

# **BIRMINGHAM CITY COUNCIL**

## **HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE**

**TUESDAY, 07 MAY 2024 AT 10:00 HOURS**  
**IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA**  
**SQUARE, BIRMINGHAM, B1 1BB**

### **A G E N D A**

#### **1 NOTICE OF RECORDING/WEBCAST**

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Public-I microsite ([please click this link](#)) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

#### **2 DECLARATIONS OF INTERESTS**

Members are reminded they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting.

If a disclosable pecuniary interest is declared a Member must not participate in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If other registerable interests are declared a Member may speak on the matter only if members of the public are allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If it is a 'sensitive interest', Members do not have to disclose the nature of the interest, just that they have an interest.

Information on the Local Government Association's Model Councillor Code of Conduct is set out via <http://bit.ly/3WtGQnN>. This includes, at Appendix 1, an interests flowchart which provides a simple guide to declaring interests at meetings.

3 **APOLOGIES**

To receive any apologies.

**5 - 10**

4 **MINUTES OF COMMITTEE MEETING ON 9TH APRIL 2024.**

To confirm and approve the minutes from the meeting held on 9th April 2024.

5 **COMMISSIONER'S REVIEW AND COMMENTS ON THE AGENDA (10.05HRS)**

Due to late approval from the Commissioners, the report was unable to be published with the agenda on Friday 26 April 2024. However, the chair has confirmed that the report can be considered at the meeting and so this report has therefore been published as an item of Urgent Business.

**11 - 12**

6 **HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE ACTION TRACKER. (10.06-10.07)**

For Committee to note the actions from the previous Health and Social Care Overview and Scrutiny Committee meeting.

**13 - 24**

7 **INTEGRATED CARE BOARD (ICB) QUALITY ACCOUNT REPORT.**

For committee to receive the report for assurance of the quality assurance processes across the Birmingham and Solihull ICS systems and future plans.

8 **OTHER URGENT BUSINESS**

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chair are matters of urgency.

**25 - 58**

9 **HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE'S WORK PROGRAMME 23/24 (11.35-11.55HRS)**

Health and Adult Social Care Overview and Scrutiny Committee Work Programme 2023-24 review, in the context of the Council's improvement and recovery priorities.

**59 - 102**

10 **CREATING A MENTALLY HEALTHY CITY FORUM - OBJECTIVES & OUTCOMES**

To provide an overview of the Creating a Mentally Healthy City Forum and the plans for developing a 'Creating a Mentally Healthy City Strategy'.

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

To consider any request for call in/councillor call for action/petitions (if received).

12 **DATE OF NEXT MEETING**



# **BIRMINGHAM CITY COUNCIL**

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

### **PUBLIC MEETING**

**Tuesday 9<sup>th</sup> April 2024. Committee Rooms 3&4,**

**Council House, Victoria Square**

#### **Minutes**

##### **Present**

Councillors Mick Brown (Chair), Kath Hartley, Gareth Moore, Julian Pritchard, and Paul Tilsley

##### **Also Present:**

Alan Butler, Associate Director, Delivery, Improvement & Urgent Emergency Care (UEC)

Faith Button, Chief Delivery Officer, Birmingham & Solihull, Integrated Care Board (ICB).

Fiona Bottrill, Senior Overview and Scrutiny Manager.

Councillor Barbara Dring, (Oscott Ward)

Lorraine Donnelly, Resident (Perry Barr)

Adewale Fashade, Interim Scrutiny Officer

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#### **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 and that Members of the press/public may record and take photographs except where there were confidential or exempt items.

#### **2. APOLOGIES**

No apologies received.

### **3. DECLARATIONS OF INTEREST**

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

### **4. MINUTES – 23<sup>RD</sup> JANUARY 2024**

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

### **5. COMMISSIONER'S REVIEW AND COMMENTS ON AGENDA**

The Commissioner had agreed that reports could be published without comments.

### **6. INTEGRATED CARE BOARD UPDATE ON THE TEMPORARY LOCATION OF WARREN FARM URGENT TREATMENT CENTRE (UTC) TO ERDINGTON**

The Chief Delivery Officer Birmingham and Solihull ICB and Associate Director of Delivery were in attendance to present the latest update on the temporary relocation of Warren Farm UTC to Erdington. Key points highlighted were:

- Since the January (2024) meeting, relocation plans have been in place and staff have been engaged with. Relocation plans and site changes have been submitted to Care Quality Commission.
- The remaining task was the installations to be done by external contractors and related work to ensure safety and security. This was now underway. The move may run into May due to digital installation delays. As a result, there was a risk of missing the April schedule opening month. Weekly inspections were ongoing to ensure safety.
- The next steps would be to roll out accessible communications so that patients and all relevant stakeholders would be fully updated about the 'go-live' date and work leading to this.
- It was emphasised that the relocation move was on a temporary and emergency basis. This was expected to last for up to 12 months in order to safeguard the ICB's number one priority – patients and staff safety.
- The Urgent Treatment Centre (UTC) urgent review was now underway to determine the effectiveness of UTC service provision.

The following were the main points made by the ICB representatives in response to Committee Members' questions:

- In response to whether capital approval had been given for reconstruction of Warren Farm with a view to moving back there, the Associate Director, Delivery, Improvement & Urgent Emergency Care said not at this stage as the focus during the relocation was on carrying out overall review of all UTCs in Birmingham and Solihull. This would start over the next month. As a result, work has not begun on the capital approval of the contract.

- It was emphasised that relocation programme including options appraisals for UTC including Warren Farm would run in parallel.
- Work undertaken so far at Warren Farm was to keep the site safe while carrying out relocation plans to its temporary location.
- Estates team responsible for plans to keeping the building safe and information on plans from them on safety would be circulated to members. This would include information on the Reinforced Autoclaved Aerated Concrete (RAAC) situation on other UTCs.
- It was emphasised that there was the need to carry out options appraisal and this must be completed before the Trust was clearer about the future of Warren Farm UTC.
- In response to a question regarding clarity on the timeline to inform people of the 'go-live' date, appropriate communications would be published in the next 7-10 days to inform patients and stakeholders.
- In response a question regarding the costs of making Warren Farm safe and the impact of relocation costs. the Committee was informed that how UTCs can be best utilised to benefit population needs would come out more in the overall review. In terms of patients' data (e.g. how far they were travelling) and how they would be accessing UTC provision, ensuring the way UTCs would be accessed in a timely manner would be monitored to ensure improvements where required. The Trust would also look to gather data on the patient experience and consider feedback to better understand patient access needs.
- There would be signage outside Warren Farm to re-direct people to the temporary location. Information would also be available on 111.
- The engagement on the whole UTC agenda will commence soon after early May (after the local elections). Plans for engagement would be shared with HASC committee members.

At this stage, Cllr. Brown invited Cllr. Dring to ask the Integrated Care Board (ICB) representatives a question on behalf of constituents seeking clarification on what was happening with Warren Farm and whether it would be the Integrated Care Board's decision in keeping Warren Farm or would the NHS also be involved in the decision. A resident, Lorraine Donnelly, also attended with Cllr. Dring.

The ICB representatives made the following points in response:

- It was reiterated that the purpose of UTCs was to relieve the pressures on hospitals and cope with patient demand. The proposed UTC review would be important to be able to scope the sustainability of UTC service provision that meet population needs and demands, and to ensure that the service was fit for purpose in taking demand and pressure from hospital Accident & Emergency departments.
- In a further response on patient accessibility concerns expressed by a resident present at the meeting, well-being and safety of patients would always come above costs, and safe access would always be a priority for all UTCs including at this new relocation premises. If there were any concerns on accessibility identified during this temporary move, this would be addressed accordingly.

## **RESOLVED:**

- Noted the progress made so far on the relocation plans, with possible move date in May pending completion of installations.
- That information on possible Reinforced Autoclaved Aerated Concrete (RAAC) in other Urgent Treatment Centres (UTCs) be circulated to committee members.
- That information on the Estates team assessment on safety issues of the building at Warren Farm, including the percentage of the roof affected by RAAC be circulated to the Committee.
- Information on the review of UTCs to be circulated to the Committee.

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

The Interim Scrutiny Officer updated members on the HASC Action Tracker from the last meeting:

Active Birmingham strategy – the implementation plan was to be launched this month. Key actions on this would be brought to a future meeting.

Committee members' visit to University Hospitals, Birmingham sites was scheduled for 1<sup>st</sup> May 2024 and the itinerary had been shared with members.

### **RESOLVED**

- The Committee noted updates on actions from the previous Health and Adult Social Care Overview and Scrutiny Committee meeting.

## **8. HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 23/24**

The Overview and Scrutiny Manager confirmed the main agenda items for the next meeting in May:

- The Integrated Care Board (ICB) Quality Report.
- Mentally Healthy Birmingham Project.
- Memorandum of Understanding (MOU) on the new Health Regulations process; a draft to come to the committee.

The committee agreed that the Task and Finish Group meeting recommendations on the savings delivery plans agreed as part of the budget scrutiny, go to the Coordinating Overview and Scrutiny (O&S) Committee.

In response to a question on the Day Opportunities report that had recently gone to Cabinet, the Chair had been consulted and expressed disappointment that his request for committee members to be consulted on the issue was not accepted. Members reiterated that it was important for the committee to feed into the report before cabinet decision on Day Opportunities.



## **RESOLVED**

- The Committee noted the Work Programme as set out in Appendix 1
- The Committee agreed, subject to further input from the Chair and Deputy Chair, the issues that the Committee will consider in May, the proposed aims and objectives and the preferred method of scrutiny.
- The Committee agreed, subject to further input from the Chair outside of the meeting, its proposed work programme will be submitted to Co-ordinating OSC
- The Committee agreed that any recommendations from the Savings Delivery Task and Finish Group would be reported to Co-ordinating OSC

### **9. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)**

None.

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

None.

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The meeting ended at 10.50 hours.



**HEALTH & ADULT SOCIAL CARE OVERVIEW & SCRUTINY COMMITTEE ACTION TRACKER – 2023/24.**

| <b>Date of Meeting</b> | <b>AGENDA ITEM</b>  | <b>ACTIONS</b>   | <b>Lead Officer</b>  | <b>Update/Outcome</b>   |
|------------------------|---|--|--|---|
| 23/01/2024             | <b>BLACHIR (Birmingham &amp; Lewisham African Caribbean Health Inequalities Research) project</b> | BCC BLACHIR team and partners to continue to update the committee on outputs and outcomes from implementation activity and actions.  | Helen Harrison AD, Health Behaviours & Communities BCC<br><br>BLACHIR Team BCC.  | Committee requested the BLACHIR team attend a future meeting (in 24/25) to provide feedback on community engagement programme |
| 09/04/2024             | <b>Warren Farm Relocation Plans and B/Sol Trust-wide UTC review</b>                               | Estates team assessment on safety issues of the building at Warren Farm, including the percentage of the roof affected by RAAC be circulated to the Committee.<br><br>Information on possible RAAC in other UTCs be circulated to committee members.<br><br>Information on the review of UTCs to be circulated to the Committee. | Faith Button, Chief Delivery Officer, ICB<br><br>Alan Butler, Associate Director, Delivery, Improvement & Urgent Emergency Care (UEC). | Information received from NHS/ICB and circulated to Committee 26 <sup>th</sup> April  |
| 09/04/2024             | <b>MMR Vaccine/Measles outbreak update</b>  | In response to recent measles outbreak, ICB and BCC Public Health to provide update information on the outbreak and on the vaccine take-up   |  | Information circulated to Committee members on 23 <sup>rd</sup> April.  |

|            |  |  |  |  |
|------------|--|--|--|--|
| 09/04/2024 | <b>Task &amp; Finish Group meeting on savings delivery plans</b> | <ul style="list-style-type: none"> <li>• On Savings 126 and 130 (Review of day care centre and care centre models); Members request further information on key milestones as the delivery of these savings progress.</li> <li>• On Savings 125 (Review of care packages), requested information on the range of services and support available to carers.</li> <li>• Section 139 (Review of Shared Live Packages); Members requested information about how Birmingham Share Lives uptake compared to other Core Cities.</li> <li>• Recommendation regarding impact of Adult Social Care savings on carers.</li> <li>• Recommendation that Leisure Services continue to monitor and update the equalities impact assessment and requested copies of the TAWS service specification and to be updated on the development of the systems approach to leisure services funding.</li> </ul> | <p>Louise Collett, Acting Director, Adult &amp; Social Care</p> <p>Maria Gavin, AD, Quality &amp; Improvement, Adult &amp; Social Care</p> <p>Temitope Ademosu, AD - Adult Social Care (Community services and EDI).</p> <p>Samantha Bloomfield, Finance Partner, Adult &amp; Social Care.</p> | Notes on recommendations to be sent to Coordinating Committee (for the May meeting), circulated to HASC committee members on 24 <sup>th</sup> April. |
|------------|--|--|--|--|

# Birmingham City Council

## Health, Adult and Social Care Overview and Scrutiny Committee

7<sup>th</sup> May 2024



**Subject:** Birmingham and Solihull ICS Quality Framework

**Report of:** Helen Kelly, Acting Nursing Officer, Bsol ICB

**Report author:** Helen Kelly, Acting Nursing Officer, Bsol ICB

### 1 Purpose

- To update Birmingham City Council Health, Adult and Social Care Overview and Scrutiny Committee on the ICB Quality Framework which has supported controlled interaction with multiple stakeholders and ensures that the ICB is sighted on major system quality risk, concerns, their mitigations, and controls.
- To provide updates of quality issues in relation to Learning from Lives and Deaths (LeDeR); Mental Health Provider Collaborative; and Working with regulators – University Hospital Birmingham NHS Foundation Trust (UHB)
- To share future plans to focus and develop oversight and assurance around clinical effectiveness, patient safety and experience to improve outcomes for the population we serve.

### 2 Recommendations

To receive the report for assurance of the quality assurance processes across the Birmingham and Solihull ICS systems and future plans to focus and develop oversight and assurance around clinical effectiveness, patient safety and experience to improve outcomes for Bsol citizens.

### 3 Any Finance Implications

None

### 4 Any Legal and Financial Implications

This Quality framework sets out how Birmingham and Solihull Integrated Care Board (ICB) will approach their statutory regulation for quality assurance and governance.

## **5 Any Equalities Implications**

Equity a key component of quality. Birmingham and Solihull ICS strive for equity of access, outcomes and experience

## **6 Appendices**

Appendix 1 - Birmingham and Solihull Integrated Care Board Quality framework update



Birmingham and Solihull  
Integrated Care System  
Caring about healthier lives

# **Birmingham and Solihull ICB – Quality Update**

Health and Adult Social Care Overview and Scrutiny Committee

7<sup>th</sup> May 2024

# Birmingham and Solihull Integrated Care System (ICS) Quality Framework

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## Quality Framework:

- Ensures that the ICB is sighted on major system quality risk, concerns, mitigations and controls.
- Assures NHS England (NHSE) of quality governance within the ICS.
- Provides the foundation for system working around quality – based on collaboration, trust, transparency and ongoing learning.
- Champions the need to ensure that quality is a shared goal that requires us all to commit and act whilst respecting organisational needs.

The Quality Framework does not change the statutory responsibilities of individual organisations, nor undermine their independence, but highlights the strategic importance of working together to measure, champion and drive improvements in quality.

## System Quality Group (SQG)

A weekly strategic, multi-stakeholder, system forum to share quality insight and intelligence, identify opportunities for improvement, and, on escalation, provide structured review and oversight of quality concerns. Levels of risk and concern, using a RAG rating (Slide 3) for risk and assurance drives discussion. Escalation and de-escalation mechanisms are established to guide proportionate oversight.

Members are: ICB Executive Quality Lead (chair), ICS partners, regional NHS England teams, Care Quality Commission (CQC), Health Education England, public health and Healthwatch.

The System Quality Group reports directly to both the NHSE Regional Quality Group (monthly) and to the BSOL ICB Quality Committee. The outputs and conclusions of this group are also reported to the BSol ICB Board.



## Quality Framework - RAG Rating Approach

| RAG Rating       | Focus   | Attendance  | Considerations  | Interventions   |
|------------------|---|---|---|---|
| Red - targeted   | Significant and serious concerns<br>Significant Quality Concerns – consider need to act rapidly to protect patients or staff.                             | Provider, ICB, CQC, NHSE, WTE, GMC, NMC & Healthwatch | Contractual, regulatory/ enforcement action and/or provide improvement support and performance management.<br><br><i>(including actions at amber and green)</i> | Consideration of embedded external support to provide direct improvement support, wider stakeholder visits for insight and assurance. |
| Amber – enhanced | Quality concerns identified.<br><br>Ensure action is taken to mitigate / resolve issues and drive improvement in quality.                                 | Provider, ICB, NHSE & Healthwatch                     | Do we need to do more to address concerns, or collect more information?<br>Provide improvement support<br><i>(building on green)</i>                            | ICB visit to agree practice standards with agreed audit.<br>Clear agreed actions.<br>Hold quality or practice summits.                |
| Green – routine  | Review quality of services; any concerns or risks to quality, ensure action is taken to mitigate resolve issues locally and drive improvement in quality. | Provider & ICB – <i>'business as usual approach'</i>  | Triangulation of information and intelligence   | Routine quality assurance, visits and audit.  |

Quality improvement support:

Quality Improvement Summit for deep dive into areas and tiered to levels of escalation. i.e. flow and discharge, mental health beds, workforce.

**Once quality concerns have been addressed return providers to a 'routine' level of surveillance.**

## CQC BSoI System Overview

|  | Well-Led             | Safe                 | Caring               | Effective            | Responsive           | Overall              | Date of Last Inspection                                   |
|--|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---|
| University Hospitals Birmingham NHS Foundation Trust   | Inadequate           | Requires Improvement | Good                 | Good                 | Requires Improvement | Requires improvement | 29 August 2023,<br>24-26 October 2023                     |
| Birmingham and Solihull Mental Health Foundation Trust   | Requires Improvement | Requires Improvement | Good                 | Requires Improvement | Good                 | Requires Improvement | 11 to 26 October/ 8-10 November 2022, 13-15 December 2022 |
| Birmingham Children's Hospital   | Good                 | Good                 | Outstanding          | Outstanding          | Outstanding          | Outstanding          | 5, 6 July 2022  |
| Birmingham Women's Hospital  | Good                 | Good                 | Good                 | Good                 | Good                 | Good                 | 22 March 2023   |
| Forward Thinking Birmingham<br>(Including Parkview)  | Requires Improvement | Requires Improvement | Requires Improvement | Requires Improvement | Requires Improvement | Requires Improvement | 22 August 2023,<br>23 August 2023                         |
| Birmingham Community Healthcare NHS<br>Foundation Trust<br>(Overall Trust)   | Requires Improvement | Requires Improvement | Outstanding          | Good                 | Requires Improvement | Requires Improvement | 13 January 2020 to<br>26 February 2020                    |
| Birmingham Community Healthcare NHS<br>Foundation Trust<br>(Community health services for children, young people and families) | Good                 | Good                 | Good                 | Good                 | Good                 | Good                 | 17 May 2023,<br>18 May 2023                               |
| Royal Orthopaedic Hospital   | Good                 | Good                 | Good                 | Good                 | Good                 | Good                 | 15 October to<br>17 October,<br>12 November 2019          |
| West Midlands Ambulance Service  | Good                 | Good                 | Outstanding          | Good                 | Good                 | Good                 | 15-17 August 2023, 3-5 October 2023                       |

## Operational Management of Quality

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The issues that have been received at SQG for oversight and assurance, which this report will focus on are:

1. Learning Disability and Autism – Learning from Lives and Deaths (LDA)
2. Mental Health Provider Collaborative
3. Working with regulators – University Hospital Birmingham NHS Foundation Trust (UHB)

## Learning from Lives and Deaths (LeDeR)

LeDeR is a national service improvement programme learning from the lives and deaths of people with a learning disability and autism (LDA). People with a learning disability die on average significantly earlier than the wider population. The ICB is responsible for making sure LeDeR reviews are undertaken for deaths in our system.

| System approach   | What's Next   |
|---|---|
| <p>BSol ICB undertook a total of 94 reviews over the past 12 months, which is an increase of 18 from the previous year. Of these reviews, six out of the 94 were for patients with autism only, the remainder were for people who had a learning disability. 75 of those reviews were for people who had died in hospital and there continues to be a disproportionate number of reported deaths for those from ethnic minorities, with only 31 of the 94 relating to non-white people.</p> <p>The LeDeR programme evaluates some of the reasons behind this health inequality and considers how we can deliver improvements in the quality of health and social care across our system. The key learning from the reviews in the last 12 months include:</p> <ul style="list-style-type: none"> <li>• Quality of annual health checks</li> <li>• Lack of consideration around how to utilise and consider the Mental Capacity Act</li> <li>• Consideration and timely support for people making choices about end of life care</li> </ul> <p>The 20 LeDeR priorities are well recognised throughout Birmingham and Solihull and we continue to strengthen our partnership working. The 2022/23 LeDeR annual report was produced in a cinema graphic, <a href="/programmes-work/leder">/programmes-work/leder</a></p> | <p>To ensure that the learning from the 20 key priorities are being reflected across Birmingham and Solihull, the ICB has commissioned the 'Capturing Change' project, where an independent organisation will be capturing the voices of those with lived experience, families and carers to understand the individual experiences. This will support the identification of areas which require further improvement work and inform future commissioning intentions.</p> <p>The ICB is working closely with the LDA Lead from BSMHFT to improve the reporting of deaths to the LeDeR programme for those patients who have autism only. This will give greater understanding of the lives of those patients who have autism and their experience of health services.</p> <p>The ICB is focussed on ensuring LeDeR learning is embedded and shared across the BSol system.</p> |

## Mental Health Provider Collaborative (MHPC)

| <b>System approach</b>   | <b>What's Next</b>   |
|--|--|
| <p>The Mental Health Provider Collaborative (MHPC) was formed in April 2023 and is hosted by the lead provider, Birmingham and Solihull Mental Health Trust.</p> <p>Over the last 12 months there has been a supported transition of quality oversight from the ICB to the MHPC ensuring that quality and safety concerns are shared promptly with assurance provided for both NHS and independent providers.</p> <p>The MHPC attends System Quality Group (SQG), providing a written report including quality assurance, improvements and concerns on all areas within their remit.</p> | <p>The Learning Disabilities and Autism Team will be transitioning to the MHPC in June 2024.</p> <p>There is continued work with the MHPC to develop and oversee a safe transition with quality and safety reporting via the SQG.</p> <p>Preparation is underway for quality oversight arrangements with the delegation of the specialised services portfolio from NHS England to the ICB in April 25.</p> |
| <p>In August last year, a mental health quality summit was held, and actions agreed including:</p> <ul style="list-style-type: none"> <li>- All Age Mental Health Strategy – which includes the work commenced on children and young people’s transformation, the associated clinical model, crisis pathway and escalation models, bed capacity and workforce.</li> <li>- Progress updates are received at SQG.</li> </ul>   |  |

## Working with Regulators – University Hospitals Birmingham (UHB) NHS Foundation Trust

| System approach  | Next Steps   |
|--|--|
| <p>System wide conversation through SQG with CQC, NHSE and other regulators to support UHB to meet CQC conditions:</p> <ul style="list-style-type: none"> <li>• The Section 29A Warning Notice in relation to the medical services at Good Hope Hospital.</li> <li>• The Section 29A Warning Notice in relation to the maternity services at Birmingham Heartlands Hospital.</li> </ul> <p><u>Good Hope Hospital (GHH) Medical Care:</u><br/> <i>Sufficient qualified, competent, skilled experienced staff to provide safe care and treatment to patients on all medical wards.</i></p> <ul style="list-style-type: none"> <li>• SQG receives written updates showing continued improvement to workforce position with structured measurement of the effects of staffing on patient care.</li> </ul> <p><i>Emergency Department ensure all safeguarding training is up to date in line with national guidance.</i></p> <ul style="list-style-type: none"> <li>• UHB have demonstrated improvements in response to CQC Safeguarding concerns in the Emergency Department resulting in de-escalation from SQG with monitoring via System Safeguarding Board.</li> </ul> <p><u>Birmingham Heartlands Hospital (BHH) Maternity</u><br/> <i>Pregnancy Assessment Emergency Room (PAER) operates is in place to support the triage process</i></p> <ul style="list-style-type: none"> <li>• In January 2024 comprehensive overview received. PAER has been renamed the Maternity Urgent Assessment Unit (MUAU) and the new MUAU opened in January '24. Daily compliance with time for patient triage reviewed on a daily basis demonstrating consistent improvement. Agreed de-escalation from SQG</li> </ul> | <p>SQG will continue to act as a forum for rapid escalation of concerns for wider stakeholder discussion and assurance in other areas when required.</p> <p>Monthly monitoring to continue through SQG.</p> <p>In relation to the CQC at Good Hope, discussions are taking place for UHB to make representations to CQC for removal of the CQC condition regulations with CQC.</p> |

## Summary

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BSol ICB has established a working framework to ensure that the ICB is aware of quality concerns and their mitigations, and to oversee and co-ordinate improvement where needed.

The Quality Framework works alongside provider governance and supported governance within emerging provider collaboratives, to ensure the oversight and assurance received is consistent. This approach, and System Quality Group in particular, has received positive feedback from regulators.

We will continue to focus and develop oversight and assurance to ensure clinical effectiveness, good quality services, patient safety and experience are in place to improve outcomes for the population we serve.





# Birmingham City Council

## Health and Adult Social Care Overview and Scrutiny Committee

Date: 7 May 2024



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**Subject:** Health and Adult Social Care Overview and Scrutiny Committee's Work Programme

**Report of:** Christian Scade, Head of Scrutiny and Committee Services

**Report author:** Fiona Bottrill, Senior Overview and Scrutiny Manager  
[fiona.bottrill@birmingham.gov.uk](mailto:fiona.bottrill@birmingham.gov.uk)  
07395884487

### 1 Purpose.

- 1.1 This report sets out the work programme for the Health and Adult Social Care Overview and Scrutiny Committee during 2023-24. Following the findings and recommendations from the independent Governance Review of the Council, and specifically recommendation 5, the Committee reframed its work programme to be aligned to the Council's improvement and recovery priorities.
- 1.2 Due to late approval from the Commissioners the report was unable to be published with the agenda on Friday 26 April 2024. However, the chair has confirmed that the report can be considered at the meeting and so this report has therefore been published as an item of Urgent Business.

### 2 Recommendations.

- 2.1 That the Committee
- 2.2 Notes the report.
- 2.3 Identifies potential issues for consideration at the first meeting of the municipal year in June 2024 subject to any decisions made by Co-ordinating OSC regarding the work programme.

### 3 Background.

- 3.1 The Committee's Terms of Reference is to fulfil its functions as they relate to any policies, services and activities concerning the development of Health and Wellbeing Board and relationship with NHS and private providers; social care services and safeguarding for adults; public health services; healthy living, and discharge of the

relevant overview and scrutiny role set out in the National Health Service Act (2006) as amended by the Health and Social Care Act (2012) including:

- The appointment of Joint Overview and Scrutiny Committees with neighbouring authorities

3.2 The Council's constitution and Committee terms of reference are being updated to reflect the 2024 Health Scrutiny Regulations that removed the Health Scrutiny power of referral to the Secretary of State. This has been replaced by the power for the Secretary of State to intervene in the reconfiguration of NHS services where there is a substantial variation or development in service.

3.3 The Committee is chaired by Councillor Mick Brown, and its membership comprises of Councillors Shabina Bano, Kath Hartley, Amar Khan, Gareth Moore, Julien Pritchard, Kath Scott and Paul Tilsey.

3.4 The [statutory guidance for local government overview and scrutiny](#) sets out the role it can play in holding an authority's decision makers to account. This makes it fundamentally important to the successful functioning of local democracy.

3.5 Effective Overview and Scrutiny should:

- Provide constructive 'critical friend' challenge.
- Amplify the voices and concerns of the public.
- Be led by independent people who take responsibility for their role.
- Drive improvements in public services.

3.6 The role and functions of Overview and Scrutiny Committees are outlined in [The City Council's Constitution | Birmingham City Council](#) They will:

- Make reports and/or recommendations to the full Council, the Executive and/or other organisations in connection with the discharge of the functions specified in their terms of reference.
- Consider any matter covered in their terms of reference that may affect or be likely to have an effect on the citizens of Birmingham; relevant to the Council's strategic objectives; relevant to major issues faced by officers in managing a function of the Council; and likely to make contribution to moving the Council forward and achieving key performance targets.

3.7 Effective scrutiny needs to add value. A well planned and timely work programme enables Overview and Scrutiny Committees to be involved at the right time and in the right way, and ensure their involvement is meaningful and can influence the outcome.

3.8 Members often have a number of topics suggested to them and are therefore required to **prioritise** matters for consideration. The Scrutiny Framework sets out the following factors to be considered:

- *Public interest*: concerns of local people should influence the issues chosen.

- *Ability to change*: priority should be given to issues that the Committee can realistically influence.
- *Performance*: priority should be given to areas in which the Council and Partners are not performing well.
- *Extent*: priority should be given to issues that are relevant to all or a large part of the city.
- *Replication*: work programme must take account of what else is happening to avoid duplication.

3.9 Each Overview and Scrutiny Committee identified a ‘menu’ of issues (including policy development, policy review, issues of accountability and statutory functions). Each Committee has then regularly reviewed their ‘menu’ and decided which issues needed to be examined further, and how that work would be undertaken. Committees have been advised to consider where they can best add value aligning to the Council’s priorities and improvement journey, and how it can prioritise topics for consideration based on the Scrutiny Framework referred to in paragraph 3.5 above.

3.10 There are a range of ways to undertake scrutiny. In line with statutory guidance from 2019, the approach for 2023-24 has enabled a more flexible scrutiny and outlined a shift from monthly formal meetings to a combination of approaches. The Committee has chosen the most effective scrutiny method to achieve the desired aims and objectives for each topic.

## **4 Outcomes from 2023/24**

4.1 During June 2023 – January 2024, the Committee considered the following topics:

- The CQC pilot inspection for adult social care to provide assurance regarding the preparation for the inspection and how the outcome of the pilot inspection would inform the Committee’s work programme.
- Integrated Care System Governance including how the principle of subsidiarity will be implemented in practice, the governance arrangements and how this links with Primary Care Networks and Local Authority locality working.
- The Task and Finish Group for the Children and Young People’s Mental Health Inquiry held evidence gathering meetings and agreed the report and recommendations that were agreed at City Council and the Health and Adult Care O&S Committee in January 2024.
- The ICB Primary Care enabling Strategy setting out how primary care will be prioritised in the delivery of health and social care in Birmingham.
- At the September, October and November meetings the Committee scrutinised the delivery of the 23/24 savings and financial recovery plans.

- Monitoring recommendations from the Scrutiny Inquiry on the Legacy of the Commonwealth Games
- Access to Community Dental Services to understand the issues relating to access to dental services in Birmingham and the impact this has on oral health.
- Access and Availability of Urgent Care Treatment Centres (UTC) in the City and consider options for the temporary relocation of Warren Farm UTC.
- ICB Quality Report informing the Committee of the Quality Assurance processes across the ICB systems and enable the Committee to prioritise system focussed quality reports to future meetings.
- Adult Social Care Performance monitoring
- Safeguarding Adults Board Annual Report to update the Committee on the adult safeguarding arrangements in the city
- Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR) to report on impact of implementation activity and actions within the ICS and BCC.

4.2 The Co-ordinating Overview and Scrutiny Committee on 15 December 2023 acknowledged the recommendations in the Governance Review of Birmingham City Council agreed by Cabinet on 12 December 2023. Recommendation 5 stated the need to reframe scrutiny work programmes on the Council's improvement and recovery priorities, and that alignment of work programmes should focus on:

- a) Having an active part in the 2024/25 budget development process.
- b) The safe and effective delivery of key services supporting vulnerable people.
- c) Critical performance issues emerging "by exception".
- d) Equality and equity issues arising from the development of the 24/25 Budget, the Emergency Budget (to be identified by exception), and other priority scrutiny activity relating to the Budget.
- e) Culture, behaviour change and organisational development.

4.3 On 20 February 2024, the Health and Adult Care Overview and Scrutiny Committee met informally to consider the developing Improvement and Recovery Plan and the findings and recommendations of the Governance Review. The Committee reconsidered its work programme for January - April and reframed it to ensure it aligns with the issues set out above.

4.4 In light of this, the Committee considered the following topics in April and May:

- Update on the temporary relocation of Warren Farm UTC
  - ICB Quality Update
  - Mentally Health City
- 4.5 In April a Task and Finish Group meeting was held in April to consider the savings delivery plans within the remit of the Committee. The comments and recommendations from this meeting will be reported to Co-ordinating OSC on 17 May.
- 4.6 A draft Memorandum of Understanding to clarify the role of Health Scrutiny, specifically in regard to consultations on substantial variations and developments of health services and to enable Health Scrutiny and NHS bodies to reach agreement on what constitutes 'substantial' within the local context has been developed and will be circulated to members for comment.
- 4.7 In May members of the Committee will visit hospital sites at Queen Elizabeth Hospital, Heartlands Hospital and Good Hope Hospital of the University Hospitals Birmingham NHS Foundation Trust.
- 4.8 The Birmingham and Sandwell Joint Health Overview and Scrutiny Committee has considered the following issues:
- Updates on the Midland Metropolitan Hospital and a visit to the hospital site during development.
  - Changes to Day Surgery as Sandwell and West Birmingham Hospitals NHS Trust.
  - Patient Experience at Sandwell and West Birmingham Hospitals NHS Trust.
  - Update on proposed changes to stroke services.
- 4.9 The Birmingham and Solihull Joint Health Overview and Scrutiny Committee has considered the following issues:
- Update reports on the 3 independent reviews of University Hospitals NHS Foundation Trust.
  - Regular updates on the Integrated Care System (ICS) financial position and recovery of healthcare services following the impact of the Covid-19 pandemic.
  - The Care Quality Commission report on maternity services at Heartlands Hospital and actions taken by the Trust.
  - West Midlands Ambulance Service (WMAS) activities such as conveyance to hospitals, lost hours to handover delays, response time by call category, profile of Serious Incidents, actions taken by WMAS, high impact actions to make a difference, outcomes from a WMAS perspective.
  - Winter pressures as part of A&E pressures and ambulance issues.

- Update on ICS workforce planning in health and social care sectors.

## 5 Looking Ahead

5.1 The Council's latest Forward Plan for April and May ([cmis.uk.com](https://cmis.uk.com)) may assist Members in identifying future topics. The following reports are of particular relevance to this Overview and Scrutiny Committee:

| ID Number   | Title  | Proposed Date of Decision |
|-------------|--|---------------------------|
| 012639/2024 | <a href="#">Putting Prevention First: Support and Advice Services for Multiple Disadvantaged Vulnerable Adults</a> | 23/04/24                  |
| 012764/2024 | <a href="#">Director of Public Health Annual Report 2023-24</a>  | 14/05/24                  |

5.2 The issues in the work programme that remain to be considered at the end of the municipal year are:

- Day Opportunities Review considering the effect on service users and their families and carers.
- Immunisations and vaccinations and the implications of covid immunisations rates for health and care staff.
- ICS 10 year Strategy.
- Birmingham City Council Commissioned Services: Birmingham Sexual Health Services, Birmingham Substance Misuse Services, Forward Thinking Birmingham to be considered at key points in the commissioning process.
- Engaging with Third Sector providers of Adult Social Care.
- Population health and inequalities.
- Ongoing monitoring of the delivery of savings within the Committee's terms of reference.
- Monitoring the recommendations of the Children and Young People's Mental Health Inquiry.
- Birmingham Active Sports Strategy and monitoring recommendations of the Commonwealth Games Legacy Inquiry.
- Update on Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR) community engagement.

## 6 Any Finance Implications

6.1 There are no financial implications arising from the recommendations set out in this report.

## **7 Any Legal Implications**

7.1 There are no legal implications arising from the recommendations set out in this report.

## **8 Any Equalities Implications**

8.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

8.2 The protected characteristics and groups outlined in the Equality Act are Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Race; Religion and Belief; Sex, and Sexual Orientation.

8.3 The Committee should ensure that it addresses these duties by considering them during work programme development, the scoping of work, evidence gathering and making recommendations. This should include considering how policy issues impact on different groups within the community, particularly those that share a relevant protected characteristic; whether the impact on particular groups is fair and proportionate; whether there is equality of access to services and fair representation of all groups within Birmingham; and whether any positive opportunities to advance equality of opportunity and/or good relations between people are being realised.

8.4 The Committee should ensure that equalities comments, and any recommendations, are based on evidence. This should include demographic and service level data and evidence of residents/service-users views gathered through consultation.

## **9 Appendices**

10 Appendix 1: HASC Work Programme 07.05.24.

## **11 Background Papers**

11.1 [Birmingham City Council Constitution](#)

11.2 Birmingham City Council Overview and Scrutiny Framework April 2021

11.3 Cabinet Report 12 December: Governance Review of Birmingham City Council by Centre for Governance and Scrutiny [CMIS > Meetings](#)





## Health and Adult Social Care Overview and Scrutiny Committee Work Programme 2023 / 24

| Month     | Item/Topic<br>Link with Corporate Priorities  | Aims and Objectives  | Scrutiny Method   | Cabinet Member/<br>Lead Officer  | Other Witnesses  | Additional Information and<br>Outcome*   |
|-----------|---|--|---|--|--|--|
| July 2023 | CQC Pilot Inspection<br><br><b>Corporate Priority: 16</b>   | <p>To update the Scrutiny Committee on the pilot CQC Inspection of Adult Social Care Services including Adult Social Care performance.</p> <p>To enable the Committee to provide assurance / recommendations to inform the preparation for the pilot inspection.</p> <p>To understand how the performance of adult social care will be overseen in future and how the role of the HASC relates to the work of the CQC to inform the Committee's work programme</p> | <p>Committee Meeting single item: Agenda item for OSC meeting on <b>4 July 2023. 10.00am</b></p> <p>Deadline for reports: <b>23 June</b></p> <p>Venue: Council House, Committee Rooms 3 and 4</p> | Professor Graeme Betts CBE<br>Strategic Director<br>Adult Social Care. | Andy Cave, Chief Executive,<br>Healthwatch<br>Birmingham | <p><b>Outcomes:</b><br/>3 recommendations were made to Strategic Director Adult Social Care following discussion at Committee.</p> <p>The recommendations are captured in the Committee Action Tracker</p> <p>HASC Chair contributed to CQC pilot inspection</p> |
| July 2023 | Integrated Care System Governance: Place Committee and decision-making powers.<br><br><b>Corporate Priority: 16</b> | To inform the Committee of the Governance arrangements of the ICS and the role and responsibilities of the Birmingham Place Board.   | Committee Meeting single item: Agenda item for OSC meeting on <b>4 July 2023. 10.00am</b>   | Professor Graeme Betts CBE<br>Strategic Director<br>Adult Social Care  | Andy Cave, Chief Executive,<br>Healthwatch<br>Birmingham | <b>Outcomes:</b><br>3 recommendations were made by the Chief Executive of the ICS following discussion at Committee.   |

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|           |  | <p>This will include how the principle of subsidiarity will be implemented in practice, the governance arrangements and how this links with Primary Care Networks and Local Authority locality working.</p> <p>The Committee to agree any comments / recommendations.</p> | <p>Deadline for reports: <b>23 June</b></p> <p>Venue: Council House, Committee Rooms 3 and 4</p>  |   |                              | <p>The recommendations are captured in the Committee Action Tracker.</p> <p>Response to recommendation has been circulated to Committee members.</p>           |
| July 2023 | <p>Scrutiny Work Programme</p> <p><b>Statutory Health Scrutiny Function</b></p>                | <p>To review the Committee's work programme, agree work to be undertaken during August – November and issues for future consideration.</p> <p>To consider the Council's Corporate Risk Register to inform the Committee's work programme.</p>                             | <p>Committee Meeting single item: Agenda item for OSC meeting on <b>4 July 2023. 10.00am</b></p> <p>Deadline for reports: <b>23 June</b></p> <p>Venue: Council House, Committee Rooms 3 and 4</p> | Fiona Bottrill<br>Senior Overview and Scrutiny Manager  |                              | <p><b>Outcome:</b></p> <p>Comments submitted to inform commissioning of sexual health services based on report and discussion at HASC meeting February 23.</p> |
| July 2023 | <p>Inquiry: Children and young people's mental health</p> <p><b>Corporate Priority: 15</b></p> | <p>Review evidence and develop draft recommendations</p>  | <p>Task and Finish Group meeting w/c 18 July</p>  | Fiona Bottrill,<br>Senior Overview and Scrutiny Manager | Task & Finish Group members. | <p><b>Outcome:</b></p> <p>Draft recommendations agreed</p>   |

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| July 2023      | Inquiry: Children and young people's mental health<br><br><b>Corporate Priority: 15</b>                  | Meeting with key partners to discuss draft recommendations   | Task and Finish Group meeting 26 July  | Fiona Bottrill, Senior Overview and Scrutiny Manager   | Task & Finish Group members. | <b>Outcome:</b><br>Draft recommendations discussed.  |
| September 2023 | Inquiry: Children and young people's mental health<br><br><b>Corporate Priority: 15</b>                  | Sign off draft Inquiry report  | Task and Finish Group meeting 6 September  | Fiona Bottrill, Senior Overview and Scrutiny Manager   | Task & Finish Group members. | <b>Outcome:</b><br>Draft report agreed   |
| September 2023 | Primary Care Enabling Strategy<br><br><b>Corporate Priorities: 8, 13, 16</b>                             | To receive a report on the NHS/ICB Primary Care Enabling Strategy setting out how primary care will be prioritised in the delivery of health and social care in Birmingham | Committee Meeting single item: Agenda item for OSC meeting on <b>19 September 10.00am</b><br><br>Deadline for reports: 8 <sup>th</sup> <b>September</b><br><br>Venue: Council House, Committee Rooms 3 and 4 | Anna Hammond, Director of GP Provider Support and Dr Sunando Ghosh, Primary Care Medical Services Board Partner Member |                              | <b>Outcome:</b><br>Issues identified by Committee to be considered by ICB in further development of the strategy.<br><br>Birmingham Community Healthcare Trust (BCHT) identified as able to provide information on Health Visiting can be part of a system-wide model working with GPs to improve childcare. |
| September 2023 | Scrutiny Contribution to the Budget Savings and Recovery Plan<br><br><b>Corporate Priorities: 10, 16</b> | To consider the implications of Equal Pay and the Medium-Term Financial Plan for the Committee's work programme including agreed savings for 2023/24.                      | Committee Meeting single item: Agenda item for OSC meeting on <b>19 September 10.00am.</b>   | Cllr. Khan, Cabinet Member, Adult Social Care<br><br>Professor Graeme Betts CBE Strategic Director Adult Social Care   | TBC                          | <b>Outcome:</b><br>Recommendation to Finance and Resources OSC regarding council income and invoicing on Oracle finance system.  |

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|                |   |  | <p>Deadline for reports: <b>8 September.</b></p> <p>Venue: Council House, Committee Rooms 3 and 4.</p>   |  |  | <p>It was agreed at Co-ordinating in July that all Scrutiny Committees would consider the implications of Equal Pay and the Medium-Term Financial Plan at the September Committee Meetings.</p>  |
| September 2023 | <p>Work Programme report to include Health and Adult Social Care OSC and Joint Health Overview and Scrutiny Committee role in NHS quality assurance.</p> <p><b>Statutory Health Scrutiny Function</b></p> | <p>To agree a 2-3 year schedule of reports from NHS Trust based in / serving Birmingham and Joint HOSC areas including:</p> <p>CQC report<br/>Quality Account<br/>Analysis of complaints and how this has driven service improvement.<br/>Key risks / issues for the Trust and plans to address these.</p> <p>The Committee to agree any comments / recommendations.</p> | <p>Agenda at HASC OSC Committee Meeting <b>19 September 10.00am</b></p> <p>Deadline for reports: <b>8 September.</b></p> <p>Venue: Council House, Committee Rooms 3 and 4.</p> | Fiona Bottrill, Senior Overview and Scrutiny Manager |  | <p><b>Outcome:</b><br/>Committee agreed approach to scrutiny of healthcare systems to be reported to the HASC.</p> <p>NHS Trusts based in / serving Birmingham:<br/>UHB<br/>BWCT NHS FT<br/>Sandwell and West Birmingham<br/>Birmingham CHT<br/>BSMHFT<br/>Royal Orthopaedic NHS FT<br/>WMAS</p> |
| October 2023   | <p>Inquiry: Children and young people's mental health</p> <p><b>Corporate Priorities: 15</b></p>  | <p>Task and Finish Group to agree consider comments received on draft report</p>   | <p>Task and Finish Group meeting on 4<sup>th</sup> October.</p>  | Fiona Bottrill, Senior Overview and Scrutiny Manager |  | <p>All Members of the Committee will be invited to this meeting to be informed of issues and recommendations.</p>  |

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| <p>October 2023</p> | <p>Scrutiny Contribution to the Budget Savings and Recovery Plan</p> <p><b>Corporate Priorities:</b> 10, 16</p>  | <p>To consider the implications of Equal Pay and the Medium-Term Financial Plan for the Committee's work programme including agreed savings for 2023/24.</p>   | <p>Committee Meeting single item: Agenda item for OSC meeting on <b>17<sup>th</sup> October 10.00am.</b></p> <p>Deadline for reports: <b>5<sup>th</sup> October.</b></p> <p>Venue: Council House, Committee Rooms 3 and 4.</p> | <p>S.151 Officer or senior member from Finance Dept (Mohammed Sajid TBC)</p> <p>Cabinet Member TBC</p> <p>Adult Social Care- Prof. Graeme Betts or Senior member of ASC team (TBC).</p> | <p>TBC</p> | <p><b>Outcome:</b></p> <p>Further scrutiny of the delivery of savings through the adult transformation programme</p> <p>It was agreed at Co-ordinating in July that all Scrutiny Committees would have this item on agenda for all meetings until further notice. To be a standing agenda item all HASC meetings going forward.</p>  |
| <p>October 2023</p> | <p>Monitoring implementation recommendation R01 from Scrutiny Inquiry on Legacy of Commonwealth Games</p> <p><b>Corporate Priorities:</b> 4 &amp; 14</p> | <p>To update on the development of the inclusive Sports Strategy and Activity City Strategy.</p> <p>The Committee to agree any comments / recommendations.</p> | <p>Committee Meeting single item: Agenda at HASC OSC Committee Meeting <b>17 October, 10.00am.</b></p> <p>Deadline for reports: <b>5<sup>th</sup> October.</b></p> <p>Venue: Council House, Committee Rooms 3 and 4, 10am.</p> | <p>Lynda Bradford, Interim Service Lead, Physical Activity, and Dave Wagg, Head of Sport &amp; Physical Activity.</p>   |            | <p>Inquiry report available from: <a href="https://document.ashx(cmis.uk.com)"><u>Document.ashx (cmis.uk.com)</u></a></p> <p>Recommendations to be completed by October 2024 R01: b) Provide an outline of how the insight and experience of disabled citizens will inform the new Sport and Physical Activity strategies.</p> <p>d) Continue to build upon the new partnerships developed through the CWG, and work with the Birmingham Disability Sports Forum to maximise</p> |

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|               |   |   |   |   |   | the impact of the strategy and understanding the range of activity on-going in the city  |
| October 2023  | <p>Access to community dental services.</p> <p><b>Corporate Priorities:</b> 13, 14</p>  | <p>To receive a report from the ICS to understand the issues relating to access to dental services in Birmingham and the impact this has on oral health.</p> <p>Based on this information the Committee may decide to undertake further work through a Task and Finish Group.</p> <p>The Committee to agree any comments / recommendations.</p> | <p>Committee Meeting single item: Agenda at HASC OSC Committee Meeting <b>17 October, 10.00am</b></p> <p>Deadline for reports: 5<sup>th</sup> <b>October.</b></p> <p>Venue: Council House, Committee Rooms 3 and 4.</p> | <p>Paul Sherriff, Chief Officer, Partnerships &amp; Integration, B/Sol ICB and Alastair McIntyre, Managing Director, Office of the West Midlands.</p> | <p>Andy Cave, Healthwatch (TBC)</p>                                     | <p><b>Outcome:</b></p> <p>The Committee to be provided with data on health equity and</p> <p>This is regional service and timescale dependent on ongoing work at BSOL and regional level.</p> <p>Link to Healthwatch report on accessing dentistry services: <a href="#">Impact report: Changes to accessing NHS dentistry in Birmingham and Solihull - Healthwatch Birmingham</a></p> |
| November 2023 | <p>Scrutiny of delivery of 23/24 Budget Savings &amp; Financial Recovery plans.</p> <p><b>Corporate Priorities</b> 10, 16</p> | <p>To update HASC Committee on the progress in delivering the 23/24 savings agreed in the MTFS 2023-26 that fall</p>  | <p>Committee meeting single item: Agenda at HASC OSC Committee <b>21st</b></p>  | <p>Samantha Bloomfield, Finance Partner, Adult &amp; Social Care (ASC).</p>   | <p>Prof. Graeme Betts, Strategic Director, Adult &amp; Social Care.</p> | <p><b>Outcome:</b></p> <p>Committee updated on delivery of savings within adult transformation programme.</p>  |

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|               |   | under this committee's portfolio.  | <b>November 2023, 10.00am</b><br><br>Deadline for report: 6 <sup>th</sup> November                        |   |   | At the Committee meeting on 17 October members requested that greater detail be provided on the savings on the Adult Social Care Transformation Programme.<br>A Task and Finish Group to be led by Finance and Resources OSC has been established by Co-ordinating OSC and will look at budget and savings across the council in further detail.<br><br>Two meetings of T& F Finance & Resource Group scheduled for December.<br>HASC to be updated (possibly on Team before the formal HASC meeting in Jan. '24) |
| November 2023 | Urgent Treatment Centres (UTC) in Birmingham<br><br><b>Corporate Priority: 13</b> | Report to Committee on access and availability of UTCs city-wide, including functionality and purpose, and quality of buildings. | Committee meeting single item: Agenda at HASC OSC Committee <b>21<sup>st</sup> November 2023, 10.00am</b> | Mandy Nagra, ICB B/Sol, Chief Delivery Officer. | Alan Butler, ICB Associate Director of Delivery, Improvement and UEC.<br><br>B/Sol Engagement Lead Officer Emma McKinney. | <b>Outcome:</b><br>Committee feedback on report was taking into consideration by ICB and it is now reviewing its engagement plans on UTCs. ICB to come back to HASC on January 2024 with  |

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|                   |  |   | Deadline for report<br>6 <sup>th</sup> November  |  |   | feedback report on<br>engagement plans on UTCs.  |
| November<br>2023  | Quality Report from ICB<br><br><b>Corporate Priorities:</b> 13,15,16               | To inform the Committee of the Quality Assurance processes across the ICB systems and enable the Committee to prioritise system focussed quality reports to future meetings.  | Committee Meeting single item: Agenda at HASC OSC.<br>Committee <b>21<sup>st</sup> November 2023 10.00am</b><br><br>Deadline for reports: 6 <sup>th</sup> Nov<br><br>Venue: Council House, Committee Rooms 3 and 4       | Lisa Stalley-Green, Deputy CEO & Chief Nursing Officer, NHS ICB Birmingham and Solihull. | Paul Sherriff, Chief Officer, Partnerships & Integration B/Sol ICB. | <b>Outcome:</b><br>Committee updated on actions to mitigate key area of concerns highlighted in report which will inform the development of the HASC and Join HOSC work programme. |
| December<br>2023. | Adult & Social Care Q2 Performance Monitoring<br><br><b>Corporate Priority:</b> 16 | Report on red rated performance indicators; 5 performance indicators chosen by HASC for in-depth examination and the complete set of Adult Social Care (ASC) performance indicators<br><br>Update on pilot CQC Inspection | Committee Meeting single item: Agenda at HASC OSC<br>Committee <b>19<sup>th</sup> December 2023 10.00am</b><br><br>Deadline for reports: <b>7<sup>th</sup> Dec.</b><br><br>Venue: Council House, Committee Rooms 3 and 4 | Maria Gavin, AD, ASC.  |   | <b>Outcome:</b> Committee noted recent CQC inspection of ASC, and the rating of 'Good' awarded to service. HASC was involved in the CQC inspection process.                        |



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| January 2024 | HASC Committee members' visit to Warren Farm Urgent Treatment Centre (UTC)<br><br><b>Corporate Priority 13, 16</b> | To inform members of issues relating to Warren Farm UTC, and to inform discussion at Committee meeting on 23 <sup>rd</sup> January.   | On location  | Mandy Nagra, Chief Delivery Officer, ICB                                     |   | <b>Outcome:</b> HASC Members' visited Warren Farm on Thursday 11 <sup>th</sup> January '24.   |
| January 2024 | Scrutiny Inquiry on Children and Young People's Mental Health.<br><br><b>Corporate Priority: 15</b>                | To approve the report and agree the recommendations of the Children's and Young People's Scrutiny Inquiry and note any recommendations to go to City Council in January '24 | Committee Meeting single item: Agenda at HASC OSC Committee <b>23<sup>rd</sup> January 10.00am</b><br><br>Deadline for reports: <b>8<sup>th</sup> January.</b><br><br>Venue: Council House, Committee Rooms 3 and 4. | Cllr. Mick Brown, Chair of Inquiry Task and Finish Group                     | Fiona Bottrill, Senior Overview and Scrutiny Committee Manager. | The Health and Adult Care OSC has the delegated Health Scrutiny power to make recommendations to NHS organisations. Report scheduled to go to Council in January '24.   |
| Jan 2024.    | Birmingham Safeguarding Adult Board (BSAB) Annual Report 2022/23.<br><br><b>Corporate Priority: 10, 16</b>         | To update the Committee on the adult safeguarding arrangements in the city.   | Committee meeting single item: <b>23rd January 2024.</b><br><br>Presentation/Paper Deadline: <b>8<sup>th</sup> January 2024</b><br><br>Venue: Council House, Committee   | Dr Carolyn Kus, BSAB Chair<br><a href="http://www.bsab.org">www.bsab.org</a> |   | Birmingham Safeguarding Adult Board (BSAB) Annual Report 2022/23<br><br>Recommendation from Co-ordinating OSC that all OSCs consider relevant aspects of Domestic Abuse in the work programme. To consider Adult Safeguarding Issues related to Domestic Abuse. |

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|               |  |  | Rooms 3 and 4 at 10am   |   |   | The Neighbourhoods OSC work programme includes informing the development of the new Domestic Abuse Prevention Strategy   |
| January 2024. | Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR).<br><br><b>Corporate Priority: 13</b> | To report on impact of implementation activity and actions within the ICS and BCC.                             | Committee meeting single item: <b>23rd January 2024.</b><br><br>Presentation/Paper Deadline: <b>8th Jan 2024</b><br><br>Venue: Council House, Committee Rooms 3 and 4 at 10am | Nonso Nwaiwu Senior Public Health Officer (BLACHIR).  | Justin Varney, Director of Public Health. | Update report presented at Jan meeting.<br><b>Outcome:</b> Recommendation regarding value for money and community engagement.  |
| January 2024  | Urgent Treatment Centres (UTC) in Birmingham update.<br><br><b>Corporate Priority: 13, 16</b>                            | To report to committee on update on consultation and engagement activity with communities on UTCs Warren Farm. | Committee meeting single item: <b>23rd January 2024.</b><br><br>Presentation/Paper Deadline: <b>8th Jan 2024</b><br><br>Venue: Council House, Committee Rooms 3 and 4 at 10am | Mandy Nagra, Chief Delivery Officer ICB<br><br>Alan Butler, ICB Associate Director of Delivery, Improvement and UEC |   | <b>Outcome:</b> Further from meeting on 21st November, Committee has asked that ICB come back to January '24 meeting with feedback report on community engagement on UTCs in line with statutory consultation process. |

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| February 2024 | Work Programme Review, Governance Stabilisation Plan and Council's Improvement and Recovery Plan.<br><br><b>Statutory Health Scrutiny Function</b> | To consider matters raised in the Review on para 4.2.3 ('Level of Assurance & Compliance'; 'Member scrutiny as a mechanism for assurance and improvement).<br><br>Update on recommendations from Governance review and Council's stabilisation plan, including scrutiny function and Health Scrutiny Regulations | Informal session<br><b>20<sup>th</sup> February 2024.</b><br><br>Venue: Council House, Committee Rooms 3 and 4 at 10am  | Paul Clarke, Director, Programmes, Performance, and Improvement (PPI).<br><br>Maria Gavin, AD, Adult & Social Care<br><br>David Melbourne, CEO, ICB.<br><br>Jo Tonkin, Deputy Director Public Health |  | As agreed at Co-ordinating OSC in December 23 all O&S Committees will hold a workshop to review the work programme in light of the Governance review stabilisation plan and the Improvement and Recovery Plan.               |
| April 2024    | Urgent Treatment Centres (UTC) planned review update.<br><br><b>Health Scrutiny Function</b>   | Update on the temporary relocation of the Warren Farm Urgent Treatment Centre  | Committee meeting single item: <b>April 9<sup>th</sup> 2024.</b><br><br>Presentation/Paper<br>Deadline: <b>21 March 2024</b><br><br>Venue: Council House, Committee Rooms 3 and 4 at 10am | Mandy Nagra, Chief Delivery Officer B/Sol ICB.<br><br>Emma McKinney, Engagement Lead, B/Sol ICB.   |  | At the January meeting, it was agreed that B/Sol ICB would come back to a future meeting to provide update on ongoing engagement of patients and stakeholders and planned review of all UTCs across Birmingham and Solihull. |
| April 2024    | Delivery of Savings within the Committee's Terms of Reference including Adult &  | To consider the delivery of 24/25 savings  | Task & Finish meeting : <b>April 9<sup>th</sup> 2024.</b>   | Acting Cabinet Member for Adult Social Care, Cllr. Pocock  |  |  |

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|          | <p>Social Care, Leisure Services and Public Health</p> <p><b>Corporate Priority:</b> 10</p> <p><b>Governance Review Criteria:</b><br/>Having an active part in the 2024/25 budget development process</p> <p>The safe and effective delivery of key services supporting vulnerable people</p> |   | <p>Presentation/Paper<br/>Deadline: <b>21 March 2024</b></p> <p>Venue: Council House, Committee Rooms 3 and 4 at 10am</p>       | <p>Samantha Bloomfield,<br/>Finance Partner,<br/>ASC</p> <p>TBC City Operations Directorate</p> <p>Louise Casey,<br/>Acting Director of Adult Social Care</p> <p>Maria Gavin, AD,<br/>Adult &amp; Social Care</p> <p>Jo Tonkin, Deputy Director Public Health</p> |  |  |
| May 2024 | <p>HASC members' visit to UHB Queen Elizabeth Hospital, Heartlands Hospital and Good Hope Hospital.</p> <p><b>Health Scrutiny Function</b></p>  | <p>To inform members work on scrutiny of acute hospital provision in the City with a focus on emergency care and maternity services</p> | <p>On location</p>  | <p>Gemma Rauer,<br/>Director of Engagement,<br/>University Hospitals,<br/>Birmingham</p>  |  | <p>Visit to all three main sites scheduled for Weds 1<sup>st</sup> May 2024.</p> |
| May 2024 | <p>ICB Quality Report Update</p> <p><b>Health Scrutiny Function:</b> NHS Quality by Exception</p>   | <p>B/SOL ICB to provide a Quality Update</p>  | <p>Committee meeting single item: <b>May 7th 2024.</b></p> <p>Presentation/Paper<br/>Deadline: <b>23<sup>rd</sup> April</b></p> | <p>David Melbourne,<br/>CEO,<br/>ICB Birmingham and Solihull.</p>   |  | <p>ICB to provide update following report to HASC in November 23.</p>            |

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|          |   |  | Venue: Council House, Committee Rooms 3 and 4 at 10am  |   |  |   |
| May 2024 | Mentally Healthy Birmingham<br><b>Corporate Priority 16</b>           | Update on the Mentally Healthy Birmingham project work outcomes.   | Committee meeting single item: <b>May 7th 2024.</b><br><br>Presentation/Paper Deadline: <b>22nd April</b><br><br>Venue: Council House, Committee Rooms 3 and 4 at 10am | Jane Intangata, Service Lead (Mental Health & Wellbeing) Mentally Healthy, Birmingham.<br><br>Cllr. Rob Pocock, Cabinet Lead and Chair, Health & Wellbeing Board. |  |   |
| May 2024 | Memorandum of Understanding (MoU)<br><b>Statutory Health Function</b> | MoU between HASC O&S committee and NHS/ICB Birmingham & Solihull (B/Sol) to develop working protocols under the new Health regulations | Report to be circulated to committee members for comment in May with final draft to come to July HASC O&S committee meeting.   | Karen Kelly, Chief of Staff, B/Sol ICB.   | Fiona Bottrill, BCC Overview & Scrutiny Manager. | To agree on MoU with NHS/ICB and recommend to committee in July 2024. |
| May 2024 | Measles outbreak update.<br><b>Corporate Priority 13</b>              | Information on measles outbreak to be circulated to Committee members  | Briefing to be circulated to HASC O &S committee members for comment.  | Paul Sherriff, Chief Officer, Partnerships & Integration, B/Sol ICB.  |  |   |

### Menu of Issues for Consideration

The following items had been identified as potential topics for future consideration. This approach enables the Overview and Scrutiny Committee to remain flexible and respond in a timely manner to emerging issues.

This is a live work programme work programme. New items may be added, or items removed during the course of the year. Proposed aims and objectives as well as scrutiny methodology may also be subject to change.

| Item/ Topic   | Proposed Aims and Objectives  | Proposed Scrutiny Method | Additional Information   |
|---|---|--------------------------|--|
| Adult Social Care Budget and Delivery of Savings Plan<br><br>Improvement and Recovery Plan workstream.<br><br><b>Corporate Priority: 10</b> | HASC members to hold Task and Finish Group meeting with Finance and senior ASC officers to review and monitor delivery of savings plan.   | Task and Finish Group    | Decision of Co-ordinating OSC that all O&S Committees will scrutinise the delivery of savings within the Committee's terms of reference. To be rolled into 24/25 Work programme  |
| Day Opportunities Review<br><br><b>Corporate Priority: 16</b>   | Examining the use of Day Opportunities services and the effect on service users/carers and their families. A review is currently being undertaken with involvement of service users, with a view to developing proposals to present to cabinet. | HASC                     | To come to HASC for further scrutiny at a date TBA prior to cabinet decision   |
| Immunisation and vaccinations.<br><br><b>Corporate Priorities: 13 &amp; 16</b>  | Immunisations and vaccinations for children under 5<br>Implications of covid immunisations rates for health and care staff.   | Task and Finish Group    | This work could commence following the completion of the CYP mental health Inquiry.<br><br><b>February Work programme review:</b><br>Information on measles outbreak to be circulated to Committee members.<br>Report to future Committee meeting on immunisations and vaccinations. |

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| <p>ICS 10-year strategy.</p> <p><b>Corporate Priorities:</b> 8, 13 &amp; 16</p>  | <p>Highlights vision for the future and the conditions we need for change, so that people who live, work and receive care in Birmingham and Solihull can live longer, happier and healthier lives by 2033.</p>                                 | <p>HASC/JHOSC.</p>           | <p>Annual review of key strategic priorities. To be looked at in new Municipal year.</p>   |
| <p>Birmingham City Council Commissioned Services:</p> <ul style="list-style-type: none"> <li>• Birmingham Sexual Health Services</li> <li>• Birmingham Substance Misuse Services</li> <li>• Forward Thinking Birmingham</li> </ul> <p><b>Corporate Priorities:</b> 8, 13, &amp; 15</p> | <p>Report to come to Health and Adult Care OSC prior to recommissioning of the service to enable the Committee to inform Cabinet decisions.</p>  | <p>HASC.</p>                 | <p>Comments submitted to Commissioners to inform tendering of Sexual Health Services during Autumn. Contract to start service in January 23.</p> <p>Contract for Substance Misuse Service to end March 2025. Health and Adult Social Care OSC to engage in process July 2024 to inform commissioning of service.</p> |
| <p>Engaging with Third Sector providers of Adult Social Care</p> <p><b>Corporate Priority:</b> 16</p>  | <p>For third sector health and social care services providers to engage with the HASC scrutiny process.</p>  | <p>TBC</p>                   |  |
| <p>Obesity and Food Strategy</p> <p><b>Corporate Priorities:</b> 8, 14 &amp; 16</p>  | <p>What actions have been implemented as part of the Food Strategy and what impact have these had?<br/>How will the medium and long terms impact be demonstrated?<br/>How has the strategy helped to reduce inequalities and food poverty?</p> | <p>TBC</p>                   | <p>Link to Food Strategy:<br/><a href="#">Birmingham Food System Strategy   Birmingham City Council</a></p>  |
| <p>Population health and inequalities</p> <p><b>Corporate Priority:</b> 13</p>   | <p>Approach/strategy in meeting the needs of the local population and address the wider determinants of health.</p>  | <p>Task and Finish Group</p> | <p><a href="#">How health has changed in your area - Office for National Statistics (ons.gov.uk)</a></p>   |

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| <p>Birmingham Active Sports Strategy</p> <p><b>Corporate Priorities: 4 &amp; 14</b></p>   | <p>Monitoring recommendation R01 b and R01d of the Scrutiny Inquiry on Promoting Health and Wellbeing: (A Commonwealth Games Legacy).</p> <p>Update on the Birmingham Active Sports Strategy.</p> | <p>Dave Wagg, Head of Sport &amp; Physical Activity.</p> | <p>A further response to the Legacy Report, which will not be ready until after implementation plan is launched in April 2024.</p> <p>Will now come to HASC in 24/25 Municipal year.</p> |
| <p>Birmingham and Lewisham African and Caribbean Health Inequalities Review (BLACHIR).</p> <p><b>Corporate Priority: 13</b></p> | <p>To provide update/feedback on community engagement programme.</p>  |  | <p>Likely to be rolled into 24/25 Work programme.</p>  |

\*Outcome: This will be populated once the item/topic has been completed. It will identify the added value and impact.

#### **Birmingham and Sandwell Joint Health Overview and Scrutiny Committee**

| Month     | Item/Topic   | Aims and Objectives   | Scrutiny Method  | Cabinet Member/<br>Lead Officer | Other Witnesses   | Additional Information and Outcome*   |
|-----------|--|---|--|---------------------------------|---|---|
| Sept 2023 | <p>Midland Metropolitan Hospital update</p> <p><b>Health Scrutiny Function</b></p> | <p>To receive an update on the development of the Midland Metropolitan University Hospital (MMUH)</p> | <p>Committee meeting single item: <b>27<sup>th</sup> Sept.</b></p> <p>Venue: Council House, Sandwell Council, Oldbury.</p> |                                 | <p>Jayne Ilic<br/>Director of Communication and Engagement, MMUH Programme Company.</p> | <p>Invitation from NHS Sandwell &amp; West Birmingham for a potential visit (Dates proposed; 16/2, 1/3 &amp; 15/3 2024)</p> |
| Sept 2023 | <p>Update on Changes to Day Surgery at Sandwell and West</p>                       | <p>To provide an update to the Committee on the</p>   | <p>Committee meeting single</p>  | <p>Jayne Salter-Scott,</p>      |   | <p>Members to be kept updated at future meetings</p>  |



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|              | Birmingham Hospitals NHS Trust.<br><br><b>Health Scrutiny Function</b>  | ongoing work to implement the changes from the formal conversation to Changes to Day Surgery held between March 2022 and April 2022.  | item: <b>27th Sept.</b><br><br>Venue: Council House, Sandwell Council, Oldbury.                          | Head of Public and Community Engagement, Sandwell and West Birmingham Hospitals NHS Trust.      |  |  |
| Sept 23      | Patient Experience at Sandwell and West Birmingham Hospitals NHS Trust.<br><br><b>Health Scrutiny Function</b>  | To update the Committee about Sandwell and West Birmingham Hospitals NHS Trust's (SWB) approach to patient experience   | Committee meeting single item: <b>27th Sept.</b><br><br>Venue: Council House, Sandwell Council, Oldbury. | Jamie Emery, Patient Insight, and Involvement   |  | Members to be kept updated at future meetings                        |
| October 2023 | An informal briefing for JHOSC Chairs with MMUH Delivery Director and our Group Director of Operations Primary Care, Communities<br><br><b>Health Scrutiny Function</b> | To talk through our rationale and approach to the decoupling of Stroke services to deliver high quality, safe rehabilitation outside the acute hospital environment and seek their opinion and advise on our direction of travel. | MS TEAMS JHOSC Chairs briefing.<br><br><b>31<sup>st</sup> October 2023<br/>1.30pm</b>                    | Jayne Salter-Scott, Head of Communities and Engagement, Sandwell and West Birmingham NHS Trust. |  | Informal briefing for JHOSC Chairs held on 31 <sup>st</sup> October. |
| March 2024   | JHOSC Member visit to MMU Hospital<br><br><b>Health Scrutiny Function</b>   |   |  | Jayne Salter-Scott, Head of Communities and Engagement, Sandwell and West Birmingham NHS Trust. |  | Scheduled visit of JHOSC members took place on 1 <sup>st</sup> March |

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| March 2024. | Midland Metropolitan Hospital – update on the hospital development and models of care across the Trust.<br><br><b>Health Scrutiny Function</b> | To looks at models of care across the Trust in meeting patients’ needs          | Committee meeting single item: <b>12th March</b><br><br>Venue: Council House, Victoria Sq. Birmingham.<br><br>Deadline for report: <b>Tues. 27th Feb</b>  | Jamie Emery, Lead for Patient Experience, Sandwell & West Birmingham NHS Trust.               |  | Update provided and noted at the JHOSC meeting on 12 <sup>th</sup> March 2024. Committee requested briefing on transportation/parking issues and implications for patients.         |
| March 2024  | Update on proposed changes to Stroke services.<br><br><b>Health Scrutiny Function</b>  | To update following member briefing on service on 31 <sup>st</sup> October 2023 | Committee meeting single item: <b>12th March</b><br><br>Venue: Council House, Victoria Sq. Birmingham.<br><br>Deadline for report: <b>Tues. 27th Feb</b>  | Jayne Salter-Scott, Head of Public & Community Engagement, NHS Sandwell & West Birmingham NHS |  | Update provided at the JHOSC meeting on 12 <sup>th</sup> March and noted pending feedback from NHS Sandwell & West Birmingham on Voluntary sector engagement on the service change. |
| March 2024. | Patient Experience at Sandwell and West Birmingham Hospitals NHS Trust – update on reporting programme<br><br><b>Health Scrutiny Function</b>  | Progress report on patients’ experience and reporting system/programme          | Committee meeting single item: <b>12th March</b><br><br>Venue: Council House, Victoria Sq. Birmingham.<br><br>Deadline for report: <b>Tues. 27th Feb.</b> | Jamie Emery, Patient Engagement & Involvement Lead, Sandwell & West Birmingham NHS Trust.     |  | Update provided and noted at JHOSC meeting on 12 <sup>th</sup> March.   |

\*Outcome: This will be populated once the item/topic has been completed. It will identify the added value and impact.

### **Birmingham and Solihull Joint Health Overview and Scrutiny Committee**

| <b>Month</b> | <b>Item/Topic</b>   | <b>Aims and Objectives</b>  | <b>Scrutiny Method</b>   | <b>Cabinet Member/<br/>Lead Officer</b>    | <b>Other Witnesses</b>  | <b>Additional Information and Outcome*</b>  |
|--------------|---|---|--|--|---|---|
| July 2023    | <p>Report on 3 Independent Reviews of University Hospital Birmingham NHS Foundation Trust:<br/>Patient Safety Review<br/>Culture Review<br/>Well Led Review of Leadership and Governance</p> <p><b>Health Scrutiny Function</b></p> | <p>To provide assurance to the Committee on the outcome of the Well Led and progress on the Culture review and timescales and implementation of the recommendations of the Patient Safety Review.</p> <p>To consider the Healthwatch ground rules for the 3 Reviews and if these have been met.</p> | <p>Committee Meeting single item: Agenda item at Joint HOSC meeting <b>25<sup>th</sup> July 23</b></p> <p>Deadline for reports <b>14<sup>th</sup> July 23</b></p> <p>Venue: Council House, Committee Rooms 3 and 4</p> | David Melbourne, BSOL ICB Chief Executive. | <p>Prof. Mike Bewick, IQ4U Consultants</p> <p>Jonathan Brotherton, CEO UHB.</p> <p>Andy Cave, Healthwatch Birmingham.</p> | <p>Information requested on April 23 Joint HOSC:<br/>To receive a copy of the ICS analysis of the UHB Trust's <i>Standardised Hospital Mortality Ratio</i> (SHMR);</p> <p>To receive an annual summary of the learning that had taken place over the course of the year across UHB be brought forward and submitted to the JHOSC in future;</p> <p>To receive a roadmap for the remaining reviews in terms of how they will report, expected dates/timescales/milestones.</p> <p><b>Outcome:</b><br/>Update provided on reviews</p> |

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|              |   |   |   |   |  | Public Engagement / Citizen voice: Engagement between patients families and UHB following deputation at meeting<br><br>Assurance provided regarding Healthwatch ground rules. |
| July 2023    | BSol ICS update on performance against finance and recovery plans<br><br><b>Health Scrutiny Function</b><br><br><b>Corporate Priority: 8, 13 &amp; 16</b> | To update the members on the ICS financial position and recovery of healthcare services following the impact of the covid pandemic. | Committee Meeting single item: Agenda item at Joint HOSC meeting <b>25 July 23</b><br><br>Deadline for reports <b>14 July 23</b><br><br>Venue: Council House, Committee Rooms 3 and 4 | Paul Athey, BSOL ICS Chief Finance Officer  |  | <b>Outcomes:</b> Update provided on ICS financial position and recovery of healthcare services.   |
| October 2023 | Maternity Services at Heartlands Hospital<br><br><b>Health Scrutiny Function</b><br><br><b>Corporate Priority 13</b>                                      | To consider the CQC report findings and actions to be taken by the Trust.   | Committee Meeting: Agenda item at Joint HOSC meeting <b>5<sup>th</sup> October '23.</b>   | Lisa Stanley-Green; ICB Chief Nurse/Deputy CEO.<br><br>Angela Hughes: BSOL ICB Senior |  | Outcome: Resolution from the October meeting: To come back to future meeting in 24/25 (June or July) with update on actions from CQC findings.                                |

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|               |   |  | Venue: Council House, Solihull   | Quality Lead Maternity  |  |  |
| October 2023. | Birmingham and Solihull ICS Performance on Finance & Recovery plans.<br><br><b>Health Scrutiny Function</b><br><br><b>Corporate Priority 8, 13 &amp; 16</b> | To provide a summary of key performance and deliverables (as at end of July).  | Committee Meeting: Standard agenda item at Joint HOSC meetings.<br><b>5th October '23.</b><br><br>Venue: Council House, Solihull | Paul Athey, Chief Finance Officer   |  | Standing agenda item: Next update at next JHOSC meeting in February 2024.  |
| Oct. 2023     | West Midlands Ambulance Service Delivery<br><br><b>Health Scrutiny Function</b>   | To consider the West Midlands Ambulance Service activities such as conveyance to hospitals, lost hours to handover delays, response time by call category, profile of Serious Incidents, actions taken by WMAS, high impact actions to make a difference, outcomes from a WMAS perspective | Committee Meeting: Agenda item at Joint HOSC meeting <b>5th October '23.</b><br><br>Venue: Council House, Solihull               | Vivek Khashu: Strategy and Engagement Director, West Midlands Ambulance Service   |  | WMAS performance update was presented to committee at the Feb JHOSC meeting. Further performance update may come to future meeting in new Municipal year 24/25.  |
| Oct. 2023     | Winter Pressure Update<br><br><b>Health Scrutiny Function</b><br><br><b>Corporate Priority 8, 13 &amp; 16</b>   | To discuss the wider topic of winter pressures as part of A&E pressures and ambulance issues to be considered by Committee. A&E pressures were a perennial problem in winter. To discuss at October meeting ahead of winter.   | Committee Meeting: Agenda item at Joint HOSC meeting <b>5th October '23.</b><br><br>Venue: Council House, Solihull               | Mandy Nagra, Integrated Care Board/ ICS Executive Chief Delivery Officer, BSol ICB.<br><br>Alan Butler, Associate Director of Delivery, |  | <b>Outcome:</b> Some progress made with Solihull. Resolution from October meeting: To receive as part of the JHOSC Work Program for 2024/25 a report addressing winter pressure preparations for 2024/25.<br><br>Mental health services workforce planning |

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|           |  |  |  | Improvement and UEC, BSoI ICB.                                   |                            | identified as an issue in the workforce impacting on Winter pressures. Resolution at October meeting: To receive update of mental health services as part of 24/25 JHOSC work programme |
| Nov 2023  | JHSOC member briefing on UHB Culture Review Report with Jonathan Brotherton, CEO, UHB.<br><br><b>Health Function</b> | To provide committee members with update on actions and recommendations from the recently published Culture Review independent report. | Briefing with CEO of UHB scheduled for 10th November 9.00am on TEAMs.  | Jonathan Brotherton, CEO UHB.                                    | David Melbourne, CEO, ICB. | <b>Outcome:</b> Update on actions and implementation provided to JHOSC members. New Operating model launched in October.  |
| Feb 2024  | ICS Work Force Planning.<br><br><b>Health Scrutiny Function.</b>   | Update on ICS workforce planning in health and social care sectors.  | Committee Meeting:<br>Agenda item at JHOSC meeting in February 7 <sup>th</sup> 24.<br>Report deadline 23 <sup>rd</sup> Jan. 2024<br><br>Venue:<br>Committee Room 6 Council House | Lisa Stalley- Green; ICB Chief Nurse/Deputy CEO.                 |                            | Update report noted by HASC committee members.  |
| Feb. 2024 | Monitoring of implementation of Recommendations from UHB Reviews.<br><br><b>Health Scrutiny Function.</b>            | The ICS and UHB to report on the implementation of the recommendations from the UHB reviews.   | Committee Meeting:<br>Agenda item at JHOSC meeting in February 7 <sup>th</sup> 24. Report  | Jonathan Brotherton, CEO, University Hospitals, Birmingham (UHB) | David Melbourne, CEO, ICB. | Informal session between UHB CEO & JHOSC held in November 2023. Update on actions and implementation provided to JHOSC members.   |

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|           |   |   | deadline <b>23<sup>rd</sup> Jan.</b><br><br>Venue:<br>Committee<br>Room 6 Council<br>House  |  |  | New Operating model<br>launched in October 2023.<br><br>Update received at Feb. '24<br>meeting. Committee to<br>consider governance issues<br>as part of UHB review work<br>in future meeting.<br><br>UHB commitment to<br>continuing with the bi-<br>monthly JHOSC Chairs'<br>briefings. |
| Feb. 2024 | Birmingham and Solihull ICS<br>Performance on Finance &<br>Recovery plans.<br><br><b>Health Scrutiny Function</b> | To provide the latest<br>summary of key<br>performance and<br>deliverables.   | Committee<br>Meeting:<br>Agenda item at<br>JHOSC meeting<br>in February <b>7<sup>th</sup><br/>2024</b> . Report<br>deadline <b>23<sup>rd</sup><br/>Jan.</b><br><br>Venue:<br>Committee<br>Room 6 Council<br>House | Paul Athey, Chief<br>Finance Officer   |  | Standing agenda item:<br>Further update was provided<br>by Chief Finance Officer at<br>JHOSC Feb meeting.   |
| Feb. 2024 | West Midlands Ambulance<br>Service Delivery (TBC)<br><br><b>Health Scrutiny Function</b>                          | To consider the West<br>Midlands Ambulance Service<br>activities such as conveyance<br>to hospitals, lost hours to<br>handover delays, response<br>time by call category, profile | Committee<br>Meeting:<br>Agenda item at<br>JHOSC meeting<br>in February <b>7<sup>th</sup><br/>2024</b> . Report   | Vivek Khashu:<br>Strategy and<br>Engagement<br>Director, West<br>Midlands<br>Ambulance Service | West Midlands<br>Ambulance Service<br>Delivery | <b>Outcome:</b> WMAS attended<br>February meeting and<br>provided update on<br>activities.  |

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|                |   | of Serious Incidents, actions taken by WMAS, high impact actions to make a difference, outcomes from a WMAS perspective  | deadline <b>23<sup>rd</sup> Jan.</b><br><br>Venue:<br>Committee<br>Room 6 Council<br>House |                         |  |   |
| TBC<br>(24/25) | CQC reports of various B/Sol NHS services, e.g, Birmingham & Solihull Mental Health Trust (BSMHST), Maternity services, W/Mids Ambulance service<br><br><b>Health Scrutiny Function</b> | To update the Scrutiny Committee on the CQC Inspection of BSMHST performance, including any progress on recommendations for action.  | TBC (in 2024/25).  |                         |  | For JHOSC members to receive updates in 24/25, on published findings on a range of CQC and well-led inspection reports on B/Sol NHS services.<br><br>Resolution in October JHOSC meeting that as part of the JHOSC Work Programme for 2024/25, a future Update Report on Mental Health Services, be brought to committee. |
| TBC<br>(24/25) | Winter Pressure Update<br><br><b>Health Scrutiny Function</b><br><br><b>Corporate Priority 8, 13 &amp; 16</b>   | To discuss the wider topic of winter pressures as part of A&E pressures and ambulance issues to be considered by Committee. A&E pressures were a perennial problem in winter. To discuss at October meeting ahead of winter. | 24/25  | Winter Pressure Update. |  | Resolution form October meeting: To receive as part of the JHOSC Work Program for 2024/25 a report addressing winter pressure preparations for 2024/25.   |
| TBC            | Update on post-covid syndrome / Long covid and rehabilitation.  | To understand the impact of post covid syndrome / long   | TBC  |                         |  | To be considered for 24/25 work programme.  |



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|  | <b>Health Scrutiny Function</b> | covid and the services / support that is available. |  |  |  |  |
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\*Outcome: This will be populated once the item/topic has been completed. It will identify the added value and impact.

**Scrutiny Method Options:**

Committee meeting - single item

Committee meeting - single theme

Task and Finish Group (outline number of meetings)

On location

Other - (describe)

**Corporate Priorities, Performance and Outcomes**

**Corporate Priorities 2022 – 26:**

- |  |   |
|--|---|
| 1 Support inclusive economic growth                          | 11 Increase affordable, safe, green housing                       |
| 2 Tackle unemployment  | 12 Tackle homelessness  |
| 3 Attract inward investment and infrastructure               | 13 Tackle health inequalities                                     |
| 4 Maximise the benefits of the Commonwealth Games            | 14 Encourage and enable physical activity and healthy living      |
| 5 Tackle poverty and inequalities                            | 15 Champion mental health   |
| 6 Empower citizens and enable citizen voice                  | 16 Improve outcomes for adults with disabilities and older people |
| 7 Promote and champion diversity, civic pride and culture    | 17 Improve street cleanliness                                     |
| 8 Support and enable all children and young people to thrive | 18 Improve air quality  |

9 Make the city safer

10 Protect and safeguard vulnerable citizens

19 Continue on the Route to Zero

20 Be a City of Nature

21 Delivering a Bold Best in Class Council

Information on the Corporate Priorities, Performance and City Outcomes was reported to the Health and Adult Social Care OSC in June 23: [Document.ashx \(cmis.uk.com\)](https://cmis.uk.com)

# Birmingham City Council

## Health, Adult and Social Care Overview and Scrutiny Committee

Date 7<sup>th</sup> May 2024.



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**Subject:** Creating a Mentally Healthy City Forum, objectives and outcomes.

**Report of:** Cllr Rob Pocock, Interim Cabinet Member for Health and Social Care.

**Report author:** Jane Itangata, Service Lead Public Mental Health and Wellbeing.

### 1 Purpose

- 1.1 The purpose of this report is to provide an overview of the Creating a Mentally Healthy City Forum and the plans for developing a 'Creating a Mentally Healthy City Strategy'.
- 1.2 Due to late approval from the Commissioners the report was unable to be published with the agenda on Friday 26 April 2024. However, the chair has confirmed that the report can be considered at the meeting and so this report has therefore been published as an item of Urgent Business.
- 1.3

### 2 Recommendations

- 2.1 The Health, Adult and Social Care Overview and Scrutiny Committee are requested to note the content of this update. The Committee is invited to provide oversight of the framework approach to the co-production of the Creating a Mentally Healthy City strategy.

### 3 Background

- 3.1 According to the World Health Organisation (WHO), Mental Health is 'a state of mental wellbeing that enables people to cope with stresses of life, realise their abilities, learn well and work well, and contribute to their community. Creating a city that enables this is much broader than the provision of clinical mental health support and requires action across the life course.
- 3.2 Compared to England and the West Midlands region, Birmingham is disproportionately affected by poor mental wellbeing. Currently, there is a higher-than-average prevalence of depression and anxiety in adults. It also has a much

greater proportion of people (10.4%) self-reporting a low life satisfaction score compared to England (6.1%) and the West Midlands (6.5%).

- 3.3 According to the Birmingham COVID-19 Impact Survey, by July 2020 more than half (53%) said their mental health had deteriorated since the pandemic started. The impacts on mental wellbeing included bereavement, loneliness, and common mental health conditions, such as anxiety and depression. Through non-recurrent additional funding the Council was able to mobilise 14 interventions specifically addressing these issues including: counselling support for women affected by domestic and/or sexual violence, specialist LGBT affirmative person-centred counselling, bereavement support targeted in the most deprived areas of the City and at identified Health Inclusion Groups.
- 3.4 There are further inequalities highlighted in the Health and Wellbeing (H&W) strategy, within the city with more deprived wards reporting lower resilience and poorer mental wellbeing, particularly in children. Equally, there are inequalities within certain communities, such as the LGBTQ+ community, who face an increased risk of suicide and self-harm.

#### 4 The Creating a Mentally Healthy City Forum

- 4.1 The 'Creating a Mentally Health City Forum' (CMHCF) is a sub-committee of the statutory Health and Wellbeing Board (see figure 1). It was formally established in 2019 just prior to the Covid-19 pandemic. The Forum has a focus on developing an evidence-based approach to prevention and the promotion of positive mental health and wellbeing across the city, so every citizen can thrive and achieve their potential. It works in partnership with the NHS led clinical services partnership groups which focus on access to treatment and care for individuals with clinical mental health issues. The forums Terms of Reference can be found in Appendix 1.

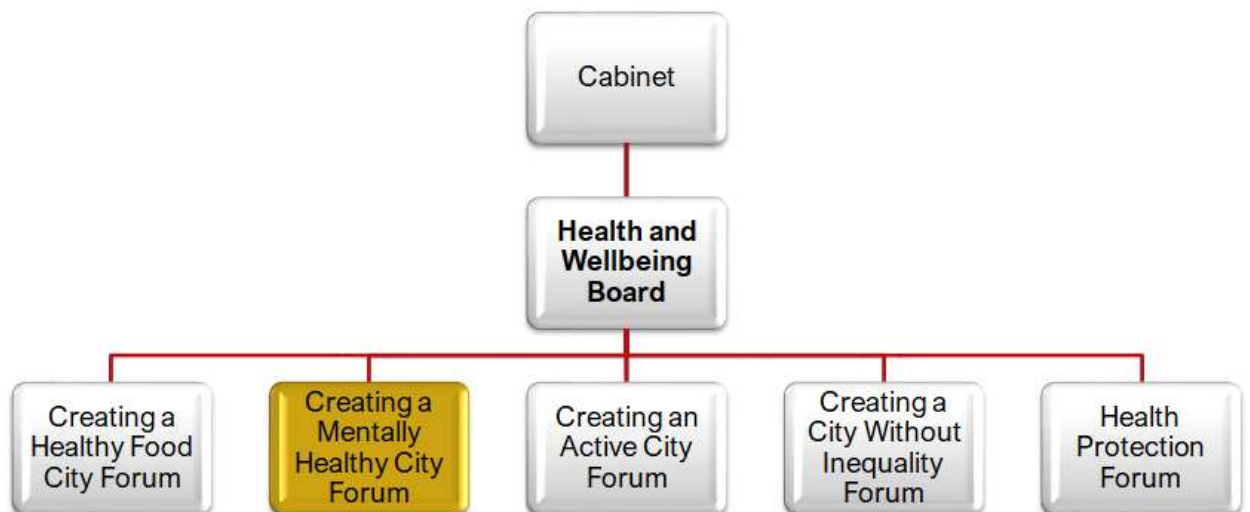


Figure 1: Health and Wellbeing Board Governance

- 4.2 The Council is committed through the Health and Wellbeing Board Strategy to creating a mentally healthy city where every citizen is supported to achieve good

mental wellness and balance to navigate life's challenges. The Health and Wellbeing Board through the strategy has set 9 ambitions to be achieved and has tasked the CMCF with overseeing the delivery of the ambitions of the Health and Wellbeing strategy. The ambitions of the H&W strategy that relate to mental wellbeing are, to work together to:

- Reduce the prevalence of depression and anxiety in adults from 21.1% to less than 12% by 2030.
- Reduce our suicide rate (persons) in the city to be in the lowest ten places in England by 2030 from 37<sup>th</sup> lowest out of 153 Upper Tier Local Authorities (UTLA).
- Reduce the emergency intentional self-harm admission rate to be within the lowest ten places in England by 2030 from 83<sup>rd</sup> lowest out of 153 Upper Tier Local Authorities (UTLA).
- Reduce the smoking prevalence in adults with a long-term mental health condition to at least the national average by 2027.
- Close the gap between people with long-term health conditions, explicitly including those with severe and enduring mental health issues, and both those in employment and those without.
- Achieve the ambitions of Triple Zero: i.e., to have zero deaths or overdoses linked to alcohol or drugs by 2030, and no-one living with substance addictions in the absence of support services.
- Work with the voluntary sector and faith leaders to embed early intervention, brief advice, and signposting in all services.
- Take proactive steps to close the inequalities in employment and education for people with long term conditions, including those with severe and enduring mental health issues.
- Deliver the targets set out in the Triple Zero Strategy to tackle harm from drugs and alcohol in our city.

4.2 The Forum meets on a bi-monthly basis and is chaired by the Cabinet Member for Health and Social Care. It has one formal sub-group currently, the Suicide Prevention Advisory Group (SPAG), which leads on the implementation of the Suicide Prevention Action Plan.

4.3 The CMHCF works with partners and organisations including the NHS, academics, voluntary sector, faith groups, and most importantly local communities. This enables coordination and co-production of place-based, upstream approaches to positive mental health and wellbeing, that reduce the need for clinical interventions. The Forum membership and Terms of Reference are being reviewed in Spring 2024 as part of a general review of Health and Wellbeing Board sub-group structures.

4.4 To focus the efforts of the forum, members will collaborate to produce The Creating a Mentally Healthy City strategy with a view to launch in Spring 2025.

## **5 Co-producing the Birmingham Mentally Healthy City strategy**

- 5.1 According to the World Health Organisation (WHO), a Healthy city is one that continually creates and improves its physical and social environments and expands the community resources that enable people to mutually support each other in performing all the functions of life and developing to their maximum potential.
- 5.2 The purpose of the strategy will be to lay out the strategic approach required to build a mentally healthy city where people are empowered and enabled to remain well. It will be a document that will be aligned with Health and Wellbeing Board's Priorities and guide the development of a Creating a Mentally Healthy City Strategic Action Plan (The Framework for Action) which will be a living document.
- 5.3 The Strategy will connect with the NHS led strategy for clinical treatment and care for people living with mental health issues. The Mental Health Provider Collaborative (MHPC) are in the process of undertaking a Mental Health Needs Assessment and Experience of Care exercise to inform their strategy focused on meeting the needs of those with mental ill health and their plans for the delivery of treatment and care. As active members of the Forum, the Collaborative will ensure these two strategic approaches seamlessly align to complement each other.
- 5.4 The strategy will be co-produced and led by members of CMHCF jointly with city-wide partners and citizens to ensure voices from a variety of backgrounds across the City influence its development and delivery. The co-production approach will draw on the methodology and learning from the recent Food and Physical Activity strategies as well as the national and international evidence of what works to improve mental wellbeing.
- 5.5 Co-production is focused on a relationship in which professionals and citizens share the power to plan and deliver improved outcomes. It is about seeing people as assets with skills and knowledge that they can bring to the table, no longer being a passive recipient of services. This will ensure that professionals, service users and citizens are equal partners in decision making, designing and delivering of the strategy. There will be extensive engagement through Community Engagement Workshops and Stakeholder Workshops to ensure the voice of Citizens informs the type of a Mentally Healthy City people would like to see.
- 5.6 The strategy will be informed by a literature review which will assess the positive and negative impact cities have on mental health and wellbeing and explores the building blocks required to create a mentally healthy city at individual, community and place levels.
- 5.7 The presentation in Appendix 2 describes the framework approach for developing the strategy.
- 5.8 Proposed timeline for developing the strategy:



Figure 2: Strategy Timeline

## 6 Suicide Prevention

- 6.1 In 2012, Preventing suicide in England: a cross government outcomes strategy to save lives, was published by the Department of Health. Reports produced by the Department Health & Social Care in 2014 & the All-Party Parliamentary Group on Suicide and Self-harm Prevention in 2015, recommended that all local authorities in England develop local Suicide Prevention Strategies and Action Plans, with oversight from Multi-agency Suicide Prevention Groups.
- 6.2 In response, the Birmingham Suicide Prevention strategy with an embedded Action Plan was published in 2019 and runs to 2024. The Suicide Prevention Advisory Group (SPAG) which reports to the Creating a Mentally Healthy City Forum (and Health and Wellbeing Board), was set up for governance.
- 6.3 The government later launched a refreshed national 5-year suicide prevention strategy in September 2023 and has asked that all relevant employers, local government, NHS and VCFSE organisations to “review their plans and approaches to ensure alignment with this new strategy”.
- 6.4 With Birmingham’s current Suicide Prevention strategy ending, and the new research and priorities laid out in the government strategy, there is opportunity to develop a new strategy which is both aligned to national priorities, and which takes our unique population into account. The proposed objective is to have a co-produced suicide prevention strategy and action plan as a clearly defined sub-strategy to the Creating a Mentally Healthy City Strategy. This will build on lived experience, promote partnerships across the city and explore a new way of understanding suicide prevention across the continuum to best meet the needs of our citizens. The strategy will be refreshed as part of the work underway to develop a Mentally Healthy City strategy.
- 6.5 A BSol 5-year Coronial Audit has been undertaken and is awaiting validation from the Coroner. The validation has been delayed due to competing priorities in the Coroner’s office. The audit combined with local intelligence gathered in collaboration with partners during the coproduction of the strategy, will provide a

sound basis and comprehensive understanding of the factors influencing suicide trends.

- 6.6 This will better inform review and updating of plans to ensure resulting interventions are tailored to respond specifically and effectively to identified needs with clear lines of ownership for actions in the plans. However, if the coronial audit is further delayed the plan will be updated without this information, using the other data sets, and updated if needed when the audit data is available.
- 6.7 For Corporate oversight, Priority 6 of the Action Plan which focuses on Research, Data collection and Monitoring, is included in the quarterly Performance and Delivery Monitoring Report to Cabinet. The activity relates to updating the Suicide Prevention Action Plan by incorporating the BSol 5-year Coronial Audit.
- 6.8 Work is commencing soon with education partners to deliver a school's suicide postvention policy, which will give schools the resources they need to minimise risk to the school community should a pupil or staff member die by suicide. The policy will include support and guidance on how to coordinate a critical incident response, communications guidance, and a directory which agencies schools should communicate with to support their communities. Once the policy has been written, engagement activities will be delivered to ensure the policy is disseminated to schools and they have the training needed to implement it safely.

## **7 Other commissioned projects**

- 7.1 The Creating a Mentally Healthy City Forum also has oversight of several other commissioned projects.
- 7.2 We commissioned Thinks Insight & Strategy to conduct a 3-month real-time listening exercise via video blogs and written blogs in Birmingham called 'The Price we Can't Pay'. The Price we Can't Pay aims to develop a better picture of the most poorly understood impacts of the Cost-of-living crisis: the impact on mental health. The final report will enable the Council to hear the real voices of a cross section of the population in Birmingham, with recommendations that will inform the developing Mentally Healthy City strategy. The report will be presented at the Creating a Mentally Health City Forum meeting on 18.04.2024.
- 7.3 We have commissioned Barnardo's to work in partnership with Our Place, Birmingham City University (BCU) and other Early Help providers on the development and delivery of a new Peer Mentoring Service with a focus on young people aged 16-25 years from LGBT+ communities, young people with disabilities and young people from Black, Asian and other minority and diverse ethnicities was put out to open tender and awarded to Barnardo's. The overall aim for the service is to encourage community wellbeing and cohesion through the creation of a self-sufficient network of support and signposting. Constructing a preventive community lead approach to tackling the challenges faced by specific and wider members of the community ensures they get the support needed on their specific personal journeys. This is a 3 year (to 2025-26) joint



funded project by Children and Young People Team and the Mental Health and Wellbeing Team.

- 7.4 We have commissioned a data analyst for 1 year to understand the needs presenting and trends of usage of the Mind Mental Healthline to inform future prevention work and the development of the Creating a Mentally Healthy City strategy. The role will develop a system dashboard, maintained by Mind to support continued analysis post our funding.
- 7.5 We are in the process of completing the procurement of Mental Health First Aider (MHFA) training for barbers across the City. The aim is to train 100 barbers from a variety of communities, with a focus on deprived areas as well as identified Health Inclusion groups across Birmingham, to allow effective recognition, signposting and communication regarding mental health with their clients and community. Barbers are frontline workers who interact and communicate with people daily. Their shops are often seen as safe places with important social and cultural functions, acting as safe spaces for men. Relationships are built with regular conversations between barbers and clients. Providing mental health and wellbeing training to barbers enables them to recognise, ask, listen and help those in their chairs to reduce stigma, increase awareness and encourage help seeking behaviours. This project will contribute to priority 1.1 of the Birmingham Suicide Prevention Strategy Action Plan, a reduction in the risk of suicide in high-risk groups, in this instance men.

## **8 Any Finance Implications**

- 8.1 This report is for information only and there are no decisions requested within the report that are likely to have any direct financial implications on the Council.
- 8.2 All funding is met wholly through the Public Health Ring Fenced Grant.
- £75,000 has been approved to co-produce the Mentally Healthy strategy.
  - £28,500 was approved for the co-production of the Suicide Prevention strategy and Action Plan strand.
  - The Price we Can't Pay was commissioned at £53,000.
  - The Barbers project has an approved budget of £23,000.
  - The Mental Health and Wellbeing budget for the Children and Young People Peer Mentoring service is £55,000 per year.
  - £33,844 was set aside for the Mind analyst role.

## **9 Any Legal Implications**

- 9.1 Currently, there are no legal implications.

## **10 Any Equalities Implications**

- 10.1 The ambition of the Creating a Mentally Healthy City Forum is “Creating a Mentally Healthy City where every citizen is supported to achieve good mental wellness and balance to navigate life’s challenges”.
- 10.2 The Birmingham Community Health Profiles explore evidence for specific communities within Birmingham. The profiles highlight the multi-layered barriers and inequalities faced by each community in relation to their everyday lives and highlight gaps in the existing evidence base and all include detail on Mental Wellness and Balance. The profiles highlight inequalities in access, experience and outcomes.
- 10.3 Coproducing the Mentally Healthy City strategy will provide opportunity to illuminate and understand the mental wellbeing inequalities faced by our citizens to enable better focused interventions.

## **11 Appendices**

- 11.1 Creating a Mentally Health Forum HASC presentation.
- 11.2 Creating a Mentally Healthy City Forum Terms of Reference
- 11.3 Co-production of the Birmingham Mentally Healthy City Strategy

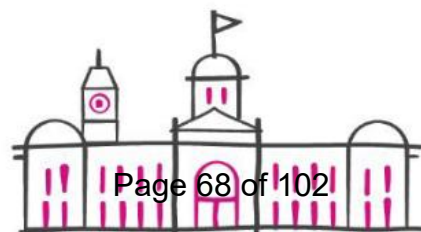
# Co-production of the Creating a Mentally Healthy City Strategy

Meeting of the CMHCF 18.04.2024

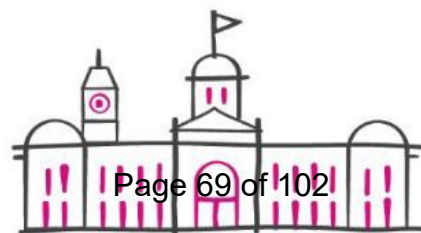


# Our Overarching Ambition

**Ambition:** Our overarching ambition is to work co-productively to create a Mentally Healthy city for individuals and communities.



# Proposed Timescales



# Mentally Healthy City Strategy Delivery Group Terms of Reference (Aims)

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Co-create a mentally healthy city strategy and framework for action document with city-wide partners from a variety of backgrounds across systems and local communities.

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The strategy is not a clinically led intervention, but a focus on the social determinants of well-being within the local communities of Birmingham through co-produced methodologies to provide a Mentally Healthy City

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Strategy is built by lived experiences of local communities and individuals.

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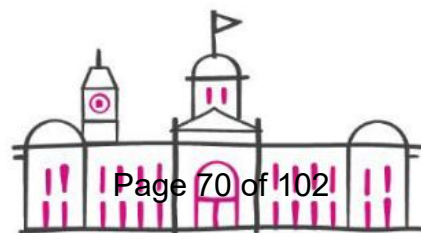
Identify rigorous research methods to produce data to inform strategy design.

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Action, delivery on key priorities for community groups

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Develop a live framework for action allowing adaptability for individual needs and systemic changes



# Mentally Healthy City Strategy Delivery Terms of Reference (Roles & Responsibilities)

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The Mentally Healthy City Strategy Delivery Group (MHCSDG) will report on the progress of the strategy to the CMHCF which will have strategic oversight.

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Each member of the partnership has an equal right to representation and to have their voices heard in the delivery group.

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Partner organisations will utilise expertise, research data and sector work to inform and co-create the strategy based on lived experiences.

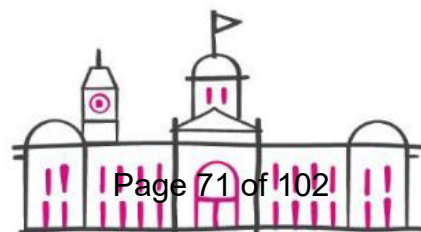
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For members to identify areas of best practice at addressing social, economic and environmental factors which impact or influence mental health, which can be fed into the strategy.

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Agreement that by being a member of the delivery group will result in accountability for actions and deliverables.

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# Steering Group Overview

The steering group will provide oversight and Strategic guidance for the Strategy. Key Roles and Responsibilities will include:



Ensure that the strategy aligns with core objectives of each creating a city forums.



Provide support and information on key targeted group/areas.



Monitor Project Quality



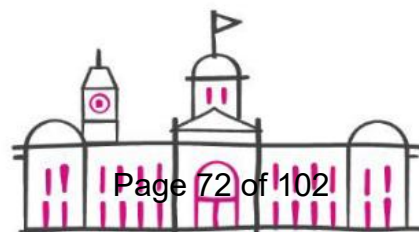
Review and Inform Project Outcomes



Evaluate



Promote and Share.





# Co-Production of the Strategy



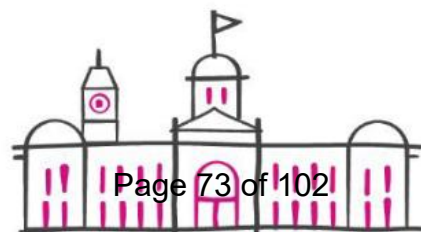
The purpose of the strategy will be to lay out the strategic approach required to build a mentally healthy city where people are empowered and enabled to remain well.



A document that will be aligned with Health and Wellbeing Board's Priorities and provide strategic direction which will guide the development of a Creating a Mentally Healthy City Action Plan (**The Framework for Action**) which will be a living document.



Develop a Co-produced strategy led by **CMHCF** jointly with city-wide **partners** from a variety of backgrounds across the Mental Health and Wellbeing system.





# Our view of Co-production



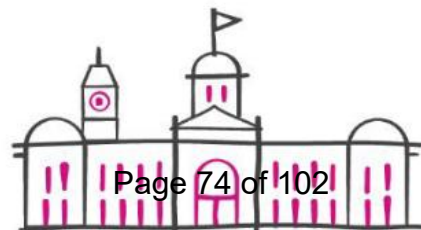
Co-production is focused on a relationship in which professionals and citizens share the power to plan and deliver improved outcomes



Co-production is about seeing people as assets with skills and knowledge that they can bring to the table, no longer being a passive recipient of services.



Co-production focuses on ensuring that professionals, service users and citizens are equal partners in decision making, designing and delivering on our strategy.



# Our Co-Production Approach Method



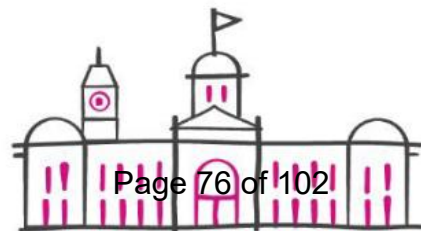
# The Journey so far...

## What has already been done

- April 2023 workshop that explored areas to be considered in the development of the **Framework for Action**.
- Developed a **Mental Wellbeing Needs Assessment**
- Commissioned Initiatives and Projects

## How we are going to build on this?

- Feedback from the April 2023 workshop will inform and shape the development of the~;
  1. **Community Workshops**
  2. **Stakeholders Workshops**
- The Mental Wellbeing Needs Assessment will be a key component for our Evidence based along with the:
  1. **Literature Review**
  2. **Data and feedback from Projects/Initiative. E.g.: The price we can't pay**



# Community Engagement Workshops (CEW)

## Our Delivery Provider Proposed will target areas:

Areas of high deprivation

Communities with high prevalences of depression & anxiety

Inclusion health Groups

Areas of higher mental health inequalities

Representatives of the demographic of the city

## What we aim to gather feedback around:

What do citizens and communities view and understand as their mental health & wellbeing

What is important for citizens mental health & wellbeing individual , community and place

What is positive resilient factors for citizens mental health & wellbeing

What social and wider determinants impact on their mental health & wellbeing





# Literature Review Scope

## Topic areas:

### How do cities impact on Mental Health?

- Positive factors
- Negative factors

### What is a Mentally Healthy City?

- Examples from across the globe
- Knowledge and lessons learnt on what works.

### What works to create a Mentally Healthy cCity?

- Individual factors
- Community factors
- Placed based factors

## Data & Intel will be used:

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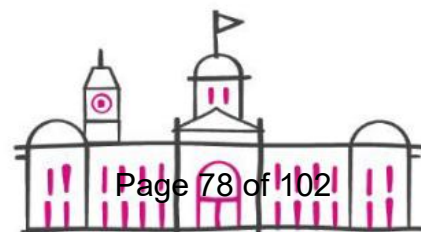
To shape the priorities of the strategy.

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To guide discussions at stakeholder workshops.

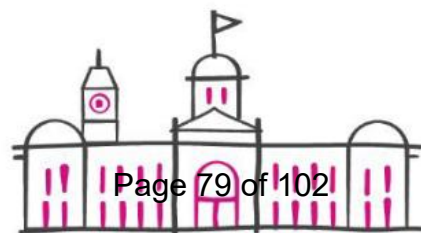
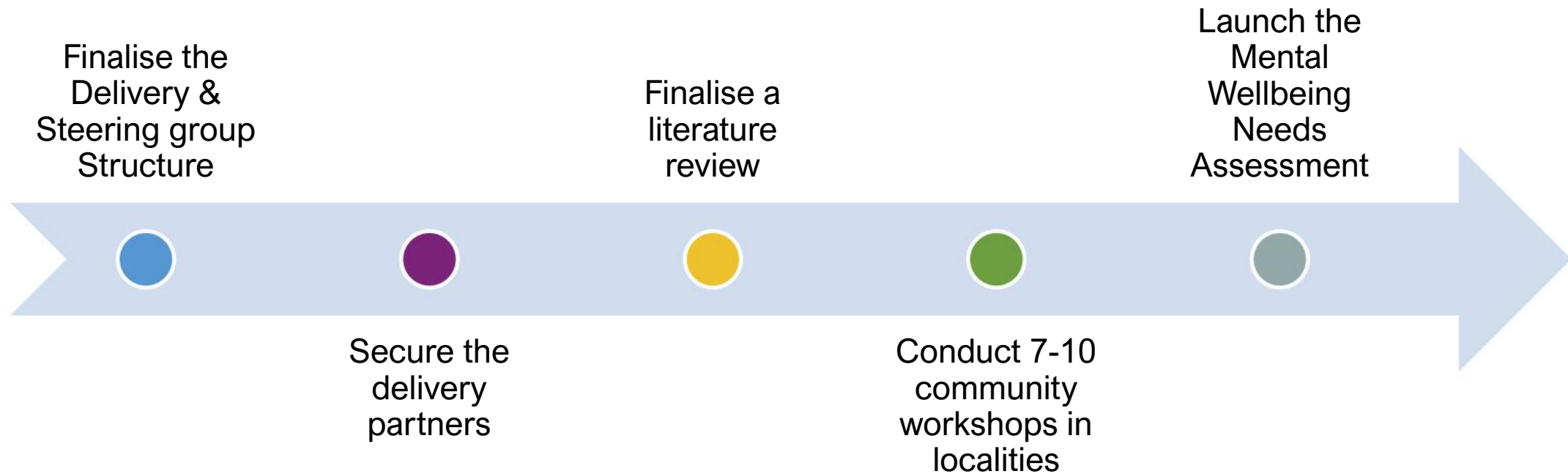
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To ensure an evidence-based approach



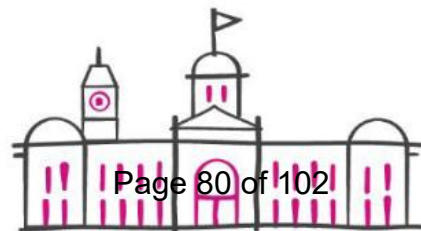
# Next Steps – Key Actions

## Phase 1 : April - June 2024



# Discussion: Is this the right process

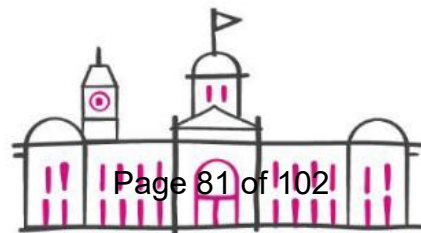
Have we got it right in terms of progressing the co-production of the strategy?





# Any questions, comments or statement ?

To be included in the workshop, please email:  
[mentalwellbeing@birmingham.gov.uk](mailto:mentalwellbeing@birmingham.gov.uk)





# Creating a Mentally Healthy City Forum.

***“Creating a Mentally Healthy City where every citizen is supported to achieve good mental wellness and balance to navigate life’s challenges”.***

Health & Adult Social Care (HASC) Overview & Scrutiny Committee meeting, 07.05.2024

Jane Itangata, Service Lead Mental Health and Wellbeing



# Mental Health and Wellbeing

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According to the World Health Organisation (WHO), Mental Health is ‘a state of mental wellbeing that enables people to cope with stresses of life, realise their abilities, learn well and work well, and contribute to their community.’ Creating a city that enables this is much broader than the provision of clinical mental health support and requires action across the life course.

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Everyone has Mental Health just like Physical Health and it is equally important!

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Mental Health is not defined by presence or absence of a mental illness or disorder.

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A person can have good mental health even with a diagnosis of a mental illness just like someone can have poor mental health without a diagnosis.

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# Background

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Compared to England and the West Midlands region, Birmingham is disproportionately affected by poor mental wellbeing. Currently, there is a higher-than-average prevalence of depression in adults. 21.1% Birmingham against 16.9% England and 17.7% at Region.

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It also has a much greater proportion of people (10.4%) self-reporting a low satisfaction score compared to England (6.1%) and the West Midlands (6.5%).

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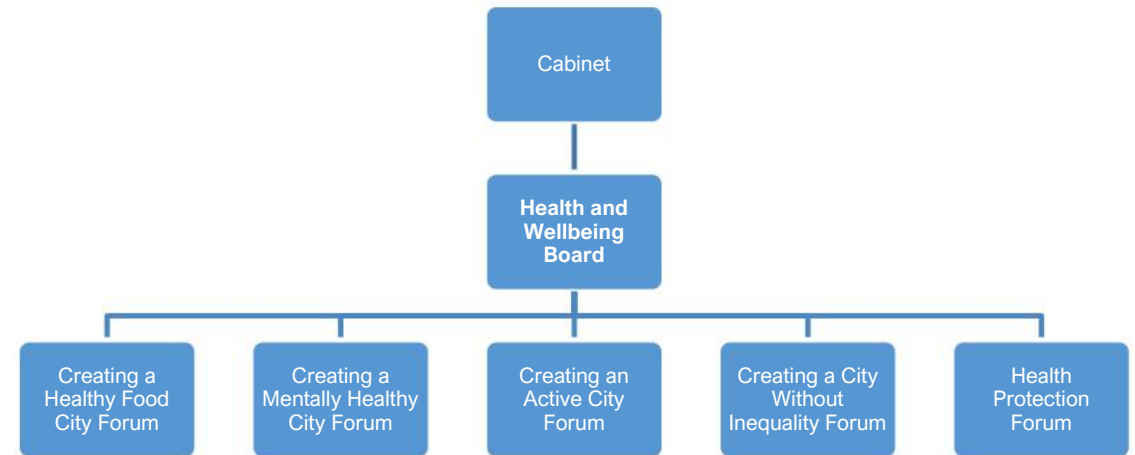
According to the Birmingham COVID-19 Impact Survey, by July 2020 more than half (53%) said their mental health had deteriorated since the pandemic started. The impacts on mental wellbeing included bereavement, loneliness, and common mental health conditions, such as anxiety and depression. Through non-recurrent additional funding the Council was able to mobilise 14 interventions specifically addressing these issues.

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There are further inequalities highlighted in the Health and Wellbeing (H&W) strategy, within the city with more deprived wards reporting lower resilience and poorer mental wellbeing, particularly in children. Equally, there are inequalities within certain communities, such as the LGBTQ+ community, who face an increased risk of suicide and self-harm.

# Creating a Mentally Healthy City Forum

- The 'Creating a Mentally Health City Forum' (CMHCF) is a sub-committee of the statutory Health and Wellbeing Board formally established in 2019 just prior to the Covid-19 pandemic. The Forum has a focus on developing an evidence-based approach to prevention and the promotion of positive mental health and wellbeing across the city, so every citizen can thrive and achieve their potential.
- The Health and Wellbeing Board through the strategy has set 9 ambitions to be achieved and has tasked the CMHCF with overseeing the delivery of the ambitions of the Health and Wellbeing strategy
- The CMHCF works with partners and organisations including the NHS, academics, voluntary sector, faith groups, and most importantly local communities. This enables coordination and co-production of place-based, upstream approaches to positive mental health and wellbeing, that reduce the need for clinical interventions.
- The Forum meets on a bi-monthly basis and is chaired by the Cabinet Member for Health and Social Care.



# Chair



Councillor Mariam Khan  
Cabinet Member for Health and Social Care  
Chair of the Birmingham and Health and Wellbeing Board  
Chair of the Creating Mentally Healthy City Forum.



Councillor Rob Pocock  
Interim Cabinet Member for Health and Social Care  
Interim Chair of the Creating a Mentally Healthy City Forum.

# Coproducing a Mentally Healthy City strategy

- The purpose of the strategy will be to lay out the strategic approach required to build a mentally healthy city where people are empowered and enabled to remain well. It will be a document that will be aligned with Health and Wellbeing Board’s Priorities and guide the development of a Creating a Mentally Healthy City Strategic Action Plan (The Framework for Action) which will be a living document.
- The strategy will be co-produced and led by members of CMHCF jointly with city-wide partners and citizens to ensure voices from a variety of backgrounds across the City influence its development and delivery.
- Co-production is focused on a relationship in which professionals and citizens share the power to plan and deliver improved outcomes. It is about seeing people as assets with skills and knowledge that they can bring to the table, no longer being a passive recipient of services. This will ensure that professionals, service users and citizens are equal partners in decision making, designing and delivering of the strategy.
- The strategy will be informed by a literature review which will assess the positive and negative impact cities have on mental health and wellbeing and explores the building blocks required to create a mentally healthy city at individual, community and place levels.



Proposed Timeline



# Suicide Prevention strategy

- With Birmingham's current Suicide Prevention strategy ending, and the new research and priorities laid out in the government strategy, there is opportunity to develop a new strategy which is both aligned to national priorities, and which takes our unique population into account.
- The proposed objective is to have a co-produced suicide prevention strategy and action plan which builds on lived experience, promotes partnerships across the city and explores a new way of understanding suicide prevention across the continuum to best meet the needs of our citizens. The strategy will be refreshed as part of the work underway to develop a Mentally Healthy City strategy.
- A BSol 5-year Coronial Audit has been undertaken and is awaiting validation from the Coroner. The validation has been delayed due to competing priorities in the Coroner's office. The audit combined with local intelligence gathered in collaboration with partners during the coproduction of the strategy, will provide a sound basis and comprehensive understanding of the factors influencing suicide trends.
- The Suicide Prevention Advisory Group (SPAG) which reports to the Creating a Mentally Healthy City Forum (and Health and Wellbeing Board), was set up for governance.



# Other commissioned projects

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The Price We Can't Pay, a 3-month real-time listening exercise via video blogs and written blogs, aims to develop a better picture of the most poorly understood impacts of the Cost-of-living crisis: the impact on mental health. The final report will enable the Council to hear the real voices of a cross section of the population in Birmingham, with recommendations that will inform the developing Mentally Healthy City strategy.

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The overall aim for the 16–25-year-olds Peer Mentoring service is to encourage community wellbeing and cohesion through the creation of a self-sufficient network of support and signposting. Constructing a preventive community lead approach to tackling the challenges faced by specific and wider members of the community ensures they get the support needed on their specific personal journeys.

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Data analysis to understand the needs presenting and trends of usage of the Mind Mental Healthline to inform future prevention work and the development of the mentally Healthy City strategy.

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Mental Health First Aider (MHFA) training for barbers across the City with the aim to train 100 barbers from a variety of communities, with a focus on deprived areas as well as identified Health Inclusion groups across Birmingham, to allow effective recognition, signposting and communication regarding mental health with their clients and community.

# Finances

- All funding is met wholly through the Public Health Ring Fenced Grant:
  - £75,000 has been approved to co-produce the Mentally Healthy strategy.
  - £28,500 was approved for the co-production of the Suicide Prevention strategy and Action Plan strand.
  - The Price we Can't Pay was commissioned at £53,000.
  - The Barbers project has an approved budget of £23,000.
  - The Mental Health and Wellbeing budget for the Children and Young People Peer Mentoring service is £55,000 per year.
  - £33,844 was set aside for the Mind analyst role.

# Equalities

- The ambition of the Creating a Mentally Healthy City Forum is “Creating a Mentally Healthy City where every citizen is supported to achieve good mental wellness and balance to navigate life’s challenges”.
- The Birmingham Community Health Profiles explore evidence for specific communities within Birmingham. The profiles highlight the multi-layered barriers and inequalities faced by each community in relation to their everyday lives and highlight gaps in the existing evidence base and all include detail on Mental Wellness and Balance. The profiles highlight inequalities in access, experience and outcomes.
- Coproducing the Mentally Healthy City strategy will provide opportunity to illuminate and understand the mental wellbeing inequalities faced by our citizens to enable better focused interventions.

# Questions?





## TERMS OF REFERENCE

### Creating a Mentally Healthy City Forum

#### 1. PURPOSE

- 1.1 The 'Creating a Mentally Healthy City' Forum is a sub-committee of the statutory Health and Wellbeing Board. This Forum will focus on developing a public health approach to mental health and wellbeing in the City, delivering the Public Mental Health Compact, and evolving an evidence-based approach to mental wellbeing that supports every citizen to thrive.
- 1.2 The 'Creating A Mentally Healthy City' Forum will provide a link between the Health and Wellbeing Board and the NHS Mental Health Pathways Programme Board and NHS Mental Health Partnership Stakeholder Board.
- 1.3 Its purpose is to enable local partnership between the Local Authority, NHS, third and voluntary sector organisations, Faith Groups, the business community, and the wider Public Health sector. These organisations will work as a collective to deliver specific characteristics of the Health and Wellbeing Strategy – Creating a Bolder, Healthier city Health and Wellbeing priorities for Birmingham – namely the mental wellness and balance theme.

#### 2. OBJECTIVES

The overarching objectives of this sub-group, 'Creating a Mentally Healthy City', are:

- 2.1 To agree a Framework for Action that will be the focus of the sub-group, enabling the measurement of impact and improvement in local communities in relation to prevention, and the promotion of mental wellbeing.
- 2.2 To work in partnership to implement the evidence-based approaches which create positive mental health and wellbeing, working upstream to increase mental wellness and reduce the need for clinical interventions
- 2.3 To provide a strategic direction and seek alignment with the work being undertaken through a range of other relevant work programmes and Boards
- 2.4 To contribute to the development of the Joint Strategic Needs Assessment (JSNA)

- 2.5 To agree the level of partnership engagement that will measure the impact and improvements in how we work in promoting mental wellbeing
- 2.6 To progress the delivery of a Report on the activities of the Forum to the Health and Wellbeing Board on an annual basis
- 2.7 To promote best practice and sharing of ideas including collaboration that lead to maximising of external funding opportunities
- 2.8 To collaborate and share local information and intelligence between partners and stakeholders that will lead to better relationships with local communities

### **3. PRINCIPLES**

The Forum expects all partner agencies to:

- 3.1 Embrace the aims and objectives of the Forum
- 3.2 Consult and/or inform the Forum over organisational changes (including any changes in representation) that may impact on collective working
- 3.3 Follow and work within the performance management framework agreed by Forum partners
- 3.4 Proactively manage risk and acknowledge the principle of shared risk in the context of partnership working
- 3.5 Own the health and wellbeing inequalities agenda through promoting and driving service transformation and improvement within their respective services and organisations
- 3.6 Report on progress on mutually agreed actions
- 3.7 Share relevant information and promote collaborative and innovative work

### **4. MEMBERSHIP**

The Chair of the Board will be the Birmingham City Council Cabinet Member with a portfolio for Health

- 4.1 The Forum will have a core group of organisations that will play a key role and will have the responsibility to improve the specific aspects/focus of the Forum in relationship to the health and wellbeing of the population of Birmingham.
- 4.2 Forum Members will have the responsibility for communicating the Group's business through their respective organisation communication channels



- 4.3 Each Lead Officer will have responsibility for specific theme areas and items in the Forum Action Plan and to report on these to the sub-committee
- 4.4 Membership will be continuously reviewed, and the Forum reserves the right to co-opt individuals for specific areas as necessary provided that:
  - (a) any such new member can demonstrate to the satisfaction of the Forum the contribution that they can make to the overriding aims and objectives; and
  - (b) in deciding whether to admit any such new member the Board shall have regard to the resulting size and composition of the Board were the new member to be admitted
- 4.5 If a member of the group misses three consecutive meeting without giving notice their membership on the sub-committee will be reviewed
- 4.6 The Forum requires its members to:
  - 4.6.1 Have the authority to make decisions on behalf of their organisation in relation to mental wellbeing, or to be able to seek and secure decisions within a given timescale as agreed by the Forum
  - 4.6.2 Attend all meetings or, in exceptional circumstances, to arrange for a suitable named delegate to attend as a representative. Delegated representative should be suitably briefed prior to the meeting and have the authority to make decisions in the same capacity as a core member
  - 4.6.3 Have responsibility for representing the views of their nominating organisations and keep their nominating organisation apprised of any actions taken, and decisions and progress made by the Forum
  - 4.6.4 Ensure that actions on delivery and progress are carried out promptly on any actions and strategies agreed by the Forum
  - 4.6.7 Have positive and constructive discussions in order to achieve workable solutions to common issues

Other persons may attend meetings of the Board with the agreement of the Chair and/or Deputy Chair

The core membership of the Forum can be seen at APPENDIX A.

Membership list of other invited participants can be seen at APPENDIX B:

## **5. MEETINGS AND WORKING ARRANGEMENTS**

- 5.1 The Forum will meet every two months scheduled for two hours. Additional meetings may be held as necessary at the discretion of the Chair should commissioning decisions drive the Agenda
- 5.2 Chairing arrangements will be agreed by the Chair of the Health and Wellbeing Board

- 5.3 The Agenda for meetings, agreed by the Chair, and all accompanying papers will be sent to members at least five working days before the meeting. Late agenda items and/or papers may be accepted in exceptional circumstances at the discretion of the Chair
- 5.4 Action Notes of all meetings of the Forum (including a record of attendance and any conflict of interest) will be approved and circulated within 10 working days before the next meeting
- 5.5 The Forum administrative support will be provided by the Public Health Division and will have responsibility for arranging meetings, note-taking, and disseminating supporting information to the Forum Members
- 5.6 The Forum will be monitored and accountable to the Health and Wellbeing Board through the agreed reporting arrangements
- 5.7 Forum Members will be requested to contribute to a Forward Plan that will be used to develop the Agenda for the meeting
- 5.8 The Forum may establish a 'Task and Finish' Group as agreed by the Forum Co-Chairs

## **6. DECISIONS**

- 6.1 Recommendations and decisions will be arrived at by consensus and these will be recorded in the action notes and on the Action Log.

## **7. CONFLICTS OF INTEREST**

- 7.1 If a representative has a conflict of interest in a matter to be decided at a meeting of the Forum, the representative concerned shall declare such interest at or before discussions begin on the matter. The Chair shall ask for this conflict to be recorded in the actions notes and unless otherwise agreed by the Forum that representative shall take no part in the decision-making process.

## **8. REVIEW**

- 8.1 These Terms of Reference will be reviewed annually for updating purpose and to express the views of relevant partner agencies.

Version 0.5 Final  
15 November 2022

Dr Justin Varney  
Director of Public Health  
Public Health Division  
Partnership, Insight and Prevention  
Birmingham City Council



APPENDIX A:

Core Membership

|                                 | <b>NAME</b>  | <b>ROLE/ORGANISATION</b>  |
|---------------------------------|--|---|
| Chair                           | Cllr Mariam Khan   | Cabinet Member for Health and Social Care, Birmingham City Council  |
| Deputy Chair                    | TBC  |   |
| Public Health                   | Stacey Gunther   | Service Lead, Healthy Behaviours and Communities, Public Health, Birmingham City Council  |
| NHS Commissioner Representative | Joanne Carney  | Associate Director Joint Commissioning, Birmingham and Solihull Clinical Commissioning Group  |
| Academic Representatives        | Dr Adam Benkwitz<br><br>Dr Karen Newbigging<br><br>Dr Adam Walsh | Head of Sport and Health, and Social Care, Newman University<br><br>Director of Impact & Knowledge Exchange; Lecturer Health Service Management Centre; and Director of Institute for Mental Health UoB<br><br>Head of Health and Life Science, BCU |
| BVSC Representative             | Helen Wadley   | Chief Executive Officer, Birmingham MIND  |
| Schools Forum                   | Dr Bev Mabey   | Washwood Heath Multi Academy Trust  |

APPENDIX B:

Other Essential Members – representatives from the following organisations:

|                                  |   |
|----------------------------------|---|
| Local Councillors                | Office for Health Improvement and Disparities (OHID)      |
| NHS Providers                    | Faith Group   |
| NHS Commissioners                | West Midlands Combined Authority                          |
| Voluntary Sector                 | Youth City Board  |
| Charity Sector                   | Office of the West Midlands Police and Crime Commissioner |
| Birmingham Education Partnership | Department of Work and Pensions                           |
| Adult Social Care                |   |

