BIRMINGHAM CITY COUNCIL

BIRMINGHAM HEALTH AND WELLBEING BOARD TUESDAY, 31 JANUARY 2023

MINUTES OF A MEETING OF THE BIRMINGHAM HEALTH AND WELLBEING BOARD HELD ON TUESDAY 31 JANUARY 2023 AT 1000 HOURS IN COMMITTEE ROOMS 3 AND 4, COUNCIL HOUSE, VICTORIA SQUARE, BIRMINGHAM B1 1BB

PRESENT: -

Councillor Mariam Khan (Chair), Cabinet Member for Health and Social Care and Chair

for the Birmingham Health and Wellbeing Board in the Chair

Dr Clara Day (Vice-Chair) Chief Medical Officer, NHS Birmingham & Solihull ICB

Natalie Allen Chief Executive SIFA FIRESIDE

Councillor Matt Bennett, Opposition Spokesperson on Health and Social Care Andy Cave, Chief Executive Officer, Healthwatch Birmingham (via Teams) Andy Couldrick – Children's Trust

Dr Anne Coufopoulous. University College, Birmingham

Councillor Karen McCarthy, Cabinet Member for Children Young People and Families

Stephen Raybould, Programmes Director, Ageing Better, BVSC Peter Richmond, Birmingham Social Housing Partnership Jo Tonkin, Assistant Director (KEG), BCC Dr Justin Varney, Director of Public Health

Dr Mary Orhewere, Assistant Director of Public Health (via Teams) Chris Baggott, Service Lead Public Health,

ALSO PRESENT:-

Aidan Hall, Service Lead, Programme Senior Officer Ed Brown, Committee Services Greg Ward, Levelling up Programme (via Teams) Representative for Christopher Beeken Douglass Simkiss

NOTICE OF RECORDING/WEBCAST

690 The Chair welcomed attendees and advised that this meeting will be webcast for live or subsequent broadcast via the Council's meeting You Tube site (www.youtube.com/channel/UCT2kT7ZRPFCXq6_5dnVnYlw) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

DECLARATIONS OF INTERESTS

691 The Chair reminded Members that they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting. If a disclosable pecuniary interest is declared a Member must not participate in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If other registerable interests are declared a Member may speak on the matter only if members of the public are allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation. If it is a 'sensitive interest', Members do not have to disclose the nature of the interest, just that they have an interest.

Information on the Local Government Association's Model Councillor Code of Conduct is set out via <u>http://bit.ly/3WtGQnN</u>

This includes, at Appendix 1, an interests flowchart which provides a simple guide to declaring interests at meetings.

Dr Justin Varney declared that he had recently been appointed to the Food Standards Agency Board.

The Vice-Chair Dr Clara Day declared that her husband had co-written the Triple-Zero Drug and Alcohol Strategy.

APOLOGIES

692 Apologies for absence were submitted on behalf of

Mark Garrick, Director of Strategy and Quality Development, UHB

Sue Harrison, Director for Children and Families, BCC

David Melbourne, NHS Birmingham and Solihull CCG

Ashan Mohammed, Department for Work and Pensions

DATE AND TIME OF NEXT MEETING

693 The Board noted the following meeting dates for the remainder of the Municipal

Year 2022/23:-

Tuesday 28 March 2023 1000 Hours

MINUTES - 29 NOVEMBER, 2022

694 Councillor Bennett raised the issue of MRI vaccinations which had been an issue in past meetings but was still not on the Forward Plan. He expressed concern about complacency particularly in light of alarming reports in the press in October. He requested that this issue be added to the agenda.

The Chair responded that an update on vaccinations would be going to Health and Social Care Overview Scrutiny Committee (HOSC) in the next few weeks.

Justin Varney then suggested that the discussion and presentations of HOSC could then be appended to the Health and Wellbeing Board (HWB) agenda as a for information item for 28th March.

The Minutes of the meeting held on 29 November, 2022, having been previously circulated, were confirmed and signed by the Chair.

ACTION LOG

695 Aiden Hall, Programme Senior Officer (Governance) advised that there were no outstanding actions on the Action Log.

696 CHAIR'S UPDATE

- The Chair advised that since the previous meeting there had been the peak winter period and a focus in the media on the University hospitals of Birmingham (UHB). There had been swift action taken to move Dame Yve Buckland into the role of interim Chair of UHB to provide

stability at his time. In terms of Council involvement in reviews surrounding UHB, a cross-party reference group had been established and the first meeting had taken place the previous week.

- Winter pressures were tough on the health system, and even more so during the cost of living crisis. The Chair thanked the Adult Social Care team for their help with keeping hospital discharges flowing. She added that she was pleased when David Melbourne, NHS Birmingham and Solihull CCG, put on record his thanks to the Adult Social Care team for keeping hospital discharges flowing. The Chair further thanked David Melbourne, Dame Yve Buckland and Jonathan Groverton for attending briefing sessions for elected members and to Graham Betts and Andrew Marsh for their session in discharges.
- The BLACHIR Implementation Board continued to meet and wer ein the process of appointing an independent Chair.

PUBLIC QUESTIONS

697 The Chair advised that there were no public questions for this meeting. The Board welcomed questions, any questions should be sent to: HealthyBrum@Birmingham.gov.uk.

COST OF LIVING CRISIS - VERBAL UPDATE ON BIRMINGHAM CITY COUNCIL'S RESPONSE

Greg Ward, Levelling Up Programme Lead- Birmingham City Council gave an online presentation including an updated slide giving information on what had been done on the issue to date.

Those present were satisfied with the information provided.

698 **RESOLVED**

That the presentation be noted.

COST OF LIVING CRISIS - VCSFE INSIGHTS REPORT

The following document was submitted:-

(See document no. 1)

Stephen Raybould, Programmes Director, Ageing Better, BVSC presented the reort using slides. He noted that the report that had been circulated was a

draft and the report had since been finalised. The final version was mostly the same and the link to it would be circulated.

He invited staff present to attend an event looking at how to support the voluntary sector workforce around the city. At the request of the Chair, information on the event would be circulated.

Natalie Allen, Chief Executive SIFA FIRESIDE thanked Stephen for his report and its effectiveness. She added that in an article in *The Guardian* on the impact of the cost of living and the research done by Homeless Link it was reported that over the coming months half of services were at risk and as such it was important to monitor the threat of said closures.

Dr Justin Varney, Director of Public Health, noted that the situation was not a short-term one and significant shift had been created in the city. As such an ongoing conversation on the issue was needed.

Stephen Raybould referred to those in the voluntary sector and encouraged them to talk to their funders to talk about their activities.

Natalie Allen added that there had been positive conversations with the Council about commission work and suggested that self-funded activity was more at risk than commission services.

Peter Richmond, Birmingham Social Housing Partnership, gave perspective form a Social Housing point of view and referred to a practitioners meeting held recently which concurred that the city strategy had been useful in linking people together and added that access to warm hubs and grants had been helpful. He further raised the need to think about general needs housing in housing associations. He added that the real problem was not yet being addressed as people were struggling and just about managing with heating etc. He added that homelessness was being presented from a general needs point of view.

The Chair welcomed the event on volunteering as it was a good opportunity to bring organisations together. She added that there was an onus to support organisations around the cost-of-living crisis and winter pressures. She observed that whilst many volunteers had been able to help during the Covid-19 crisis as many had free time in lockdown, this was no longer the case for many which meant there was more pressure on the voluntary sector. As such she suggested that strategic thinking was needed across the city.

699 **<u>RESOLVED</u>**:-

- i) That the recommendations f the report be noted.
- ii) That the development of a holistic, sustainable VCSFE be supported.
- iii) That the VCSFE be worked with to give Birmingham more of a presence at national level.

COST OF LIVING EMERGENCY - BIRMINGHAM HEALTHWATCH

Andy Cave, Chief Executive Officer, Healthwatch Birmingham gave an online presentation on the cost-of-living emergency using some slides noting that this was a live survey using the most up-to-date statistics which would be reported on regularly.

The Chair thanked Andy Cave for the presentation and information commenting that it was useful to put the issue into perspective and that she welcomed regular updates. She asked if this information was being fed into the corporate cost-of-living crisis work.

Andy responded that this was not yet the case but had been reported to the Equalities Group and the Adult Social Care Group.

The Chair requested that the information be tied together and fed in so that the Council's response could match the information being disseminated.

Dr Justin Varney commented that the City was keen to enable voluntary groups and community organisations to feed data in as such information was useful to the Council, for example to inform where to locate foodbanks.

Greg Ward concurred that there was a need to share more data in order to direct help to the most vulnerable, and suggested a meeting (which could include City Observatory colleagues to enable this.

A representative for Sandwell & West Birmingham Hospitals referred to points made about people reducing frequency of prescriptions and compromising health management due to the costs involved and raised concern that people not turning up for appointments may be missed due to backlogs associated with Covid-19.

Dr Clara Day suggested that Healthcare providers could make people aware that some may be able to claim expenses when attending hospital appointments. She further raised the issue that some people may only just mis out on the criteria for free prescriptions, further adding that the costs of repeat prescriptions could particularly affect such people.

Dr Justin Varney added that women may be disproportionally affected by the costs of repeat prescriptions when prescriptions such as HRT and the contraceptive pill were considered.

Stephen Raybould raised the issue of connecting services, for example, monitoring whether those using food banks were also able to access healthcare. He also raised concern that the city did not seem to have a longterm strategy and requested that this be looked at as a Board.

Dr Justin Varney referred to the city-wide partnership response to poverty and observed that whilst Team Birmingham had been able to respond well in a crisis, this was an ongoing crisis that could continue for many years. He

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conferred with the Chair about whether the issue should be considered by the Board r by Cabinet. The Chair responded that it was necessary to consider where the issue would have the best oversight, but stipulated that the Health and wellbeing Board would need o be involved.

Responding to a query from Councillor McCarthy about dentistry, Dr Clara Day concurred that there was a need in this area. She added that NHS Birmingham and Solihull would be inheriting dentistry from NHS England in April and recognised the need to obtain data to outline if there were issues in the area and to investigate further.

Natalie Allen referred to a communication about a list of dental practices that could provide services to refugees and homeless people and agreed to circulate this information.

Andy Cave said that he would mention the issues raised when presenting to the Observatory. He added that he would look into working more closely with foodbanks. He further suggested that communications were needed around awareness on where people could claim for travel expenses for hospital visits and around prescriptions and suggested that he would do a piece of work on this.

670 **<u>RESOLVED</u>**:-

That the report be noted.

AGENDA VARIENCE

At the request of the Chair, Item 14 was brought forward on the agenda.

PERINATAL AND INFANT MORTALITY TASKFORCE UPDATE

The following document was submitted:-

(See document 2)

The Chair made the Board aware that an additional paragraph had been inserted into the report into section 4.4.10.

Dr Justin Varney presented the report drawing particular attention to the Annex on experiences. He added that recommendations had been taken forward, working groups had been established and workstreams were moving forward. He noted that research done on genetic screening was timely as NHS England was changing its stance. The Chair suggested that the Board continue getting updates on infant mortality and wider maternal health across the city and that the local maternity and neonatal system provide an update at the March meeting of the board including any actions that they were taking.

Councillor McCarthy emphasised the importance of he report and the work done and added that Children's Services were working on a plan through to 2028 which included a workshop on infant mortality, preventable death and early intervention. She added that pathways from hospital, public health, nursing, health at home and in the community to support infant health were elements that were particularly important.

The Chair concurred with Councillor McCarthy and thanked her for providing additional reference linking in with the Children's and Young People's plan.

Andy Cave added that cultural awareness and associated health issues were important to highlight and link in.

Dr Justin Varney suggested that an update on cultural competency would be useful.

In response to a query form Dr Anne Coufopoulous, University College, Birmingham, regarding a report form Shelter on women in temporary accommodation, Jo Tonkin, Assistant Director (KEG), BCC, responded that work had been completed by Birmingham Community Healthcare Trust on temporary accommodation looking into what support those in temporary accommodation might need. She added that the service were aware of the issue and action could be taken.

Dr Clara Day praised the good feedback for the Seldom Heard report. She enquired as to what extent it was ensured that the data was landing back with healthcare professionals and suggested that that the way staff cared for patients may need to be considered.

In response to a query from Douglass Simkiss about interventions to reduce infant mortality, Jo Tonkin responded that the taskforce could look at factors that may have an impact.

Dr Varney added that it was important to increase opportunities for women in Birmingham, particularly with regard to accommodation and employment and his would in turn increase opportunities for children.

In response to a question from Peter Richmond, Birmingham Social Housing Partnership, about whether the trajectory had returned to a pre-pandemic position, Dr Varney responded that this would not be known for another 18 months as there was a time lag on the data from the Office of National Statistics (ONS). He further suggested that the recovery from the Covid-19 pandemic would probably be minimal due to the effect of the cost-of-living crisis.

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Dr Varney added that the benefit of having an Independent Chair of the Perinatal and Infant Mortality Taskforce was that actions that had not yet been received could be chased. The Independent Chair, Sushma Acquilla, had been persistent in working with colleagues in the ICS.

The board would continue to receive report son progress.

Douglass Simkiss stated that in term of years of life lost, this was he biggest issue in the city.

671 **<u>RESOLVED</u>**:-

That the report be noted.

Matthew Bennet left the meeting during the consideration of this item.

BETTER CARE FUND ADDENDUM PLAN 2022/23 FOR ADULT SOCIAL CARE DISCHARGE FUNDING

The following document was submitted:-

(See document 3)

Andy Cave, Chief Executive Officer, Healthwatch Birmingham, presented the report drawing attention to the plan attached as an appendix and the key intervention set out within it. He reported that implementation had now commenced and the next report was due the following day.

Retrospective approval was sought from the Health and Well-being Board for the Addendum Better Care Fund Plan: Adult Social Care Discharge Fund.

672 **<u>RESOLVED</u>**:-

That the ASC Discharge Fund BCF Addendum Plan be approved by the Board.

Douglas Simkiss left the meeting following the conclusion of this item.

TRIPLE ZERO DRUG AND ALCOHOL STRATEGY

The following document was submitted:-

(See document 4)

Dr Mary Orhewere, Assistant Director of Public Health, and Chris Baggott, Service Lead Public Health, presented he report and received comments and responded to questions.

Approval from the Board was sought to progress the report to Cabinet and for the proposed governance.

It was proposed that the new group be accountable to the Board for the recovery and treatment elements and to the Community Safety Partnership (CSP) for the community and safety elements.

Councillor McCarthy highlighted the work for young people delivered by Aquarius regarding how alcohol and other drugs affected issues such as homelessness, child sexual exploitation and mental health.

Dr Varney proposed that given the additional funding received from the government and new issues such as the use and effects of nitrous oxide, the group should report directly to the Board for at least the next two years. The Board agreed to this.

Dr Day praised the presentation of the document, but expressed concern that recovery was not emphasised as much as support and treatment. She enquired as to the next steps and highlighted the opportunity to make sure services were properly joined up. She also raised uncertainty as to what 'good' would look like in terms of numbers.

The Chair added that monitoring needed to be looked at otherwise any reduction in numbers would not have context. She suggested that thought was needed for the next stage of implementation.

Chief Superintendent Mat Shaer, neighbourhood Police Commander – Birmingham East, commended the proposal around governance noting that in the past the city had not done well at a strategic level and there had been duplication of governance. Regarding recovery, he raised concern that treatments were often aimed at the bulk of the distribution curve, but looking at the harm of risk it appeared that it was a minority caught in the issue. He enquired whether the strategy took account of this.

Natalie Allen highlighted the need to engage with those most marginalised and suggested that a key risk was the high figures of those not in treatment. She further suggested that whilst work around specialist teams, for example those working around homelessness, had worked well, this work was reactive and in order to translate a strategy into action it was necessary to look at those not in treatment. She added that it was important to design the service to allow people to engage.

Stephen Raybould referred to the focus shifting from criminality to a health issue suggesting that it needed to be brought into line with the rest of provision in the city.

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Dr Varney clarified that as work on drugs and alcohol was nationally by the Home Office it needed to be written in a certain way with this in mind. He praised the team for doing a good job in engaging and working with partners to develop it and it was now necessary to clarify the connection to the overarching strategy and work on the narrative of the impact of issues such as poverty etc.

Chris Baggot noted the comments made, responding that recovery was a key part of the action plan. He added that there had been discussions around dual diagnosis but more work was necessary on key parts of the implementation plan.

In terms of Dr Day's query about what 'good' looked like, he clarified that ambitions had not changed but there was work to do on explaining the narrative.

He further highlighted the importance of monitoring progress in the context of the national plan, recognising that they were accountable under the outcomes frameworks. He also highlighted the importance of translating into local outcomes.

He explained that governance and delineation took time.

He agreed with previous comments from Natalie Allen about the risk of those not in treatment, noting that half of drug deaths were not in structured treatment programmes, and whilst reaching those not in treatment would be a big task, it was a focus.

Dr Orhewere further responded that there were ambitions but also a need, and as such quantitative measures would get worst before they got better, as part of getting better. She further raised the issue that not all people in need of the services saw themselves as people who did.

She concluded by stating that many of the issue would be taken up in the implementation plan.

673 **<u>RESOLVED</u>**:-

- i) That the documents be noted.
- ii) That the group report directly to the Health and Wellbeing Board for the next two years.
- iii) To agree to HWB responsibility for oversight of delivery of actions supporting the strategy (health and treatment activity).
- iv) To approve continuation through the governance process and request to
- v) Cabinet for publication.

Information Items

FORWARD PLAN

Aidan Hall presented the Forward Plan which was noted.

(See document no. 5)

WRITTEN UPDATES FROM HEALTH AND WELLBEING BOARD FORUMS

The following written updates were on the Agenda for information only.

(See document nos. 6 to 8)

CREATING A BOLDER HEALTHIER CITY (2022-2030): INDICATOR UPDATES

Creating a Physically Active City Forum

Creating a Mentally Healthy City Forum

Health Protection Forum

676 **RESOLVED:-**

That the written updates be noted.

OTHER URGENT BUSINESS

677 There were no items of urgent business.

The meeting ended at 1151 hours.

CHAIR