

Scrutiny Committee

Agenda

Date: Monday, 21st March, 2022

Time: 10.30 am

Venue: The Capesthorne Room - Town Hall, Macclesfield SK10 1EA

PLEASE NOTE - This meeting is open to the public and anyone attending the meeting is advised to wear a face covering when not seated (unless exempt).

Lateral Flow Testing: Anyone attending the meeting is asked to undertake a lateral flow test on the day of the meeting before embarking upon the journey to the venue. If your test shows a positive result, then you must not attend the meeting and must follow the latest advice on self-isolation.

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and at the top of each report.

It should be noted that Part 1 items of Cheshire East Council decision making meetings are audio recorded and the recordings will be uploaded to the Council's website.

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. Apologies for Absence

To receive any apologies for absence.

2. **Declarations of Interest**

To provide an opportunity for Members and Officers to declare any disclosable pecuniary and non-pecuniary interests in any item on the agenda.

3. Minutes of Previous Meeting (Pages 3 - 8)

To approve as a correct record the minutes of the previous meeting held on 6 December 2021.

4. Public Speaking/Open Session

There is no facility to allow questions by members of the public at meetings of the Scrutiny Committee. However, a period of 10 minutes will be provided at the beginning of such meetings to allow members of the public to make a statement on any matter that falls within the remit of the committee, subject to individual speakers being restricted to 3 minutes.

5. Update from East Cheshire NHS Trust

6. **Update from Cheshire and Wirral Partnership NHS Foundation Trust** (Pages 9 - 14)

To receive an update from the Associate Director LD, NDD & ABI & East Relationship Management on CWP's progress with service provision in the following two areas:

- Mental health support for Military Veterans
- Mental health support for children and adults with Eating Disorders

7. Update from NHS Cheshire Clinical Commissioning Group

To receive an update from the Accountable Officer (and newly appointed Assistant Chief Executive of the Integrated Care Board) ahead of the imminent implementation of the Cheshire and Merseyside Integrated Care Board.

8. Update from the Integrated Care Board (ICB)

To receive an update from the Chair and Chief Executive of the Cheshire and Merseyside Integrated Care Board ahead of the imminent implementation of the Cheshire and Merseyside Integrated Care Board (ICB).

9. Work Programme (Pages 15 - 18)

To consider the Work Programme and determine any required amendments.

Membership: Councillors Anderson, R Bailey, J Bratherton, D Brown, B Murphy, D Murphy (Vice-Chair), C Naismith, S Pochin, L Roberts, M Simon, L Smetham, R Vernon and L Wardlaw (Chair)

Agenda Item 3

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Scrutiny Committee** held on Monday, 6th December, 2021 in the Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor L Wardlaw (Chair) Councillor D Murphy (Vice-Chair)

Councillors Anderson, R Bailey, D Brown, C Naismith, M Simon, L Smetham, R Vernon and S Hogben

OFFICERS IN ATTENDANCE

Helen Charlesworth-May- Executive Director of Adults, Health and Integration Helen Davies- Democratic Services Officer Brian Reed- Statutory Scrutiny Officer

Superintendent Peter Crowcroft- Eastern Area Commander, Cheshire Police James Sumner, Chief Executive, Mid Cheshire Hospital NHS Foundation Trust

16 APOLOGIES FOR ABSENCE

Apologies of absence were received from Councillors Joy Bratherton (Councillor Steve Hogben was substituting), Councillor Lloyd Roberts, Councillor Brendan Murphy and Councillor Sarah Pochin.

17 DECLARATIONS OF INTEREST

There were no declarations of interest.

18 MINUTES OF PREVIOUS MEETING

The Committee noted that in the minutes dated 6.9.21 on page 6, the penultimate paragraph should read:

"The Committee was advised there had been six deaths from house fires in the borough during 2020-21, when previously there had been none."

On page 7, the paragraph that read:

"The Committee noted there was no focus on rural communities and that the borough was 52% rural or any animal welfare focus. This was noted by officers for future work planning."

Did not accurately reflect that the focus was on road safety and road traffic collisions (RTC) in rural areas and that this is statutory work conducted by

the Safer Cheshire East Partnership (SCEP). The Committee noted that RTC incidents had been reported to and investigated by SCEP.

The reference to animal welfare related to domestic pets and the number of people who had purchased an animal in lockdown and given the restrictions had now lifted, were struggling to cope with the responsibility. The Committee noted the council had a statutory duty towards animal health and wellbeing. This would not necessarily be reported back to SCEP and would be a standalone issue.

RESOLVED:

That subject to the changes above, the minutes of the meeting held on 6 September 2021 be approved as a correct and accurate record and be signed by the Chair.

19 PUBLIC SPEAKING/OPEN SESSION

Sue Helliwell attended the Committee and spoke against agenda item 5 on the subject of drink spiking.

Sue spoke about the dangers of drink spiking with one in ten people (both male and female) having been victim to this crime and asked for a multiagency approach to dealing with this crime in Cheshire with investment in testing kits or straws for licensed premises.

Councillor Denis Murphy gave some reassurances to the Committee that he was aware Cheshire Police were actively working together with the licensed premises and licensing authority.

Councillor Rachel Bailey noted the impact and subsequent cost of hospitalisation for young people.

Councillor Sally Holland attended the Committee and spoke against agenda item 6 on the subject of Congleton War Memorial Hospital, she asked the Committee directly to investigate the future of the hospital in the context of current service provision within an Integrated Care System (ICS).

Councillor Holland advised the Committee that the hospital was opened in 1924 and paid for by public subscription, as a memorial to those who died during World War One.

Currently the X-Ray department was underutilised and the Minor Injuries Unit was temporarily closed due to staff shortages. There was a 28-bed unit to treat those receiving rehabilitation, palliative and sub-acute care for periods of between 1-6 weeks.

The Committee were advised that the population of Congleton is set to rise over the coming years and should Congleton War Memorial Hospital become fully operational this would lessen the impacts to neighbouring A&E facilities.

RESOLVED:

That Sue Helliwell and Councillor Holland be thanked for their attendance and participation at the Committee meeting.

20 UPDATE FROM CHESHIRE POLICE

Superintendent Peter Crowcroft, the Eastern Area Commander within Cheshire Police attended the Committee and gave a verbal update on key pieces of work currently being carried out by the Police.

The Committee were advised that given the national and local concerns of drink spiking Cheshire Police had undertaken three weekends of intensive action in the areas of Congleton, Sanbach, Crewe, Nantwich, Macclesfield and Wilmslow. This included Police in plain clothes, drugs dogs and a high visibility Police presence.

To date across Halton and Cheshire East, there has been one confirmed case of a person being spiked with a hypodermic needle.

Resources were being deployed to target crime and fear of crime. The Safer Cheshire East Partnership (SCEP) have purchased bottle tops to help within licensed premises.

The Police are working collaborative with partner agencies such as My Cheshire Without Abuse (My CWA) in instances where there could be reports of Domestic Abuse. This has led to referrals by the Police for perpetrators of DA into rehabilitation programmes.

The top priority for the Police was violence and intimidation to women and girls, continued partnership work was the strategy to combat it. There had been significant educational work done to challenge behavioural signal type behaviours especially drunken males who have had a drink or feel emboldened because they are in large numbers. This extended to working with local employers to educate them on signal crimes if potentially this involved their member of staff.

Antisocial behaviour (ASB) had moved post-lockdown out of covid related ASB and back to traditional ASB.

Finally Superintendent Crowcroft advised the Committee that following the murder of David Ames MP, the government had enacted Operation Bridger a national plan for providing MPs with security advice.

The Committee were given the opportunity to ask questions, there was some discussion on domestic abuse cases during lockdown, forensic testing in relation to drink spiking, and advice to men who wish to be allies to vulnerable women in an appropriate way.

RESOLVED:

That Superintendent Crowcroft be thanked for his attendance and contribution to the Committee meeting.

21 UPDATE FROM MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST

James Sumner, Chief Executive of the Mid Cheshire Hospital NHS Foundation Trust attended the Committee and gave a verbal update on building at Leighton that followed on from a previous presentation to this Committee in April 2021.

The Committee heard how Leighton Hospital was built in the 1970s, and 85% of the building materials used contained asbestos and reinforced autoclaved aerated concrete panels that were now recognised as unstable materials. There was no research on how long those materials would last but by 2035 it would all need to be replaced.

Following consultation with external architects, three options had been identified for the future of the hospital:

1) The option to remove roof planks, recover and build new roof. This would take ten years and cost £660million;

2) The option to create new wards would cost £800million; and

3) The option to completely rebuild the hospital and future proof it would cost £660 Million and take 3-4 years to complete the works.

A business case has been drafted on each option.

The hospital has been submitted as part of a bid for eight national places that included retention of the critical care and theatres, but for a new build. Regional NHS teams have selected Leighton, but this doesn't indicate the bid will be successful nationally.

£15 million of national funds had been received to extend Accident and Emergency (A&E), and this will open mid-January.

The Committee were given the opportunity to ask questions, and there was some discussion that included the 30-year future proofing of Leighton Hospital alongside major expansion schemes such as HS2, ambulance delays being at the highest rate they have ever been at however Leighton had the shortest ambulance hand over time despite being one of the busiest hospitals. Leighton and Macc have lowest number of patients waiting twelve hours or longer in A&E.

RESOLVED:

That the Chief Executive of the Mid Cheshire Hospital NHS Foundation Trust be thanked for his attendance and contribution to the Committee meeting.

22 UPDATE FROM THE CHESHIRE EAST PLACE PARTNERSHIP BOARD

Helen Charlesworth-May, Executive Director of Adults, Health and Integration attended the meeting and gave a presentation to the Committee on the current work of the Cheshire East Place Partnership Board. Following the presentation, there was the opportunity for the Committee to ask questions. There was discussion that included:

- The work of the Cheshire East Place Partnership Board being a consideration for this Committees Work Programme;
- The expectation for variation across Place given legislation was expected to be passed by the end of January 2022/beginning of February 2022, there was not a lot of time for implementation of Place. That being said there was no expectation that this will have detrimental impact on the delivery of services for residents;
- A review of the Cheshire/Merseyside footprint was planned for 2years after implementation;
- what joint scrutiny might look like, acknowledging that scrutiny arrangements were unchanged by the legislation;
- Executives were currently meeting weekly because this was a significant development issue, any decision points would be for the Children and Policy Committees;
- It was noted that the scrutiny of the ICS was in a process of development both jointly and/or working sequentially;
- The CCG had consulted with its staff from the perspective of being a statutory reorganisation consultation; and
- It was noted that Yorkshire and Humber were further advanced with the same process because of mature voluntary partnerships, Cheshire and Merseyside were having conversations with officers in Yorkshire to understand lessons that had been learned.

RESOLVED:

That the Executive Director of Adults, Health and Integration be thanked for her attendance and presentation to the Committee; and That the presentation be received and noted.

23 WORK PROGRAMME

The Committee considered its Work Programme and noted the items scheduled for March.

RESOLVED: That:

a) The Democratic Services Officer schedule a Microsoft Teams meeting for the whole Committee in January to discuss future items for the Work Programme; and

b) The Work Programme be received and noted.

The meeting commenced at 10.30 am and concluded at 1.56 pm

Councillor L Wardlaw (Chair)



Cheshire and Wirral Partnership NHS Foundation Trust

Report for Cheshire East Scrutiny Committee

March 2022

1. Introduction

This report provides Cheshire East Scrutiny Committee with an update on CWP's progress with service provision in the following two areas:

- Mental health support for Military Veterans
- Mental health support for children and adults with Eating Disorders

2. Mental health support for Military Veterans

The Trust is very aware of the potential impact of the current conflict in Ukraine on military veterans. The work described below pre-dates the current conflict, which has highlighted why this work is so important.

2.1. Veteran Aware Status

In 2021, the Trust was re-accredited as a veteran aware organisation. The accreditation status lasts for 3 years. The following provides an update on the progress and development which has enabled the successful reaccreditation:

- The CWP Veterans Network has been established. The inaugural meeting was held on Friday 23rd July 2021. The network is the main conduit for discussion and co-production to inform and shape the veteran aware workstreams.
- A Veterans and Reservists intranet site has been established and is the central information portal and evidence repository for all things relating to veterans and reservists. Access is available to all staff.
- Dedicated veteran awareness training has been developed. The intention is to make the basic awareness training mandatory for all staff and new employees via induction to promote veteran awareness.
- Our clinical champion has completed the SERVES training (Armed Forces Mental Health Awareness and Suicide Prevention Training) in August 2021 and this will be incorporated into the offer of training on the CWP Virtual Academy following recruitment of staff who are able to complete the 'Train the Trainer' Course.
- CWP has piloted "veterans passports" with our primary care practices. This pilot is a prelude to establishing the passport across all primary care sectors.
- The recording and reporting of veteran aware status and dependents are being extended to include all physical health services. This went live on 1st November 2021. The ambition is that all services will be enabled to record and report on veteran status.
- A dedicated Reserve Forces Training & Mobilisation Policy is to be developed to support our Silver Defence Employer Recognition Scheme submission in 2022.
- We have linked with Operation Courage, which is a high intensity user service for veterans across the north of England. This enables us to be able to refer patients for specialist support as required. CWP has undertaken an internal relaunch around this to ensure staff are aware that this offer is available for veterans to access.

Helping people to be the best they can be

- CWP encourages all its employed veterans to register their veteran or reservist status to enable a baseline measurement to monitor future progress.
- We encourage our clinical teams to ask the question: are you a veteran or a dependent? This will enable improved recording and reporting of veteran and dependent access to all CWP services.
- Further development of our veteran recruitment approach will be explored to support our Silver Defence Employer Recognition Scheme submission in 2022.
- Veteran aware has been embedded into the Trust's suicide awareness training.

In pursuit of these aspirations, The Trust works closely and is supported by our colleagues at Stockport NHS Foundation Trust and the University of Chester.

2.2. Armed Forces Covenant

The Trust has re-signed the Armed Forces Covenant, re-affirming its pledge to the principles and commitments of the covenant, and to our veterans and their families. Crucial to fulfilling this pledge, the Trust is required to publicise these commitments through its literature and its public facing website, setting out how we will seek to honour them and inviting feedback from the Service community and our customers on how we are doing.

2.3. Defence Employer Recognition Scheme

Currently, the Trust has a Bronze status accreditation with the Defence Employer Recognition Scheme. It is the ambition that the Trust achieves a Gold standard, although we aim to move through Silver Status first. Our key milestones for achieving Silver status are:

- Expression of interest for the Defence Employer Recognition Scheme Silver Status (January 2022).
- Submission of evidence for the Defence Employer Recognition Scheme Silver Status (July 2022

3. Eating Disorder Services

3.1. Support for Children and Young People

3.1.1. Cheshire Eating Disorder Spoke teams (community offer)

- CWP's Eating Disorder Spoke teams are based in the local community CAMHS teams and work with young people aged 8-18 years with eating disorders. Across Cheshire, there are three Eating Disorder Spoke teams, two of which contribute at place to East (Central Eating Disorder Spoke team and East Eating Disorder Spoke team).
- Each Spoke team is made up of Eating disorder therapists and a dietitian. The Eating Disorder Spoke teams link in closely with the CAMHS teams to access psychiatry support where needed.
- The Eating Disorder Spoke teams are commissioned to see young people with eating disorders within 1 week for urgent referrals and 4 weeks for routine referrals in line with nationally defined targets. The teams will make contact quickly following receipt of a referral to arrange a date for an assessment appointment. This assessment appointment is an opportunity for the team to understand how things are for the young person and their family and how the eating disorder is affecting and impacting on their day-to-day life. Towards the end of this assessment the teams will develop a care plan with the young person and their family identifying next steps for support based on their clinical presentation and need.

• Our Eating Disorder Spoke teams offer psychological therapies clinically indicated for people with eating disorders and are recommended by NICE guidelines. The teams offer individual, family and group therapy, depending on what would be most beneficial for presenting need. Young People will also be offered appointments with our specialist dietitian.

Accessing Spoke teams

- The spoke teams in each place are accessible via the local community CAMHS team.
- Professional referrals should be sent via the local CAMHS team process. The local Eating Disorder Spoke team will review all referrals that indicate, or the specialist CAMHS staff suggest has eating disorder concerns.
- Referrals are screened by Duty Professionals in East Cheshire or the Well-Being Hub in Central Cheshire.
- Eating Disorder Spoke team members make contact within one working day to undertake a telephone triage of information to ensure we have a full picture of the young person's presenting need.

Impact of Covid on referrals

• Since the Covid-19 pandemic there has been a significant increase in demand in referrals and severity of presentation. This increase in demand and risk across Cheshire East mirrors what is happening on a national level. To be able to meet this increased demand, to be able to continue to meet requirements of national targets and in anticipation of this increase in demand being sustained, additional posts have been introduced into each Eating Disorder Spoke team to bolster existing capacity.

3.1.2. Cheshire Eating Disorder Specialist (CHEDS) outpatient service (hospital admission avoidance)

- The Cheshire and Merseyside Adolescent Eating Disorder Service (CHEDS) is a specialist outpatient team that offers assessment, treatment and support to young people aged 13-18 with a broad range of complex eating disorders like anorexia nervosa, bulimia nervosa, binge eating disorder or atypical eating disorders. The service is based in the Countess of Chester Health Park at Churton House and is aimed at hospital admission avoidance.
- Outpatient treatment is less disruptive to social and family life in comparison to inpatient treatment (e.g. staying in a hospital for young people experiencing mental health difficulties), so this is encouraged as much as possible.
- The service offers individual, parent, family and group therapy, depending on what would be most beneficial for the individual. People accessing the service are also offered appointments with aSpecialist Dietitian and additional 1:1 sessions with an Assistant Psychologist.
- The service offers twice yearly Multi-Family Therapy Workshops, which are 4-day long intensive family therapy courses involving up to 6 families at a time. Due to limited spaces, this course is only offered if the team it would be beneficial to an individual at that point in treatment.
- If it is felt that inpatient treatment would be beneficial to an individual, CHEDS works closely with the paediatric ward at the Countess of Chester hospital, and the children and young people's inpatient services at Ancora House in Chester, to provide hospital care for young people with eating disorders.

Accessing CHEDS

- Referrals are currently accepted from Children and Young People's Mental Health Services across Cheshire and Wirral Partnership, including the Spoke teams based in Crewe, Winsford and Macclesfield. In order to be assessed by CHEDS, the child/ young person must first be receiving treatment from one of these teams.
- Once referred, the team will see someone within 7 days (if it's an urgent referral) or 28 days (if it's a routine referral). The assessment will be with both the young person and their parents and takes place in Chester. Once the assessment is complete, the team will consult with the multi-disciplinary team and provide the individual with the outcome of the assessment as soon as possible. If it is agreed that the individual will benefit from treatment with CHEDS, the service aims to organise an appointment within 2 weeks of the assessment. During that time, support packs from CHEDS will be provided, and the individual will be asked to engage in a call which ensures treatment is person-centred and adjusted to individual needs.

3.2. Support for Adults with Eating Disorders

On 1 October 2021, CWP took on the Lead Provider Collaborative role for the provision of Adult Eating disorder services across the North West. This means that the following organisations are working together, and with people who use services:

- NHS Lead: Cheshire and Wirral Partnership NHS Foundation Trust
- NHS Providers:
 - o Greater Manchester Mental Health NHS Foundation Trust
 - o Lancashire & South Cumbria NHS Foundation Trust
 - Mersey Care NHS Foundation Trust
- Independent Sector Providers: Priory Health Care

The Lead Provider Collaborative (LPC) has had significant engagement with stakeholders including community and private sector partners and, following a co-production exercise, is known as EmpowerED.



There is a robust governance structure which delineates between the provision and commissioning of services and CWP as host LPC has a separate commissioning function to oversee the clinical and operational delivery of services across the partnership. In line with the community mental health transformation, CWP has prioritised investment to develop Eating Disorder Services across Cheshire and Wirral.

Key developments have been:

- introducing the FREED model with additional clinical posts
 - FREED is the acronym for the First episode Rapid Early intervention for Eating Disorders model. It is
 a service model and care package aimed at 16 25 year olds who have had an eating disorder for
 three years or less (anorexia nervosa, bulimia nervosa, binge eating disorder, or another eating

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disorder). FREED helps young people to access specialised evidence-based treatment quickly. The goal is for treatment to start within 4 weeks of referral to an eating disorder service.

- FREED also attends to the specific needs of young people in the early stages of an eating disorder. It emphasises early, pro-active engagement; early symptom change; family involvement; attention to the effects of eating disorders on the brain; attention to social media use; and attention to transitions (out of school, to university, into work) and 'emerging adulthood'.
- FREED operates as a 'service within a service'. It complements, rather than replaces, existing eating disorder services and treatments.
- working alongside BEAT (the UK's eating disorder charity) to deliver the "Momentum" programme
 - Momentum is a guided self-help programme for people with Binge Eating Disorder, which includes eight telephone support sessions delivered over 12 weeks by Specialist Advisors using the NICErecommended guided self-help book.

In line with the LPC commissioning team, the LPC are scoping out a full needs assessment to consider future commissioning intentions aligned with population health needs, transition of children into adult services and consideration of community models and investment.

4. Conclusion and Recommendations

Support for military veterans and people with eating disorders has been prioritised and improved over the past 12 months.

Cheshire East Scrutiny Committee are asked to:

- note the progress made
- identify any areas for further discussion or prioritisation

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Work Programme – Scrutiny Committee – 2021/22

Reference	Committee Date	Report title	Purpose of Report	Report Author /Senior Officer	Consultation and Engagement Process and Timeline	Corporate Plan Priority	Exempt Item and Paragraph Number
SC/11/21-22	21 Mar 2022	Update from East Cheshire NHS Trust	To receive an update from the Chief Executive of East Cheshire NHS Trust on how clinical teams are being supported in working together to develop a joint clinical strategy that sets out new, single clinical pathways, and innovative solutions to best meet the growing care needs of local populations.			An open and enabling organisation	N/A

SC/08/21-22	21 Mar 2022	Update from Cheshire and Wirral Partnership NHS Foundation Trust	To receive an update from the Associate Director LD, NDD & ABI & East Relationship Management on the work being carried out in the Poppy Factor and work with the veterans as mentioned in the Quality Account 2021; and how this Committee might assist in ensuring any anticipated funding in the area of eating disorders best met the needs of the residents.	Director of Commissioning	N/A	A council which empowers and cares about people	N/A
SC/09/21-22	21 Mar 2022	Update from NHS Cheshire Clinical Commissioning Group	To receive an update from the Accountable Officer ahead of the imminent implementation of the Cheshire and Merseyside Integrated Care Board.	Director of Commissioning	N/A	A council which empowers and cares about people	N/A

SC/10-21-22	21 Mar 2022	Update from the Integrated Care Board (ICB)	To receive an update from the Chair and Chief Executive of the Cheshire and Merseyside Integrated Care Board ahead of the imminent implementation of the Cheshire and Merseyside Integrated Care Board (ICB)	Director of Commissioning	N/A	A council which empowers and cares about people	No
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