

BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

1400 hours on 21st July 2020, via Microsoft Teams – Actions

Present:

Councillor Rob Pocock (Chair), Mick Brown, Diane Donaldson, Peter Fowler, Mohammed Idrees, Ziaul Islam, Zaheer Khan and Paul Tilsley.

Also Present:

Mark Astbury, Finance Business Partner, Adult Social Care.

Andy Cave, Chief Executive Officer, Healthwatch Birmingham.

Councillor Debbie Clancy

Maria Gavin, Assistant Director, Quality and Improvement, Adult Social Care.

Councillor Paulette Hamilton, Cabinet Member for Health and Social Care.

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office.

Gail Sadler, Scrutiny Officer.

Dr Justin Varney, Director of Public Health.

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. DECLARATIONS OF INTEREST

None.

3. APOLOGIES

None.

4. ACTION NOTES/ISSUES ARISING

The action notes for the meeting held on 16th June 2020 were agreed.

17th March meeting – Outstanding Actions

Permission to consult on the Birmingham Drug and Alcohol Strategy (Triple Zero City Strategy)

Dr Marion Gibbon to ask the Public Health Evidence Team if geographical data on substance misuse on a ward-by-ward basis city-wide can be provided.

Scoping of the Infant Mortality Review

Dr Marion Gibbon to provide geographical data on infant mortality city-wide, and if possible also mapped against air pollution emissions.

The evidence relating to both outstanding actions was circulated prior to the meeting and members were asked to identify gaps in the evidence presented in the draft reports. It was agreed that, due to the lateness of the reports, that they should be noted and that:-

- The Drug and Alcohol Strategy data is discussed at the next meeting.
- The Infant Mortality data to be taken into consideration when gathering evidence for the review.
 - As further evidence to the infant mortality data, the Chair asked for a map of the deprivation/housing/living conditions and health inequalities mapped against infant mortality across the city.

16th June meeting – Outstanding Action

COVID-19 Update – West Midlands Care Association

Questions that had arisen from the presentation had been sent to Debbie Le Quesne (WMCA) and Alison Malik (BCC) and a response would be circulated to members upon receipt.

5. FINANCIAL OUTTURN 2019/20 – ADULT SOCIAL CARE

The Resources O&S Committee had received the Financial Outturn figures for the City Council at their 18th June 2020 meeting which contained a number of underspends in the Adult Social Care budget. Therefore, this committee was invited by Resources O&S Committee to look into the detail behind those figures.

Councillor Paulette Hamilton (Cabinet Member for Health and Social Care) and Mark Astbury (Finance Business Partner, Adult Social Care) presented a paper which set out the figures and areas of activity within the Directorate which had resulted in underspends. This was to assure members that the underspends were not a result of displacement activity i.e. not deliberately underspending on service users care provision in order to offset an overspend elsewhere.

The underspend on packages of care were primarily related to older people's services and there were several factors that led to that underspend:-

- Reduced the amount set aside for bad debt.
- Underspent against the rollout of framework pricing.
- Implementation of the 3 Conversations Model.

There were also underspends in the following service areas:-

- Learning Disabilities.
- Mental Health.
- Physical Disabilities.

This was largely due to an increase in the number of direct payments and a reduction in the number of residential placements and service users receiving a purchased home support package.

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

- The shift from purchasing packages of care to direct payments allows the service user more freedom to choose the services and package of care that they want. It is not the intention to lower the standard/quality of care. The efficiency is in the flexibility not in a reduction in the quality of care that an individual receives.
- Clarification was sought on how the bad debt figure was calculated.
- The underspend on Framework Pricing was a one-off in-year saving. It had been assumed that it would be rolled-out on 1st April, but it took several months and was rolled-out throughout the year.
- Concern was raised about whether there was too much of a shift towards 3 Conversations Model and whether it was appropriate for the upper age range of the older people client group.
- There are strict controls in place to continually monitor the use of a direct payment which is also subject to an annual financial review. There is an agreed support plan in terms of what an individual will use their funding for and how they will ensure their care needs are met. Any financial issues which arise from the monitoring process would be addressed by the social worker. The service user also has the right to withdraw from direct payments and request an assessed package of care.

RESOLVED:

- The committee is reassured that there did not appear to have been a shortfall in services as a result of the underspend.
- The topic of Direct Payments is added to the work programme. There is a corporate objective to increase direct payments. The committee would like a report setting out both the benefits and also risks associated with the move from purchased care packages to direct payments.
- The topic of the 3 Conversations Model is discussed at another meeting in order for the committee to gain a detailed description of the process.

6. COVID-19 UPDATE

Cabinet Member for Health and Social Care

Councillor Paulette Hamilton thanked the committee for the support she had received during the Covid-19 outbreak.

Councillor Hamilton explained the work that had been undertaken to develop a Local Outbreak Engagement Plan which sets out a framework for coordinating and collaborating across local partnerships in the event of a second wave or any outbreaks. The plan was being overseen by the Covid Outbreak Engagement Board, which has cross-party representation and Chaired by the Leader, and is a sub-group of the Health and Wellbeing Board.

The Cabinet Member also referred to the impact of Covid-19 on mental health and wellbeing and how the effects of lockdown are yet to be fully realised in society. She referred to partnership working between Birmingham and Solihull CCG and the city council and online resources promoting help and support for mental health in the city e.g. organisations like MIND.

Update from Public Health

Dr Justin Varney gave an overview of the current Covid-19 situation across the city. He said numbers had risen slightly during the last week spread out across the city and, predominantly, in working age adults i.e. 20-40-year-old age group. In the areas that have more than 5 cases there were links to where 3 or 4 households, from the same family, have socialised with each other. Dr Varney also praised business owners for acting responsibly and reporting cases of employees testing positive in order to get the right advice for staff and customers.

Referring to the situations in Leicester and Blackburn i.e. those areas that have moved into a local lockdown or a local pre-lockdown, Dr Varney said he had agreed a framework with the Chief Executive and Gold Command which was RAG (red, amber and green) rated based on thresholds of where Birmingham would need to be to move from the current green stage to amber and red.

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

- The local authority is empowered to take the decision to go into local lockdown. Therefore, in the current emergency situation that would be a Gold Command decision taken in conversation with the Leader and Councillor Hamilton as the Cabinet Member. A weekly meeting has been set up between the Leader, Chief Executive, Councillor Hamilton and Dr Varney to establish the current situation in Birmingham and prepare should lockdown become a reality.
- Concern was expressed about the forthcoming Eid Festival and getting the message across about taking precautions to avoid catching or spreading the infection. Dr Varney said a lot of work was being done to reduce the risk of people catching Covid-19 e.g. focussing on people who have long term conditions like diabetes and launching a new public health campaign called

‘Be Healthy’ to encourage people to get healthier before the second wave which is predicted around October/November.

- Councillor Hamilton has asked for a report on details relating to hospital patients being discharged into care homes and outbreaks of Covid-19.
- Responding to a query regarding any further update on black, Asian and minority ethnic (BAME) communities who have disproportionately suffered from Covid-19, Councillor Hamilton said evidence appeared to show that this was partly due to health inequalities, multi-generational households, underlying health conditions and people presenting late at hospitals because had tried home remedies in the first place.
- In response to a query about how decisions taken by the Outbreak Engagement Board would be communicated, Dr Varney shared a Governance Map of how the various Boards/Sub-Groups that have been established relate to each other.
- Testing Sites in Birmingham – There is a walk-through pilot testing site on Villa Street, Newtown. There are three mobile testing sites in the car parks at Brewery Street Coach Station, Moseley Rugby Football Club and Birmingham City Football Clubs. There are no authorised testing sites located inside buildings.

RESOLVED:

Dr Varney to circulate:-

- Slide set on ‘Test and Trace’ to Councillor Debbie Clancy.
- Information on location of testing sites.

Healthwatch Birmingham

Andy Cave presented an overview of what had been learned from an online survey conducted during Covid-19 and activities undertaken by Healthwatch Birmingham during the pandemic.

The survey was shared across health and social care through providers and commissioners and partners in the third sector. In addition to the survey, Healthwatch continued to hear feedback around health and social care services via their Feedback Centre and through the Information and Signposting Services. All of the information received was combined and the data analysed. Key issues that came to light during the survey were immediately raised with providers and commissioners to ensure that any gaps in provision were addressed.

Resulting from information received, three further areas of work have been identified:-

- BAME inequalities and looking at specific population groups within the BAME communities;
- To hear from people in residential care, and
- To hear from people with learning disabilities.

Moving forward working with health and social care to ensure the citizens voice is heard and Healthwatch can influence the level of involvement through restoration and recovery of services and in the redesign of services.

The data Healthwatch has collected, in addition to data from the Public Health survey and the CCGs, provides a more comprehensive account of what has happened in the city especially around the BAME communities and this information will be fed into the Health and Wellbeing Board.

RESOLVED:

Any members who have questions on the presentation should email them to Scrutiny Officers to forward to Andy Cave for a response.

7. 2019/20 END OF YEAR ADULT SOCIAL CARE PERFORMANCE MONITORING REPORT

Maria Gavin (Assistant Director, Quality and Improvement, Adult Social Care) Maria presented the end of year 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.

The information on the 5 key indicators related to March 2020 apart from Delayed Transfers of Care (DTOC) which has a different reporting cycle and relates to February 2020.

DTOC – Showed a slight improvement on the January data. During Covid-19 the data has not been collected. Central Government instructed health and social care to implement a Covid-19 Discharge Service from hospital - 'Discharge to Assess'. The impact of this saw delays drop between 40-60% in March.

Reviews completed in last 12 months – Performance dropped for several reasons including Covid-19 and the introduction of easements. Review plans are also linked to the introduction of Customer Journey and that was put on hold but has now recommenced.

Direct Payments – Has continued to increase and now the city council is in the top quartile nationally mainly due to the implementation of the 3 Conversations Model.

Shared Lives – Has improved by 25% this year.

Learning Disability and Employment – Temporarily suspended during Covid-19 as it was not possible to put people in work placements and higher education. The service has been adapted to run as an online support service and work is underway to see how the service will continue to support people into employment post-Covid.

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

- Members commented positively on the achievement of having a key indicator in the top quartile nationally and also the improvement in the shared lives indicator but concern over the lower level of reviews carried out.
- Concern was also shown over the data that was being presented from March i.e. 3-4 months out of date. Members were told that due to the governance procedure there is a delay before the data is presented to Scrutiny.

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

None.

9. OTHER URGENT BUSINESS

The Chair informed members that Rose Kiely (O&S Manager) would be leaving the council at the end of August. On behalf of the HOSC, he thanked Rose for her guidance and support and wished her well for the future.

10. 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.

11. DATE AND TIME OF NEXT MEETING

The Chairman confirmed that the next meeting would take place on 1st September 2020.

The meeting ended at 1620 hours.