

BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

PUBLIC MEETING

Tuesday 18 October 2022. Committee Rooms 3 & 4, Council House, Victoria Square

Action Notes

Present

Councillor Mick Brown (Chair)

Councillors: Kath Hartley, Jane Jones, Rob Pocock, Julian Pritchard and Paul Tilsley.

Also Present:

Neil Barnett, Divisional Director of Operations, Birmingham Women's and Children's NHS Foundation Trust.

Fiona Bottrill, Senior Overview and Scrutiny Manager (joined the meeting online)

Joann Bradley, Public Health Service Lead: Children and Young People.

Dr Anupam Dharma, Consultant Psychiatrist and Medical Director, Birmingham Women's and Children's NHS Foundation Trust.

Maria Gavin, Assistant Director, Quality and Improvement – Adult Social Care.

Joanne Hemming, Director of Nursing, Birmingham Women's and Children's NHS Foundation Trust.

Councillor Shehla Moledina (Education and Children's Social Care O&S Committee).

Fiona Reynolds, Chief Medical Officer, Birmingham Women's and Children's NHS Foundation Trust.

Gail Sadler, Scrutiny Officer.

Merryn Tate, Head of Service – Safeguarding.

James Thomas, Senior Performance Adviser.

1. NOTICE OF RECORDING/WEBCAST

The Chair advised that the meeting would 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 could record and take photographs except where there were confidential or exempt items.

2. APOLOGIES

Councillor Gareth Moore.

3. DECLARATIONS OF INTEREST

None.

4. ACTION NOTES/MATTERS ARISING

Actions from 19 July informal meeting

Q4 Adult Social Care Performance Monitoring Report

- Andrew Marsh agreed to try to obtain the information for a suggested new indicator which measures the length of time from when someone is discharged to assess from hospital and the wait before a care package is in place and would let Scrutiny Officer(s) know how this was being progressed. Scrutiny Officer(s) followed up the request and also raised the matter with the Cabinet Member. The following response was received on 16th October:-

The feedback from colleagues at the University Hospital Birmingham is that there were no formally recorded instances of failed discharges due to care packages not being in place and it had not been picked up as an issue.

Actions from 20 September meeting

Report of the Cabinet Member for Health and Social Care

- A briefing note on Adult Social Care plans for 'winter pressures' was circulated to members on 12th October.

Tackling Period Poverty and Raising Period Awareness Tracking Report

- Councillor Brown had met with Councillor Kerry Jenkins on 4th October to discuss the issue of schoolgirls being absent from school when menstruating. It was agreed that this would be an item for the Education and Children's Social Care O&S Committee to consider when they met on 19th October. If agreed by the Committee for inclusion in the work programme the focus of the report would be on the learning/good practice that has been identified and how this is being shared with schools across the city.
- Monika Rozanski to provide a breakdown of male and female staff who attended the event at George Dixon Academy. Members were told that Scrutiny Officer(s) had followed up this request and asked for an indication of when the response would be available.

RESOLVED:

- Scrutiny Officer(s) were asked to contact Andrew Marsh to request a more detailed briefing around the process and causes of a failed discharge i.e., is it due to the hospital or social care and how significant the problem might be.

The action notes for the meeting held on 20th September were agreed .

5. USE OF CHAIR'S AUTHORITY TO ACT

This item was on the agenda to formally report the use of Chair's Authority to Act taken at the July Meeting in order to appoint members to the Joint Health Overview and Scrutiny Committees with Sandwell and Solihull.

6. FORWARD THINKING BIRMINGHAM

Fiona Reynolds (Chief Medical Officer); Dr Anupam Dharma (Consultant Psychiatrist and Medical Director); Joanne Hemming (Director of Nursing) and Neil Barnett (Divisional Director of Operations), Birmingham Women's and Children's NHS Foundation Trust attended for this item.

Members received a presentation which included information on the capacity and demand for the service post and pre-pandemic. Also, the waiting time for treatment to start and how the service is accessed. Furthermore, members were told of the actions that were being put in place to meet the increased demand on the urgent care pathway which has resulted in more patients being cared for in their own home by the Crisis and Home Treatment Teams; more patients presenting at A&E departments and patients being admitted into out of area beds. In addition, members were updated on actions and improvements that had taken place over the last 12 months including recruiting 60 additional staff (35 nurses recruited internationally); the roll out of Peer Support Workers and a pilot undertaken to improve the Pharmacy Delivery Service.

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

- The new international nurses have been recruited from South Africa.
- Urgent discussions need to take place with GCHQ to prevent another cyber-attack because they can offer safeguards.
- Concern was raised that the NHS are not investing enough in training their own workforce and having to rely on third world countries who invest heavily in training their staff who then come to the UK. Members were assured that these were long term options, and they are working closely with universities to increase the number of student places and, therefore, increase the number of trained clinicians. Have got a number of actions in place to grow home talent but it is a slow process and need to fill the gap in the interim.
- The international nurses are recruited on the same pay and conditions as any substantive employed staff within the organisation.
- 18 weeks target from referral to treatment are in place for physical health but not mental health but FTB use that target as their standard. Just over 76% of service users are currently accessing treatment within 18 weeks. Used to have challenges with some service users having to wait over a year but that has not been an issue for the last 2 years.
- There has been a significant increase in ADHD referrals which has led to longer waiting times for treatment.

- Out of area beds refers to any beds outside of the Birmingham and Solihull area and are mainly in London and Manchester catchment areas. People are accessing services quite late due to the pandemic, and this has led to a rise in serious mental illness conditions. Out of area has varied between 20-30% (15-20 young people) additional usage at any one time. Have a dedicated Case Management Team to support families and carers to enable visitations.
- Mental health practitioners will be placed in Primary Care Networks but with a modelled allocation of workers to support the population.
- As a system between FTB and the Birmingham and Solihull Mental Health Trust have identified an additional 20 short term beds.
- All patients are assessed by FTB but around 60-70% do not meet the eligibility criteria and their needs may be met by the voluntary sector.

RESOLVED:

- Further detail required on:-
 - age/distance of young people being placed out of area and the trajectory for reducing that.
 - the number of weeks a patient has to wait before treatment starts.

7. INFANT MORTALITY TRACKING REPORT

Joann Bradley (Public Health Service Lead: Children and Young People) attended for this item to outline progress against the four outstanding inquiry recommendations.

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

- The revised targets for reducing infant mortality were to ensure they aligned with the Health and Wellbeing Strategy and being more realistic about timescales for achieving the targets. Citywide partners are committed to the revised targets.
- Within the local maternity system there are link workers who are working directly with parents. Those link workers speak different languages making communication more effective. Also creating Parent Forums across the city.
- Public Health officers were congratulated for the work that has been undertaken so far and for treating the issue as a priority. Also elected members would be keen to play a part in the community engagement. To advise when the role of elected members in engaging communities might be helpful.
- Addressing the issue of genetic risk awareness in schools was commended.

RESOLVED:

Members agreed with the following Cabinet Member Assessments:-

R01 – Cabinet Member Assessment 2 (Achieved Late).

R02 – Cabinet Member Assessment 2 (Achieved Late).

R03 – Cabinet Member Assessment 2 (Achieved Late).

R04 – Cabinet Member Assessment 2 (Achieved Late).

A copy of the 22nd March 2022 report to the Health and Wellbeing Board is circulated.

Report and recommendations signed off as completed.

8. AN UPDATE ON FUTURE ARRANGEMENTS FOR ADULT SOCIAL CARE PERFORMANCE MONITORING

James Thomas (Senior Performance Adviser); Maria Gavin (Assistant Director, Quality and Improvement – Adult Social Care) and Merryn Tate (Head of Service – Safeguarding) attended for this item.

Members were told that a revised Corporate Performance Framework had been established which was aligned to the Corporate Plan. The Performance and Delivery Plan which brings together key performance measures and delivery milestone for each corporate theme would be presented to Cabinet in November 2022. There has been a delay due to no committee meetings being held during the period of national mourning. This has also impacted on performance data not being available for consideration today. The first of the new performance reports will be presented to Cabinet in December and will contain Q1 and Q2 data.

Furthermore, members were reminded of the measures Adult Social will be reporting corporately for 2022/23. At a directorate level more detailed data is collected for the Management Team e.g., vacancies, sickness, freedom of information, complaints etc. There is also service level data that is not reported to the Management Team unless there is a particular issue or concern.

In response to concerns raised at a previous meeting about the lack of information regarding safeguarding that the committee receives in the performance monitoring reports, Merryn Tate presented a high-level set of data on referrals; sources of referral; types of alleged abuse or neglect; location of abuse etc. across the city.

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

- The Care Act included self-neglect as a safeguarding matter rather than care management. The Social Care Institute of Excellence says it depends upon the impact and what is meaningful to that person. For example, if a person had support to services in place but, because an impairment or disability, was not engaging and, potentially, this is creating a risk to themselves or others, then that would be considered a safeguarding issue. Emotional neglect would be assessed in the same way i.e., the impact on that person. If there was intentional withholding of emotional support with malicious intent, then it would be considered a safeguarding issue.

RESOLVED:

- Merryn Tate to provide a table that depicts the alleged type of abuse/neglect to the location where it has taken place.

- The report was noted.

9. CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH INQUIRY – TERMS OF REFERENCE

The committee received a verbal update from the Senior Overview and Scrutiny Manager who informed them that the Task and Finish Group met on 7th October and agreed the draft terms of reference included as an appendix to the report. The membership of the Task and Finish Group consists of members from both this committee and Education and Children's Social Care O&S Committee. The report from the inquiry would be presented to City Council in June 2023 meaning the evidence gathering would need to be finished by the end of March 2023. The focus of the inquiry will be access and support for children and young people who have diagnosed mental health need and for those who experience psychological distress.

The Task and Finish Group agreed to review the terms of reference during the inquiry process to see if the evidence is highlighting some areas that would benefit a more detailed focus from Scrutiny. Therefore, it may be that during the inquiry members decide to focus on a particular mental health need.

The draft report will be considered by the Task and Finish Group with cross-party representation and the final report signed off by the Chair of the inquiry.

RESOLVED:

The terms of reference for the inquiry were agreed.

10. WORK PROGRAMME – OCTOBER 2022

The Chair told Members that he had received a briefing note from Professor Graeme Betts on the Adult Social Care Reforms, and he would ask Scrutiny Officer(s) to circulate it to the committee.

RESOLVED:

That the work programme be noted.

11. DATE AND TIME OF NEXT MEETING

The date of the next meeting is scheduled to take place on Tuesday 22 November 2022 at 10.00am.

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

None.

13. OTHER URGENT BUSINESS

None.

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 1207 hours.