BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

TUESDAY, 18 JUNE 2019 AT 10:00 HOURS
IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA
SQUARE, BIRMINGHAM, B1 1BB

AGENDA

1 NOTICE OF RECORDING/WEBCAST

The Chairman to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2 **APPOINTMENT OF COMMITTEE AND CHAIRMAN**

To note the resolution of the City Council appointing the Committee, Chair and Members to serve on the Committee for the period ending with the Annual Meeting of the City Council 2020, as follows:-

Labour (6):-

Councillors Mick Brown, Diane Donaldson, Zaheer Khan, Mohammed Idrees, Ziaul Islam and Rob Pocock (Chairman).

Conservative (1):-

Councillor Peter Fowler

Liberal Democrat (1):-

Councillor Paul Tilsley

3 **ELECTION OF DEPUTY CHAIR**

To elect a Deputy Chair to substitute for the Chair if absent.

4 APOLOGIES

To receive any apologies.

5 - 10 5 ACTION NOTES/ISSUES ARISING

To confirm the action notes of the meeting held on 14th May 2019.

6 **DECLARATIONS OF INTERESTS**

Members are reminded that they must declare all relevant pecuniary and non pecuniary interests arising from any business to be discussed at this meeting. If a disclosable pecuniary interest is declared a Member must not speak or take part in that agenda item. Any declarations will be recorded in the minutes of the meeting.

7 TERMS OF REFERENCE

To fulfil the functions of an Overview and Scrutiny Committee as they relate to any policies, services and activities concerning adult safeguarding, social care and public health; and to discharge 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; and
- The exercise of the power to make referrals of contested service reconfigurations to the Secretary of State as previously delegated to the Health and Social Care Overview and Scrutiny Committee by the Council.

8 JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEES - APPOINTMENTS

The Committee is asked to agree appointments to the Joint Health Overview and Scrutiny Committees including Councillor Rob Pocock as Joint Chair: -

<u>Birmingham and Sandwell Joint Health Overview and Scrutiny Committee</u> (5 Members)

Labour (3); Conservative (1); Liberal Democrat (1)

<u>Birmingham and Solihull Joint Health Overview and Scrutiny Committee</u> (5 Members)

Labour (3); Conservative (1); Liberal Democrat (1)

9 MINOR SURGERY AND NON OBSTETRIC ULTRASOUND SERVICES (NOUS) LISTENING EXERCISE

Dr Ian Sykes, Clinical Lead; Angela Poulton, Deputy Chief Officer, Strategic Commissioning and Redesign; Kally Judge, Commissioning Engagement Manager, Sandwell and West Birmingham Clinical Commissioning Group

61 - 74 PERIOD POVERTY: EVIDENCE GATHERING

Neelam Heera, Founder of Cysters.

11 WORK PROGRAMME - JUNE 2019

For discussion.

75 - 82

12 **DATES OF MEETINGS**

To approve a schedule of dates for meetings during 2019/2020.

(A) The Chairman proposes that meetings be held at 1000 hours on the following Tuesdays in the Council House:-

2019	_2020
18 June	21 January
16 July	18 February
17 September	17 March
15 October	21 April
19 November	19 May
17 December	·

(B) The Committee is also requested to approve Tuesdays at 1000 hours as a suitable day and time each week for any additional meetings required to consider 'requests for call in' which may be lodged in respect of Executive decisions.

Monthly dates have been reserved with a view to planning all work i.e. Committee meetings, inquiries etc. to fit into the schedule.

13 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).

14 OTHER URGENT BUSINESS

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

15 **AUTHORITY TO CHAIRMAN AND OFFICERS**

Chairman to move:-

'In an urgent situation between meetings, the Chairman jointly with the relevant Chief Officer has authority to act on behalf of the Committee'.

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BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

1000 hours on 14th May 2019, Committee Room 2 – Actions

Present:

Councillor Rob Pocock (Chair)

Councillors: Peter Fowler, Ziaul Islam, Chauhdry Rashid and Suzanne Webb.

Also Present:

Dr Angela Brady, Clinical Director Mental Health, BSol CCG

Sylvia Broadley, Air Quality Manager

Joanne Carney, Director of Joint Commissioning, BSol CCG

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

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office

Sonia Mais-Rose, Head of Service, Adults Social Care

Gail Sadler, Scrutiny Officer, Scrutiny Office

Duncan Vernon, Acting Assistant Director, Public Health

Mark Wolstencroft, Operations Manager, Environmental Protection

1. NOTICE OF RECORDING

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

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

2. DECLARATIONS OF INTEREST

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

Item 7 – Councillor Peter Fowler declared that he is a member of the West Midlands Combined Authority Overview and Scrutiny Committee.

3. APOLOGIES

Apologies were received from Councillors Nicky Brennan, Mick Brown and Paul Tilsley.

4. ACTION NOTES/ISSUES ARISING

The action notes of the meeting held on 16th April 2019 were agreed.

The following matters have arisen since the committee last met:

• Enablement Call-In Report

Councillor Pocock confirmed that the Enablement report, which contains new proposals on how the service will continue in future, along with the Call-In Report, which was deferred from the 14th May 2019 meeting will now be considered at the next Cabinet meeting on 22nd May 2019 where he will present the committees concerns about the previous proposals.

Adult Social Care Performance Monitoring

Following today's meeting there would be an informal discussion on potential new performance indicators in the new municipal year.

Item 5 – Consultation on NHS Sandwell and West Birmingham CCG Commissioning Boundary

The preferences expressed by the committee were submitted into the consultation process on 24th April 2019.

• Item 7 – Healthwatch Birmingham: Waiting Room Study

Detailed reports for each of the 9 hospitals cited in the study were circulated to members on 9th May 2019.

• <u>Item 8 – Birmingham Public Health Green Paper – Consultation Response</u>

The views of the committee, as expressed in the notes of the meeting, were submitted into the consultation process on 24th April 2019.

Councillor Fowler reiterated that, at the previous meeting, he had indicated to the Assistant Director of Public Health, that he would be interested to hear feedback on the public reaction to the document as he felt it was too long and a more 'user friendly' document should be considered in future.

5. MENTAL HEALTH STRATEGY

Joanne Carney (Director of Joint Commissioning, BSol CCG) and Dr Angela Brady (Clinical Director Mental Health, BSol CCG) attended and set out the high level strategic outcomes and objectives of the strategy. An action plan underpins the strategy detailing how these will be delivered. Seven outcome indicators have been identified which will evidence the direction of travel towards improvement.

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

- There is a dashboard that underpins the seven outcomes with measurable data. Joanne Carney considered that those indicators might become part of a wider set of dashboard measures that the committee is currently putting together which was welcomed by the Chair.
- The Chair suggested that, as the age range of the strategy i.e. 0-25s spans both the HOSC and Education and Children's Social Care O&S Committee, there might be scope for a joint piece of scrutiny work in the future.
- Central Government is providing £2.3 billion nationally of extra funding ring fenced for mental health prevention/early intervention. The money is received over a number of planning years. One of the objectives is to get waiting times down to 4 weeks. The CCG has a Mental Health Investment Standard, which they have a statutory obligation to meet, and have to show an increase on mental health investment year on year as a percentage of the overall allocation. This has been achieved over the last 2 years. It was suggested that this should also become another measure that the committee may wish to track.
- An extensive piece of business intelligence work has been undertaken by the CCG about the number of children living in poverty in the City. A dashboard has been produced to evaluate how interventions are making a difference.
- The proximity of partnership working i.e. joint commissioning between the CCG and local authority and joint working location helps to combine planned work and avoid duplication.

RESOLVED:

- Joanne Carney will provide:-
 - A copy of the dashboard indicators/data which underpins the 7 outcomes.
 - o Information on children living in poverty in the City.
- A further report is scheduled on the work programme later in the municipal year.

6. ADULT SOCIAL CARE DRAFT DAY OPPORTUNITIES STRATEGY

Maria Gavin (Assistant Director, Quality and Improvement, Adults Social Care) and Sonia Mais-Rose (Head of Service, Adults Social Care) presented a high level overview of the proposed new vision for day opportunities and the committee was updated on progress made to date with the consultation.

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

- Concern was raised around the following issues:-
 - The proposal put forward makes no predetermination about the outcome of the future model of day care opportunities but in the budget /financial plan there is reference to potential savings.
 Identified as one of the areas for those savings is reducing

expenditure on existing buildings. Therefore, clarification was sought that whatever comes out of the consultation, should there be a budgetary implication, then the budget would need to change and be realigned rather than the budget predetermining the result of the consultation.

- Members were told that "there is no predetermination. The way forward would be reflective of the outcome of the consultation and if there are wider changes needed in historical decisions...... We have checked with Legal that there is no predetermination. All our previous proposals were quashed. This is a fresh exercise."
- For clarity, if an individual wants or benefits from their current day care provision then the strategy would allow them to continue to access that form of service.
 - "The consultation recognises that people might have a preference for different models including traditional day centres. The model recognises that there would need to be a range of support available."
- Should a service user in receipt of direct payments have insufficient funds to pay for their preferred choice e.g. a day centre, what would be done to bridge the gap? Would the direct payment system avoid the risk that someone may not be able to access their preferred form of service because the funding of the direct payment is not sufficient to buy it.
 - Further information on direct payments would be circulated to members once available.
- Members were encouraged to attend the Day Centre Consultation events being held around the City. Alternatively, if members were unable to make the specific events and wanted to visit a Day Centre this could be arranged to suit individual members' diaries.
- Response rate Consultation sessions run within services are very well
 attended by both service users and carers. The public engagement events
 are not as well as attended as was hoped and have had quite low numbers.
 Independent provider sessions have been well attended by both service users
 and carers. Therefore in-house, independent and voluntary sector provider
 events have had very good attendance.
- The committee will need to make a response to the consultation. Comments from members on the following two lines of the consultation would be helpful:-
 - The 6 principles/statements contained in question 4 of the questionnaire.
 - The diagram of the Proposed Day Service Model i.e. Enablement;
 Personalised Support and Specialist Intensive Support and the set of

priorities attached to the 3 areas of support structure within the proposed strategy.

- From the previous HOSC meeting, where the pre-consultation discussion had taken place, it was felt that the 6 principles/statements which had been put forward by service users and carers had been taken on board.
- Scrutiny Officers to coordinate a draft response reflecting any further comments, points of detail or other concerns of the committee which will be circulated to members and, once approved, submitted into the consultation process.
- When the new committee is in place it might want to take up the offer of a set of site visits to Day Centres.

RESOLVED:

 Maria Gavin to forward information on direct payments and the determination used to set payment levels.

7. PROGRESS REPORT ON IMPLEMENTATION: 'THE IMPACT OF POOR AIR QUALITY ON HEALTH'

Mark Wolstencroft (Operations Manager, Environmental Protection); Sylvia Broadley (Air Quality Manager) and Duncan Vernon (Acting Assistant Director, Public Health) presented a report to track the implementation of the remaining 13 outstanding recommendations.

In discussion, and in response to Members' comments, the following was agreed:-

- Recommendation 1 Cabinet Member Assessment 2 Agreed.
- Recommendation 2 Cabinet Member Assessment 2 Agreed.
- Recommendation 3 Cabinet Member Assessment 6 Agreed.
- Recommendation 4 Cabinet Member Assessment 2 Amended to 3.
- Recommendation 5 Cabinet Member Assessment 1 Agreed.
- Recommendation 6 Cabinet Member Assessment 3 Agreed.
- Recommendation 7 Cabinet Member Assessment 2 Amended to 3.
 - Time of implementation of the recommendation is yet to be confirmed.
- Recommendation 8 Cabinet Member Assessment 1 Agreed.
- Recommendation 9 Cabinet Member Assessment 6 Agreed.
- Recommendation 10 Cabinet Member Assessment 2 Agreed.
- Recommendation 11 Cabinet Member Assessment 2 Agreed.
- Recommendation 12 Cabinet Member Assessment 2 Agreed.
- Recommendation 14 Cabinet Member Assessment 1 Agreed.

RESOLVED:

- An update report on 'The Effects of Pollution on Health' to be presented to the committee in 12 months.
- A report on the 'Clean Air Fund Programme' is presented to committee when it has been implemented.
- That the next tracking report is presented to the committee in 6 months.

8. WORK PROGRAMME - MAY 2019

The work programme was noted.

The new committee will meet informally on the 4th June to discuss the priorities for the work programme.

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

None.

10. OTHER URGENT BUSINESS

None.

11. AUTHORITY TO CHAIRMAN AND OFFICERS

RESOLVED:-

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

The meeting ended at 1217 hours.



Minor Surgery and Non Obstetric Ultrasound Scan Service (NOUS) Listening Exercise



SWB CCG

• Who Are We?

• Our Purpose?

Our Population



NHS 10 Year Plan





Primary Care Network (PCN) Boundaries

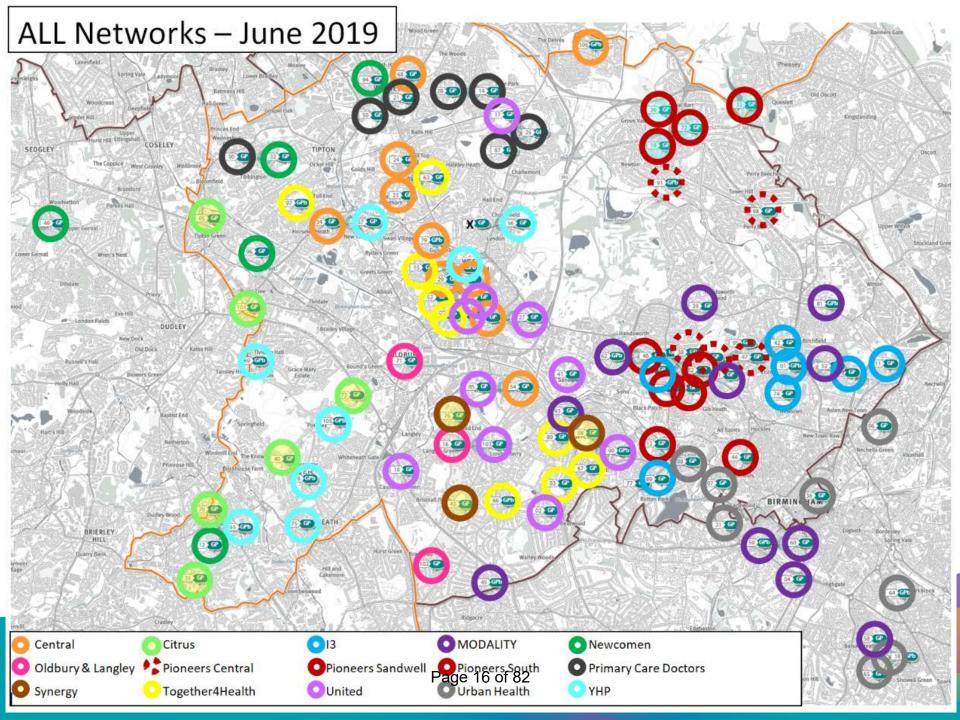
- National requirements
- List Size
- Boundary



Primary Care in an ICS

ij		Individual	Supporting individuals to manage their own care through self-care, care navigation and improving patient activation.
Ш		Neighbourhood 30~50k	Primary Care Networks that bring together local health and care professionals around natural local neighbourhoods of care – improving integrated ways of working and more joined-up pathways; and embedding population health approaches.
	畾	Place ~250-500k	Groups of local primary care networks that work alongside partners in secondary care, mental health and with CCGs and local authorities, to: • Integrate health and care services • Work preventatively to stop people becoming acutely unwell • Care models to redesign care
		System 1+m	Providers and commissioners collaborating to: • Hold a system control total • Implement strategic change • Take on responsibility for operational and financial performance • Population health management





Minor Surgery





Minor Surgery

• What is Minor Surgery?

 What are the Current Arrangements for Minor Surgery?

 What do the Changes Mean for Our Patients?



Non Obstetric Ultrasound Scan (NOUS)





NOUS

• What is NOUS?

What are the Current Arrangements for NOUS?

What do the Changes Mean for Our Patients?



Our Responsibilities To Our Patients

The Health and Social Care Act 2012 dictates the NHS has a duty to involve people in decisions about their health care and to consult and involve people when planning or changing commissioned health services.



Our Engagement Approach

















Our Public Meetings

- Tuesday 4th June 2019, 2.00-5.00pm
 Handsworth Fire Station, Rookery Rd, Birmingham, B21 9QU
- Tuesday 25th June 2019, 2.00-5.00pm
 Portway Lifestyle Centre, Newbury Lane, Oldbury, B69 1HE
- Thursday 27th June 2019, 6.00-9.00pm
 YMCA 38 Carter's Green, West Bromwich, B70 9LG



Further Details

- Complete our online surveys:
- For NOUS

https://www.surveymonkey.co.uk/r/SWBNOUS

For Minor Surgery

https://www.surveymonkey.co.uk/r/SWBMinorSurgery

 For more information contact our Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net



Next Steps

- Report presentation to Strategic Commissioning and Redesign Committee (SCR) for
 - **➤ Minor Surgery**
 - > NOUS
- Report availability
 https://sandwellandwestbhamccg.nhs.uk/public-engagement



Question and Answers







Thursday 30th May 2019

Dear Colleague

RE: Minor Surgery Listening Exercise

We are NHS Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) and are responsible for commissioning (buying) local healthcare services on your behalf. We are a membership organisation consisting of 83 GP Practices and are responsible for 575,684 registered patients across the Sandwell and West Birmingham area.

As your local Clinical Commissioning Group, we have a responsibility under the Health and Social Care Act to inform and consult you on proposed changes and seek your views on how we shape future services.

We currently commission Minor Surgery from an organisation called Health Harmonie that provides community based healthcare services on behalf of the NHS. This contract will soon be coming to an end meaning that Health Harmonie will no longer provide minor surgery to our patients but you will still receive this from the majority of our GP practices and other healthcare providers.

Earlier this year the service was reviewed and evaluated by the Commissioner and after careful consideration the CCG agreed that this service would no longer be commissioned for a number of reasons;

- The way the service was commissioned does not form part of a joined up patient journey
- The CCG could no longer financially sustain this service in the interests of protecting the public purse and using every pound wisely
- To support Primary Care Networks to build on primary care services and enable greater provision of personalised, coordinated and more joined up health and social care for our patients

This has presented an opportunity for SWB CCG to hold a listening exercise as we want to hear about your views and experiences for Minor Surgery Services.

The listening exercise will run from Monday 3rd June 2019 to Friday 28th June 2019 and you can get involved in a number of ways:

Attend one of our public meetings as listed below;

Tuesday 4th June 2019, 2.00-5.00pm
 Handsworth Fire Station, Rookery Rd, Birmingham B21 9QU



Sandwell & West Birmingham CCG 4R, Kingston House, 438-450 High Street, West Bromwich, B70 9LD Tel: 0121 612 1702



- Tuesday 25th June 2019, 2.00-5.00pm
 Portway Lifestyle Centre, Newbury Lane, Oldbury B69 1HE
- Thursday 27th June 2019, 6.00-9.00pm
 YMCA 38 Carter's Green, West Bromwich B70 9LG
- Complete our online survey at https://www.surveymonkey.co.uk/r/SWBMinorSurgery
- Complete a paper copy survey and requesting this by using the number below please
- Alternatively complete the survey in the listening exercise booklet and return it to

RTHG-KAKC-RTBZ
Engagement (Freepost)
Sandwell and West Birmingham Clinical Commissioning Group
Kingston House
438 High Street
West Bromwich
B70 9LD

We look forward to hearing your views, if you require any further information please contact our Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net

Yours sincerely

Dr Karl Grindulis MB ChB FRCP

Secondary Care Specialist for Service Redesign Committee and Governing Body Sandwell and West Birmingham Clinical Commissioning Group





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About Us

We are NHS Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) and are responsible for commissioning (buying) local healthcare services on your behalf. We are a membership organisation consisting of 83 GP Practices and are responsible for 575, 684 registered patients across the Sandwell and West Birmingham area.

As your local Clinical Commissioning Group we have a responsibility under the Health and Social Care Act to inform and consult you on proposed changes and seek your views on how we shape future services.

Earlier this year the NHS Long Term Plan was launched and this is a new NHS 10 year plan to improve the quality of patient care and health outcomes.

We are supporting this plan by setting up Primary Care Networks to build on primary care services and enable greater provision of personalised, coordinated and more joined up health and social care for our patients.

About this Listening Exercise

We currently commission Minor Surgery from a company called Health Harmonie, an organisation that provides community based healthcare services on behalf of the NHS.

As the contract is coming to the end of its term, a thorough review and evaluation has been undertaken by the CCG and after careful consideration it has been agreed that this service will no longer be commissioned for a number of reasons:

- The way the service was commissioned does not form part of a joined up patient journey
- The CCG could no longer financially sustain this service in the interests of protecting the public purse and using every pound wisely
- To support Primary Care Networks to build on primary care services and enable greater provision of personalised, coordinated and more joined up health and social care for our patients

This has presented an opportunity to hear your views and experiences regarding Minor Surgery through a listening exercise.

To compliment what is already available we now want to ask patients, their carers, their communities, general practice and members of the public about what Minor Surgery services should look like in the future.

It is important that we commission (buy on your behalf) Minor Surgery services for our patients that:

- Offer choice and flexibility to take into account personal circumstances such as work, study and caring commitments
- Offer a seamless patient journey

- Are fit for purpose
- Offer value for money

What is Minor Surgery?

Minor Surgery is an invasive operative procedure, involving incisions (surgical cut to the skin or flesh) or excisions (removal or cutting out tissue). These surgical procedures can be carried out by GPs in their practice and other healthcare providers. Patients who have had minor surgery in primary care settings report high levels of patient satisfaction. Furthermore, providing this surgery outside hospital and close to where people live is also highly cost-effective. Some minor procedures require a local anaesthetic which numbs the affected area so that you do not feel any pain when this is performed and can include procedures such as:

- Injections in your joints, muscles and tendons
- Removal of minor lumps and bumps, skin tags, cysts, moles and ingrown toenails

What are the Current Arrangements for Minor Surgery?

Minor Surgery is currently provided by Health Harmonie, some GP Surgeries and the local hospitals.

Where do Health Harmonie currently provide Minor Surgery from?

Health Harmonie provide this from:

Hill Top Medical Centre 15 Hill Top Road, Oldbury, Warley, B68 9DU (General Surgery)

Swanpool Medical Centre, St Mark's Rd, Tipton DY4 0SZ (General Surgery)

Great Barr Medical Centre, 379 Queslett Road, Great Barr, B43 7HB (General & Orthopaedic Surgery)

Soho Road Health Centre, 247-251 Soho Rd, Birmingham B21 9RY (Orthopaedic Surgery)

Summerfield Health Centre, Winson Green Road, Birmingham, West Midlands, B18 7AL (Orthopaedic Surgery)

What do the Changes mean For Me?

The changes mean that Health Harmonie will no longer provide Minor Surgery from the above five locations.

You will still continue to access and receive Minor Surgery from a wide range of GP locations and other healthcare settings.

Most of our GP Surgeries provide minor surgery under an arrangement known as a Direct Enhanced Service (DES).

Ways to get involved

There are a number of ways you can get involved in our listening exercise;

- Attend one of our events in the area as listed below;
 - Tuesday 4th June 2019, 2.00-5.00pm Handsworth Fire Station, Rookery Rd, Birmingham B21 9QU
 - Tuesday 25th June 2019, 2.00-5.00pm
 Portway Lifestyle Centre, Newbury Lane, Oldbury B69 1HE
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Sandwell and West Birmingham Clinical Commissioning Group
Kingston House
438 High Street
West Bromwich
B70 9LD

Further Information

For more information contact our Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net

Survey

NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG) is responsible for commissioning (buying) healthcare services for our local population. We want to hear your views and experiences of Minor Surgery so that we can understand:

- What does an excellent Minor Surgery service look like?
- What is not working so well now?
- How do we put it right?

Please let us know your views and experiences by taking the time to complete the survey.

The listening exercise will run from Monday 3rd June 2019 to Friday 28th June 2019.

Section One

Q1. How would you describe yourself (tick all that apply)
☐ A patient registered to a SWB CCG practice
Please tell us the name of your practice here
☐ A patient not registered to a SWB CCG practice
☐ A carer for a patient registered to a SWB CCG practice
Please tell us the name of the practice here
□A carer for a patient not registered to a SWB CCG practice
☐ A GP/Staff Member of GP Practice
☐ A Health Care Provider
□ Local Authority
□ Voluntary Sector
□ Other
☐ Please tell us the name of your organisation here

Section Two

Q2.	Are you completing this for yourself or a person you are caring for?
□F	or Me
□ F	or the Person I am Caring For
Q3.	Have you or the person you are caring for had Minor Surgery?
□ Y	es (please go to question 4)
□N	o (please go to question 13)
Q4.	When did you or the person you are caring for have Minor Surgery?
	0-1 year
	2-3 years
	3-4 year
	4+ years ago
	Was the appointment offered at a convenient date and time for you/ the son you are caring for?
	Yes
	No (please go to 5a)
	. What was the reason that the appointment time was not convenient for /the person you are caring for (please state below)
	Did you/the person you are caring for be offered a choice of venue where could have the Minor Surgery?
□ Y	es
□N	0

	Did you/the person you are caring for receive any information before the Surgery?
	Yes (please go to 7a)
	No (please go to 7b)
Q7a.	Did you/the person you are caring for find this information useful?
	Yes
	No
Q7b. usefu	Would you/the person you are caring for have found this information II?
	Yes
	No
	Did you/the person you are caring for receive any information after Minor ery on how to look after yourself following your procedure?
	Yes
	No
	How would you/the person you are caring for rate your experience of Surgery?
□ Po	or
□ Sat	tisfactory
□ Go	od
□ Ve	ry Good
□Ехо	cellent
	Can you please give details of the reasons for your response/the on you are caring for here?

Q11. What went well for you/the person you are caring for when receiving Minor Surgery?
Q12. What did not go so well for you/the person you caring for when receiving Minor Surgery?
Q13. What would you/the person you are caring for like to see in the future for Minor Surgery Services?
Q14. Do you/the person you are caring for have any other comments?
Q15. How did you/the person you are caring for find out about this Minor Surgery Listening Exercise?
□ Poster
□ Newspaper
□ Social Media
□ CCG Website
☐ A friend or family member told me
□ Other
Please state here

Equalities monitoring

We recognise and actively promote the benefits of diversity and we are committed to treating everyone with dignity and respect regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. To ensure that our services are designed for the population we serve, we would like you to complete the short monitoring section below. The information provided will only be used for the purpose it has been collected for and will not be passed on to any third parties.

Q16. What are the first four letters of your/the person you are caring for postcode, please specify below:

Q17. What gender are you/the person you are caring for?
□ Male
☐ Female
☐ Transgender
□Prefer not to say
Q18. What is your age/the person you are caring for?
□ 16-24
□ 25-34
□ 35-59
□ 60-74
□ 75+
Q19. What is your ethnic group/the person you are caring for?
□ Arab
☐ Asian or Asian British
☐ Black or Black British
□ Chinese

☐ Gypsy/Romany/Irish traveller
☐ Mixed dual heritage
☐ White or White British
☐ Prefer not to say
☐ Other (please specific)
Q20. Do you look after, or give any help or support to family members, friends, neighbours or others. Please note this is not referring to the person you care for if you have specified carer or if you are completing this survey on behalf of someone else
☐ Long-term physical or mental-ill-health/disability
☐ Problems related to old age
□ No
☐ Prefer not to say
☐ Other (please specify)
Q21. Are your day-to-day activities limited because of a health condition or illness which has lasted, or is expected to last, at least 12 months? (Please select all that apply)
☐ Yes limited a lot
☐ Yes limited a little
□ No
Q22. What is your/the person you are caring for sexual orientation?
□ Bisexual
☐ Heterosexual/straight
□ Gay
□ Lesbian
☐ Prefer not to say
☐ Other please specify

Q23. What is your/the person you are caring for status?
□ Single
□ Never married or partnered
☐ Living as a couple
☐ Married/civil partnership co-habiting
□ Not living as a couple
☐ Married (but not living with husband/wife/civil partner)
☐ Separated (still married or in a civil partnership) divorced/dissolved civil partnership)
☐ Widowed/surviving partner/civil partner
□ Prefer not to say
☐ Other please specify
Q24. What is your/the person you caring for religion and belief?
☐ No religion
□ Baha
□ Buddhist
☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
□ Hindu
□ Jain
□ Jewish
□ Muslim
□ Sikh
□ Prefer not to say
□ Other

What happens next?

Thank you for completing the Minor Surgery Survey, we really appreciate your time.

The Engagement Team will listen to your views at the public meetings, analyse the surveys that you have completed, a report will be developed and presented to the Strategic Commissioning and Redesign (SCR) Committee at the CCG. Our findings will help inform any Minor Surgery services that we buy on behalf of our patients in the future.

A copy of this report will be available shortly, if you would like to view this, it will be available on our website https://sandwellandwestbhamccg.nhs.uk/public-engagement or by contacting the Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net





Thursday 30th May 2019

Dear Colleague

RE: Non Obstetric Ultrasound Scan (NOUS) Listening Exercise

We are NHS Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) and are responsible for commissioning (buying) local healthcare services on your behalf. We are a membership organisation consisting of 83 GP Practices and are responsible for 575,684 registered patients across the Sandwell and West Birmingham area.

As your local Clinical Commissioning Group, we have a responsibility under the Health and Social Care Act to inform and consult you on proposed changes and seek your views on how we shape future services.

We currently commission NOUS (scanning services) from an organisation called Health Harmonie that provides community based healthcare services on behalf of the NHS. Health Harmonie has recently informed SWB CCG that they no longer wish to provide this service and we now need to look for an alternative provider for our patients. NOUS is also provided by some GP Surgeries and other health care providers.

This has presented an opportunity for SWB CCG to hold a listening exercise as we want to hear about your views and experiences for NOUS.

The listening exercise will run from Monday 3rd June 2019 to Friday 28th June 2019 and you can get involved in a number of ways;

Attend one of our public meetings as listed below:

- Tuesday 4th June 2019, 2.00-5.00pm
 Handsworth Fire Station, Rookery Rd, Birmingham B21 9QU
- Tuesday 25th June 2019, 2.00-5.00pm
 Portway Lifestyle Centre, Newbury Lane, Oldbury B69 1HE
- Thursday 27th June 2019, 6.00.9.00pm
 YMCA 38 Carter's Green, West Bromwich B70 9LG

Complete our online survey at https://www.surveymonkey.co.uk/r/SWBNOUS

Complete a paper copy survey and requesting this by using the number overleaf please



Sandwell & West Birmingham CCG 4R, Kingston House, 438-450 High Street, West Bromwich, B70 9LD Tel: 0121 612 1702



Alternatively complete the survey in the listening exercise booklet and return it to

RTHG-KAKC-RTBZ
Engagement (Freepost)
Sandwell and West Birmingham Clinical Commissioning Group
Kingston House
438 High Street
West Bromwich
B70 9LD

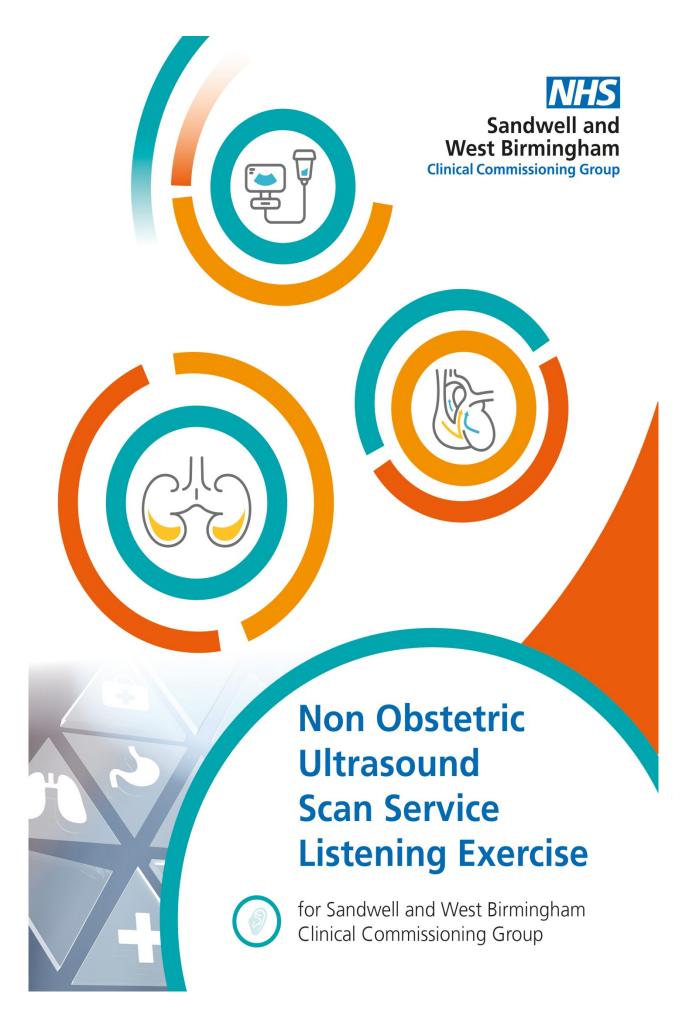
We look forward to hearing your views, if you require any further information please contact our Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net

Yours sincerely

Dr Karl Grindulis MB ChB FRCP

Secondary Care Specialist for Service Redesign Committee and Governing Body Sandwell and West Birmingham Clinical Commissioning Group





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About Us

We are NHS Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) and are responsible for commissioning (buying) local healthcare services on your behalf. We are a membership organisation consisting of 83 GP Practices and are responsible for 575, 684 registered patients across the Sandwell and West Birmingham area.

As your local Clinical Commissioning Group we have a responsibility under the Health and Social Care Act to inform and consult you on proposed changes and seek your views on how we shape future services.

Earlier this year the NHS Long Term Plan was launched and this is a new NHS 10 year plan to improve the quality of patient care and health outcomes.

We are supporting this plan by setting up Primary Care Networks to build on primary care services and enable greater provision of personalised, coordinated and more joined up health and social care for our patients.

About this Listening Exercise

We currently commission Non Obstetric Ultrasound Service (NOUS) from an organisation called Health Harmonie that provides community based healthcare services on behalf of the NHS.

Health Harmonie have recently informed SWBCCG that they no longer wish to provide this service, SWB CCG will now start to look into alternative provision for our patients. NOUS is also provided by some GP Surgeries and other healthcare providers.

This has presented an opportunity to hear your views and experiences regarding NOUS through a listening exercise.

To compliment what is already available we now want to ask patients, their carers, their communities, general practice and members of the public about what NOUS services should look like in the future.

It is important that we commission (buy on your behalf) NOUS services for our patients that:

- Offer choice and flexibility to take into account personal circumstances such as work, study and caring commitments
- Offer a seamless patient journey
- Are fit for purpose
- Offer value for money

What is Non Obstetric Ultrasound Scan (NOUS)?

Ultrasound is used to create images of soft tissue structures, such as the gallbladder, liver, kidneys, pancreas, bladder, and other organs and parts of the body. Ultrasound can also measure the flow of blood in the arteries to detect blockages. Ultrasound testing is safe and easy to perform

Ultrasounds offer many advantages: they are generally painless and do not require needles, injections, or incisions. Patients are not exposed to ionizing radiation, making the procedure safer than diagnostic techniques such as X-rays and CT scans.

What are the Current Arrangements?

Health Harmonie currently provide NOUS from the following locations at the days and times listed below:

Location	Day	Time
Aston Pride Community Centre	Tuesday	9:00 am – 5:00 pm
	Wednesday	9:30 am - 2:30 pm
Glebefields Health Centre	Tuesday	9:00 am – 4.00 pm
	Tuesday	9:00 am – 5:00 pm
	Thursday	9:00 am – 5:00 pm
Great Barr Group practice	Thursday	9:00 am – 12.30 pm
Great Bridge Surgery	Wednesday	9:00 am – 5:00 pm
	Thursday	9:00 am – 5:00 pm
Handsworth Wood Medical Centre	Friday	8:30 am – 4.30 pm
Hawes Lane Surgery	Mondays and Tuesdays	9:00 am – 5:00 pm (when Oldbury Health Centre does not have room availability)
Hill Top Surgery	Thursday	1:30 pm – 5:00 pm
Tim Top Surgery	Alternate Saturdays	9:00 am – 4:00 pm
New Street Surgery	Monday	9:00 am – 5:00 pm
Nishkam	Monday	9:00 am – 5:00 pm
	Tuesday	1:15 pm – 4.45 pm

	Wednesday	9:00 pm - 5:00 pm
Oakham Surgery	Wednesday	9:00 am - 5:00 pm
	Friday	9:00 am - 5:00 pm
Oldbury Health Centre	Monday	9:00 am - 5:00 pm
-	Wednesday	9:00 am - 5:00 pm
	Thursday	9:00 am - 5:00 pm
	Friday x 2	9:00 am - 5:00 pm
Soho Health Centre	Monday	8:30 am - 5:00 pm
	Tuesday x 2	8:30 am - 12:30 pm
	Wednesday x 2	9:00 am - 5:00 pm
	Friday x 2	9:00 am - 5:00 pm
Spires health Centre	Tuesday	9:00 am - 4:30 pm
-	Thursday	9:00 am - 4.30 pm
Tower Hill Partnership	Tuesday	9:45 am – 5:00 pm
_	Wednesday	9:00 am - 5:00 pm

What do the changes Mean for Me?

The changes mean that Health Harmonie will no longer provide NOUS from the above locations and the CCG is looking into alternative provision for our patients.

Ways to get involved

There are a number of ways you can get involved in our listening exercise;

- Attend one of our events in the area as listed below;
 - Tuesday 4th June 2019, 2.00-5.00pm
 Handsworth Fire Station, Rookery Rd, Birmingham B21 9QU
 - Tuesday 25th June 2019, 2.00-5.00pm
 Portway Lifestyle Centre, Newbury Lane, Oldbury B69 1HE
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- Complete our online survey at https://www.surveymonkey.co.uk/r/SWBNOUS
- Alternatively complete the survey in this listening exercise booklet and return it to

RTHG-KAKC-RTBZ
Engagement (Freepost)
Sandwell and West Birmingham Clinical Commissioning Group
Kingston House
438 High Street
West Bromwich
B70 9LD

Further Information

For more information contact our Engagement Team on 0121 612 1447 or email swbccg.engagement@nhs.net

Survey

NHS Sandwell and West Birmingham Clinical Commissioning Group (CCG) is responsible for commissioning (buying) healthcare services for our local population. We want to hear your views and experiences of Minor Surgery so that we can understand:

- What does an excellent NOUS service look like?
- What is not working so well now?
- How do we put it right?

Please let us know your views and experience by taking the time to complete the survey.

The listening exercise will run from Monday 3rd June 2019 to Friday 28th June 2019.

Section One

Q1. How would you describe yourself (tick all that apply)
☐ A patient registered to a SWB CCG practice
Please tell us the name of your practice here
☐ A patient not registered to a SWB CCG practice
☐ A carer for a patient registered to a SWB CCG practice
Please tell us the name of the practice here
□A carer for a patient not registered to a SWB CCG practice
☐ A GP Practice/Staff Member of GP Practice
☐ A Health Care Provider
□ Local Authority
□ Voluntary Sector
□ Other
☐ Please tell us the name of your organisation here

Section Two

Q2. Are you completing this for yourself or a person you are caring for?
□ For Me
☐ For the Person I am Caring For
Q3. Have you or the person you are caring for had a Non Obstetric Ultrasound Scan (NOUS)?
☐ Yes (please go to question 4)
□ No (please go to question 12)
Q4. When did you or the person you are caring for have NOUS?
□ 0-1 year
□ 2-3 years
□ 3-4 year
□ 4+ years ago
Q5. Was the appointment offered at a convenient date and time for you/the person you are caring for?
□ Yes
□ No (please go to 5a)
Q5a. What was the reason that the appointment time was not convenient for you/the person you are caring for? (please state below)
Q6. Did you/the person you are caring for be offered a choice of venue where you could have the NOUS?
□ Yes
□ No

Q7. NOU	Did you/the person you caring for receive any information before the S?
	Yes (please go to 7a)
	No (please go to 7b)
Q7a.	Did you/the person you are caring find this information useful?
	Yes
	No
Q7b. usefu	Would you/the person you are caring for have found this information II?
	Yes
	No
Q8. NOU	How would you/the person you are caring for rate your experience of S?
□Ро	or
□ Sa	tisfactory
□ Go	ood
□ Ve	ry Good
□Ех	cellent
	Can you please give details of the reasons for your response/the person are caring for here?
Q10. NOU:	What went well for you/the person you are caring for when receiving S?

Q11. What did not go so well for you/the person you are caring for when receiving NOUS?
Q12. Do you/the person you are caring for have any other comments?
Q13. How did you/the person you are caring for find out about this NOUS Listening Exercise?
□ Poster
□ Newspaper
□ Social Media
□ CCG Website
☐ A friend or family member told me
□ Other
Please state here

Equalities monitoring

We recognise and actively promote the benefits of diversity and we are committed to treating everyone with dignity and respect regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. To ensure that our services are designed for the population we serve, we would like you to complete the short monitoring section below. The information provided will only be used for the purpose it has been collected for and will not be passed on to any third parties.

Q14. What are the first four letters of your/the person you are caring for postcode, please specify below;

Q15. What gender are you/the person you are caring for?
□ Male
□ Female
☐ Transgender
□Prefer not to say
Q16. What is your age/the person you are caring for?
□ 16-24
□ 25-34
□ 35-59
□ 60-74
□ 75+
Q17. What is your ethnic group/the person you are caring for?
□ Arab
☐ Asian or Asian British
☐ Black or Black British
□ Chinese
☐ Gypsy/Romany/Irish traveller

☐ Mixed dual heritage
☐ White or White British
☐ Prefer not to say
☐ Other (please specific)
Q18. Do you look after, or give any help or support to family members, friends, neighbours or others. Please note this is not referring to the person you care for if you have specified carer or if you are completing this survey on behalf of someone else
☐ Long-term physical or mental-ill-health/disability
☐ Problems related to old age
□ No
☐ Prefer not to say
☐ Other (please specify)
Q19. Are your day-to-day activities limited because of a health condition or illness which has lasted, or is expected to last, at least 12 months? (Please select all that apply)
☐ Yes limited alot
☐ Yes limited a little
□ No
Q20. What is your/the person you are caring for sexual orientation?
□ Bisexual
☐ Heterosexual/straight
□ Gay
□ Lesbian
□ Prefer not to say
☐ Other please specify

Q21. What is your/the person you are caring for status?
□ Single
□ Never married or partnered
☐ Living as a couple
☐ Married/civil partnership co-habiting
□ Not living as a couple
☐ Married (but not living with husband/wife/civil partner)
☐ Separated (still married or in a civil partnership) divorced/dissolved civil partnership)
☐ Widowed/surviving partner/civil partner
□ Prefer not to say
☐ Other please specify
Q22. What is your/the person you caring for religion and belief?
☐ No religion
□ Baha
□ Buddhist
☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
□ Hindu
□ Jain
□ Jewish
□ Muslim
□ Sikh
□ Prefer not to say
□ Other

What happens next?

Thank you for completing the NOUS Survey, we really appreciate your time.

The Engagement Team will listen to your views at the public meetings, analyse the surveys that you have completed, a report will be developed and presented to the Strategic Commissioning and Redesign (SCR) Committee at the CCG. Our findings will help inform any NOUS services that we buy on behalf of our patients in the future.

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Cysters – Womens Support and Awareness Group

Our Cysters Project

www.cysters.org

witter: @cystersgroup

Who are we?

- Cysters Women's Support and Awareness Group is a grassroots charity dedicated to improving the health, educational, human welfare, and opportunities for women living and affected with reproductive health and gynaecological problems.
- We recognise that reproductive health, chronic illness, and the social attitude to women's health can be an emotional strain; we want to support you every step of the way.
- Cysters aim to reduce the cultural barriers, tackle exclusion issues and ensure equality for all irrespective of their access to information, protects or health awareness. We work within marginalised communities, those living under the poverty line, BAME and LGBTQ communities.
- We are culturally sensitive and inclusive of all.

Projects we run

- Cysters Smear Awareness Events on Cervical Screening in order to increase the uptake within BAME communities
- Cysters Chat Support Group meetings across Bham on Reproductive health issues, from PCOS, Endometriosis, Fibroids to Gynae Cancers and Fertility issues
- Workshops on specific reproductive health issues
- Our Cysters Project Tackling Period Poverty
- Online support groups
- Research projects on various womens health issues, for example PCOS studies with University of Birmingham

The project

- "Our Cysters" To tackle period poverty in Birmingham, by asking for donations of menstrual products items and providing those to those who need them.
- We believe that individuals who menstruate deserve a dignity period, and all these individuals are "Our Cysters."
- We use this as an opportunity to go into schools and other organisations too hold workshops on menstrual wellbeing and reproductive health.

Period poverty

- It is hard to imagine that in that individuals are missing school, university or work using old clothes or tissues to replicate a disposable sanitary towel. A number of people are living below the poverty line.
- It has been reported by teachers and in the media that girls are getting sanitary towels from their teachers at school as well as missing time off school. If each student misses a minimum of 5 days off school, that would amount to 60 days per year. The lack of accessible and affordable menstrual products keeps them art a disadvantage in terms of education, preventing their mobility and productivity.
- Conversely this problem is not limited to those from a low-income background. This is a massive, global and societal issue. It can affect all individuals of all stages of their lives, in poor communities, which makes this cause all the more important.
- This also includes individuals who are homeless.
- Contributing factors include, the expense of commercial menstrual pads, lack of access to pain relief, leakage from poor quality materials, limited education about menstruation, limited access for support during this time, fear caused by myths, embarrassment and low self-esteem.

Our goal

- Every female deserves access to safe and hygienic menstrual products. Our goal is to help these individuals reclaim the dignity that poverty denies them. We hope by this small gesture that it is enable individuals too to make a lasting and positive impact on the communities by giving back to the community at a later stage.
- From an educational perspective, it would also mean that on average a single girl who would have ordinarily missed 5 days per month (60 days per year) will have a better education, possibly leading to better grades and later higher wages.
- This knowledge and understating of the effects of menstrual health, dignity and impact will also be passed on their community and children.

Cysters Solution

- We will donate menstrual items etc. to those who need them, splitting them between charities working with homeless women and the schools within the Handsworth School of association – and those who ask us for products
- We will also look to provide reusable menstrual pads and cups which are a sustainable resource, allowing girls to wash and re-use them rather than having to buy non-reusable sanitary pads every month.
- However we recognise that this will not be appropriate for women who are homeless.
- Reusable products are inexpensive and environmentally friendly. The social benefit of the implementation of this concept can greatly mitigate the disadvantages many disempowered girls endure during their process of maturing.
- It will provide a platform to teach about reproductive, menstrual and gynaecological health, when teaching girls about how use re-usable sanitary towels and cups.
- We aim to distribute the products, and then go into the schools and offer workshops around reproductive and menstrual wellbeing.
- We will also focus on practical strategies for coping with monthly periods. Looking at ways to keep healthy during menstruation and how they acquire, use and dispose of bloodabsorbing materials.

What have we learnt?

- Interestingly we held a focus group with BAME women on their thoughts around period poverty, a number of women reported that as children they had to use tissues etc in place of menstrual products, but this wasn't seen as poverty but rather that menstrual products weren't important in the home compared with other expenses. It was said in the focus group, "buying dad the good meat for the week was more essential than pads."
- We feel that these are indicators that womens menstrual is traditional seen as unimportant compared to the needs of the males within the family. These are based on cultural attitudes towards menstruation general within BAME communities.
- Some cultures are taught from an early age that menstruation is dirty, and blood spoils food. Out founder Neelam, was recently featured on the BBC about her experiences, and being told to stay away from the Kitchen when on a menstrual cycle. Cysters aim to tackle these cultural myths and teach the correct information to the community in a cultural sensitive way.
- There are religious believes around the purity of womens during a menstrual cycle, so again conversations around this can be often taboo and embarrassing for some women. Some women report being afraid of reaching out if facing poverty as it is an area that they are encouraged not to speak about.
- The conversations around period poverty and menstrual health is much more than the issues of poverty, there is an element of cultural patriarchy and barriers.

Environment

The average disposable towel takes 5000 years to biodegrade.

Teaching females at a younger age about the options of reusable and environmentally friendly menstrual items will affect lead to an overall reduction of waste.

We know that flushing menstrual items down the toilet is still a problem, leading to the pollution of beaches and oceans, so this alterative may alleviate this.

Who needs it?

Although we are aware of the impact of not having menstrual products towels on schoolgirls. Cysters have extended our project across all sectors, low income families and homeless women.

Long term we want to have a "bank" of menstrual items, alongside current provisions such as food banks.

We aim to have a wellbeing hub, with a food/menstrual product bank, as well as access to workshops and regular support group services on reproductive and mental health. We also want to use this time to tackle some of the cultural issues around reproductive wellbeing and menstrual health.

How has Cysters achieved this?

- By engaging with local business/organisations and asking them to collect a box of monthly donations, that we can collect. The items are then given direct to either the schools or organisations working directly with homeless individuals.
- We have been asked to speak at various networking events about the need to support grassroots community projects such as Cysters.
- Created an Amazon "Wishlist" of items that we have asked people to purchased on our behalf. It includes items such as wipes, menstrual products and underwear.

What have we done

- We have engaged with Handsworth Association of Schools, we drop products at their Hub and Schools collect what they require.
- We have collaborated with Chambers Of Commerce who have held period poverty donation drives for us, it has also opened up meetings and conversations on period poverty within cooperate organisations.
- Working with corporate organisations to utilise their CSR policies to collect products for us
- Galvanised the community by working with various sectors.
- Working with local Temples and Gurdwaras as a donation station, and to have a box of products in the temple for the community. Such as the Nishkam Centre.
- Created a partnership with Sandwell & Dudley Hospital on their Period Poverty drive within the hospital
- Various donation stations

How could the Council support us

Financially support a Project Co-oridinator to run this project on a part time basis and to deliver workshops within schools and community organisation on menstrual health.

Including grassroots organisations in conversation around menstrual and reproductive health in Birmingham, as we have a voice for marginalised and BAME communities which are often missed out when tackling sensitive topics.

Providing us with Space for us to keep donations, and office space.

Future

- Spearheading this project as a collaborative effort of dedicated volunteers organisations and reach out across networks.
- We hope that by taking a collaborative approach we can reach more in need and share the workload of tackling period poverty in Birmingham and the west midlands.
- We have opened up conversation around other issues around menstrual health, such as heavy menstrual bleeding, early indicators of reproductive health issues such as endometriosis, fibroids or pcos.



Health and Social Care Overview & Scrutiny Committee

2019/20

Work Programme

Committee Members: Chair: Cllr Rob Pocock

Cllr Mick BrownCllr Zaheer KhanCllr Diane DonaldsonCllr Ziaul IslamCllr Peter FowlerCllr Paul Tilsley

Cllr Mohammed Idrees

Committee Support:

Scrutiny Team: Rose Kiely (303 1730) / Gail Sadler (303 1901)

Committee Manager: Errol Wilson (675 0955)

Schedule of Work

Meeting Date	Committee Agenda Items	Officers
4 th June 2019 (Informal)	 Public Health Performance Indicators Adult Social Care Performance Indicators Draft Quality Accounts 	Dr Justin Varney, Director of Public Health; Rebecca Bowley, Head of Business Improvement and Support (Adult Social Care); Maria Gavin, AD, Quality & Improvement, Adult Social Care; David Rose, Performance Management Officer (Adult Social Care); Max Vaughan, Behaviour Service Integration Manager; Adult Social Care; Carol Herbert, Clinical Quality Assurance Programme Manager, BCHC.
18th June 2019 Send out: 6 th June 2019	Appointments to Deputy Chair and JHOSCs Minor Surgery and Non Obstetric Ultrasound Services (NOUS) Listening Exercise	Angela Poulton, Deputy Chief Officer – Strategic Commissioning & Redesign; Kally Judge, Commissioning Engagement Officer, Sandwell and West Birmingham CCG.



18 th June 2019 Send out: 6 th June 2019	Period Poverty – Evidence Gathering	Neelam Heera, Founder of the Charity Organisation 'Cysters'
16 th July 2019 Send out: 4 th July 2019	Period Poverty – Evidence Gathering	Councillor John Cotton, Cabinet Member for Social Inclusion, Community Safety and Equalities.
		Dr Justin Varney, Director of Public Health.
		Soulla Yiasouma, Joint Head of Youth Services.
	Adult Social Care Performance Monitoring Scorecard – End of Year 18/19	Maria Gavin, AD, Quality & Improvement, Adult Social Care.
17 th Sept 2019	Public Health Green Paper – Feedback from consultation	Dr Justin Varney,
Send out: 5 th Sept 2019	Public Health Grant – Position Paper	Director of Public Health
	Forward Thinking Birmingham	Elaine Kirwan, Associate Director of Nursing.
	Direct Payments in Birmingham: Maximising choice, control and flexibility in the use of Direct Payments	Andy Cave, Chief Executive Officer, Healthwatch Birmingham
15 th Oct 2019 Send out: 3 rd Oct 2019	Dementia Strategy (new)	Zoeta Manning, Senior Integration Manager – Frailty, BSol CCG
19 th Nov 2019 Send out: 7 th Nov 2019	The Impact of Poor Air Quality on Health – Tracking Report	Mark Wolstencroft, Operations Manager, Environmental Protection.
	Birmingham Substance Misuse Recovery System (CGL)	Max Vaughan, Head of Service, Universal and Prevention – Commissioning



17 th Dec 2019 Send out: 5 th Dec 2019		
21 st Jan 2020 Send out: 9 th Jan 2020	Birmingham Community Healthcare NHS Foundation Trust Draft Quality Accounts 19/20 - Briefing	Colin Graham, Associate Director, Clinical Governance, BCHC.
18 th Feb 2020 Send out: 6 th Feb 2020	Birmingham Sexual Health Services – Umbrella (UHB)	Max Vaughan, Head of Service, Universal and Prevention – Commissioning
17 th March 2020 Send out: 5 th March 2020		
21 st April 2020 Send out: 9 th April 2020		
19 th May 2020 Send out: 7 th May 2020	Mental Health Strategy Update	Joanne Carney, Director of Joint Commissioning, BSol CCG
	Update on 'The Effects of Pollution on Health'	Mark Wolstencroft, Operations Manager, Environmental Protection



Items to be scheduled in Work Programme

- Adult Social Care Commissioning Strategy (Graeme Betts)
- Enablement Service Review (Graeme Betts)
- Ageing Well Programme (Graeme Betts)
- Shared Lives Service Re-design (Graeme Betts)
- Neighbourhood Networks Programme (Graeme Betts)
- Tracking of the Suicide Prevention Action Plan.
- GP Practice Delivery (Late 2019)
 - o Partnerships (e.g. Modality)
 - Universal Patient Offer (Karen Helliwell)
- STP Strategy Post Engagement Report (Rachel O'Connor)
- What matters most? Support people want from general practices in Birmingham (Andy Cave, Healthwatch)
- Update on the New Social Work Model in Birmingham (Pauline Mugridge) (Early new municipal year)
- Immunisation and Screening
- Infant Mortality
- Childhood Obesity Stocktake Report (2020)
- Joint Strategic Needs Analysis (JSNA) Autumn 2019. Elizabeth Griffiths to advise date.

CHAIR & COMMITTEE VISITS		
Date	Organisation	Contact

INQUIRY:		
Key Question:	How can a sustainable supply of free sanitary products be made available to females in educational establishments and council run buildings and, through engagement with our partners, more widely in buildings/venues across the City?	
Lead Member:	Councillor Rob Pocock	
Lead Officer:	Rose Kiely / Gail Sadler	
Inquiry Members:	Councillors Brennan, Brown, Fowler, Islam, Rashid, Tilsley and Webb	
Evidence Gathering:	June and July 2019	
Drafting of Report:	September 2019	
Report to Council:	November 2019	

Councillor Call for Action requests

Cabinet Forward Plan - Items in the Cabinet Forward Plan that may be of interest to the Committee		
Item no.	Item Name	Proposed date
005730/2018	A Sustainable Solution for the Future of Wellbeing Services and Hubs	30 July 2019
005920/2019	Adult Social Care and Health – Day Opportunity Strategy	25 June 2019
006206/2019	Putting Prevention First: Tender Strategy for the Commissioning of Housing Support to Vulnerable Adults	16 April 2019
006449/2019	Putting Prevention First: Investing in Communities	14 May 2019
006528/2019	Enablement Service Redesign	14 May 2019
		-



Members	Cllrs	
Meeting Date	Key Topics	Contacts
Date - TBA Birmingham	Update on Recommissioning of Gynae-oncology Services.	Scott Hancock, Project Lead, Head of Operational Performance and Business Management Support, UHB; Cherry West, Chief Transformation Officer, UHB; Toby Lewis, Chief Executive, Sandwell & West Birmingham NHS Trust; Jessamy Kinghorn, Head of Communications & Engagement — Specialised Commissioning, NHS England (Midlands & East of England).
	Further update on the Midland Metropolitan Hospital	Toby Lewis, Chief Executive, Sandwell
	 Further update on Measures to Reduce A&E Waiting times at Sandwell and West Birmingham Hospitals 	& West Birmingham NHS Trust.



	nt Birmingham & Solihull Health Scrutiny Committee Work		
Members	Cllrs	1	
Meeting Date 26 th June 2019 @ 6.00pm (Solihull)	• Urgent Primary Care Service Model ○ JHOSC to be consulted on draft Service Model ○ Impact of UTC communications campaign in Solihull	Contacts Karen Helliwell, Director of Integration; Helen Kelly, Associate Director of Urgent Care and Community, BSol CCG	
	 Financial Savings Plan 2019/20 including:- Service Redesign Projects - What has been reviewed and what is the outcome of that through cost savings? 	Phil Johns, Chief Finance Officer, BSol CCG	
	UHB - Update on UHB Merger including potential changes to trauma, orthopaedic and gynaecology services	Fiona Alexander, Director of Communications UHB Harvir Lawrence, Director of Planning and Performance, BSC CCG	
5 th September 2019 @ 5.00pm (Birmingham)	UHB - Potential changes to trauma and orthopaedic and gynaecology services - Update	Fiona Alexander, Director of Communications UHB Harvir Lawrence, Director of Planning and Performance, BSG CCG	
	 Birmingham and Solihull Mental Health NHS Foundation Trust including:- Introduction to new Chief Executive Risk assessments/care planning for patients who are not detained under the Mental Health Act. 	Roisin Fallon-Williams Chief Executive, BSMHFT.	
	Clinical Treatment Policies – Evidence based policy harmonisation programme – Phase 3	Rhona Woosey, Network & Commissioning Manager; Ben Panton Transformation Project Manager, Transformation & Innovation – Arden & GEM CSU; Cherry Shaw, Senior Communications Lead Arden & GEM CSU.	



December 2019 (Solihull)	BSol CCG Financial Plans	Phil Johns, Chief Finance Officer, BSol CCG
	Role of the STP across the Birmingham and Solihull footprint	Paul Jennings, System Lead, BSol STP
	Birmingham and Solihull STP – Joint Public Health Priorities	Dr Justin Varney, DPH Birmingham and Ruth Tennant DPH Solihull.
March 2020 (Birmingham)		