### **BIRMINGHAM CITY COUNCIL**

### **HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE**

TUESDAY, 24 JANUARY 2023 AT 10:00 HOURS
IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA
SQUARE, BIRMINGHAM, B1 1BB

### AGENDA

### 1 NOTICE OF RECORDING/WEBCAST

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's meeting You Tube site (<a href="www.youtube.com/channel/UCT2kT7ZRPFCXq6\_5dnVnYlw">www.youtube.com/channel/UCT2kT7ZRPFCXq6\_5dnVnYlw</a>) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

### 2 APOLOGIES

To receive any apologies.

### 3 **DECLARATIONS OF INTERESTS**

Members are reminded 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 <a href="http://bit.ly/3WtGQnN">http://bit.ly/3WtGQnN</a>. This includes, at Appendix 1, an interests flowchart which provides a simple guide to declaring interests at meetings.

### 3 - 10 4 ACTION NOTES/MATTERS ARISING

To confirm the action notes of the meeting held on 20th December 2022. (1000-1010hrs)

### 11 - 22 5 ADULT SOCIAL CARE REFORMS

John Williams, Director - Adult Social Care (Operational and Community Services) (1010-1100hrs)

### 6 APPROVED MENTAL HEALTH PROFESSIONAL 23 - 26

John Williams, Director - Adult Social Care (Operational and Community Services); Joanne Lowe, Head of Service, Operations and Partnerships Mental Health.
(1100-1150hrs)

#### 7 <u>WORK PROGRAMME - JANUARY 2023</u> 27 - 46

For discussion. (1150-1200hrs)

### 8 **DATE AND TIME OF NEXT MEETING**

To note that the next meeting is scheduled for Tuesday 21st February 2023 at 10.00am.

### 9 REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

To consider any request for call in/councillor call for action/petitions (if received).

### 10 OTHER URGENT BUSINESS

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chair are matters of urgency.

### 11 **AUTHORITY TO CHAIR AND OFFICERS**

Chair to move:-

'In an urgent situation between meetings, the Chair jointly with the relevant Chief Officer has authority to act on behalf of the Committee'.

#### **BIRMINGHAM CITY COUNCIL**

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

### **PUBLIC MEETING**

## Tuesday 20 December 2022 Committee Rooms 3 & 4, Council House, Victoria Square Action Notes

#### **Present**

Councillor Mick Brown (Chair)

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

#### **Also Present:**

Councillor Mariam Khan, Cabinet Member for Health and Social Care / Deputy Chair of the BLACHIR Implementation Board

Maria Gavin, Assistant Director, Adult Social Care

Dr Carolyn Kus, Independent Chair of the Birmingham Safeguarding Adults Board

Asif Manzoor, Business Manager, Birmingham Safeguarding Adults Board

Modupe Omonijo, Assistant Director, Wider Determinants, Public Health (On-line)

Monika Rozanski, Service Lead – Inequalities Public Health

Dr Justin Varney, Director of Public Health

Fiona Bottrill, Senior Overview and Scrutiny Manager

Jayne Bowles, Scrutiny Officer (On-Line)

#### 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

None.

#### 3. DECLARATIONS OF INTEREST

None.

### 4. ACTION NOTES/MATTERS ARISING

#### Actions from 19 July informal meeting:

### **Q4 Adult Social Care Performance Monitoring Report**

Regarding the further informal briefing session to be organised with Andrew Marsh and a representative from University Hospitals Birmingham NHS Foundation Trust, Scrutiny Officers have been in touch with Andrew to follow up on this request and are waiting for some proposed dates.

#### Actions from 22 November meeting:

### Birmingham and Solihull Integrated Care System Ten-Year Strategy

- A note to be provided on what long-Covid services are available in Birmingham.
- A note to be provided on the membership of the ICS Partnership, ICS Board and Place Board.

This information has been requested with an indication of when it will be available and a response is awaited.

### <u>Substance Use: Birmingham's Adult Treatment Services</u>

- To provide information on the association between people living in HMOs and exempt accommodation and in treatment for drug and alcohol abuse by Wards.
- CGL to provide information regarding the training that has been given to housing providers.

Scrutiny Officers have been advised that this information will be available by the end of January 2023.

#### **RESOLVED**:

That the action notes of the meeting held on 22 November 2022 were agreed.

### 5. BIRMINGHAM AND LEWISHAM AFRICAN CARIBBEAN HEALTH INEQUALITIES REVIEW (BLACHIR) PROGRESS UPDATE

Councillor Mariam Khan, Cabinet Member for Health and Social Care and Deputy Chair of the BLACHIR Implementation Board, Dr Justin Varney, Director of Public Health, and Monika Rozanski, Service Lead – Inequalities Public Health, were in attendance for this item. Modupe Omonijo, Assistant Director, Wider Determinants, Public Health, was also in attendance on-line.

Councillor Khan thanked the Committee for inviting her to the meeting, with colleagues from Public Health, to talk about the important work they are leading on

with Lewisham Council in tackling health inequalities in the Black African and Black Caribbean communities, and highlighted the following:

- The review has been endorsed by both Lewisham and Birmingham Health and Wellbeing Boards and the report was published in June this year.
- Members of the committee should all have a copy and there is a link to the report on the Council's website.
- The actions being taken to deliver on the recommendations which came out of the review.
- The goal of the review is very simple: to break the cycle of inequalities and disadvantage for Black African and Black Caribbean communities and reduce health inequalities that are affecting them.
- Monika Rozanski, Service Lead Inequalities Public Health, highlighted further key points regarding the Taskforce.

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

- Members asked why Lewisham had been chosen as partners and it was explained that this followed a discussion back in 2019 when Lewisham visited Birmingham as part of the Childhood Obesity Trailblazer.
- It had been identified that Birmingham has the largest number of African and Caribbean people of any unitary authority in the country and Lewisham has the largest percentage of any authority, so it absolutely worked for this reason.
- What was of interest was Lewisham have a larger Caribbean population and their African population is slightly different to Birmingham, so this has been helpful throughout the journey because in some of the discussion they have more representation from affected communities than we do.
- In the implementation phase, Birmingham and Lewisham are implementing separately but sharing learning with each other as this progresses.
- In terms of how this piece of work can achieve what previous work has not, this review focussed very specifically on what actions need to change and what the opportunities are based on published evidence, lived experience and the involvement of providers.
- There is a lot of commitment from the ICS at local level and many of the things that will be changed through BLACHIR will benefit many other communities.
- The delay between the report being launched in June and the first meeting of the Implementation Board in November was queried and Members were told that during this time there had been a lot of work on engagement and dissemination of the report, getting partners on board, recruiting to senior officer and support roles, and drafting plans. The Commonwealth Games

- had also been a factor with the team having to be diverted onto other projects.
- A dashboard will be set up to measure progress. This will be an on-going live document and should demonstrate how measurable outcomes are.
- There is a lot of national interest in the report and it is being taken forward by the NHS England Director of Inequalities who is taking it to all of the NHS Integrated Care System Inequalities Boards to ask what they are doing in response to the recommendations.
- With regard to engagement with Solihull beyond the ICB, Solihull does not have the same ethnic diversity as Birmingham but they recognise the value in collaborating with this work. In terms of the way the governance fits together, the Implementation Board is held by Birmingham and underneath it the ICS has the implementation board that feeds into the overall BLACHIR Implementation Board and also the ICS Inequalities Board, so there is a dual reporting line and that is where Solihull benefits from BLACHIR. It will be interesting how they take some of the work being done on cultural competency and apply it to their central and eastern European population which is a large and growing ethnic community.
- Working initially with West Birmingham and now the Birmingham and Solihull
  Maternity network system, a network of community researchers has been
  developed focussing initially on infant mortality, also providing support to
  other community research projects in the Council. The second element is
  then mapping all other community researchers we have across the Council
  and trying to bring them all together and then the third element is building
  that up as a model for the Council, working with the City Observatory and
  Richard Brooks.
- The importance of community profiling and going beyond BAME was discussed and it was agreed this is a significant piece of work in terms of recognising inequalities.
- There is also a need to invest in engaging our own staff in recognising inequalities.
- The role of O&S as regards Equalities issues was discussed and Members were told that the Co-ordinating O&S Committee had looked at the Everyone's Battle Everyone's Business action plan. All reports to O&S also now have a covering report with an Equalities section and Members are encouraged to question this if they feel it does not include all the relevant information.

#### **RESOLVED**:

That the report was noted.

#### 6. BIRMINGHAM SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2021-22

Dr Carolyn Kus, Independent Chair of the Birmingham Safeguarding Adults Board, and Asif Manzoor, Business Manager, Birmingham Safeguarding Adults Board, were in attendance for this item.

The following key points from the presentation were highlighted:

- During the year, there have been 11,861 concerns raised, of which 843 became inquiries and 90% felt their inquiry had achieved what they wanted.
- There is a large increase in enquiries and concerns raised around abuse and neglect and a lot of that is happening in people's own homes.
- The 4 strategic priorities for 2021/22 were around communication, prevention, making safeguarding personal and learning and development and all the way through those priorities, the person is at the centre.
- The achievements of the Board against those priorities.
- Each Board meeting starts with a citizen's story and these are a key element in terms of learning.
- Three Safeguarding Adult Reviews have been completed from the previous year. They were published reports and the findings have been shared with partners so that they could take away and learn from those.
- This year there have been six adult safeguarding referrals which did not meet the criteria for review but they have been taken forward into the learning and development sub-group to look at how they can learn from those.
- The biggest role of the Board is about seeking assurance from partners that they are doing what they should be doing and that is done through annual statements. The citizen's voice is important, but also the data and intelligence.

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

- With regard to abuse and neglect in a person's own home and the support
  offered, the Safeguarding Adults Board is not operational so it would be the
  local authority providing that support. There is a national document which
  the LGA and ADASS were working on last year around safeguarding for carers.
- The Board had done a safeguarding adults review which focussed on domestic abuse where they had held a practitioners forum to raise awareness around support for carers.
- The number of safeguarding concerns which go on to become inquiries varies nationally. There are some other local authority areas where 99% of concerns become inquiries.
- The Board's role is to seek assurance from the local authority and in Birmingham they know that all safeguarding concerns raised are acted upon.

- An audit has been carried out recently to understand where safeguarding referrals have been appropriate or not, for example there may be a referral for example from the Ambulance Service where it is not a safeguarding issue but that person might have care and support needs and that is what they try to filter out.
- Data and intelligence is key to the Board and they do ask colleagues in Adult Social Care and partners those searching questions and there is also a quarterly performance group with partners which includes data on the number of safeguarding concerns raised and the outcomes.
- Commissioning and the CQC attend the Board and they will be asked what the national and local picture is in terms of support, themes and trends.
- The impact of the pandemic and the cost of living crisis on referrals in relation to neglect and self-neglect was discussed in view of the likely impact on people's mental health.
- In response to a question around concerns that vulnerable individuals who are in exempt accommodation and accessing substance misuse services being at risk of being exploitation, Members were told the Safeguarding Adults Board is not a leader in exempt accommodation. However, Members acknowledged the role of the Board in bringing this issue to the attention of the Committee and the Council some years ago and expressed their thanks, as this had been one of the triggers for the inquiry undertaken by the Co-ordinating O&S Committee and the national debate on the issue.

### **RESOLVED**:

That the report was noted.

#### 7. ADULT SOCIAL CARE QUARTERLY PERFORMANCE REPORT

Maria Gavin, Assistant Director, Adult Social Care, was in attendance for this item.

The Chair advised the Committee that due to time constraints they would go straight to Members' questions and the following were among the main points raised:

- It was noted that the proportion of clients reviewed, re-assessed or assessed within 12 months has slipped away over the last 12-18 months and is running at just over 63% with a target of 85%. Members were told that the papers included both the Quarter 1 and Quarter 2 performance reports and the second one does show the situation improving. Adult Social Care had a huge recruitment campaign over the summer and autumn and 62 new social workers have been recruited which will increase capacity for reviews.
- The amount of money raised from the adult social care precept and what it is being spent on was queried. It was agreed that this information would be obtained from Finance colleagues and circulated to the Committee.

Members were also advised that at their next meeting the Resources O&S Committee would be looking at the budget so if there are any comments they wished to feed into that discussion there would be an opportunity to do so.

- Concerns were raised in relation to staff turnover in care homes.
   Birmingham works with 600-800 providers and as a Council tries to pay more and has a lower turnover than the national average, but still around 25%, and it is difficult for the care sector to compete with other sectors in terms of wages.
- Delayed transfers of care it was pointed out that there is no indicator for this Committee that demonstrates the reasons why a patient's discharge from hospital is delayed. Reference was made to discussions with Andrew Marsh regarding new measures on discharges and this will be followed up as reported in the actions at the beginning of the meeting.

#### RESOLVED:

- That the information requested in relation to the adult social care precept would be obtained and circulated to Members.
- That the report was noted.

#### 8. WORK PROGRAMME – DECEMBER 2022

#### **RESOLVED**:

That the work programme was noted.

#### 9. DATE AND TIME OF NEXT MEETING

The next meeting is scheduled to take place on Tuesday 24 January 2022 at 10.00am.

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

None.

#### 11. OTHER URGENT BUSINESS

None.

#### 12. 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 1158 hours.

# Birmingham City Council Health and Social Care Overview and Scrutiny Committee



**Date (24 January 2023)** 

Subject: Adult Social Care Reforms

**Report of:** John Williams, Director of Operational and Community

Services, Adult Social Care

**Report author:** Andrew Marsh, Strategic Lead for Hospitals and

Discharge to Assess, Head of Service (Operations and

Partnerships)

### 1 Purpose

The Government introduced plans for Adult Social Care Reforms in 2021 including £5.4bn to fund the reforms. Implementation of the reforms was expected to commence in October 2023. The Chancellor during the Autumn Statement in November 2022 announced that the reforms would be delayed until 2025. The report will update the Committee on the actions taken to date and key next steps of implementing the Fair Cost of Care.

### 2 Recommendations

- 2.1 Note the work started by the Directorate
- 2.2 Note that the implementation of the charging reforms was delayed until October 2025 as announced in the Autumn Statement in 2022. This means the new £86,000 Cap on care costs will not be introduced until 2025
- 2.3 Note that the Fair Cost of Care element of the reforms is still being implemented in stages from October 2023. At which point self-funders entering a care home for the first time will be able to access the Local Authority fee rates. Self-funders already in a care home in October 2023 will have access to the Local Authority fee rates no later than 2025

### 3 Any Finance Implications

3.1 The allocation for implementation of the market sustainability and fair cost of care for the 2022/23 financial year was £3.78m. The allocations for 2023/24 and

- 2024/25 have not yet been confirmed and therefore no increases have been incorporated into the projections for those years
- 3.2 Due to the delayed implementation of the charging reforms the impact is subject to change

### 4 Any Legal Implications

- 4.1 Provisions in the Care Act 2014 (section 18(3)) will be brought fully into force enabling self-funders to ask their local authority to arrange their care in a care home for them so that they can benefit from lower rates
- 4.2 There will be a requirement to distribute the grant funding to the care market in line with the conditions of the grant
- 4.3 Due to the delayed implementation of the charging reforms, implications are subject to change

### 5 Any Equalities Implications

- 5.1 Self-funders will be able to ask their local authority to arrange their care in a care home for them so that they can benefit from lower rates
- 5.2 Due to the delayed implementation of the charging reforms, implications are subject to change

### 6 Appendices

6.1 Adult Social Care Reforms

### **Adult Social Care Reforms**

Update report to Health and Social Care Overview and Scrutiny Committee

24 January 2023





### **Background**

- In September 2021, the Government set out plans to reform adult social care in England. Funding of £5.4 billion would be used to fund the reforms between 2022/23 and 2024/25:
  - £3.6 billion would be used to reform how people pay for social care. This included £1.4 billion to help local authorities move towards paying a "fair cost of care" to providers
  - £1.7 billion would be used to support wider system reform
- The social care reforms were due to be implemented from October 2023
- However in the Autumn statement delivered on the 17 November 2022 the Chancellor announced that the charging reforms would be delayed until 2025



### **Key Features of the Reforms**

- Charging reforms/Care Cap
  - The Government planned to introduce a new £86,000 cap on the amount anyone in England will have to spend on their personal care over their lifetime. The cap will apply irrespective of a person's age or income
  - The cap is not intended to apply retrospectively meaning any cost accrued prior to implementation will not count towards the cap
  - Any money paid by a local authority towards meeting a person's eligible care needs will not count towards the cap
  - The upper capital limit (the threshold above which somebody is not eligible for local authority support) will increase from £23,250 to £100,000
  - The lower capital limit (the threshold below which somebody does not have to contribute towards their care costs from their capital) will increase from £14,250 to £20,000
  - Only money spent on meeting a person's personal care needs will count towards the cap. Spending on daily living costs (commonly referred to as "hotel costs" in a care home) is not included
  - Daily living costs would be set at a notional level of £200 per week at 2021/22 prices
  - During the Autumn Statement 2022 the Chancellor announced that the charging reforms would be delayed until 2025





### **Key Features of the Reforms**

- Fair Cost of Care Reforms
  - Provisions in the Care Act 2014 (section 18(3)) will be brought fully into force enabling self-funders to ask their local authority to arrange their care in a care home for them so that they can benefit from lower rates
  - £1.4 billion will be provided to local authorities to support them to increase the rates they pay to providers where necessary (move towards paying a "fair cost of care")
  - Local Authorities would need to:
    - Carry out cost of care exercises for the 65+ older adult care home market, and 18+ home support market (including extra care sheltered housing) and submit output reports and returns to DHSC by 14 Oct 2022
    - Carry out market sustainability assessments for the 65+ older adult care home market, and 18+ home support market (including extra care sheltered housing) including assessment of the impact of social care reforms and submit a draft Market Sustainability Plan to DHSC by 14 Oct 2022 and finalise for submission in February 2023
    - Distribute grant funding to care providers by 31 March 2023 in line with the grant conditions for 2022/23 and develop plans for spend in 23/24 and 24/25
  - The Fair Cost of Care was already set out to be implemented in stages from October 2023 up to 2025 and is therefore unchanged as a result of the Autumn statement





### **Fair Cost of Care Exercise**

- The Fair Cost of Care exercise for Birmingham is based on provider submitted data between 6 June and 4 August 2022
  - Data covered a variety of factors for both 65+ older adult care and 18+ domiciliary care
  - Providers were encouraged to take part through various communications and, where necessary, by issuing contractual breach notices. Care homes used the Care Cubed FCoC tool and Home support and extra care providers used the ARCC tool, both commissioned by LGA/ADASS
  - Birmingham City Council engaged closely with the providers to understand any discrepancies in the submissions. Only returns that were internally validated were approved for inclusion in the analysis
  - Once data collection was completed, the median costs of providing care in the local market was calculated for each of the cost lines
  - After further validation with stakeholders, further iterations were developed along with a variety of scenarios on occupancy and inflation assumptions for 22/23
  - The government mandated Fair Cost of Care template and report, submitted on 14th of October
  - The submission was underpinned by close engagement with both care home and domiciliary care providers
    - The returns were scrutinised in collaboration with the providers to improve the quality of data used in the exercise; however, this was limited and did not extend to validation of individual costs or accounts.
    - Stakeholder engagement sessions were held by Birmingham City Council where the providers were updated on the ongoing programme and initial insights were shared and validated





### Fair Cost of Care Exercise – Summary Results

- Summary results for 65+ Care Home Market
  - Total cost outputs for 22/23 from the FCoC exercise are £934 for Without Nursing, and £1,137 for Nursing
  - Enhanced care (1) costs do not show a significant change in either Without Nursing or Nursing
  - Costs for 21/22 are 53% higher than the current (22/23) fee rate for Without Nursing, and 23% higher for Nursing. Projected costs for 22/23 are 63% higher than the current fee rate for Without Nursing, and 31% higher for Nursing
  - The higher costs for Nursing are primarily driven by the additional nursing staff costs

Resident Type	Records	22/23 Fee rate (incl FNC) (3)	21/22 Median reported costs	22/23 Modelled inflation
Without Nursing	46	£572	£873	£934
Without Nursing Enhanced	37	£572	£898	£961
Nursing	29	£867	£1,064	£1,137
Nursing Enhanced	26	£867	£1,051	£1,123



<sup>1)</sup> Enhanced care as defined by the Government ECoC fund covers residents with enhanced needs (e.g. dementia)
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<sup>3)</sup> Nursing rates include Funded Nursing Care (FNC) fee of £209.19

### Fair Cost of Care Exercise – Summary Results

- Summary results for 18+ Domiciliary Care Market
  - Total cost outputs for 22/23 from the FCoC exercise are projected to be £20.95 for home support and £24.22 for extra care
  - Costs for 22/23 are 28% higher than the current (22/23) fee rate for home support and 47% higher for extra care
  - Profit is between 5% and 6% of total costs for all care types
  - Reported travel time and NI costs (direct care time) for home support are significantly lower than national benchmarks. Profit contributions per hour of care are higher than benchmarks. It should be noted that the benchmarks are based on national averages and the FCoC figures may be a reflection of local circumstances
  - PPE costs are generally in line with benchmarks; however the reported unit costs show high variability between providers

Care Type	Records	22/23 Fee rate	22/23 Median reported costs	% Increase on fee rate
Home Support	40	£16.43	£20.95	+ 28%
Extra Care (1)	10	£16.43	£24.22	+ 47%





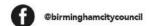
### Fair Cost of Care – Progress and Next Steps

- Progress on Actions for the Local Authority
  - Carry out cost of care exercises for the 65+ older adult care home market, and 18+ home support market (including extra care sheltered housing) and submit output reports and returns to DHSC by 14 Oct 2022 **complete**
  - Carry out market sustainability assessments for the 65+ older adult care home market, and 18+ home support market (including extra care sheltered housing) including assessment of the impact of social care reforms and submit a draft Market Sustainability Plan to DHSC by 14 Oct 2022 – complete
    - Finalise for submission in February 2023 in progress
  - Distribute grant funding to care providers by 31 March 2023 in line with the grant conditions for 2022/23 and develop plans for spend in 23/24 and 24/25 in progress
- Key Next Steps
  - Seek approval to distribute the grant at the February Cabinet
  - Distribute the grant to providers by 31 March 2023
    - The Council intends to spend 48% of the grant on increasing fees paid to 65+ care homes and 52% of the Grant on increasing fees paid to 18+
       Home Support providers
  - Finalise the draft market sustainability plan based on template still to be received from the DHSC
  - Prepare for future grant distribution based on details of the grant and conditions for 2023/24, still to be received from DHS















# Birmingham City Council Health and Social Care Overview and Scrutiny Committee



Date 24th January 2023

Subject: Adults and Children and Young Peoples Mental Health

Report of: John Williams Director – Adult Social Care (Operational

and Community Services)

**Report author:** Joanne Lowe Head of Service Operations and

Partnerships Mental Health

### 1 Purpose

- 1.1 To outline the Role of the Approved Mental Health Professional those authorised to make certain legal decisions and applications under the Mental Health Act 1983.
- 1.2 To detail the number of Mental Health Act Assessments per month 2019/2022
- 1.3 To detail the average time from request to completion of Mental Health Act Assessment
- 1.4 To provide detail on under 18's (Children) and Separately Adults over the same period

### 2 Recommendations

2.1 N/A

### 3 Role of the Approved Mental Health Professional

3.1 The role of Approved Mental Health Professional (AMHP) in the United Kingdom was created in the 2007 amendment of the Mental Health Act 1983 to replace the role of Approved Social Worker. The role of the Approved Mental Health Professionals is to coordinate the assessment of individuals who are being considered for detention under the Mental Health Act 1983. The reason why some specialist mental health professionals are eligible to undertake this role is broadly to avoid excessive medicalisation of the assessment and treatment for individuals living with a mental disorder, as defined by section 1 of the Mental Health Act 1983. It is the role of the Approved Mental Health Professional to decide, founded on the medical recommendations of doctors (or a doctor for the

- purpose of section 4 of the Act), whether a person should be detained under the Mental Health Act 1983.
- 3.2 Assessment and detention under the Act is colloquially known as being 'sectioned', or 'sectioning', in reference to the application of sections of the Mental Health Act relevant to this process. The role to apply for the 'section' remains with the Approved Mental Health Professional, not the medical doctor, it is the Approved Mental Health Professional who is the individual who will decide if this is required after detailed assessment and consultations with the medical doctors.
- 3.3 Approved Mental Health Professionals are responsible for organising, coordinating and contributing to Mental Health Act assessments. It is the Approved Mental Health Professional's duty, when two medical recommendations have been made, to decide whether or not to make an application to a named hospital for the detention of the person who has been assessed.
- 3.4 To be detained under the Mental Health Act individuals need to have a mental disorder, the nature or degree of which warrants detention in hospital on the grounds of their health and/or the risk they present to themselves and/or the risk they present to others.
- 3.5 The Approved Mental Health Professional's role includes arranging for the assessment of the person concerned by two medical practitioners who must be independent of each other and at least one of whom should be a specialist in mental health, called being 'section 12 approved' under section 12 of the Mental Health Act 1983. Preferably one of the medical assessors should have previous acquaintance with the person being assessed. Efforts should be made to seek less restrictive alternatives to detention if it is safe and appropriate to do so, such as using an individual's own support networks, in line with the principle of care in the least restrictive environment. Approved Mental Health Professionals are expected to take account of factors such as gender, culture, ethnicity, age, sexuality and disability in their assessments.
- 3.6 Birmingham City Council provides a dedicated Approved Mental Health Professional function 24 hours a day via its Mental Health Act HUB and Adults and Approved Mental Health Professionals Out of Hours Team. Birmingham City Council Approved Mental Health Professionals have a dual role as both assessing social workers and Approved Mental Health Professionals and 50% of their casework is Approved Mental Health Professional work. Birmingham City Council provides Approval for Approved Mental Health Professionals directly employed by Birmingham and Solihull Mental Health Trust.
- 3.7 Birmingham City Council currently Approves 62 Approved Mental Health Professionals of which 28 are externally employed or agency staff and we operate with an average of 10 Approved Mental Health Professionals on duty per day in the daytime, 2-3 at night and 5-6 per weekend/Bank Holiday. We have no Approved Mental Health Professionals who are employed by Birmingham Childrens Trust.

### 4 Mental Health Act Assessment Data

Age Under.18 Age 18 plus

Month	Assessments completed	Median Days
Apr-19	16	1.0
May-19	20	1.0
Jun-19	12	1.0
Jul-19	17	1.0
Aug-19	18	1.0
Sep-19	13	1.0
Oct-19	7	1.0
Nov-19	14	1.0
Dec-19	8	4.5
Jan-20	9	1.0
Feb-20	9	0.0
Mar-20	13	1.0
Total	156	1.0
Apr-20	16	1.0
May-20	17	1.0
Jun-20	8	3.0
Jul-20	12	0.0
Aug-20	8	0.0
Sep-20	18	1.0
Oct-20	17	1.0
Nov-20	14	0.0
Dec-20	25	1.0
Jan-21	21	1.0
Feb-21	13	1.0
Mar-21	14	1.0
Total	183	1.0
Apr-21	17	1.0
May-21	12	1.0
Jun-21	23	0.0
Jul-21	11	1.0
Aug-21	7	1.0
Sep-21	11	2.0
Oct-21	13	1.0
Nov-21	14	1.0
Dec-21	9	1.0
Jan-22	8	0.5
Feb-22	18	1.0
Mar-22	15	1.5
Total	158	1.0

Month	Assessments completed	Median Days
A m s 10	-	-
Apr-19	361	1.0
May-19	345	1.0
Jun-19	308	1.0
Jul-19	381	1.0
Aug-19	359	1.0
Sep-19	319	1.0
Oct-19	371	0.0
Nov-19	305	1.0
Dec-19	338	0.0
Jan-20	369	1.0
Feb-20	319	1.0
Mar-20	326	1.0
Total	4101	1.0
Apr-20	287	1.0
May-20	351	1.0
Jun-20	365	1.0
Jul-20	361	1.0
Aug-20	340	1.0
Sep-20	343	1.0
Oct-20	311	1.0
Nov-20	295	0.0
Dec-20	318	1.0
Jan-21	327	1.0
Feb-21	338	1.0
Mar-21	363	1.0
Total	3999	1.0
Apr-21	323	1.0
May-21	337	1.0
Jun-21	336	1.0
Jul-21	330	1.0
Aug-21	353	1.0
Sep-21	308	1.0
Oct-21	342	1.0
Nov-21	320	1.0
Dec-21	340	1.0
Jan-22	320	1.0
Feb-22	426	2.0
Mar-22	309	1.0
Total	4044	1.0

### 5 Insights

- The Mental Health Act HUB manages an average of 11 Mental Health Act Assessments per day and Out of Hours Adult/Approved Mental Health Professionals Service manages an average of 4 Mental Health Act Assessments per day. For under 18's we average 13 Mental Health Act Assessment requests per month.
- 5.2 The average time taken to respond to and complete a Mental Health Act Assessment is 24 hours however this does not mean that all assessment requests will lead to admission within 24 hours and this is particularly relevant with under 18s where NHS England hold sole responsibility for the allocation of Tier 4 beds (acute admission beds for under 17's). This is a national bed management provision and beds are often full across the country meaning a sometimes, significant wait of several weeks in extreme cases for a suitable bed to be found.
- 5.3 For the general adult population there are local bed management arrangements and some significant waiting times exceeding 2 months for a particular type of resource for example Older Adults or Psychiatric Intensive Care Beds. This can mean a person being subjected to multiple Mental Health Act Assessments and multiple Approved Mental Health Professionals being involved, putting a strain on our resources as we have to send an Approved Mental Health Professional out to complete the Mental Health Act Application form usually within 24 hours of the original assessment having been completed.
- 5.4 The above figures have remained consistently high for the past 5 years and Covid had a minimal impact on the level of Mental Health Act Assessments we complete in an average year.

### 6 Any Finance Implications

6.1 None

### 7 Any Legal Implications

7.1 None

### 8 Any Equalities Implications

8.1 None



## Health and Social Care O&S Committee: Work Programme 2022/23

Chair: Cllr Mick Brown

**Deputy Chair:** Cllr Rob Pocock

Committee Members: Cllrs: Kath Hartley, Jane Jones, Kirsten Kurt-Elli, Gareth Moore, Julian Pritchard

and Paul Tilsley.

**Officer Support:** Senior Overview and Scrutiny Manager: Fiona Bottrill (07395 884487)

Scrutiny Officer: Gail Sadler (303 1901)

Committee Manager: Sofia Mirza (675 0216)

### 1 Introduction

- 1.1 The Health and Social Care Overview and Scrutiny Committee's remit is to fulfil the functions of an Overview and Scrutiny Committee as they relate to any policies, services and activities concerning adult safeguarding, social care and public health; and to discharge the relevant overview and scrutiny role set out in the National Health Service Act 2006 as amended by the Health and Social Care Act 2012, including: The appointment of Joint Overview and Scrutiny Committees with neighbouring authorities; and the exercise of the power to make referrals of contested service reconfigurations to the Secretary of State as previously delegated to the Health and Social Care Overview and Scrutiny Committee by the Council.
- 1.2 This report provides details of the proposed scrutiny work programme for 2022/23.

### 2 Recommendation

2.1 That the Committee considers its work programme, attached at Appendix 1, and agrees any amendments required.

### 3 Background

- 3.1 "Scrutiny is based on the principle that someone who makes a decision...should not be the only one to review or challenge it. Overview is founded on the belief that an open, inclusive, member-led approach to policy review...results in better policies in the long run." (Jessica Crowe, former Executive Director, Centre for Governance and Scrutiny).
- 3.2 Developing an effective work programme is the bedrock of an effective scrutiny function. Done well, it can help lay the foundations for targeted, inclusive and timely work on issues of local



- importance, where scrutiny can add value. Done poorly, scrutiny can end up wasting time and resources on issues where the impact of any scrutiny work done is likely to be minimal.
- 3.3 As a result, the careful selection and prioritisation of work is essential if the scrutiny function is to be successful, add value and retain credibility.

### 4 Work Programme

4.1 Appendix 1 sets out the future work programme for this Committee. This provides information on the aims and objectives, together with lead officers and witnesses, for each item. The attached work programme also includes items to be programmed where dates are still to be confirmed, and any outstanding items including the tracking of previous recommendations.

### 5 Joint Working Across Committee Work Programmes 2022/23

5.1 As the work programmes for the Committees have developed a number of cross cutting issues have been identified. To avoid duplication Members will be invited to attend different Overview and Scrutiny Committee meetings for relevant reports as set out below:-

Lead Committee	Meeting and Agenda Item	Members to be invited and reason
Education and Children's Social Care O&SC	22 February 2023 Report from Birmingham Safeguarding Children's Partnership (BSCP)	Members of the CYP Mental Health Inquiry from the Health and Adult Care O&SC Information from the BSCP will inform the CYP mental health inquiry.
Commonwealth Games, Culture and Physical Activity O&SC	Meeting: TBC  Report on employment and skills Legacy of the Commonwealth Games	Members of the Economy and Skills OSC  At the meeting on the 8 <sup>th</sup> July Co-ordinating O&SC decided that this issue falls within the remit of the CWG, Culture and Physical Activity OSC, and as it has been identified during the work planning for the Economy and Skills O&SC as an issue of interest Members of this Committee would be invited to the relevant meeting.



### 6 Inquiry

6.1 Evidence gathering meetings for the inquiry on children and young people's mental health have been arranged during January and February 2023.

### 7 Other Meetings

7.1 The Birmingham/Solihull Joint Health Scrutiny Committee will meet on Thursday 19<sup>th</sup> January at 2.00pm in Committee Rooms 3 and 4, the Council House, Birmingham.

### **Call in Meetings:**

None scheduled

### **Petitions**

None scheduled

### **Councillor Call for Action requests**

None scheduled

The Committee approved Tuesday at 10.00am as a suitable day and time each week for any additional meetings required to consider 'requests for call in' which may be lodged in respect of Executive decisions

### 8 Forward Plan for Cabinet Decisions

- 8.1 Since the implementation of the Local Government Act and the introduction of the Forward Plan, scrutiny members have found the Plan to be a useful tool in identifying potential agenda items.
- 8.2 The following decisions, extracted from the CMIS Forward Plan of Decisions, are likely to be relevant to the Health and Social Care O&S Committee's remit. The Panel may wish to consider whether any of these issues require further investigation or monitoring via scrutiny. The Forward Plan can be viewed in full via Forward Plans (cmis.uk.com).

ID Number	Title	Proposed Date of Decision
•	Prevention and Communities Grants Programme Recommissioning	14 Feb 2023
	Distribution of the Market Sustainability and Fair Cost of Care Grant to Adult Social Care Providers and Approval of the Market Sustainability Plan	14 Feb 2023
	Approval to Spend Funds from the Integrated Care Board to Support Prevention Services During the Winter	14 Feb 2023



### 9 Legal Implications

9.1 There are no immediate legal implications arising from this report.

### 10 Financial Implications

10.1 There are no financial implications arising from the recommendations set out in this report.

### 11 Public Sector Equality Duty

- 11.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:
  - eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act;
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 11.2 The Committee should ensure that it addresses these duties by considering them during work programme development, the scoping of work, evidence gathering and making recommendations. This should include considering: How policy issues impact on different groups within the community, particularly those that share a relevant protected characteristic; Whether the impact on particular groups is fair and proportionate; Whether there is equality of access to services and fair representation of all groups within Birmingham; Whether any positive opportunities to advance equality of opportunity and/or good relations between people are being realised.
- 11.3 The Committee should ensure that equalities comments, and any recommendations, are based on evidence. This should include demographic and service level data and evidence of residents/service-users views gathered through consultation.

### 12 Use of Appendices

12.1 Appendix 1 – Work Programme for 2022/2023

### **HEALTH & SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE 2022-23 WORK PROGRAMME**

Date of Meeting: 19<sup>th</sup> July 2022

Item/ Topic	Type of Scrutiny	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information (Including joint working / links with other O&S Committees)
Q4 Adult Social Care Performance Monitoring	Agenda item	Report on red rated performance indicators; 5 performance indicators chosen by HOSC for in-depth examination and the complete set of Adult Social Care performance indicators.	Maria Gavin	N/A	None identified	Maria to include any performance information on Delayed Transfers of Care.
Healthwatch Birmingham Annual Report 2021/22	Agenda item	Reporting on investigations completed in the previous year.	Andy Cave, CEO, Healthwatch Birmingham	N/A	None identified	<ul> <li>Access to NHS         Dentistry</li> <li>Investigation         about people's         experiences of         Day Services</li> <li>Access to GP         Services</li> </ul>

Final Deadline: Thursday 7<sup>th</sup> July 2022

Publication: Monday 11th July 2022

Date of Meeting: Tuesday 20<sup>th</sup> September 2022

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Election of Deputy Chair	Agenda item	To elect a Deputy Chair. Deferred from 19 <sup>th</sup> July informal meeting.				
Action Notes/ Matters Arising	Agenda item	To approve the action notes of the meeting held on 29 <sup>th</sup> March 2022. To note the action notes of the informal meeting held on 19 <sup>th</sup> July 2022.				
Report of the Cabinet Member for Health and Social Care	Agenda Item	To set out the Cabinet Member's priorities for the coming year.	Ceri Saunders	N/A	None identified	Councillor Mariam Khan
Period Poverty and Raising Period Awareness	Tracking Recommendations	To track progress against implementation of recommendations.	Monika Rozanski Rokneddin Shariat	N/A	None identified	

Final Deadline: Thursday 8<sup>th</sup> September 2022

**Publication: Monday 12<sup>th</sup> September 2022** 

Date of Meeting: Tuesday 18<sup>th</sup> October 2022

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Forward Thinking	Agenda item	To present the annual	Fiona Reynolds	N/A	None	It was agreed at Co-
Birmingham		report.	Chief Medical Officer		identified	ordinating OSC on the
			Birmingham Women's			8 July 2022 that the
			and Children's NHS			Health and Social Care
			Foundation Trust			O&SC undertakes
			(FTB)			scrutiny of children's
						mental health (under
						the overview and
						scrutiny role set out in
						the National Health
						Service Act 2006 as
						amended by the Health
						and Social Care Act
						2012) and members of
						the Education and
						Children's Social Care
						Committee will be
						invited to attend as
						mental health is
						included within the
						Committee's terms of
						reference.
Infant Mortality –	Tracking	To track progress against	Dr Marion Gibbon	N/A	None	
Tracking Report	Recommendations	implementation of			identified	
		recommendations.				

Q1 Adult Social Care	Agenda item	Report on red rated	Maria Gavin	N/A	None	The Q1 Performance
Performance		performance indicators; 5	John Williams		identified	data had been deferred
Monitoring		performance indicators	Merryn Tate			to the meeting on 20
		chosen by HOSC for in-				December. An update
		depth examination and the				will be provided to the
		complete set of Adult Social				October meeting on
		Care performance				the future
		indicators.(Deferred to 20				arrangements for Adult
		December 2022)				Social Care
						Performance
						Monitoring data.
Children and Young	Agenda item	Terms of Reference	Fiona Bottrill	N/A	None	
People's Mental					identified	
Health Inquiry						

Final Deadline: Thursday 6<sup>th</sup> October 2022

Publication: Monday 10<sup>th</sup> October 2022

Date of Meeting: Tuesday 22<sup>nd</sup> November 2022

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Birmingham	Agenda	Annual report on	Karl Beese	N/A	None	
Substance Misuse	item	performance against public			identified	
Recovery System		health contract.				
(CGL)						
Birmingham and	Agenda	Report setting out the plan	David Melbourne	N/A	None	
Solihull Integrated	item	for health and care services	Chief Executive,		identified	
Care System Ten-Year		for Birmingham and Solihull	Birmingham and			
Strategy			Solihull ICS			

Final Deadline: Thursday 10<sup>th</sup> November 2022

Publication: Monday 14th November 2022

Date of Meeting: Tuesday 20<sup>th</sup> December 2022

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Birmingham Safeguarding Adults Board Annual Report	Agenda item	Reporting on outcomes against priorities in the previous year.	Asif Manzoor Dr Carolyn Kus, Independent Chair	N/A	None identified	
Birmingham and Lewisham African Health Inequalities Review (BLACHIR)	Agenda item	Reporting on progress against actions in the report	Monika Rozanski; Jo Tonkin; Modupe Omonijo; Marcia Wynter; Ceri Saunders	N/A	None identified	Councillor Mariam Khan, Cabinet Member for Health and Social Care.
Q2 Adult Social Care Performance Monitoring	Agenda item	Report on red rated performance indicators; 5 performance indicators chosen by HOSC for indepth examination and the complete set of Adult Social Care performance indicators.	Maria Gavin	N/A	None identified	Reporting Q1 and Q2.

Final Deadline: Thursday 8<sup>th</sup> December 2022

Publication: Monday 12<sup>th</sup> December 2022

Date of Meeting: Tuesday 24<sup>th</sup> January 2023

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Adult Social Care Reforms	Agenda item	To inform the committee on reforms to Adult Social Care.	John Williams	N/A	None identified	
Approved Mental Health Professional	Agenda item	Evidence gathering for the Children and Young People's Mental Health Inquiry	John Williams / Joanne Lowe	N/A	None identified	

Final Deadline: Thursday 12th January 2023

Publication: Monday 16th January 2023

Date of Meeting: Tuesday 21st February 2023

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Birmingham Sexual Health Services – Umbrella (UHB)	Agenda item	Annual report on performance against public health contract.	Karl Beese	N/A	None identified	
Immunisation	Agenda item	Report to set out the challenges with the take up of immunisations.	Mary Orhewere / Kate Woolley, Director of Immunisation and Vaccinations	N/A	None identified	Report to be presented as a scoping paper for a possible future inquiry based on previous scoping paper for Infant Mortality.

Final Deadline: Thursday 9th February 2023

Publication: Monday 13th February 2023

Date of Meeting: Tuesday 14<sup>th</sup> March 2023

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Cabinet Member Update Report	Agenda item	Cabinet Member to report progress against portfolio priorities	Ceri Saunders	N/A	None identified	Councillor Mariam Khan, Cabinet Member for Health and Social Care.
Day Opportunities Co- Production Review	Agenda item	Findings of the independent co-produced review of day opportunity services.	Dr Temitope Ademosu / John Williams / Saba Rai / John Freeman	N/A	None identified	Also attending are representatives from the Empowering Peoples Team.
Q3 Adult Social Care Performance Monitoring	Agenda item	Report on red rated performance indicators; 5 performance indicators chosen by HOSC for indepth examination and the complete set of Adult Social Care performance indicators.	Maria Gavin	N/A	None identified	

Final Deadline: Thursday 2<sup>nd</sup> March 2023

Publication: Monday 6th March 2023

Date of Meeting: Tuesday 18<sup>th</sup> April 2022

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
ICB Update	Agenda item		Paul Sherriff and Karen Kelly	N/A	N/A	

Final Deadline: Thursday 6<sup>th</sup> April 2023

**Publication: Monday 10<sup>th</sup> April 2023** 

### **INFORMAL BRIEFINGS (TO BE ARRANGED)**

Engaging with third sector providers of Adult Social Care (Louise Collett)

City Observatory Data (Richard Brooks)

#### TO BE SCHEDULED:

1. Public Health Horizon Scanning / JSNA

- 2. Primary Care Networks
- 3. Access to GPs
- 4. Mental Health and Wellbeing Post-COVID
- 5. Visit to UHB NHS Foundation Trust Hospital sites.
- 6. Visit to Early Intervention Community Team, Norman Power Centre

Date of Meeting: 29<sup>th</sup> November @ 2.00pm

Venue: Birmingham

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Committee Terms of Reference	Agenda item	To update the committee terms of reference	Fiona Bottrill	N/A	None identified	
Acute Care Model	Agenda item	To report on the model for acute care.	Liam Kennedy, Midland Metropolitan Hospital Delivery Director	N/A	None identified	
Feedback on proposed changes to Day Case Surgery	Agenda item	To report on feedback regarding proposed changed to Day Case Surgery.	Liam Kennedy, Midland Metropolitan Hospital Delivery Director	N/A	None identified	

Final Deadline: 17<sup>th</sup> November 2022

**Publication: 21st November 2022** 

Date of Meeting: 13<sup>th</sup> October – 1800-2000 hrs – Solihull Civic Suite

Venue: Solihull

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Draft BSoL Strategic Vision for Autism and the Draft BSoL Strategic Vision for Learning Difficulties and Disabilities	Agenda item		TBC	N/A	None identified	
Birmingham and Solihull ICS Financial Planning Update	Agenda item	To report on the financial plan for the ICS.	Paul Athey, ICS Finance Lead	N/A	None identified	
Update on the recovery and proposed configuration of surgical services across University Hospitals Birmingham – ICB and UHB and Preparation for Winter Pressures	Agenda item	To report on the current status of services and waiting lists.	Jonathan Brotherton, Chief Operating Officer, UHB	N/A	None identified	

**Final Deadline:** 

Publication: 5<sup>th</sup> October 2022

Health and Social Care O&S Committee, January 2023

Date of Meeting: 19<sup>th</sup> January 2023 at 2.00pm, Committee Room 3&4, Council House

Venue: Birmingham

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Committee Terms of Reference	Agenda item	To update the committee terms of reference	Fiona Bottrill	N/A	None identified	
Healthwatch Ground Rules for Reviews announced by NHS Birmingham and Solihull	Agenda item	To seek endorsement from the committee on the ground rules	Fiona Bottrill / Andy Cave, Healthwatch Birmingham	N/A	None identified	
ICS/UHB Update	Agenda item	To respond to concerns raised by the BBC Newsnight investigations.	Jonathan Brotherton, UHB; David Melbourne, BSol ICS	N/A	None identified	
West Midlands Ambulance Service Update	Agenda item	To respond to concerns raised by the BBC Newsnight investigations	Vivek Khashu and Mark Docherty, WMAS; David Melbourne, BSol, ICS	N/A	None identified	
BSol ICS update on performance against finance and recovery plans	Agenda item	To update on the current status regarding finance and recovery plans	Paul Athey, ICS Finance Lead	N/A	None identified	

Final Deadline: 10th January 2023

Publication: 11<sup>th</sup> January 2023

Health and Social Care O&S Committee, January 2023

Date of Meeting: 15<sup>th</sup> February 2023 at 6.00pm, Civic Suite

Venue: Solihull

Dementia Strategy	Agenda item	Following consultation seeking approval for the strategy	Revinder Johal, Commissioning Manager — Strategy and Integration, ASC Anna Walker, Commissioning Manager for Strategy and Planning, Solihull MBC	N/A	None identified	
Primary Care Enabling Strategy	Agenda item		Paul Sherriff	N/A	None identified	
Integrated Care System and the Role of Scrutiny	Agenda item	To determine future arrangements and reporting	TBC	N/A	None identified	

Final Deadline: 6<sup>th</sup> February 2023

Publication: 7<sup>th</sup> February 2023

Date of Meeting: 13<sup>th</sup> March 2023 at 2.00pm, Committee Rooms 3 and 4, Council House

Venue: Birmingham

ICS/UHB Update	Agenda item	Update on actions taken to respond to concerns raised at the January meeting.	Jonathan Brotherton, UHB; David Melbourne, BSol ICS	N/A	None identified	
West Midlands Ambulance Service Update	Agenda item	Update on actions taken to respond to concerns raised at the January meeting.	Vivek Khashu and Mark Docherty, WMAS; David Melbourne, BSol, ICS	N/A	None identified	
BSol ICS update on performance against finance and recovery plans	Agenda item	To update on the current status regarding finance and recovery plans	Paul Athey, ICS Finance Lead	N/A	None identified	

Final Deadline: 2<sup>nd</sup> March 2023

Publication: 3<sup>rd</sup> March 2023

### **TO BE SCHEDULED**

Item/ Topic	Туре	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
ICS Joint Forward Plan	Agenda item	Report on health planning for the system including commissioning intentions.	Carol Herity to confirm Lead Officer	N/A	None identified	
ICS Quality Assurance Update	Agenda item	Update on Quality Assurance to every JHOSC	Carol Herity to confirm Lead Officer	N/A	None identified	
Remodelling of the Primary Care Service	Agenda item	Update report on the current position regarding Primary Care	Paul Sherriff, Executive Director at NHS Birmingham and Solihull ICB.	NA	None identified	Report to include information on commissioned primary care services.
Update on Post- COVID Syndrome ('Long COVID') Rehabilitation	Agenda item	Update on previous report presented to JHOSC on 29 <sup>th</sup> September 2021	Ben Richards, Chief Operating Officer, Birmingham Community Healthcare NHS Foundation Trust	N/A	None identified	Report to include Long COVID implications on health and long-term employment.
Phase 2, Musculoskeletal Redesign Programme	Agenda item	To report on the current status of the programme	Marie Peplow, Chief Operating Officer, The ROH	N/A	None identified	