#### **BIRMINGHAM CITY COUNCIL**

### HEALTH AND SOCIAL CARE O&S COMMITTEE

## 1000 hours on 22<sup>nd</sup> January 2019, Committee Room 6 – Actions

#### Present:

Councillor Rob Pocock (Chair)

Councillors Nicky Brennan, Mick Brown, Peter Fowler, Ziaul Islam and Chauhdry Rashid.

#### **Also Present:**

Kalvinder Kohli, Head of Service Adult Social Care Commissioning

Carol Herity, Interim Locality Director, NHS BSol Clinical Commissioning Group

Andy Cave, Chief Executive, Healthwatch Birmingham

Dr Chipiliro Kalebe-Nyamongo, Policy Officer, Healthwatch Birmingham

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office

Gail Sadler, Scrutiny Officer, Scrutiny Office

#### 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.

#### 2. APOLOGIES

Apologies were received from Councillors Paul Tilsley and Suzanne Webb.

#### 3. DECLARATIONS OF INTEREST

Members were reminded that they must declare all relevant pecuniary interests and non-pecuniary interests relating to any items of business to be discussed at the meeting. If a pecuniary interest is declared a Member must not speak to take part in that agenda item. Any declarations will be recorded in the action notes of the meeting.

No declarations were received.

#### 4. ACTION NOTES/ISSUES ARISING

The action notes of the meeting held on 18<sup>th</sup> December 2018 were agreed.

The following matters have arisen since the committee last met:

#### Item 8 – Update on Day Opportunities Strategy

Councillor Pocock confirmed that a copy of the NDTi PowerPoint presentation had been circulated to committee members. He also referred to the NDTi final report which would form part of the information presented to Cabinet in June 2019. He was aware that the final report is currently being discussed by co-production participants in the next round of consultation. As the report is available a copy will be requested and circulated to members of the committee.

It was resolved at the last meeting that the committee invite a representative from NDTi to attend a future meeting. Councillor Pocock confirmed that the suggestion had proved to be contentious but would seek to pursue the request.

Councillor Fowler asked if the information on the cost of the Judicial Review could be provided. Councillor Pocock stated that in the most recent correspondence received it was indicated a report would be received upon conclusion of the Judicial Review. Councillor Fowler said he would welcome an interim statement on the costs to date (22/1/19) and an estimate of final costs.

#### Item 9 - Work Programme - November 2018

Period Poverty – Councillor Pocock confirmed it had been agreed that a substantive piece of work would be undertaken. Evidence gathering sessions would take place between May-July 2019 looking to take a report to Full Council in October/November 2019.

#### 5. HOMELESSNESS PREVENTION: SOCIAL CARE AND HEALTH RESPONSE

Kalvinder Kohli (Head of Service, Adult Social Care Commissioning) and Carol Herity (Interim Locality Director, NHS BSol Clinical Commissioning Group) presented a report on the activity being undertaken to implement the priorities within the Homelessness Prevention Strategy particularly in relation to homelessness and health.

The following observations were made by Members:-

- In response to a question regarding information contained within a diagram around 'Move-on supports Recovery' it was confirmed that it was aspirational.
   The 'move on' pathway was not consistent across the City but there are pockets of good practice.
- Members were told that the information on 'Increased presentations at GP surgeries and A&E by people with precarious situations' was national data from organisations like Crisis etc.
- It was confirmed that the term 'homeless' referred to anyone who is, potentially, at risk of becoming homeless.
- Older couples who have been living with each other for a long time but longer wish to do so but cannot afford to separate. Early intervention and

- advice on housing options would be provided by the work connected to Neighbourhood Network Commissioning.
- The data on life expectancy was national/regional. Birmingham figures by District were not available.
- It was confirmed that the £9.6m funding for the Housing First was a regional project.
- Concern was expressed about the number of rough sleepers that were still
  living on the streets of Birmingham. Reassurance was given that there is
  capacity within the system to accommodate all rough sleepers and they were
  being offered an alternative to sleeping outdoors within 24 hours of being
  identified through a coordinated multi-agency approach but the offer for
  accommodation may be refused with a preference to continue rough
  sleeping.
- A question was asked about the impact of Universal Credit on homelessness and what prevention the City Council is putting in place with private landlords and council housing. The biggest impact was being felt by the under 25s and how it limits their housing options and that there is a strong Landlords Forum within the City with whom there is ongoing dialogue.

#### **RESOLVED**:

- Officers would enquire from colleagues whether the data around life expectancy was available for Birmingham.
- Kalvinder Kohli would bring the plan on rough sleeping back to committee at a later date if required.
- Kalvinder Kohli to share the information on funding allocations regarding the Housing First Pilot project.

#### 6. TRACKING IMPLEMENTATION OF THE 'HOMELESS HEALTH' INQUIRY

Kalvinder Kohli presented a tracking report detailing evidence of progress against the two remaining recommendations which have yet to be concluded.

#### **RESOLVED:**

- In response to comments about vulnerable women and domestic abuse the committee was invited to visit the Domestic Abuse Hub.
- It was agreed that to move from tracking the recommendations of the report to tracking the issues that the Cabinet Member assessment of 2 for recommendations 4 and 6 is agreed.
- Five issues arising from the discussion of the Report Tracker were highlighted
  as the basis for retaining a longer term programme of concerns to the
  committee. It was resolved to request further updates specifically on these
  specific health aspects of homelessness which falls within the remit of the
  committee, as well as others that may emerge over time:-

- Dual diagnosis particularly around mental health and its connection with alcohol misuse and dementia.
- Those leaving the criminal justice system particularly women who are vulnerable to domestic abuse.
- Improving the effectiveness of primary care interventions for the homeless or those at risk of homelessness, and work being undertaken to get GPs to extend the offer.
- Joint commissioning of health-related support for the homeless and progress being made to move from single agencies commissioning in isolation into becoming an integrated multi-agency offer.
- Further reassurance that homeless people who present on the streets are within 24 hours offered care, support or accommodation. Where it appears individuals "choose" not to take up these offers, it is important the Committee receives further insight into the barriers deterring them from taking up the offer, and the actions being taken to overcome these barriers.
- Councillor Fowler asked Scrutiny Officers to send him an email with details of the 5 areas for concern and that a further update on those issues is reported to committee in June 2019.

# 7. DIRECT PAYMENTS IN BIRMINGHAM: MAXIMISING CHOICE, CONTROL AND FLEXIBILITY IN THE USE OF DIRECT PAYMENTS

Andy Cave (Chief Executive) and Dr Chipiliro Kalebe-Nyamongo (Policy Officer), on behalf of Healthwatch Birmingham, presented an interim report of an investigative study into Direct Payments that had been undertaken. The aim of the study had been to understand if Birmingham Direct Payment users felt supported by Birmingham City Council social workers to take control over the decision making of the services they access.

The following comments were noted:-

- Members were pleased that when the final report is published in September it will have taken into consideration how the roll out of the 3 work programmes i.e. Three Conversations; Neighbourhood Networks and Local Models will address the issues raised within the initial report.
- Concern was raised about whether 85 respondents to the survey was a large enough figure for the study. Members were told that the initial target was 100 respondents to ensure the detail of the responses was fully captured.
- The number of respondents who felt they were partially or not informed was higher with carers than service users. It was further explained that, in some cases, the carer was the voice of the service user and, therefore, the response was on behalf of the service user.
- Feedback received from residents in receipt of Direct Payments was that direct payments works if you are the exact fit for the direct payments system

and lacks the flexibility to enable people to use it with more specialised care services requirements. It was stated that for a personalised approach the changes around the Three Conversations programme should address the needs of individuals and, therefore, only when direct payments would be a benefit to them would that process progress.

#### **RESOLVED:**

• A further report from Healthwatch Birmingham is scheduled on the work programme for September 2019.

#### 8. WORK PROGRAMME - JANUARY 2019

• The Chairman reminded members about the site visit to CGL, Scala House which had been arranged to take place on Tuesday 12<sup>th</sup> February.

#### 9. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS

None

#### **10. OTHER URGENT BUSINESS**

None

#### 11. 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 1203 hours.