

BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

1400 hours on 16th June 2020, via Microsoft Teams – Actions

Present:

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

Also Present:

Andy Cave, Chief Executive Officer, Healthwatch Birmingham.

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

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office.

Debbie Le Quesne, Chief Executive, West Midlands Care Association.

Alison Malik, Head of Commissioning (Adult Care).

Gail Sadler, Scrutiny Officer.

Dr Justin Varney, Director of Public Health.

1. NOTICE OF RECORDING

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

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

2. DECLARATIONS OF INTEREST

None.

3. APOLOGIES

Councillor Diane Donaldson

4. ACTION NOTES/ISSUES ARISING

The action notes for the meeting held on 19th May 2020 were agreed.

11th February meeting – Outstanding Actions

Review of In-House Enablement Service

Tim Normanton provided diversity data for the In-House Enablement Service Workforce on 20th May 2020.

18th February meeting – Outstanding Actions

Sexual Health: Testing and Treatment Service in Birmingham – Umbrella

The committee was informed that Natalie Slayman-Broom had now left Umbrella and her successor had been contacted to provide further information on the clinical trials that Umbrella are involved with.

Adult Social Care Performance Monitoring – Month 8

Clarification on the number of beds inappropriately occupied across the whole of the estate i.e. each hospital was circulated to members of the committee on 2nd June 2020.

17th March meeting – Outstanding Actions

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

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

Scoping of the Infant Mortality Review

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

Public Health colleagues have been occupied dealing with Covid-19 and have been unable to provide the additional information to date. Scrutiny Officers have asked if the information could be made available for circulation before the next meeting in July.

5. COVID-19 UPDATE

a) Update from the Cabinet Member for Health and Social Care

Councillor Paulette Hamilton gave an overview of work being undertaken by the Adult Social Care Directorate in response to Covid-19 including:-

Care Homes – Officers have had regular contact with care homes to provide information, advice and guidance.

Infection Control Fund – The council have received the first allocation of £4.881m to be disseminated to care homes and aim to do this within 10 days of receipt. A second allocation is expected in July.

Councillor Hamilton also referred to the Health and Wellbeing Board meeting held on 23rd April 2020 in response to issues/concerns being raised in communities, especially the black, Asian and minority ethnic population (BAME), around health inequalities during the Covid-19 pandemic. The findings from that meeting were sent to Public Health England (PHE) who were undertaking a review looking at the

impact of Covid-19 on the BAME groups. PHE published the report in June and had taken into consideration suggestions put forward by stakeholders.

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

- Public Health have been running a survey into the impact of Covid-19 on people's lives. Initial analysis suggests that more people are spending less time being physically active and less likely to be eating a healthy diet. As a mitigation, the City Council have commissioned some YouTube videos on how to be more physically active and a series of cooking videos. This would suggest that coming out of lockdown we will see an increase in both childhood and adult obesity.
- The survey also asks about loneliness and mental wellbeing and, similarly, has identified that more people have felt lonely during lockdown and have seen a deterioration in mental health and wellbeing. This could be further exacerbated due to the economic impact of Covid-19 and potential job losses. Public Health are currently working with partners to try and mitigate against this in the short term but also preparing for the longer-term effects of that.
- The Cabinet Member for Health and Social Care apologised on behalf of the Communications Team for failing to promote Loneliness Awareness Week (which fell during the week of the Committee meeting), which she said she would address during the latter part of that week.

RESOLVED:

- Dr Varney to forward links to the YouTube videos for Members to disseminate in their Wards and to community contacts.
- The Cabinet Member for Health and Social Care be invited to attend the next meeting to discuss the impact of Covid-19 on mental health and wellbeing and how the city is preparing to address this.

b) Test and Trace.

Dr Justin Varney (Director of Public Health) gave a summary of the current situation of Covid-19 in Birmingham including the potential for a 2nd wave of the pandemic. He concluded by outlining how 'Test and Trace' will be implemented city-wide.

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

- Currently do not have access to a breakdown of data by Ward but information at medium super output areas is available. Currently analysing that information which, as would be expected, is identified a higher proportion of Covid-19 deaths in geographical areas where there are a large number of care homes.
- Have also been analysing 'excess' deaths i.e. average number of deaths over the last 5 years per month compared to current year. Particularly in April and

May there was an increase in the excess number of deaths. Working with the Registrar's Officer to look at death certificates during that period to look at the cause of deaths. Initial assessment shows those excess deaths are people with pre-existing conditions e.g. cancer.

- Working with the Clinical Commissioning Groups, particularly in West Birmingham, who are instigating a Death Review Audit process where GPs will examine the case notes of a sample of people who have died during that period to try to understand why that person died at that time.
- There will be a second wave of the pandemic because, currently, a vaccine isn't available and, even if trials are successful, anticipate it would not be available until late spring/early summer 2021. Also, at the moment, there is no effective drug treatment to kill the virus. It could be that as lockdown is relaxed the number of people infected is relatively small and manageable. On the other hand, if it should come in autumn/winter, at the same time as seasonal flu, this could be quite serious in terms of pressure on the NHS.
- Dr Varney explained the 'Test and Trace' model and roles/responsibilities nationally, regionally and at local government level. A Local Outbreak Plan would need to be in place by the end of June and will be presented to the Local Covid Outbreak Engagement Board. Board meetings will be available to the public via livestreaming.
- Local implementation issues and risks were also set out along with which organisation responsibility for enforcement predominantly sits.
- The financial allocation to the City Council to support 'Test and Trace' is circa £8.4m but clarity was being sought about the length of time that the funding covered. Currently, working on 12 months.
- Concern was raised surrounding the list of vulnerable people who had been identified for shielding by the NHS centrally and GPs. Then a 2nd tier of patients who were vulnerable but not clinically shielded which led to confusion.
- Have done a huge amount of engagement with communities through local community radio, faith groups and bi-lingual Q&As with existing online channels. Also commissioned the in-house Brasshouse Service to produce resources about social distancing etc. in different languages.
- National guidance has been produced to help people who live in shared facility accommodation e.g. properties of multiple occupation but it is a real challenge.
- There is clear national guidance that a face covering must be worn when travelling on public transport and West Midlands Transport have been working to empower staff to challenge people and refuse entry.

RESOLVED:

- Dr Varney to circulate the updated PowerPoint presentation which included an extra slide on 'Enforcement'.

- The committee to receive a further update from Public Health on 'Test and Trace' at the next meeting in July.

c) West Midlands Care Association

Debbie Le Quesne (Chief Executive, West Midlands Care Association) and Alison Malik (Head of Commissioning - Adult Care) gave a presentation which provided an update on the relationship between BCC and the independent care sector and how they had worked together to support the health of residents within care homes.

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

- Worked with system partners to coordinate communication with care homes to provide support and reduce the burden of being overwhelmed with contact from many organisations.
- Personal Protective Equipment (PPE):-
 - Training was provided on the use of PPE to some care homes.
 - Initially, the availability of supplies was very difficult and expensive i.e. the cost of a mask rose from 2p to £1.60. Now the association is paying in the region of 45p.
 - The city council ensured that national guidance was issued to all care providers.
- Funding:-
 - Extra costs of PPE equipment and agency staff. The city council offered financial assistance to providers to cover the additional cost.
 - A reduction in demand for care because people have chosen to stay in their own homes or have gone into discharge to assess settings rather than care homes.
 - A lot of families pay a 'top up' fee for a relative's care home. Unsure what the economic impact of Covid-19 will have due to job losses and the ability to fund this.
- Insurance:-
 - A lot of insurance companies are choosing to opt out of insuring the care home market.
- Testing:-
 - Initially, did not know whether patients being discharged from hospital into care homes had Covid-19 or not.
 - Uncertain about how long to isolate people after being discharged from hospital.
 - Implications for care homes of high staff absence levels.

- Hospitals now test patients 48 hours before discharge but there is always the possibility of being infected in those 2 days before discharge.
- The association has begun to hold webinars to ensure care homes are made aware of what is happening locally.
- Staffing:-
 - Have seen high levels of staff absence but this is slowly reducing.
 - Longer-term risk of whether somebody would want to work in the care sector on a minimum wage and also at risk of being infected with Covid-19.
 - The city council has provided financial support to fund additional hours to cover staff absence.
- Discharge from hospital:-
 - Implemented the national 'Discharge to Assess' model in March. In Birmingham this meant patients were, on the whole, discharged into a short-term bed first to assess their needs and Covid-19 status.
 - Birmingham Community Healthcare Trust provided a wrap-around service of nurses and clinicians to support care homes.
 - Worked with West Midlands Care Association's Trusted Assessor Scheme who undertake on behalf of independent care providers for people in hospital who need long-term care. Trusted Assessors worked in specific hospitals to avoid movement between hospitals.

RESOLVED:

- Members of the committee submit questions to Scrutiny Officers who will liaise with Debbie Le Quesne/Alison Malik for a response.
- Debbie Le Quesne and Alison Malik, in their respective roles of provider and commissioner, are invited to provide a further report to the committee.

d) Healthwatch Birmingham

Andy Cave (Chief Executive Officer, Healthwatch Birmingham) told the committee that a survey that Healthwatch had been conducting had run for 9 weeks and closed on 12th June 2020. Work was now being undertaken to analysis the dataset. The focus of the survey was twofold:-

1. To identify vulnerable citizens in need of support and signpost them to relevant information.
2. To hear individuals concerns or issues around health and social care as a consequence of lockdown.

The findings of the survey are being summarised and will be available in two weeks' time.

Healthwatch have also undertaken a poll to understand peoples' experiences of digital transformation/communication as many health services in Birmingham

are providing consultations over the telephone or video-link rather than face-to-face.

RESOLVED:

Andy Cave is invited to the next meeting to present the findings of the survey.

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

None.

7. OTHER URGENT BUSINESS

Councillor Peter Fowler queried whether a response had been received from Chris Naylor, Interim Chief Executive, to the cross-party letter sent on behalf of the HOSC raising concerns about the enactment of Care Act Easements.

RESOLVED:

Scrutiny Officers to submit a further email to the Interim Chief Executive which reflects the concerns of the committee and requests a response as soon as possible.

8. 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.

9. DATE AND TIME OF NEXT MEETING

The Chairman confirmed that the next meeting would take place on 21st July 2020 at 2.00pm and, provisionally, 1st September 2020 at 2.00pm for the subsequent meeting.

The meeting ended at 1606 hours.