HEALTH, WELLBEING AND THE ENVIRONMENT OVERVIEW AND SCRUTINY COMMITTEE 25 APRIL 2017

REPORT OF CABINET MEMBER FOR HEALTH & SOCIAL CARE COUNCILLOR PAULETTE HAMILTON

1. PURPOSE OF REPORT

This report sets out my portfolio priorities for 2017/18, and provides an overview of progress over the last year and sets out key challenges for the forthcoming year and emerging future issues.

2. ACCOUNTABILITY

I have accountability for:

Adult Social Care and Health	Development of the Health and Wellbeing Board and relationships with the NHS and private providers.
	Strategic leadership of social care services and safeguarding for adults.
	Development of an integrated health and social care economy in Birmingham and neighbouring local authorities around the STP.
Public Health	Leadership on public health services, working with the Health and Wellbeing Board to reduce health inequalities.
Healthy Communities	Healthy living through sport and leisure services.
Domestic Violence	All council activity relating to domestic violence and developing a city- wide domestic violence strategy with partners including advice to the Cabinet Member for Housing and Homes on the provision of accommodation.

3. SUMMARY OF KEY PRIORITIES AND OTHER KEY PROGRAMMES

My key focus is to help people become healthier and more independent with measurable improvement in physical activity and mental wellbeing. The key priorities for this portfolio include:

- Promoting independence for all our citizens.
- Leading a real change in individual and community mental wellbeing.
- Driving forward the joining up of health and social care services so that citizens have the best possible experience of seamless care.
- Preventing, reducing and delaying dependency and maximising the resilience and independence of citizens, their families and the community.
- Creating a healthier environment for Birmingham and reducing health inequalities.
- Promoting healthier lifestyles and physical activity and encourage an increase in people walking, cycling and using our public spaces.

 Managing the delivery of services within the budget envelope allocated to the directorate.

4. PARTNERSHIP WORKING

4.1 Birmingham and Solihull Sustainability and Transformation Plan

Our main local STP footprint is Birmingham and Solihull (BSoL). As West Birmingham currently falls under Sandwell and West Birmingham CCG, 200,000 of Birmingham residents are in the Black Country STP footprint.

The Committee has had regular progress updates on the development of the Birmingham and Solihull STP. The focus remains on the delivery of three key objectives;

- Creating efficient organisations and infrastructure
- Transformed Primary, Social and Community care (Community Care First)
- Fit for Future Secondary and Tertiary services

There have recently been a few changes in governance and Dame Julie Moore is now the System Lead. The Leader, Cllr John Clancy and Stella Manzie the Interim Chief Executive are both on the board with voting rights. In my capacity of Chair of Health and Wellbeing Board I attend but I do not have voting rights. However I am fully involved in discussions to shape the direction of travel. The Council remains a full partner within the STP governance arrangements and council and NHS staff have been and will continue to work together to try to find sustainable solutions to the challenges faced by the whole system.

4.2 Health and Wellbeing Board

Over the last year, I have led the Health and Wellbeing Board (HWBB) into new directions including:

- Mental Health as well as the wider determinants of health, for example the effects of Housing and Air Quality.
- Supporting the Housing Board in working towards eradicating the plight of families with children, being placed in inappropriate temporary accommodation.
- Supporting the council in efforts to improve air quality as it is the second biggest factor in causing early deaths in the city after tobacco.
- Some of these arears overlap deliberately with work streams in the Combined Authority. The Board is also examining "Adverse Childhood Experiences" and how it can promote appropriate work to reduce the effects of them.

4.3 Birmingham Domestic Abuse Prevention Strategy

The new Birmingham Domestic Abuse Prevention Strategy is being developed across the Council, Health, Criminal Justice and the Voluntary Sector.

Cabinet approved consultation on the draft Strategy on 18 October 2016 with a public consultation open from 31 October 2016 to 6 January 2017. It focused on the proposal of three priority areas with associated approaches to preventing domestic abuse in Birmingham:

- Changing Attitudes;
- Early Identification and Early Help, and
- Safety and Support.

The Domestic Abuse Prevention Strategy will be proposed for approval at Cabinet in June this year.

4.4 Learning Disability Partnership working

The Transforming Care Partnership working for People with Learning Disabilities is an incredibly important issue that arose out of Winterbourne. Both social care and health systems are allied in taking this this important programme of work forward (the resettlement of people placed out of city and in hospital services). It is equally of prime importance that the developments and initiatives are applied to the whole of the learning disability population. I am committed to the provision of high quality care for not simply those people placed out of the city, but those also that are at risk leaving our great city that should be providing their care.

5 PROGRESS ON DELIVERING PRIORITIES

PRIORITY	PROGRESS
Promoting independence	Over the past year, there has been a real push to increase efforts in promoting the uptake of the number for our service users accessing direct payments. Direct payments allow our citizens with eligible assessed need greater choice, control and flexibility over their care.
	Over recent months, I have heard directly from social workers and some of our citizens a number of fantastic case studies on how through direct payments we have enhanced the lives of some of vulnerable citizens and improved their quality of life.
Individual and community mental wellbeing	Supporting People
	During the budget consultation in January it was evident from the responses received that a significant concern was reducing the funding on this budget line. As a result the amount of savings proposed was reduced.
	A report will be presented to Cabinet at the end of June which will set out how the reductions will be achieved across the SP contracts and Third Sector Grants Programme.
Preventing, reducing and delaying dependency and maximising the resilience and independence of citizens, their families and the community	We are changing our approach to commissioned social care services, through the Adult Social Care Framework. We want to work with partners to create a great city to grow old in and to help people become healthier. The draft Commissioning Strategy which outlines our approach is currently out for consultation.
	This approach will support people to continue to live independently and in their own home for as long as possible, help all residents access high quality and affordable social care and ensure that service users have choice and control over their own lives.
	Shared Lives
	I have been keen to increase the number of service users who benefit from a Shared Lives service. The focus is to provide long term placements and short term respite placements to those who are already within the scheme and to outside referrals made by social workers.
Creating a	I attend the Member Steering Group on Air Quality, chaired by Cllr

	,
healthier environment for Birmingham and reducing health inequalities	Trickett. The key focus of this work is to reduce the Public Health impact of poor air quality which claims nearly 900 lives per year. I have supported alternative approaches to improving nutrition and food quality including the experimentation with novel approaches such as crowdfunding.
Promoting healthier lifestyles and physical activity and encourage an increase in people walking, cycling and using our public spaces	I have led on the development of "A Healthy City", a key priority for the Council. Everyone I talked to had a very positive ambition for health, using the "five steps to wellbeing" as a reference point (being active, connecting, learning, giving, and observing). The Wellbeing Service has worked closely targeting some of our more deprived communities and groups to take up physical activity through Birmingham Bikes; Walks; Volunteering to Active parks and Active streets.
Budget Challenge	It has been very evident over recent years that we face a real challenge in meeting adult social care need with the drastic cuts to the budget available. This brings about real significant challenges as demand for care continues to increase. The government earlier this year announced additional funding for adult social care which is welcome but this funding does not address the shortfall in the funding needed to appropriately fund adults' social care. We will need to be innovative and target system redesign and strategically link services going forward in the future.

6. UPDATE ON SOCIAL CARE AND HEALTH PERFORMANCE/SERVICE IMPROVEMENTS

- **6.1** There are five Council Business Plan measures within my portfolio. I am pleased to report that all are on track:
 - The percentage of people who receive Adult Social Care in their own home.
 - Uptake of Direct Payments.
 - The proportion of clients receiving Residential, Nursing or Home Care from a provider that is rated as Good.
 - Percentage of births that receive a face to face New Born Visits (NBV) from a health visitor within 14 days.
 - Birmingham Promise: Process Blue Badge applications within 40 working days.

I am pleased to report that the proportion of people receiving Adult social Care in their home continues to increase, as does the uptake of direct payments. Over 90% of births receive a New Born Visit in 14 days well above the target of 85%. In addition 99.3% of Blue Badge applications are processed with 40 days.

However, there has been a decrease in the percentage of client's residential, nursing or home care from a provider that is rated as Good. This is something that I am keen to address and officers are working with providers to see how together we can drive up quality and improve the lives of the most vulnerable citizens. As part of this drive one of the proposals being consulted on will be that we will not allow a provider who is currently rated by the Care Quality Commission (CQC) as Inadequate to enter the framework of recognised providers. All providers will have to meet an agreed standard set up by either the CQC, NHS or the city council's proposed ratings system.

6.2 Adult Social Care Peer Challenge

In November 2016 the ADASS network undertook a peer challenge of Adult Social Care. The Peer Challenge team made a number of positive observations such as:

- Sustained strong performance and process in adult safeguarding;
- Positive joint working with Health and Social Care, good frontline working relationships and growing joint working on pathways and shared protocols between Health and Social Care;
- Staff were positive, enthusiastic, knowledgeable in their field and open to scrutiny and challenge.

The panel made 6 recommendations and an action plan has been developed to drive forward on these recommendations.

7 UPDATE ON KEY BUDGET ISSUES/KEY FUTURE BUDGET ISSUES

7.1 2016/17

The total budget in 2016/17 for the portfolio is £295.2m. Within this allocation we have to deliver a substantial amount of savings; benefits and efficiencies internally as well as through corporate initiatives.

- 54% of the net total budget is allocated to external packages of care.
- 13% is spent on specialist care services.
- 12% is spent on Assessment and Support Planning (Social Work).
- 8% of the budget is spent on Supporting People.
- 13% is spent on Commissioning and other services.

The estimated outturn position is an overspend of £51m, £28m of which is savings relating to anticipated integration with Health. Most of the rest of the overspend relates to continued pressure on packages of care, growth in the number and size of packages, shortfall in delivery of savings estimated to arise from changes from residential to other care settings.

7.2 2017/18

The Council Budget for 2017/18 has provided additional funding for Adult Social Care, as set out in the Financial Plan. However, like other local authorities nationally we are facing a real pressure in the increasing number of people requiring care and support.

The new Interim Corporate Director for Adult Social Care and Health, Graeme Betts will be working very closely with managers to review plans and to deliver savings proposals going forward.

7.3 Additional Social Care Funding

Following pressure from across the country, it was announced in the Spring Budget that there would be an additional £2bn funding nationally for Adult Social Care for three years commencing in 2017/18. Birmingham's allocation of this funding is £50m over five years, £27.064m for this year, £16,059m for 2018/19 tapering to £7,932m in 2019/20. It is important to note this is a tapering fund it is not cumulative.

This extra adult social care funding is being directed through the better care fund. There has been some clear criteria on how this funding needs to be spent and used specifically for the purposes of meeting adult social care needs, reducing pressures on the NHS, including supporting more people to be discharged from hospital when they are ready and stabilising the social care provider market. The funding needs to be spent with agreement of NHS and the Birmingham Health and Wellbeing Board.

7.4 Better Care Fund

The Guidance regarding the operation of the fund for the period 2017/19 was published on the 31st March 2017 and we are still awaiting the BCF detailed information for our BCF area including minimum contributions for all parties.

Improved Better Care Grant (iBCF), the government has provided £1.5bn nationally to local authorities to spend on Adult Social Care by 2019/20. For Birmingham, the funding starts in 2017/18 at £6.7m, rising to £31.3m in 2018/19 and £52.4m in 2019/20. In Birmingham City Council's budget that has been approved for 2017/18, subsequent years funding has been identified in the Long Term financial Plan (LTFP). The additional funding of £6.7m in 2017/18 will be used to help address the demographic growth in Adult Care which was £14.5m for 2017/18 and has been added to care budgets.

8 KEY ACHIEVEMENTS

8.1 Despite the significant challenges over the last 12 months, officers have worked hard to look at delivering services in far more innovative ways and put in place processes that improve efficiency and productivity.

There are lots which I am proud of including:

- Partnership working with Health Colleagues both the Acute trusts and Clinical Commissioning Groups;
- Reducing the endemic rise in DoLs assessments; through improving processes and redirecting resources to protect some of our most vulnerable citizens;
- Work with agencies we have commissioned to deliver services on our behalf; ensuring they improve outcomes in a more joined up way; the Drug and Alcohol project; Sexual Health Services; the work that we have done on the Domestic Abuse Prevention Strategy;
- Moving some of our clients out of outdated centres and providing better outcomes through direct payments or providing care out of more modern centres;
- The achievements of our Adult Social Workers in the National Social Worker of the Year Awards.

9. Challenges and Closing Summary

The key challenge facing the portfolio is the delivering of the savings and meeting social care need. The population of Birmingham is not ageing significantly; however the number of assessments which require on-going BCC support is increasing. Over the last five years the number of hospital referrals has increased by more than 300% from 4,971 to 15,857.

The City Council's traditional role as a provider of services is changing in many respects to that of more of a commissioner and market shaper of services. In adult social care the priority needs to be shifting the focus from short term expenditure to improving outcomes and a long term financial strategy. I am clear that the approach is more about helping people help themselves through a person and asset centred approach. This will require the service to work more closely with community and other groups to develop better, more cost effective ways of providing support.

We have significantly challenging times ahead and there has been a great deal of management change over recent months which required re-balancing. I am confident in the recent senior leadership appointments, albeit interim and that the structure for this portfolio will be strengthened to become a corporate shared responsibility with a more outward facing role.

However, I am fundamentally clear that the City Council is here to safeguard and protect our most vulnerable citizens which is the City's statutory duty.

To end on a positive note, we have great social workers in Birmingham and from adults we had another great entry into the Social Worker of the Year Awards. Overall 78 social workers and social work teams from across England have been selected as finalists across 15 different categories, celebrating the achievements of practitioners.

This year, almost 10 per cent of the finalists, across seven of the 15 categories, were from Birmingham Adult Social Care Services, which is a fantastic achievement. The shortlist of Birmingham City Council finalists was as follows:

Mental Health Social Worker of the Year: Dee Belford

Student Social Worker of the Year: Annabelle Stock, University of Birmingham

Creative & Innovative Social Work Practice: Preparing for Adulthood Team

Team Leader of the Year, Adult Services: Natalie McFall

Newly Qualified Adult Social Worker of the Year: Jamie McEwan Adult Social Worker of the Year: Joanne Finnegan and Keron Ford

The competition for Social Worker of the Year Awards is always very strong and the standard of entries high. All of our finalists should be extremely proud, I know I certainly am. A special mention is worthy of both Jamie McEwan and Dee Belford who were both successful in winning their categories.

Councillor Paulette Hamilton
Cabinet Member for Health and Social Care