

**Minutes of the Meeting of the Greater Manchester
Joint Health Scrutiny Committee held on 17 January 2024,
GMCA, Boardroom, 56 Oxford Street, Manchester M1 6EU**

Present:

Councillor David Sedgwick	Stockport Council (in the Chair)
Councillor Andrew Morgan	Bolton Council
Councillor Elizabeth FitzGerald	Bury Council
Councillor Eddie Moores	Oldham Council
Councillor Patricia Dale	Rochdale Council

Officers in Attendance:

Nicola Ward	Statutory Scrutiny Officer, GMCA
Jenny Hollamby	Senior Governance & Scrutiny Officer, GMCA
Oliver Fenton	Assistant Governance Officer, GMCA
Xanthe Townsend	Programme Director, Mental Health, NHS Greater Manchester Integrated Care
Lynzi Shepherd	GM Strategic Mental Health Commissioning Lead
Sandeep Ranote	Medical Exec Lead Mental Health, NHS GM Integrated Care
Manisha Kumar	Chief Medical Officer, NHS Greater Manchester Integrated Care
Francesca Speakman	BeeWell Project Manager, GMCA
Stuart Dunne	CEO, Youth Focus North West & Interim Chair, Youth Alliance GM

JHSC/25/24

Welcome & Apologies

Apologies were received and noted from Councillor Zahid Hussain, Councillor Naila Sharif, Councillor Sammie Bellamy, Councillor Sophie Taylor, and Councillor Ron Conway.

JHSC/26/24

Chair's Announcements and Urgent Business

The Chair acknowledged the financial challenges within the wider Greater Manchester and announced that the Integrated Care Partnership (ICP) had organised a series of events aimed at addressing these challenges.

The Chair proposed that with only one meeting left in the municipal year, the agenda planning be adjusted to prioritise discussions about the financial challenges for the next committee meeting.

The Chair also acknowledged the increasing prevalence of adult Attention Deficit Hyperactivity Disorder (ADHD) diagnosis in Greater Manchester and the whole country which had led to a significant backlog in referrals and prolonged waiting times. The Chair announced that a briefing note would be produced and sent to all Greater Manchester Councillors.

In light of the above, the Chair recommended the deferral of the obesity agenda item to the next municipal year to accommodate the inclusion of financial challenges at the next meeting.

RESOLVED/-

1. That the NHS financial challenges be considered at the next meeting.
2. That a briefing note on the proposed ADHD service configuration be produced and sent to all Greater Manchester Councillors.
3. That the proposed agenda item on obesity be deferred for consideration in the 2024/25 municipal year.

JHSC/27/24 Declarations of Interest

RESOLVED/-

No declarations of interest were received.

JHSC/28/24 Minutes of the Meeting held on 13 September 2023

RESOLVED/-

That the minutes of the meeting held on 13 September 2023 be approved as a correct record.

**JHSC/29/24 Minutes of the Joint Meeting of the Greater Manchester
Joint Health Scrutiny Committee and the GMCA Overview
and Scrutiny Committee Meeting held on 8 November 2023**

RESOLVED/-

That the minutes of the meeting held on 8 November 2023 be approved as a correct record.

JHSC/30/24 Mental Health Inequalities

A presentation was provided by Xanthe Townend, Programme Director, Mental Health and Lynzi Shepherd, Greater Manchester Strategic Mental Health Commissioning Lead.

The presentation outlined the national evidence base for mental health inequalities across three strands; access, experience, and outcomes. Additionally, the report presented further evidence of these inequalities in Greater Manchester supplemented with examples of how the National Health Service (NHS) addresses any unwarranted variation, including equality impact assessments for any service variation.

Members inquired about the future delivery of health services in communities aimed at combating health inequalities and sought clarity on the nature of these services. Officers discussed long-term plans to leverage existing resources to assist Greater Manchester's ambition to reduce inequalities, despite financial constraints experienced by the ICP. Notably, officers highlighted that Greater Manchester had invested £650m less than some other ICPs in mental health services, however, there were notable opportunities across the whole ICP to address mental health.

Officers stressed the need for a system-wide approach to mental health, whether in urgent care or primary care, to address these issues. Officers added that there was progress in data recording practices within mental health services, integrating both data and narratives to assist equality aims and outcomes. However, access to services remained the most significant issue.

Officers drew attention to the people and communities participation strategy finalisation, aiming to amplify community voices in healthcare services, noting that this strategy would be presented at locality boards.

Members sought guidance on how to contribute to addressing health inequalities. Officers explained that members could present data and narratives from the committee to their localities and help identify local needs to ensure the right services are put in the right places.

Members acknowledged the finance and resource challenges outlined by officers, and members stressed the importance of leveraging data to target resources effectively and generate creative solutions to assist as many individuals as possible. A whole system approach was considered the most successful way to deliver through collaboration.

Members also raised concerns about reaching different age groups with mental health services, noting lower engagement among older generations with talking therapy, with only 6 percent of service users. Officers pointed to the utilisation of social media channels to raise awareness of services but acknowledged that older

generations might not access these platforms as readily. Additionally, Officers then suggested that older individuals may hold onto traditional beliefs but emphasised the benefits of talking therapy for the older generation based on data evidencing a 65 percent recovery rate from anxiety and depression.

Officers stressed the importance of people's preferences and using data sets to ensure services meet needs. The importance of recognising mental health is the responsibility of all tracing in the workplace, creating space for conversations, and removing stigmas in GM.

Officers underscored that one-third of the population comprised of children and young people. Officers emphasised the pioneering role of the BeeWell Programme in co-designing a needs-led model for addressing mental health issues among young people in Greater Manchester.

Members inquired about employee wellbeing within the health and social care sector. Officers referenced the Greater Manchester Resilience Hub established after the Manchester Arena attack, aimed at supporting individuals in the workplace. Officers additionally highlighted the establishment of a new People and Culture team, dedicated to supporting the wellbeing of employees within the expanded workforce following the formation of the Integrated Care Partnership. Inequalities were also addressed through the inclusion of people with lived experience being involved in decision-making and board positions.

RESOLVED/-

That the Committee reviewed and noted the actions and plans presented in the report.

JHSC/31/24 Young People's Health and Wellbeing

A presentation was provided by Francesca Speakman, BeeWell Project Manager, GMCA and Stuart Dunne, CEO, Youth Alliance GM.

The report shared the findings of the latest BeeWell survey and the subsequent actions that have been undertaken by organisations across Greater Manchester to improve the health and wellbeing of young people.

Members expressed their gratitude towards officers for their work on the BeeWell Programme and its ground-breaking approach for such a significant broad sample of views across GM secondary schools.

Officers encouraged members to access the BeeWell data via the public dashboard and feedback for their neighbourhoods. Organisations such as GM Youth Alliance were able to use qualitative data alongside BeeWell to shape services that address young people's wellbeing.

Members raised concerns about the narrowing school curriculum which had impacted creative and physical activities. Officers agreed with members that the classroom balance was challenging but physical exercise was vital to overall wellbeing. Officers explained that data showed pupils receiving peer support within schools for special education needs felt more optimistic about school and their future as a result, and this reflected the requirement for other pupils to receive the same support.

Members expressed their disappointment with the data presented as it showed that a generation of sad children had been raised and asked officers had any examples of good practices which would help alter the direction of travel. Officers informed members that there was data from schools and the youth voice programme that if they are consulted regarding changes in schools and services increases their sense of belonging and happiness. A further survey was hoped to see a change in direction post-pandemic.

Officers referred to the Greater Manchester Mentally Healthy School Programme which was present in 10 percent of GM Schools and explained that the programme was a partnership between Schools, Health and the Voluntary, Community and Social Enterprise (VCSE) sector which looked to co-produce activities such as sports and creative arts with young people that overall improved their mental health. The committee welcomed examples of service co-design.

Members expressed their surprise at the report's findings, which revealed that children felt they had places to spend their leisure time, especially following cuts to youth provision. Members asked how they could be encouraged to utilise these spaces, and what additional resources were needed. Officers explained that such spaces should be flexible, allowing individuals to select and participate in activities according to their preferences. Additionally, they should have consistent availability, ensuring they are always open when needed.

Officers informed members that as young people grew older, they felt that certain activities available to them were no longer suitable, requiring flexibility to accommodate their changing interests and needs.

RESOLVED/-

1. That the Committee note the findings of the BeeWell survey in their local area reflecting the voices of young people in GM.
2. That officers would share a summary of good places to go findings with the Committee.
3. That the Committee urge for additional investment to enable the plans to extend the survey for a further two years subject to securing further investment.

JHSC/32/24 Work Programme for the 2023/24 Municipal Year

Nicola Ward, Statutory Scrutiny Officer, GMCA provided a draft of the Committee's work programme for the 2023/24 municipal year (Appendix 1 of the report).

RESOLVED/-

That the work programme is noted and updated accordingly.

JHSC/33/24 Date and Time of Next Meeting

The next meeting will be held in person at the GMCA on 13 March 2024 at 10.00 am, GMCA.