

**MINUTES OF THE MEETING OF THE GREATER MANCHESTER JOINT HEALTH SCRUTINY MEETING
HELD ON WEDNESDAY, 10 JULY, 2019 AT BOARDROOM, GMCA OFFICES, CHURCHGATE HOUSE,
OXFORD STREET, MANCHESTER M1 6EU**

PRESENT:

Councillor John O'Brien (in the Chair)	Wigan Council
Councillor Linda Thomas	Bolton Council
Councillor Stella Smith	Bury Council
Councillor Eddie Moores	Oldham Council
Councillor Ray Dutton	Rochdale Borough Council
Councillor Margaret Morris	Salford City Council
Councillor Keith Holloway	Stockport MBC
Councillor Sophie Taylor	Trafford Council

OTHER MEMBERS IN ATTENDANCE:

Councillor Linda Grooby	Derbyshire County Council
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OFFICERS IN ATTENDANCE:

Jackie Bene	Chief Executive Bolton NHS FT/Delivery Lead Improving Specialist Care Programme
Lindsay Dunn	GMCA
Anthony Hassall	Accountable Officer, Salford CCG/Lead Commissioner Improving Specialist Care Programme
Warren Heppollette	Executive Lead, Strategy and System Development, GMHSC Partnership
Joanne Heron	GMCA
Jackie Robinson	Communications and Engagement Lead, Improving Specialist Care Programme
Jon Rouse	Chief Officer, GMHSC Partnership

APOLOGIES:

Councillor Eve Holt, Manchester CC
Councillor Stephen Homer, Tameside MBC

JHSC/16/19 APPOINTMENT OF CHAIR

A nomination for Councillor John O'Brien to be appointed as Chair for the Municipal Year 2019/20 was received and approved.

Resolved/-

That Councillor John O'Brien be appointed as Chair for the Municipal Year 2019/20.

BOLTON
BURY

MANCHESTER
OLDHAM

ROCHDALE
SALFORD

STOCKPORT
TAMESIDE

TRAFFORD
WIGAN

JHSC/17/19 APPOINTMENT OF VICE-CHAIR FOR THE MUNICIPAL YEAR 2019/20

A nomination for Councillor Margaret Morris to be appointed as Vice-Chair for the Municipal Year 2019/20 was received and approved.

Resolved/-

That Councillor Margaret Morris be appointed as Vice-Chair for the Municipal Year 2019/20.

JHSC/18/19 MEMBERSHIP 2019/20

The Committee was asked to note its Membership for the 2019/20 Municipal Year:

<u>Member</u>	<u>Substitute Member</u>	<u>Authority</u>
Councillor Linda Thomas	Councillor Mudasir Dean	Bolton
Councillor Stella Smith	Vacancy	Bury
Councillor Eve Holt	Councillor Julie Reid	Manchester
Councillor Eddie Moores	Vacancy	Oldham
Councillor Ray Dutton	Councillor Patricia Sullivan	Rochdale
Councillor Margaret Morris	Councillor Samantha Bellamy	Salford
Councillor Keith Holloway	Councillor Wendy Wild	Stockport
Councillor Stephen Homer	Councillor Teresa Smith	Tameside
Councillor Sophie Taylor	Councillor Anne Duffield	Trafford
Councillor John O'Brien	Councillor Ron Conway	Wigan

Resolved/-

That the Membership for the 2019/20 Municipal Year be noted.

JHSC/19/19 MEMBER'S CODE OF CONDUCT AND ANNUAL DECLARATION FORM

Members were reminded of their obligations under the GMCA Members Code of Conduct and were requested to complete an annual declaration of interest form which will be published on the GMCA website.

Resolved/-

Members noted the report and the GMCA's Code of Conduct (Part 1 of the report) and agreed to complete an annual register of interest form (Part 2 of the report).

JHSC/20/19 TERMS OF REFERENCE

The Committee was asked to note its Terms of Reference.

Resolved/-

That the Terms of Reference for 2019/20 be noted.

JHSC/20/19 DECLARATIONS OF INTEREST

There were no declarations received in relation to any item on the agenda.

JHSC/21/19 MINUTES OF THE MEETING HELD ON 13 MARCH 2019

Members were asked to consider the approval of the minutes of the last meeting held on 13 March 2019.

Resolved/-

That the minutes of the last meeting held on 13 March 2019 be approved as a correct record.

JHSC/22/19 IMPROVING SPECIALIST CARE UPDATE

The Committee considered a presentation provided by Dr Jackie Bene, Chief Executive, Bolton NHS FT/Delivery Lead Improving Specialist Care Programme and Anthony Hassall, Accountable Officer, Salford CCG/Commissioning Lead Improving Specialist Care Programme.

Anthony Hassall advised Members that the Improving Specialist Care Programme is building on previous hospital transformation work across Greater Manchester and responding to the changing needs of the population. It aims to make best use of resources and compliments the shift in how care is delivered in the community and at a local level, removing variation and saving lives.

It was reported that Models of Care for eight services have been designed by clinicians and patients to ensure quality and reduce variation across GM. These services are;

- Benign Urology services
- Cardiology services
- Respiratory services
- MSK/Orthopaedics services
- Paediatric Surgery services
- Breast Services
- Vascular services
- Neuro-Rehabilitation services

The models have been assured through programme governance frameworks and undergone external clinical scrutiny. The recommended outcomes of the new Models of Care were outlined to the Committee.

Members were informed that feedback from the Patient and Public Reference Group was extensively supportive of the new Models of Care. Services moving sites to some degree, was supported by more than 80% of the group and only 4% of the group were not supportive of services moving.

Dr Jackie Bene provided the Committee with an overview of proposed site-specific options for detailed evaluation for each service.

The decision making process for the implementation of service change recommended by NHS England along with current status was highlighted. It was advised that the Greater

Manchester Joint Commissioning Board (JCB) is leading the appraisal of site options along with any decision to progress to a business case or consultation for any site and speciality. Further engagement with the Committee and a future update will be provided following assurance from NHSE England and JCB feedback.

On behalf of the Committee, the Chair thanked both Anthony and Jackie for the informative update. Councillor Keith Holloway advised that Stockport had received an update at their Local Health Scrutiny meeting which had promoted a helpful discussion on the impact of the changes. Any further opportunities of engagement with services in scope and the subsequent Models of Care were welcomed. It was considered crucial to be able to make a decision with regards to breast services swiftly due to the current fragility of the service.

A member questioned whether the role of the Committee at the next stage would be to receive the proposals for due noting or endorsement. It was clarified that the pre consultation business case for proposed site-specific options would require further NHSE Strategic Assurance. The options would then be presented to the GM Joint Health Scrutiny Committee to determine whether proposals are a significant variation which require further scrutiny and formal consultation.

Members discussed breast services and highlighted the requirement to provide diagnostics, screening and after care services locally to ensure that patients were able to access and receive care closer to home. It was confirmed that local public health access to mammography screening will continue and the proposal relates to a smaller subsection of patients who require further diagnostic screening.

In support of the models of care, the Committee highlighted the importance from the patient and carers perspective, of time and cost of travel along with availability and cost of car parking. A joined up approach to promote any financial assistance with travel and car parking charges was requested.

It was acknowledged that in relation to the Models of Care, the intention was to keep services as local as possible alongside the consolidation of services that are regarded to be more specialised. This movement of patients equates to approximately 6% of all activity in GM. However, in order to minimise the amount of movement, comprehensive travel time analysis is being undertaken by TfGM to assist in the evaluation.

A member questioned what the 80% Patient and Public Reference group represented. It was advised that the group that had received information on the Models of Care rather than the site specific options at this stage, reflected a collective geographical range across each locality in GM. It was acknowledged however that this did not reflect the views of the whole population and it was advised that each clinical commissioning group across Greater Manchester had the responsibility to ensure that further engagement was undertaken at the heart of communities.

It was further recommended that the starting point of the narrative provided to the public should focus on services which would be provided locally along with anticipated improved outcomes for patients.

Variation in Clostridium difficile, Methicillin-resistant Staphylococcus aureus (MRSA) infections and CQC ratings in hospitals were highlighted for consideration. Continuity of aftercare following surgery was recognised as paramount for patient safety.

Clarification was provided with regards to the scope of cardiology and vascular services. A member questioned the financial constraints to surgery and thresholds. It was confirmed that the decision to undertake surgery was based on clinical evidence rather than financial considerations.

The requirement to ensure that consistent patient information was available across sites was regarded as a key component of the programme. It was advised that technology had advanced in order to share images across hospitals and organisations. However, it was acknowledged that further work was required to share patient records in line with the appropriate information governance and security.

In support of the programme, the Committee welcomed the opportunity for further engagement and supplementary in depth discussion.

Resolved/-

- That the presentation be received and noted.
- That approval be provided to Greater Manchester Joint Commissioning Board (JCB) for the appraisal of site options.
- That any decision to progress to a business case or consultation for any site and speciality be delegated to the GM Joint Health Scrutiny Committee.
- That future updates be provided following assurance of NHS England and JCB feedback.
- That further engagement with the Committee on services in scope and the subsequent Models of Care, the options appraisal process and proposed service delivery at specific hospital sites be provided.

JHSC/23/19 WORK PROGRAMME

Consideration was given to the report of Joanne Heron, Statutory Scrutiny Officer, Governance and Scrutiny Team, GMCA.

It was explained that the Greater Manchester Joint Health Scrutiny's work programme had been included within the agenda for Members to develop, review, and agree. The work programme was a 'live' document which would be reviewed and, if necessary, updated at each meeting to ensure that the Committee's work programme remained current.

For information items taken previously to Greater Manchester Joint Health Scrutiny in 2018/19 were listed in appendix 1 of the report.

Items suggested included;

- Improving Specialist Care Programme Updates
- North West Ambulance Service performance and service delivery update
- IT/Digital Update
- Overview of homeless healthcare provision and 'A Bed Every Night' programme

- Children's Mental Health School's pilot
- Regular updates from the GM Health and Social Care Partnership

Resolved/-

That the suggested work programme items be included, updated and approved.

JHSC/24/19 DATES OF FUTURE MEETINGS

All meetings will take place between 10.00am – 12 noon in the Boardroom at GMCA Offices, Churchgate House, Oxford Street, Manchester, M1 6EU on the following dates:

- Wednesday 11 September 2019
- Wednesday 13 November 2019
- Wednesday 15 January 2020
- Wednesday 11 March 2020