

## **BIRMINGHAM CITY COUNCIL**

### **HEALTH AND SOCIAL CARE O&S COMMITTEE**

**1000 hours on 21<sup>st</sup> January 2020, Committee Room 6 – Actions**

**Present:**

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

**Also Present:**

Cherry Dale, Independent Chair of the Birmingham Safeguarding Adults Board

Colin Graham, Associate Director, Clinical Governance, Birmingham Community Healthcare NHS Foundation Trust

Rose Kiely, Overview & Scrutiny Manager, Scrutiny Office

Asif Mansoor, Business Manager, Birmingham Safeguarding Adults Board

Andrew McKirgan, Director of Partnerships, University Hospitals Birmingham NHS Foundation Trust

Gail Sadler, Scrutiny Officer

Mike Walsh, Service Lead - Commissioning

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#### **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](http://www.civico.net/birmingham)") and members of the press/public may record and take photographs.

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

#### **2. DECLARATIONS OF INTEREST**

None.

#### **3. APOLOGIES**

None.

#### **4. ACTION NOTES/ISSUES ARISING**

The action notes of the meeting held on 17<sup>th</sup> December 2019 were agreed.

The following matters have arisen since the committee last met:

- The Day Opportunities Strategy

An informal briefing on the proposed strategy, that will be presented to Cabinet on 11<sup>th</sup> February 2020, will follow this meeting.

- The Birmingham STP and West Birmingham

The Chairman confirmed that he had attended a round table event on 14<sup>th</sup> January 2020 with representatives from Birmingham and Solihull CCG and Sandwell and West Birmingham CCG to discuss how to progress the situation in a practical way. HOSC will receive a report in late Spring.

- NHS Long Term Local Plan – Healthwatch Birmingham

Andy Cave is liaising with Healthwatch England to provide a response on the number of respondents to the survey compared with other core cities.

- Budget Consultation 2020+

Information regarding the Adaptations budget is yet to be received.

- Public Health Grant Budget Update

Committee members were asked to identify any gaps in the contract overview document and report to Scrutiny Officers. The Chairman confirmed that no such requests for further information had been received.

## **5. BIRMINGHAM SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2018/19**

Cherry Dale (Independent Chair of the Birmingham Safeguarding Adults Board) and Asif Mansoor (Business Manager, Birmingham Safeguarding Adults Board) presented the report, setting out: -

- The purpose, role and statutory duties of the Board.
- Key achievements by the Board and its partners in 2018/19.
- How work of the Board is measured through the Scrutiny and Assurance model.
- Safeguarding Adults Concerns Data.
- Future priorities for 2019/20.

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

- The data highlighted a significant increase in the number of concerns reported over the last 5 years especially those single, aged, vulnerable residents living in their own homes. Members were assured that, despite budget cuts which have impacted on both statutory and non-statutory services, the focus of the Board is definitely on those most vulnerable people. The aim of the Board is that all people in Birmingham can live free from harm and neglect.
- Concern was raised about the response rate to carers queries from the Forward Carers Hub which, in some cases, may take several months.

- Highlighted as an issue was a lack of communication between local authorities where potentially vulnerable people are moving to Birmingham from another local authority and are residing in non-regulated properties.
- The increase in the number of safeguarding concerns being reported may, in part, be due to several awareness campaigns.
- The Board works in a number of ways to support the homelessness agenda. The board helped to develop the strategy and promote it and raising awareness of actions within the strategy. The Board, working with organisations who are dealing with the homeless, can seek assurance that all safeguarding practices are up to date.
- Responding to a query regarding abuse at home, members were told that the Board is working close with self-funders and people using Direct Payments to provide training and advice about recruiting people to work with them at home.

#### **RESOLVED:**

- Cherry Dale to: -
  - enquire and seek assurance from Forward Carers Hub about their response rate to queries.
  - forward a copy of the Non-Regulated Accommodation report and a brief note on progress to date for circulation to the committee.
- The Chairman suggested that an item for next year's work programme might be to conduct a review with Housing and Neighbourhoods O&S on 'Health implications for people living in non-regulated accommodation'.

## **6. EARLY INTERVENTION PROGRAMME**

Andrew McKirgan (Director of Partnerships, UHB) and Mike Walsh (Service Lead – Commissioning) gave an overview of the work that had been undertaken over the last 12 months as part of the Early Intervention Programme. This included a diagnostic of how older people flow through the care system and, in particular, through hospital and how this impacted on outcomes for those patients.

Early Intervention Community Teams will be rolled-out city-wide over the coming months.

What the governance model will look like is still to be determined.

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

- Highlighted was the lack of intermediate beds available in Birmingham and being able to move patients out of acute beds is a priority. It was acknowledged that in the past there have not been home-based services available and have been over reliant on intermediate beds. The emphasis now is to get patients home with the right integrated home-based care to support this. As a result, better use of intermediate beds for those patients

who require them. The challenge is turning a system model into an operating model.

- The integrated approach to intermediate care has 3 elements which overlap providing home-based care with the right community assets and support to address social isolation.
- Early data on successful outcomes shows that people are not being re-admitted after being discharged but there is a need to get a broader understanding of outcomes for those patients on a longer-term basis.
- There is an ongoing piece of work with Solihull Council around those residents who live on the border with Solihull whose discharge from hospital relies on assessments being carried out by Solihull Council social workers.
- The focus going forward is to put commissioning and contracting arrangements in place for the new model. The Local Authority and CCGs will jointly commission Early Intervention. Alliance arrangements will need to be put in place for the providers joint working arrangements.
- It is intended to roll out services initially through existing contractual arrangements.
- Regarding financial implications, there will need to be understanding of what the financial envelope is and reconfigure it across the system. The intention is for this to be cost neutral.
- The Chair and other members commended the EI initiative as a very positive development in delivering more effective adult social care, and especially the enthusiasm shown by staff of all participating agencies in this prototype for the new arrangements.

**RESOLVED:**

- The report was noted.

**7. BEST CARE: HEALTHY COMMUNITIES**

Colin Graham (Associate Director, Clinical Governance, Birmingham Community Healthcare NHS Foundation Trust) highlighted some key facts and gave an overview of the services delivered by BCHC. He further went on to appraise members on the following: -

- Outcome of the CQC Inspection 2018.
- The Vision of the Trust – the values had been chosen by staff.
- Priorities for 2019/20.
- Issues facing Children's Services.
- Future plans and priorities for 2020/21.
- Objectives for 2020/21: -
  - Empower staff on the ground to embed quality improvement.

- Clinical outcomes – measure how successful care has been.

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

- Children's Services rated inadequate in 2018 CQC Inspection received a S29A Warning Notice (5 areas of action). Members were told that by January 2019 the CQC was satisfied that actions had been taken and achieved to address 4 areas. One area, Health Visiting, despite undertaking work to address the area of concern, had not changed.
- It was suggested that going forward a Hub where there is a specialist multi-disciplinary team who have knowledge of working with people with learning difficulties may improve health outcomes.
- Clarity sought on statement on 'maintaining safe staffing levels' despite sickness and vacancy levels. Members were told that a tool was used to measure where there may be staffing issues. Have also had to use more bank/agency staff.
- Performance against Mandated Health Visits is reported back on a regular basis through the CQC.
- In 2019/20 the Trust expects to deliver a surplus of £4.4m and 2020/21 a surplus of £1.0m. Information was sought on how the £8.0m savings figure would be achieved.

**RESOLVED:**

- Colin Graham will: -
  - report back to the Management Team overseeing the Learning Disabilities Division the suggestion regarding a specialist multi-disciplinary team Hub.
  - ask the Finance Director to provide a response to the query regarding how the £8.0m savings figure will be achieved.

**8. WORK PROGRAMME – JANUARY 2020**

The work programme was noted.

- Blood Donor Service to be added to the items to be scheduled on the work programme.
- The committee will next meet on 11<sup>th</sup> February 2020 at 10.00am which will be a meeting dedicated to evidence gathering for the In-House Enablement Service Review.

**9. 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.

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The meeting ended at 1206 hours.