

# Birmingham City Council

## Report to Cabinet

28<sup>th</sup> June 2022



**Subject:** UPDATES AND NEXT STEPS FOR FAST-TRACK CITIES+ INITIATIVE

**Report of:** Dr Justin Varney  
Director of Public Health

**Relevant Cabinet Member:** Cllr Mariam Khan - Health & Social Care  
Cllr Yvonne Mosquito - Finance and Resources

**Relevant O &S Chair(s):** Cllr Mick Brown - Health and Social Care  
Cllr Akhlaq Ahmed -Resources

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Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, add Forward Plan Reference:		
Is the decision eligible for call-in?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

### 1 Executive Summary

- 1.1 The purpose of this report is to provide an update on the current progress and next steps for the Fast-Track Cities+ (FTC+) Initiative, which aims to reduce new infections and deaths from HIV. During December 2020, a Cabinet Report was submitted to join the initiative and to include reducing other blood-borne viruses

(BBVs) Hep B, Hep C, and TB. Furthermore, we would request that Cabinet endorse the signing of the Paris Declaration to end AIDS pandemic by 2030.

- 1.2 The Public Health Team have continued to work closely with stakeholders to establish the current position in Birmingham regarding blood-borne viruses (BBVs) and what further actions are required. Recent achievements include an Engagement/Needs Assessment report that establish the views of citizens and stakeholders as well as analyse current data, the planning for a Signing Ceremony to officially join the initiative, development of a workplan and development of a stigma-reducing communications campaign.
- 1.3 The next step is the commitment to sign the Paris Declaration for ending the AIDS pandemic by 2030 and the development of a plan of action based on the recommendations from the Engagement/Needs Assessment, which will be followed by the implementation phase. Stakeholders in the Steering Group and Project Board will continue to receive updates on progress.

## **2 Recommendations**

- 2.1 It is recommended that Cabinet:
  - 2.1.1 Notes the progress and next steps for Fast-Track Cities+ provided within this update report.
  - 2.1.2 Endorse the signing of the Paris Declaration to end the AIDS pandemic by 2030.

## **3 Background**

- 3.1 Prevalence rates of blood-borne viruses and TB are higher for Birmingham than the average for England. Prevalence rates are also higher among certain vulnerable population groups compared to the general population. These include but are not limited to: homeless and rough sleepers, people who inject drugs, sex workers, LGBTQ+ individuals, women of reproductive age, Black African individuals, South Asian individuals, people aged 60+, men who have sex with men, young people aged 13-25, refugees and asylum seekers.
  - 3.1.1 The diagnosed prevalence rate of HIV in Birmingham in 2020 was 2.69 per 1,000 residents aged 15-59 years. This was 1.15 times higher than the rate of the rest of England as a whole. Between 2018-2020, 41.1% of those newly diagnosed were diagnosed late.
  - 3.1.2 Between 2018-2020, the rate of new TB cases in Birmingham was 18.4 per 100,000 residents, which is 2.39 times higher than the rate of the rest of England as a whole.
  - 3.1.3 During 2018, there were 0.97 per 100,000 residents of new cases of Hepatitis B in Birmingham, which is 1.64 times higher than the rate of the rest of England as a whole.

3.1.4 During 2017, the detection rate for Hepatitis C in Birmingham was 35.2 per 100,000 residents, which is double the rate of the rest of England as a whole.

3.2 A key focus of Theme 5 within our Health and Wellbeing Strategy is to protect individuals from the harm caused by infectious diseases such as HIV, Hep B, Hep C and TB through early detection and treatment. For this reason, Birmingham is one of 10 local authorities in the UK and one of 300+ international cities taking part in the FTC+ Initiative. Although Birmingham City Council has committed to achieving the FTC+ targets, the city is yet to undergo the official process to sign the Paris Declaration to formally join the initiative.

3.3 Following Cabinet approval during December 2020 work on the Fast-Track Cities+ initiative has been continued. To date, activities and decisions made include:

3.3.1 An Engagement and Needs Assessment exercise conducted during Q1 and Q2 of 2021 to establish the views of citizens and stakeholders in Birmingham regarding BBVs and TB, as well as analyse how current data compares to the overall targets. The report is being finalised at the time of writing this report and will inform the next stages of the project and enable the team to be better equipped to commit to the targets.

3.3.2 A decision made by stakeholders that as a city, we are now equipped to officially sign up to the initiative and commit ourselves to achieving the targets. To officially sign up to the initiative, an in-person Signing Ceremony is being planned, during which the Lord Mayor, or their nominee, would sign The Paris Declaration (Appendix 1) to reduce new infections and deaths from BBVs and TB, on behalf of Birmingham. This is currently scheduled for Q2 or Q3 2022/23, and will see stakeholders from the NHS, UKHSA, OHID, community groups and industry in attendance to demonstrate the joint-working approach required to achieve the project's aims.

3.4 Following the recommendations from the Engagement/Needs Assessment, a workplan will be developed to set out the actions required to meet the targets of the initiative locally. This will include actions for Birmingham Public Health as well as our stakeholders from the Steering Group and Project Board. Following implementations, the actions are to be reviewed annually to ensure the initiative remains on track.

3.5 The Fast-Track Cities+ ambition is for work to continue and ensure stakeholder budgets are pooled together to ensure the recommendations from the Engagement/Needs Assessment can be actioned.

## **4 Options considered and Recommended Proposal**

4.1 It is recommended that Cabinet notes the progress and next steps for Fast-Track Cities+ provided within this update report.

## **5 Consultation**

- 5.1 A public consultation was conducted between June-August 2021 via the Be Heard platform and various community groups, as part of the Community Engagement exercise described under point 3.3. The findings of this consultation are included in the Engagement/Needs Assessment Report, which will inform the workplan for the next stages of the project.

## **6 Risk Management**

- 6.1 Risks will be identified, evaluated and controlled by utilising the Birmingham City Council Risk Management Framework.

## **7 Compliance Issues:**

### **7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?**

- 7.1.1 The provision of BBV and TB prevention services aligns to the following Council priorities:
- An aspirational city to grow up in
  - A fulfilling city to age well in
  - Birmingham is a great, clean and green city to live in.
- 7.1.2 These priority areas are supported by the overarching commitment to reduce health inequalities (a duty of the Local Council under the Health and Social Care Act 2012).
- 7.1.3 A core theme within the Health and Wellbeing Board's Health and Wellbeing Strategy covers infectious diseases/health protection, known as the 'Protect and Detect' theme. Fast-Track Cities+ plays a key role in this theme due to its ambition to tackle 4 common infectious diseases.

### **7.2 Legal Implications**

- 7.2.1 Section 12 of the Health and Social Care Act 2012 introduced a new duty at Section 2B of the NHS Act 2006 Act for all upper-tier and unitary local authorities in England to take appropriate steps to improve the health of the people who live in their areas. Achieving the ambitions of the FTC+ initiative will enable us to reduce health inequalities and improve health outcomes for all.
- 7.2.2 Section 6C of the National Health Service Act 2006 as amended by the Health and Social Care Act 2012 provides that Regulations may require a local authority to exercise public health functions by taking such steps as may be required for the discharge of public health functions by local authorities.

### **7.3 Financial Implications**

- 7.3.1 The intention is for the services to reach the Fast-Track Cities+ ambition to continue with the current funds (£250,000) and ensure stakeholder budgets are pooled together to ensure the recommendations from the Engagement/Needs Assessment can be actioned. 100% of the role of an officer has been secured from the Public Health Grant to work on this initiative which will be sustained in the longer term that will work within the sexual health agenda and link with health protection and wider determinants teams. A matrix approach to this work will be beneficial and essential for the progress of this work.

### **7.4 Procurement Implications (if required)**

- 7.4.1 None at present, however if additional funding is received, Birmingham Public Health would aim to go out to procure services, following the Council's established governance rules, based on the findings from the Engagement/Needs Assessment.

### **7.5 Human Resources Implications (if required)**

- 7.5.1 None at present.

### **7.6 Public Sector Equality Duty**

- 7.6.1 An Equality Impact Assessment was completed during the first phase of this project during March 2021 and is currently being reviewed as is required annually.

## **8 Appendices**

- 8.1 **Appendix 1** – The Paris Declaration
- 8.2 **Appendix 2** – Fast-Track Cities+ Targets for HIV, Hep B, Hep C, TB (draft awaiting Project Board approval)

## **9 Background Documents**

- 9.1 Cabinet Report 15<sup>th</sup> December 2020 – Fast Track Cities+ NHS England and NHS Improvement (NHSE&I) Funding