## SCRUTINY REVIEW PANEL - THE COUNCIL'S RELATIONSHIP WITH ITS HEALTH PARTNERS

Meeting: 10 March 2021 At: 4.00 pm

#### PRESENT

Councillor Carole McCann (Chair) in the chair; Councillors Angie Clark, Dickie Davies, John McGahan, Lisa Smart, Wendy Wild and John Wright.

#### 1. MINUTES

The Minutes (copies of which had been circulated) of the meeting held on 25 January 2021 were approved a correct record.

#### 2. DECLARATIONS OF INTEREST

Councillors and Officers were invited to declare any interests which they had in any of the items on the agenda for the meeting.

The following interests were declared:

Personal

Councillor

- Wendy Wild As her husband is a public governor of Penine Care and as a member of the Foundation Trust.
- Lisa Smart As a member of the Foundation Trust

Michael Cullen As Interim Chief Finance Officer of the CCG and Section 151 Officer.

#### 3. HEALTH AND CARE WHITE PAPER

The Deputy Chief Executive submitted a report (copies of which had been circulated) which provided the Panel with an update on the Health and Care White Paper (background information provided) and considered the themes and principles from a local perspective.

The following comments were made/issues raised:

- Members expressed that the integration of care was vital. Often, services were not joined up and service users and those caring for them had to repeat their story over and over again.
- Members of the panel acknowledged that although Local Authorities have some powers in terms of scrutiny for health committees, what would the changes mean for elected members when representing their communities?

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- The panel noted the challenging timescale for the proposals and asked for clarification in relation to the process and the route for the changes.
- Members asked whether Stockport Together was still ongoing and if so, how the new proposals fitted in? In response, Members were advised that there was a difference in approach. Previously, the focus was on integration of organisations and now the focus would be on the integration of service provision around individuals. The new proposals would build on and enhance what was already in place.

RESOLVED – That the report be noted.

## 4. DISCUSSION WITH EXPERT PANEL

Case study examples (copies of which had been circulated) provided details of service delivery across health and social care. An expert panel of local leaders attended the meeting to answer questions about what is working well, the challenges faced and potential opportunities for a future health and social care delivery model in Stockport through integration.

Expert Panel:

- Michael Cullen (Deputy Chief Executive (Section 151 Officer) Stockport Council; Interim Chief Finance Officer – Stockport CCG)
- Chris McLoughlin (Director of Children's Services Stockport Council)
- Mark Fitton (Director of Adults Services Stockport Council)
- Andrea Green (Chief Accountable Officer, Stockport CCG)
- Dr Cath Briggs (GP Clinical Chair for Stockport CCG)

The following comments were made/issues raised:

- Members of the panel asked what was the biggest challenge from a governance perspective and what was the role of GDPR? In response, Members were advised that GDPR was already a huge part of day to day practice. Permission was always sought from patients to share any part of their information. It did not feel like a huge concern as the work is already being done and consideration of GDPR was part of the working culture. GDPR can become a barrier in people's perceptions due to the complexity of the legislation. It was important to ensure that the right protocols, training and support were in place for staff.
- Concerns were raised regarding how information sharing would take place across a wider footprint, for example across Greater Manchester. Members were advised that this matter was currently being considered.
- Who decides when information sharing is being done in the patients' best interests and what criteria would be used?
- Members requested clarification as to what they could recommend to enable change to happen both better and faster. In response, Members were advised that consent would be key and would need to evolve and be constantly reviewed.
- Could the current proposals work whilst the details of the new social care proposals were still unknown?

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- Some residents had mentioned to Members that having a long term, complex health condition could be tantamount to having a full-time job. Would integration also allow for a named individual to whom patients could refer when they had a query or needed support? In response, Members were advised that it can be quite hard to navigate services and it would be ideal if a patient could have control over their own pathway. These proposals represented an opportunity to develop the model, for example a care navigator role or similar could be built into the patient pathway who can offer support alongside an IT solution.
- In response to a question from the Panel regarding the biggest challenges, Members were advised that most problems arose when the patient was not put at the forefront of developing their care.
- Members thanked the Expert Panel for their attendance at the meeting and for using accessible language. It was felt that the session had been invaluable.

RESOLVED – That the case studies and the responses from the Expert Panel be noted.

# 5. SCRUTINY PANEL DELIBERATION

The Panel discussed what would be important in a future health and social care delivery model for Stockport, based on what they heard and evidence gathered in this and the previous meeting.

The following comments were made/issues raised:

- Concerns were raised that there was a lot of work to be completed and perhaps not enough time to carry out all the proposals.
- Residents and citizens need to be at the heart of all decision making.
- The panel would like to recommend that work is ongoing to ensure that the right processes are in place in relation to data sharing. This will never be a completed piece of work as it will need to be constantly reviewed and updated.
- Members of the Scrutiny Panel felt it important that those people who would be affected by the proposed changes were engaged in and contributing to the process.
- Delivery of the proposals in Stockport's localities and neighbourhoods was felt to be a very strong message and the Panel would like to endorse this.
- The process in relation to navigating patient pathways needs some clarification and explanation as to how this can help people as patients.
- It was felt important to ensure that the foundations for change were put in place, that the language used was inclusive and accessible and that support was available for those who did not have English as a first language and for those who may not have access to online services and support.
- Navigating patient pathways could also be dependent upon support from family members. If family support is not available, then another person who can act as a support will need to be identified.
- Health inequalities and the role they play needs to be embedded when making decisions as a Council. Spending money cleverly and in the right way can save money later on.
- A short discussion took place relating to whether patients should consider themselves as customers of the NHS and whether this could improve services.

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- It was felt to be important that the workforce were appropriately well looked after and trained.
- Striving for simplicity was an important aim.
- In terms of early intervention and prevention, integrating health and social care into the decisions that the Council makes was a crucial factor. Members asked if it would be possible to run a pilot scheme or carry out some academic research on preventative work and measuring efficacy, perhaps with local universities.
- Members wished to make a recommendation that value for money considerations are taken into account.

# 6. DATE OF NEXT MEETING

### 25 MARCH 2021

The meeting closed at 6.00 pm