECLARATION OF INTEREST

Governance Officer (Ms. S. Ferraioli)

Councillor Leicester and Brophy informed the Chair of their role in the NHS.

3. MINUTES

RESOLVED – That the minutes of 28th June 2022 be noted as true and correct.

4. QUESTIONS FROM THE PUBLIC

None were received.

5. ALTRINCHAM MINOR INJURIES UNIT

Members received a report from the Director for Commissioning who reminded the Committee about the purpose of the Unit and that prior to the pandemic the general opening hours were 8am – 8pm Monday to Friday and 10 am till 6pm at weekends and closed for public holidays. In order to support the workforce the Unit was stood down during the pandemic. In June 2021 it was stood up again but in a reduced capacity due to workforce issues and was stood down again in July 2021 due to the same factor. EMP staff were redeployed to Wythenshawe Hospital.

Prior to closure the chief complaint was people presenting at the Unit with upper or lower limbs injuries particularly children between the age 5 and 9 and 10 and 4. People that attended the Unit lived within the area predominately. Activity from the Unit was picked up by Wythenshawe Hospital during the pandemic, this does not mean that the same number of patients that would have attended the Unit attend the hospital but of course the hospital was presented with an increase in the number of patients that attended. The staff redeployed from Altrincham General helped with the extra flux of patients.

The Interim CEO added that they had invested in training nurses and staff and were looking at reopening the Unit on a Monday and Tuesday the busiest days in Altrincham from 8am and closing at 4pm with a view of increasing the opening period to four days a week as more and more nurses completed the training. She informed the Committee that they would probably be fully operational on a seven day basis not earlier than half way through next year if they manage to retain all staff.

The Director of Commissioning asked the Committee to consider supporting them in carrying out a system wide urgent care review, to understand the needs of access points for the demand, the capacity and the workforce required to achieve best results, in terms of recruitment and the financial flaws with a commitment that this be done by December 2022. The aim is to achieve strategic and operational recommendations to present to the locality Board and NHS GM.

Councillor Brophy stated that she was happy to hear that the Unit was being considered for reopening and the work done to make this possible. She queried about the communications available in order to make people aware of the services that they could access. She did not believe that the wider population of Trafford was aware of the Unit. The Director of Commissioning replied that there is going to be a full communication plan which will inform not just on the Unit but also about urgent care. She stated that they will ensure that the information about the varying opening times would be recorded on the phoneline as well to ensure people did not turn up when the service is closed. MFT will also support via their social media channels.

Councillor Leicester asked if the figures highlighted in the report demonstrated attendance in relation to the more deprived areas and was this more due to the lack of information about the services available as opposed to other reasons. The Director of Commissioning replied that this was the reason for wanting to explore the review, to better understand the needs of the wider population in Trafford.

Councillor Hartley stated that a lot of people in Trafford would be able to reach Altrincham if they were available of the services provided. He also believed that opening first for two days a week and then four days a week could be confusing for

people and he felt that information for the public was a key factor. He enquired about the waiting time between Wythenshawe A&E and Altrincham Minor Injuries Unit and when the Unit would be fully operational.

The Director of Commissioning stated that it is perceived that the waiting time would be shorter in Trafford General than Wythenshawe A&E however they are trying to assess the needs of the population compared with the waiting time and find a balance. She reiterated that this is what the review would assist with, to ensure that not only the easy access issue was addressed but also the type of service required.

Councillor Taylor stated that possibly the Unit provided a niche service for perhaps a part of the population who were the least deprived and she was glad to hear that the review would regard the wider population of Trafford as at the moment she felt that perhaps the Unit would not be reaching its potential. She queried whether the service was actually serving the people that needed it most. She then stated that the review would be very welcome and looked forward to further updates and thanked the team.

Councillor Mrs Young informed Members of how much easier it is nowadays to access Altrincham by Metro as well and that if people were aware of the service they would attend. She felt it was more beneficial to reopen to a wider audience and fully, seven days a week even if ambitious at the moment and for longer periods rather than from 8 am till 4pm; especially given that there are many schools in Altrincham. This would mean that if for instance a child had an accident in a school playground, it was easier for staff to access the Unit.

The Chair invited Councillor Coggins the Ward Councillor for Altrincham to speak as the Unit is in her Ward.

Councillor Coggins stated that before the pandemic there were also the issues of the increase in the demand for urgent care treatment and the reduced supply of staff to contend with. She wanted to know how this was going to be addressed. She wondered whether the issues were more due to the lack of funding or the lack of training for staff and reiterated that it was also necessary to take steps to reduce the demand by educating people on better life styles to achieve a happier and healthier population.

The Councillor was informed that most staff come from an accident and emergency background and need to be assessed appropriately before they can work autonomously. Before being able to work at Altrincham, staff are required to spend a year at University and a further 6 – 9 months in-hospital training elsewhere. So it is not a quick solution to get an emergency nurse practitioner.

Councillor Acton stated that it would be a shame to lose the service as it is the only one in Trafford and that it goes a long way to relieving the pressures in other hospitals. He is looking forward to receiving the review and stated that the communication is paramount for people to know what is available to them and was looking forward to working together with the team in support of the review and ensuring that there would be a service that is useful to the whole area of Trafford.

Councillor Brophy reiterated concerns about the opening times and felt that there was scope for reopening full hours from the beginning given that there are transport links and therefore the Unit would be accessible from the whole of the Trafford area

especially looking at the longer term population of the area and asked that this be taken into consideration once the review is underway.

Councillor Leicester asked why the Unit was only for minor injuries and not for minor illnesses given that there are the services in the hospital. She was informed that it was mostly due to the fact it had always been this way from the setting up of the Unit, it was an historical reason rather than a technical one and this is something that the team will address in the review as they would want to bring the Unit to speed with the needs of the population.

The Chair invited Judy Collins Altrincham campaigner, who informed Members of how hard the community in Altrincham fought to have the hospital built. She stated that the CCG had informed that the Altrincham Wellbeing Centre would work with the Unit as an holistic hospital and not being just about clinics and GPs but that there would be a library where one could walk around the building yet this has not taken place. Residents felt that they have two good services in the town centre which wre not being fully exhausted and supported the review.

The Chair thanked Mrs Collins for attending and the Director of Commissioning also thanked Mrs Collins for her input and for agreeing that they needed to hear the voice of the population.

The Chair also stated that he shared the concerns of Members about the opening times and hoped that the Unit would be able to open at full service before June/July 2022.

RESOLVED:

- 1) That the report be noted.
- 2) To receive updates on the review.

6. DENTAL SERVICES

Members received a report from the Head of Primary Care for NHS Greater Manchester Integrated Care who informed that Dentistry has been commissioned since 2013 by NSH England. NHS Greater Manchester has taken delegated authority to be able to commission dental services locally although still subject to national regulations and contracts.

In Trafford there are 36 dental practices and within the community there are specialist services delivered by Bridgewater Foundation Trust.

Dentistry nationally and locally is significantly challenged, in fact a documentary demonstrating this will be shown on TV soon. Prior to covid there was a relatively stable position within Dentistry across Greater Manchester and Trafford. It was certainly not perfect but there was not the same challenges as say perhaps some fifteen years previously.

There was evidence that a lot of the population accessed private dentistry either through choice or because they felt that NHS Dentistry was not available. Also there is evidence that a lot of people choose not to access the service as they find Dentistry

scary as well as maybe using the services on an as and when basis i.e. emergency treatment.

During the pandemic there were significant challenges due to the specific area of the mouth being central to the transportation of the virus and thus new directives were issued by the Chief Dental Officer for England to suspend services in March 2020.

Once appropriate protective equipment was obtained across the country, services were able to resume allowing relevant time between patients. Though the access level to said service was drastically reduced and clearly not the same amount of patients were being seen.

Work was undertaken with practices to prioritise children and patients with pain and immediate need. A child friendly scheme has been introduced to reduce waiting time and ensuring looked after children also receive the health support required.

Councillor Acton thanked the Head of Primary Care for his report and asked how and when could services return to normality. He also asked if the patient's feedback was actually being addressed. He was informed that practices mostly preferred to address complaints at local level as opposed to going through a formal process. All complaints were being taken seriously. It was impossible to foresee the return to normality as yet as covid was still present.

Councillor Acton enquired if the dental provider contracted are actually delivering. He was informed that nationally the contracted delivery is falling short, about 70% of activity which demonstrates the impact that covid has had on the service.

Workforce issues is also another relevant factor that is impacting the ability to provide a full service as prior to the pandemic especially given the impact of Brexit which makes it impossible for European colleagues to register to work so recruitment is being impacted.

Councillor Brophy reinforced that this was definitely a national issue and not only to the Trafford area.

RESOLVED – That the report be noted.

7. INTEGRAGED CARE SYSTEM UPDATE

The Director of Finance NHS Trafford provided a verbal update for Members, informing of the delay in the Health Act being published. As of July 2022 the focus has been on the establishing of 42 Integrated Care Systems, ICS. The ICS comprises two parts the ICB, Integrated Care Board and the ICP Integrated Care Partnership in Greater Manchester.

Staff and their duties from CCG transferred to ICS fairly seamlessly, with Mark Fisher the Chief Executive of the Board recognising the 2022/23 period as the year of transformation and transition.

The Integrated Care Partnership in particular has the responsibility of developing a strategy to address the needs of the population of Greater Manchester. The ICP will be subject to local government Health Scrutiny.

The Chair asked how would they have known if there had been issues with the changeover and how it would have been addressed. He was informed that the main concern was for staff to be able to continue to provide for their families financially speaking. However there was a very small risk compared to the huge gains going forward with the new system.

The Chair also enquired about the Director's own main concern. The Director stated that performance was going to be his main focus going forward as he felt this was very poor pre pandemic.

Councillor Taylor enquired whether patient care has been negatively impacted by the change in the system. The Director stated that actually there has been and there will be an opportunity to reduce the risk, despite it being a huge challenge especially relating to the financial constraints.

RESOLVED:

- 1) That the update be noted.
- 2) To receive a further update describing the Locality Board functions

8. WORK PROGRAMME

RESOLVED:

- 1) That the new template be agreed.
- 2) That the Committee agreed to have a Task and Finish Group on the topic of Access to GPs following the pandemic.
- 3) That the Committee recommend the topic of Access to Mental Health services for Children and Young People to the relevant Scrutiny Committee.

The meeting commenced at 6.30 pm and finished at 9.15 pm