

BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

1000 hours on 19th November 2019, Committee Rooms 3 & 4 – Actions

Present:

Councillor Rob Pocock (Chair), Diane Donaldson, Peter Fowler and Paul Tilsley.

Also Present:

Chris Baggott, Service Manager – NHS Support

Karl Beese, Commissioning Manager, Adult Social Care

Andy Cave, Chief Executive Officer, Healthwatch Birmingham

Maria Gavin, Assistant Director, Quality & Improvement, Adult Social Care

Elizabeth Griffiths, Acting Assistant Director of Public Health

Ben Howells, Area Manager, Aquarius

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office

Simon Needle, Principal Arboriculturist & Ecologist

Gail Sadler, Scrutiny Officer

Max Vaughan, Behaviour Service Integration Manager, Adult Social Care

Sian Warmer, Deputy Director, Change, Grow Live (CGL)

Mark Wolstencroft, Operations Manager, Environmental Protection

1. NOTICE OF RECORDING

The Chairman advised that this meeting would be webcast for live or subsequent broadcast via the Council's Internet site (which could be accessed at "www.civico.net/birmingham") and members of the press/public may record and take photographs.

The whole of the meeting would be filmed except where there were confidential or exempt items.

The Chair also reminded members of the committee that meeting was being held during the General Election period where purdah applies.

2. DECLARATIONS OF INTEREST

None.

3. APOLOGIES

Councillors Mick Brown and Ziaul Islam.

4. ACTION NOTES/ISSUES ARISING

The action notes of the meeting held on 15th October 2019 were agreed.

The following matters have arisen since the committee last met:

- Page 2 – bullet point 1 – The Chairman confirmed that a response to the query on ‘how many users of the in-house enablement service have a medical condition and are also being supported by the health service’ was circulated on the 23rd October 2019.
- Page 2 – bullet point 2 – Still awaiting a response to the request for information on the justification of the figure for the cost per hour for the in-house enablement service previously provided by Finance Officers. The request for this information is scheduled for receipt before the next in-house enablement review evidence gathering session.
- Page 2 – bullet point 3 – The Chairman and Councillor Donaldson attended the site visit to the Community Early Intervention Prototype at the Norman Power Centre on 22nd October 2019. The outcome of that visit will be fed back into the review of the in-house enablement service.

- Report of the Cabinet Member for Health and Social Care

Page 2 – bullet point 1 – Day Opportunities Strategy – This is being presented to Cabinet on 17th December. Therefore, the informal briefing for this committee will now take place on 28th November 2019.

Page 2 – bullet point 2 – The Birmingham STP and West Birmingham – The Chairman confirmed that on 17th October he attended a stakeholder event around some work that was to commence on merging the 4 Black Country CCGs into a single CCG. At that event, he took the opportunity to make known the views of the committee i.e. that West Birmingham should fall within the Birmingham and Solihull STP footprint and not the Black Country and West Birmingham footprint. He also confirmed he was attending a meeting later that day with Rebecca Farmer, NHS England and NHS Improvement, where he will have the opportunity to reaffirm the committee’s position.

- Birmingham Dementia Strategy Refresh

The request for demographic information on ethnic minority groups accessing the Dementia Support Service was still outstanding.

- Birmingham Suicide Prevention Strategy

- Information was circulated on 24th October regarding individuals presenting to A&E with self-harm in 2017/18.
- Elizabeth Griffiths has confirmed that the Suicide Working Group has been informed that the FGM cohort has not been included in the strategy.
- Tracking of the Suicide Prevention Strategy - Scrutiny Officers and Public Health Officers have had an initial discussion about the

possibility of synchronising this with the Health & Wellbeing Board. There is a further meeting arranged and the outcome of that meeting will be reported to this committee in December.

- Work Programme – October 2019
 - It was the committee's intention to hold the second evidence gathering session of the In-House Enablement Service in November but given the General Election and purdah this will not be possible. Therefore, it will now be rescheduled to take place early in the new year. A date will be confirmed at the next committee meeting in December.
 - Also, in relation to the in-house enablement review, the committee had been invited to attend the One Team One City – Early Intervention Event which will be held on 28th November 2019. Councillors Pocock, Fowler and Brown will be attending and any other members wishing to attend should inform the Scrutiny Officers.

5. PUBLIC HEALTH PROFILE DATA

Elizabeth Griffiths (Acting Assistant Director of Public Health) presented a discussion document framed around what public health data is available and when. What can be understood from that data; what the strengths and limitations are of that data and went on to demonstrate live one of the publicly available data sources i.e. <https://fingertips.phe.org.uk>.

Given the breadth of data available, Elizabeth sought guidance from members as to what information would be required in future reports to the committee. One suggestion was a contextual report on a themed approach e.g. information around drugs and alcohol; sexual health services etc.

Public Health Indicator B08d **Percentage of people aged 16-64y in employment (%)** was used in the live demonstration for illustrating available information.

In discussion, and in response to Members' questions, the following were among the main points raised:

- More in-depth analysis would be required to understand what was preventing certain BME communities entering into employment.
- Using Public Health and Office for National Statistics (ONS) data identifies areas of deprivation within Birmingham.
- The figures given were at an England level. Further work would be needed to overlay figures e.g. deprivation at a local level to breakdown the information by ethnicity and gender.

Also used to illustrate data was the **Local Alcohol Profiles for England** to compare Birmingham against other local authorities.

In response to comments about the low uptake of immunisation and screening and working with partners to improve this, members were told that the Health

Protection Forum was monitoring figures and there were various work programmes that were going on with Public Health England and NHS England to address this.

RESOLVED:

- The next report to HOSC in February 2020 should be a contextual report with the most up to date information available on the theme of sexual health services.
- Further discussion needed to consider how best to utilise the data available.

6. SUBSTANCE MISUSE: BIRMINGHAM'S ADULT AND YOUNG PEOPLES TREATMENT SERVICES

Max Vaughan (Behaviour Service Integration Manager, Adult Social Care); Sian Warmer (Deputy Director, Change, Live Grow) and Karl Beese (Commissioning Manager, Adult Social Care) and Ben Howells (Area Manager, Aquarius (Children's Services)) gave a presentation outlining the current contract in place; some of the prevalence rates on substance misuse and future commissioning intentions.

In discussion, and in response to Members' questions, the following were among the main points raised:

- National figures show that the Birmingham substance misuse treatment adult population is pretty much on a par with other local authority areas in terms ethnicity, gender, sexual orientation.
- All adults who come into the service are offered dried blood spot tests which screen for hepatitis C and HIV. The uptake of the offer in the Hubs city-wide is variable.
- Anyone who comes into treatment undergoes a risk assessment which includes questions about their family/children. There are a lot of procedures in place to check the wellbeing of children whose parents are in treatment for substance misuse. For example, CGL have Designated Safeguarding Leads and also have a daily presence in the Multi-Agency Safeguarding Hubs (MASH).
- Support for Armed Forces Veterans will be an area covered in the Joint Strategic Needs Analysis (JNSA).
- The ethnic profile for those accessing treatment through Aquarius is predominantly non-white, whereas those accessing treatment through CGL, which is the adult population, is less ethnically diverse.

RESOLVED:

- The report was noted.
- When CGL next reports to committee the presentation should include the role of KIKIT Drugs Project, and the work being undertaken by CGL and Aquarius to target ethnic minority communities in the City.

7. HEALTHWATCH BIRMINGHAM UPDATE

Andy Cave (Chief Executive Officer, Healthwatch Birmingham) set out the headlines of the presentation. He focussed on: -

- changes that have taken place to meet the needs of the new contract which commenced on 1st August 2019.
- recruitment that had taken place to increase capacity within the Team.
- the new contractual key performance indicators which sees the quantitative measures of success increase by 30% in year 2 of the contract and a further 30% in year 3.
- follow up reports which measure the impact of their investigations.
- current investigation into exploring people's experiences of contacting the NHS Trusts' Patient and Liaison Service (PALS) or customer services departments.

In discussion, and in response to Members' questions, the following were among the main points raised:

- Healthwatch Birmingham has a role to promote any information leaflets produced by the City Council to raise awareness of direct payments and signpost individuals to speak to social workers where they feel they might meet the requirements for direct payments.
- In such a diverse multi-cultural city it is important to observe religious holidays when scheduling hospital appointments. University Hospitals Birmingham is currently conducting a programme of work around inclusion and this may be included as part of that but Healthwatch Birmingham meet regularly with UHB and will ask the question.

RESOLVED:

The report was noted.

8. THE IMPACT OF POOR AIR QUALITY ON HEALTH TRACKING REPORT

Mark Wolstencroft (Operations Manager, Environmental Protection); Simon Needle (Principal Arboriculturist & Ecologist) and Chris Baggott (Service Manager – NHS Support) attended to report on tracking the implementation of the 5 outstanding recommendations in the inquiry.

In discussion, and in response to Members' questions, the following were among the main points raised:

- As a City Council we would wish to enforce the anti-idling legislation but have to be mindful of the practicalities as the legislation currently stands. The offence is leaving a vehicle's engine running unnecessarily while the vehicle is stationary on a public road, but this can only be imposed if the driver fails to turn off their engine when asked to do so by an officer.

- In Birmingham we have been trialling a Car Free School Streets Programme which sees roads outside schools closed to traffic at the start and end of the school day. This is enforced by West Midlands Police.

RESOLVED:

That the current tracking report discharges all of the remaining outstanding recommendations as follows: -

- R03 - Cabinet Member Assessment – 1
- R04 – Cabinet Member Assessment – 2
- R06 – Cabinet Member Assessment – 2
- R07 – Cabinet Member Assessment – 2
- R09 – Cabinet Member Assessment - 1

Mark Wolstencroft to contact the Scrutiny Officers with a proposal for presenting to this committee in the next municipal year a revised report with refined measures on 'The Effects of Air Pollution on Health'.

9. ADULT SOCIAL CARE PERFORMANCE MONITORING

Maria Gavin (Assistant Director, Quality & Improvement, Adult Social Care) presented the quarterly update on the performance of adult social care highlighting the 5 key indicators that are reported to HOSC in detail but also including performance monitoring of all key indicators.

In discussion, and in response to Members' questions, the following were among the main points raised:

- Since the last quarterly monitoring report 4 of the 5 key performance indicators have improved.
- Delayed Transfers of Care indicator has deteriorated. Over the summer there have been a high level of A&E visits nationally and this was reflected in Birmingham as well which has impacted on performance. For example, 15% extra people attending A&E at the Queen Elizabeth Hospital alone.
- The City Council is working with health partners to try and understand what was driving the 15% increase.
- There is a lot of ongoing work around the Shared Lives Programme. The increase of 2 people living in a Shared Lives arrangement was during the last month which is the highest number in the last 2 years.

RESOLVED:

- If there is a national review/analysis of the 15% increase in A&E visits, then this should be circulated to the committee (when available).
- The report was noted.

10. WORK PROGRAMME – NOVEMBER 2019

- Due to staffing constraints, the Birmingham Safeguarding Adults Board Annual Report has been deferred to the January 2020 meeting.
- Scrutiny Officers to allocate timeframes for agenda items to ensure that only the most relevant information is presented to the committee.
- Councillor Fowler wanted to put on record his thanks to the Cabinet Member for Health and Social Care and other members for their comments regarding the Period Poverty report which was presented to City Council on 5th November 2019.
- Scrutiny Officers to circulate to committee members the email that was sent to Councillor Fowler summarising the work undertaken by HOSC on mental health.
- The work programme was noted.

11. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

None.

12. OTHER URGENT BUSINESS

RESOLVED:

13. AUTHORITY TO CHAIRMAN AND OFFICERS

RESOLVED: -

That in an urgent situation between meetings the Chair, jointly with the relevant Chief Officer, has authority to act on behalf of the Committee.

The meeting ended at 1249 hours.