BIRMINGHAM CITY COUNCIL

HEALTH AND ADULT SOCIAL CARE (HASC) OVERVIEW & SCRUTINY COMMITTEE

PUBLIC MEETING

Tuesday 17th October 2023. Committee Rooms 6, Council House, Victoria Square

Minutes.

Present

Councillor Mick Brown (Chair).

Councillors Rob Pocock (Deputy Chair), Gareth Moore, Julian Pritchard, Shabina Bano, Kath Hartley, Amar Khan and Paul Tilsley.

Also Present:

Mohammed Sajid, Interim Head of Financial Strategy.

Samantha Bloomfield, Finance Business Partner, Adult & Social Care.

Ekbal Hussain, Interim Business Cases Business Partner.

Professor Graeme Betts CBE, Director, Adult and Social Care Directorate.

Dr Mary Orhewere, Assistant Director, Public Health, Partnerships, Insight & Prevention.

Lynda Bradford, Interim Service Lead, Physical Activity.

Humera Sultan, Consultant in Public Health.

Dave Wagg, Head of Sport and Physical Activity.

Ibrahim Subdurally-Plon, Service Lead, Physical Activity.

Paul Sherriff, Chief Officer, Partnerships & Integration, Integrated Care Board.

Tracey Harvey, Senior Commissioning Manager.

Rebecca Woods, Head of Primary Care Commissioning, Pharmacy, Optometry & Dental Services.

Sarah Fradgley, Senior Overview and Scrutiny Manager.

Adewale Fashade, Interim Scrutiny Officer.

1. NOTICE OF RECORDING/WEBCAST

The Chair advised that the meeting would be webcast for live or subsequent broadcast via the council's Public-I microsite. Members of the press/public may record and take photographs except where there were confidential or exempt items.

2. APOLOGIES

None

3. DECLARATIONS OF INTEREST

Councillor Gareth Moore declared a non-pecuniary interest as trustee of Birmingham LGBT and Citizens Advice.

4. MINUTES – 19TH SEPTEMBER 2023.

The minutes of the last Health & Adult Social Care Overview and Scrutiny Committee were approved by members to be accurate record of the meeting.

5. COMMISSIONER'S REVIEW AND COMMENTS ON AGENDA

For the committee to note the Commissioner's review and comments. This is a standard item for the committee to note at each meeting.

6. FINANCIAL CHALLENGES – SCRUTINY CONTRIBUTIONS TO BUDGET SAVINGS AND RECOVERY PLANS.

Samantha Bloomfield, Finance Business Partner, Adult & Social Care (ASC) introduced the report with appendices previously circulated to members. Below were key points highlighted:

- No red ratings on Adult and Social Care budgets.
- There are six specific areas of savings in 23/24 totalling £9.708m that fall under the committee portfolio as detailed in appendix 2 of report. Satisfactory progress is being made on delivery of these savings.
- Of the £9.708m total £1.000m has been delivered (blue), £0.700m is green denoting low risk to delivery and the remaining £8.008m is Amber with medium risk to realising the savings in 23/24.
- The amber ratings denote medium risks, and this was partly due to the lack of monitoring information in Oracle and the nature of changes being implemented. However, these are being regularly reviewed and there is confidence that savings target can be achieved by year-end.
- The two green ratings indicated on report anticipated to be delivered by yearend.
- Monitoring work is ongoing on the amber ratings to ensure full savings target are met, with update on these to be provided early in the New Year.

The following were among the main points made in response to Members' questions:

- In response to what was being done to get a more informed estimates on Adult and Social Care (ASC), Finance officers stated that while acknowledging issues around Oracle as a source of information, there was access to other sources to help inform the work being done to meet savings targets and monitor budget areas such as payroll/vacancy management. There was confidence currently that savings can be made by year-end on the amber ratings. Fees & Charges are a bit more difficult to forecast, but we are still confident of the monitoring in place to help ensure we meet saving targets by year-end.
- Transformation Fund savings was on course to be delivered, with a couple of areas of savings to work through within the system. A much clearer picture should emerge by Q3.
- In response to concerns about ability to make savings by Q3 especially considering the information tools e.g., Oracle that officers are working with. In response, officers stated that they had other sources of information they can use to get robust information that feed into Oracle e.g., activity data and other sources to help manage vacancies and other spend.
- In response to the Adult Transformation Programme fund and the different components within these, officers said that they will work on providing a clearer picture of the various components within the fund to give the best possible figure in future reports. Prof. Graeme Betts informed the meeting that there was confidence that work is on track to deliver on savings.
- In response to question on which of the amber rated savings could give most concern, officers indicated the vacancy savings is within the grasp of officers. There is also scope to re-prioritise if necessary. For Adult Transformation savings, this was a case of keeping a close eye and maintaining robust monitoring.
- Officers stated that reversal of savings have been removed and lots of manual
 efforts have been put in data cleansing which is helping with monitoring and
 budget setting to counter Oracle issues. Also, lots of information on Health and
 Social Care comes from third party systems, so the team is able to capture
 some of the data from these
- The Overview and Scrutiny Manager referred the Committee to section 1.3 of the cover report on research the Scrutiny team was doing on the work of authorities who are similar situation as currently experience by BCC. Key themes from engagement with these authorities were; refocusing work programme on budget recovery plans, savings and improvement plans; scrutiny committees playing important roles in the process; and member training was key component to the process.

RESOLVED

That the Committee notes the Quarter 1 2023/24 savings set out in Appendix 1.

That the Committee note the update for Q2 / Q3 attached as Appendix 2 and notes progress on delivery of the 2023/24 savings within the remit of the Committee's terms of reference.

That Finance officers provide a clearer picture of the various components within the Adult Transformation Fund to give the best possible figure in future reports.

That the Committee notes reassurance from the Strategic Director, Adult & Social Care and Finance team that there was confidence that work is on track to deliver on savings by year-end.

7. HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ACTION TRACKER.

The Interim Scrutiny Officer updated members that all actions from the Action Tracker from the last meeting was for noting.

In response to question on the recent CQC pilot inspection and when report on this was due, it was stated that November could be the likely date, but this was yet to be confirmed as CQC are likely to publish all pilot reports at same time. Further update on this will be provided as soon as there is confirmation from CQC via the Adult & Social Care Team.

RESOLVED

That the Committee note updates on actions from the previous Health and Social Care Overview and Scrutiny Committee meeting.

8. DEVELOPMENT OF THE CREATION OF AN ACTIVE BIRMINGHAM STRATEGY AND SPORTS STRATEGY.

Officers from the Public Health Physical Activity Team and the Sports and Activity team introduced the report/ presentation. Key points made to the committee are:

- There is a key focus in getting people to be more active at least 30 minutes a day, this level of activity has significant benefits for adults.
- The Creating an Active Birmingham Draft strategy is due to be taken to cabinet and hoping to secure approval on 14th November 2023. There will then be a public consultation commencing from 20th November. This will focus on 5 key priority areas: Active People, Active Environment, Active Society, Active Systems and Closing the Gap. Stakeholder engagement has taken place looking at various data to help inform strategy. Also, a citizens panel will be established involving citizens to input into the strategy as it moves into implementation in May 2024.
- Key aims for both the Creating an Active Birmingham Strategy (previously known as the Physical Activity Strategy) and the Sports Strategy were to improve overall physical well-being of citizens as an important part of the Commonwealth Games Legacy. It is critical that the two strategies are aligned.

- Consultants Knight, Kavanagh and Page (KKP) have commenced work on behalf
 of the Council in April 2023 to support the council in delivering the Sports
 Strategy. This is currently in the consultation phase, with 30 clubs, sports and
 community organisations already engaged with. There is a huge piece of work
 involved in carrying out desktop analysis, such as looking at data available from
 Sport England.
- There has been engagement with national governing sports bodies such as Sports England on how we can work with them, and with primary and secondary schools' sector. Information from these engagement activities will contribute to the delivery of a key issues paper towards developing strategy by April/May 2024.
- Public Health and Sports Teams are working closely to ensure synergy of milestones, towards implementation of both strategies in May 2024.

The following are among the main points made in response to Members' questions:

- The team will be utilising existing infrastructure by collaborating with existing
 partners and Locality Network leads to connect and engage with people who
 are likely not to be involved in physical activity. Some money had been used to
 develop some brochures which will direct people to questionnaires that they
 can complete.
- In terms of investment in parks, the officers have engaged with the Parks Lead and understand that models of investment are being explored to bring money, such as working with businesses with different funding streams.
- In response to why there are two strategies, this is because physical activity is aimed at those who are inactive and not involved in any activity. Officers from the Public Health Physical Activity Team and the Sports and Activity team introduced the report/ presentation. Key points made to the committee are the Sports strategy will focus more on people who are already active, who could become more active and are likely to become involved in sporting activity. Additionally, the Sports strategy addresses the improvement of sporting assets, and how they are used such as sport-related buildings and sporting fields. There are conversations held with people from separate sectors and we work closely in bringing these together.
- Playing fields strategy is due to be signed off by cabinet soon and this could serve as a template for investment.
- On paying for the Sports Strategy consultancy, this was due to lack of resources and expertise internally in the Sports Team to develop strategy in line with national standards.
- The 'Closing the Gap' priority area in the Creating an Active Birmingham Strategy will help ensure engagement of groups identified as 'inactive' and 'seldom heard' such as women in maternity/post-natal, those living with autism as well as others with an impairment or disability. Accessibility for people with impairment or disability is an important focus and the team is working with the Disability Forum on engagement with Sports strategy.

- The Assistant Director (AD), from Public Health team emphasised the importance of play in the discourse around physical activity, in relation to children, and that this should not be underestimated alongside sporting activity.
- Education settings could do more to support physical activity and will be actively involved in the strategy action plans.
- In terms of wider citizen engagement, there will be a virtual citizens' panel set up as well as opportunities to be involved in various working groups.
 Public Health also work with communities of interest as well as across localities. The team would be happy to come back to the committee to demonstrate how impairment has been structured into the strategy to ensure inclusion.
- Grassroots sports programme can help bring in 'minority' sports e.g., having better standard basketball courts across the city.
- People living with serious long-term mental health will also be engaged with and involved in physical activity through the Be Active Plus.
- There is the need for the strategy to focus on the 'functional', day-to-day activities people can do as physical activity, such as carrying shopping bags from the car and walking to bus-stops. For people to do this, it will be important to ensure streets and environment are safe. Lifestyle improvement and creating the right environment to encourage people to be more active.
- The state of sports field in the city needs to be addressed as protection of sports assets helps create more access to regular sports and physical activity.
- The Creating an Active Birmingham Draft strategy will be in the public domain on 20th November. To be circulated to committee to disseminate accordingly.

RESOLVED:

- For Committee to note the work being carried out to create both Strategies and the alignment between the two.
- For a further response to the Legacy Report, which will not be ready until implementation plan is launched, officers will come back to Committee in April 2024.

9. ACCESS TO COMMUNITY DENTAL SERVICES IN BIRMINGHAM

Rebecca Woods and Tracey Harvey from Office of the West Midlands Integrated Care Board (ICB) which supports the 6 West Midlands Integrated Care Boards, presented their report on access to community dental services in Birmingham. Also present was Paul Sherriff, Chief Officer, Partnerships and Integration at NHS B/Sol ICB. Rebecca Woods began by giving an overview of key messages from the report and presentation:

- All ICBs across the West Midlands are performing well in terms of Units of Dental Activity (UDA) delivery.
- 4 dental contracts under-performing (Kitt Green, Small Heath, Selly Oaks and Acocks Green). This was due to challenges in areas such as workforce/recruitment issues and ill-health.
- Information for B/Sol and Black Country are combined to extract data for Birmingham (based on 24-month look-back period). Boundary changes came about in October 2022, and since then there has been slow disaggregation of data in helping to provide a more Birmingham-related footprint.
- 168,000 contacts lost since 2020, creating significant patient gap over a 24-month access period. Again, this was due to workforce shortage.
- Prevention work and health improvement programmes being put in place to mitigate access to dental services.
- Current work is on commissioning around contracts, with focus on the most vulnerable such as children. New investment scheme about to be introduced to target patients and improve access to dentistry. The ICB is working closely with Local Dental Network covering Birmingham to continue to identify areas of investment.

The following are among the main points made in response to Members' questions:

- The Office of the West Midlands ICB is looking to be more engaged with the work of local ICBs across the midlands. Members would like supplementary briefing note on this new structure, (Office of West Midlands hips and ICB), to have more of an understanding of its work regionally and locally. It aims to have better collaboration of the 6 ICBs across the West Midlands. Working relationships are being developed to ensure shared understanding across various work areas, including dental health.
- In response to health equity and population health in relation to dentistry, data
 on this can be provided to the committee, through the Health Equity Audit
 currently ongoing. The Audit will inform the strategy in the future to ensure
 more equitable access. The Audit report is due in the New Year.
- The issue of shortage of NHS dentists continues to be a concern impacting on the dental health of the local population. The ICB recognise that the lack of patient registration for dental services is a challenge due to the way contracts are structured. Capacity of dental practices need to be utilised in a different way, hence process of recommissioning of practices locally.
- There is adequate training of NHS dentists. The issue is when they are trained, they move to the private sector. The national workforce plan is proposing a tie-in period so that if trained NHS dentist exit after training, they will pay back training costs. Also, the ICB is currently exploring investment in incentives to help professionals feel part of the NHS to want to stay on.
- The Assistant Director (AD), Public Health, informed the meeting that Public Health has commenced an Oral Needs Assessment covering B/Sol which will

cover all aspects of oral health and not just dental for adults as well as children. There will be a focus on prevention, diet, and lifestyle improvement to oral health. Report should be out by next spring.

- On the process of accepting new patients' and frustrations people are experiencing in trying to access dental care, this has been a major challenge locally and nationally. There is now a contractual requirement for dentists to update their status details and information on the website as this is the access point for people. Dentists are being contacted to remind them of this requirement. There is acceptance within ICB that there are many issues to be looked at in terms of contract structure and how it is currently meeting demand for oral improvement and delivery of dental activity. Work is ongoing at national level on what dental contract activity should look like.
- There is not much that can be currently done locally to make changes to the contract requirements as this is a national contract. However, there are considerations to look at local population need for Birmingham and how we can explore this further to adequately meet local demand.
- ICB in contact with frontline GP dental services to seek views on what the challenges are for them in relation to contract and service delivery, and building a shared understanding of how these can be resolved.
- National dental contract reform still under consideration. The first stage of the reform looked at changes to band 2 payments about a year and a half ago. ICB are awaiting the next stage of the reform to be announced.

RESOLVED

- That the Committee note the report.
- That the Committee be sent a supplementary briefing note of the structure and remit of the Office of the West Midlands Integrated Care Board (ICB).

10. HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME UPDATE (2023/24).

The Interim Scrutiny Officer provided an update report on the proposed work programme for the Health and Adult Social Care Overview and Scrutiny Committee for 2023-24. Key updates and proposals are:

- For the November meeting, a Birmingham/Solihull (B/Sol) JHOSC members' briefing on UHB Culture Review with Jonathan Brotherton, CEO UHB is scheduled for 10th November.
- Day Opportunities Review item scheduled for November will now be brought to the committee in December. This was due to Spending plans impacting on activities by Red Quadrant limiting what can be updated in November. A fuller report will be provided at the HASC meeting coming up in December on all activities that has taken place and next steps.

- The B/Sol Integrated Care Board (ICB) would like to present a draft report on Urgent Treatment Centres (UTCs), with focus on access/availability, to the committee. This will come to the next committee meeting in November, in place of the Day Opportunities Review item.
- Apart from the standing item on budget plans and financial recovery, the main agenda items for the next meeting in November will be NHS/ICB themed – Urgent Treatment Centres and Quality Report from ICB.
- On the point made about December agenda being potentially busy, officers will keep an eye on this and monitor accordingly.

RESOLVED:

That the Committee:

- Notes the updates and changes to the Work Programme for November December 2023.
- Agree, subject to further input from the Chair and Deputy Chair, the issues that the Committee will consider in November - December 2023, the proposed aims and objectives and the preferred method of scrutiny.
- Notes, subject to further input from the Chair and Deputy Chair outside of the meeting, its proposed work programme update will be submitted to Co-ordinating O&S Committee, to enable work to be planned and co-ordinated throughout the year.

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

None.

12. OTHER URGENT BUSINESS.

None.

13. AUTHORITY TO CHAIRMAN AND OFFICERS

RESOLVED: -

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

The meeting ended at 12.12 hours.