

BIRMINGHAM CITY COUNCIL

**BIRMINGHAM HEALTH AND
WELLBEING BOARD
TUESDAY, 19 JUNE 2018**

MINUTES OF A MEETING OF A MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON TUESDAY 19 JUNE 2018 AT 1500 HOURS IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, BIRMINGHAM

PRESENT: - Councillor Paulette Hamilton in the Chair;
Councillors: Matt Bennett and Kate Booth, Professor Graeme Betts,
Andy Cave, Professor Nick Harding, Dr Peter Ingham, Becky Pollard,
Stephen Raybould and Antonina Robinson, MBE

ALSO PRESENT: -

Margaret Ashton-Gray, Head of Finance, Adult Social Care and Health Directorate
Peter Axon, Deputy Chief Executive, Birmingham Community Health Care FT
Melanie Brooks, Assistant Director, Adult Social Care
Dr Wayne Harrison, Assistant Director of Public Health, BCC
Kalvinder Kohli, Head of Service Adult Social Care Commissioning
Dame Julie Moore, CEO, University Hospitals NHS Foundation Trust
Paul Sherriff, Director of Organisational Development and Partnership
Sarah Sinclair, Interim Assistant Director as substitute for Colin Diamond
Lawrence Tallon, Director of Corporate Strategy and Planning, UHB
Errol Wilson, Committee Services, BCC

At the start of the meeting the Chair invited the Board members who were present to introduce themselves.

NOTICE OF RECORDING

254 It was noted that the meeting was being webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/ public may record and take photographs except where there were confidential or exempt items.

DECLARATIONS OF INTERESTS

255 Members were reminded that they must declare all relevant pecuniary and non-pecuniary interests arising from any business to be discussed at this meeting. If a

Birmingham Health and Wellbeing Board – 19 June 2018

disclosable pecuniary interest was declared a member must not speak or take part in that agenda item. Any declarations would be recorded in the minutes of the meeting.

APOLOGIES

- 256 Apologies for non-attendance were submitted on behalf of Colin Diamond (Sharon Sinclair attended as substitute), Jonathan Drifill, Operations Commander Steve Harris, Paul Jennings and Commander Danny Long.
-

The business of the meeting and all discussions in relation to individual reports was available for public inspection via the web-stream.

MINUTES

- 257 **RESOLVED: -**

That the Minutes of the meeting held on 24 April 2018 having been previously circulated were confirmed and signed by the Chair.

CHAIR'S UPDATE

- 258 The Chair welcomed Peter Axon, Deputy Chief Executive, Birmingham Community Health Care FT and Becky Pollard, the new Interim Director of Public Health. The Chair then gave a brief update on the following:
- Domestic Abuse Prevention Strategy launch
 - The launch of the Homelessness Prevention Strategy
 - Clean Air Day on the 21 June 2018
 - Windrush impressive floral display which was awarded Gold at the recent Chelsea Flower Show
 - The 70th Anniversary of Empire Windrush in June 2018
 - An exhibition of the Windrush Generations at the Library of Birmingham
 - The National Health Service 70th Birthday on the 5th July 2018

The Chair highlighted that all members of the Birmingham Health and Wellbeing Board were circulated with a copy of the Annual Reports and Accounts of the latest CCGs by email on the 1st June 2018.

The Chair then expressed her personal thanks to all who worked in the National Health Service previously and currently.

(See document No. 1)

SUSTAINABILITY AND TRANSFORMATION PLAN (STP) VERBAL UPDATE

- 259 Dame Julie Moore, CEO, University Hospitals NHS Foundation Trust introduced the item and stated that they were still on track with the STP. Dame Julie Moore then invited Lawrence Tallon, Director of Corporate Strategy and Planning, UHB to

present the item. Mr Tallon drew the Board's attention to the information contained in the draft STP strategy document.

(See document No. 2)

At this juncture, Dame Julie More informed the meeting that she will be stepping down from her role at the end of August 2018.

In response to questions, Dame Julie Moore and Mr Tallon made the following statements: -

- a. As part of the STP people should have access to the same standard and quality of care in the system. Wherever people enter the system, they should have the same standard and level of care – Birmingham Women's, Heartlands, Community Good Hope should be the one system with the quality of standard and care.
- b. They started in October and had spent a lot of time as organisations learning to get together to devise this. There had been a number of organisational changes amongst the CCG and others to come together as a system to devise this.
- c. In terms of engagement, they were trying to get the sequence right and thought it was appropriate to go to the stakeholders such as the Overview and Scrutiny Committees, Healthwatch, Birmingham and Solihull Health and Wellbeing Board, before going to the public. This was the reason for the website being a 'dummy'.
- d. They would consult with the wider public in autumn and this was the reason the website was a dummy website as opposed to a live website. Once they had feedback from the Board, Solihull and the other stakeholders in the group they would then go further and wider with the consultation.
- e. The criticism was accepted as all STP had not been as open as they would have liked, but this was their intention from this point forward. There was a national programme of maternity services and the one in Birmingham was called Birmingham United Plan Project, which was looking at the whole provision across it.
- f. They would not be going to a single site and this was led by Birmingham Women's and Children's Hospitals. Dame Julie more reiterated that one site would not be able to cope with it all.
- g. In relation to the West Birmingham situation it was felt that it was not right that the boundary of the STP did not match up with the local authority's boundary. There were complexities and it was a problem that had not gone away.
- h. Aging was chosen as one of the priorities as it was causing some problems. They had large numbers of delayed transfers of care and problems with social care some of which were reasons outlined.
- i. It was not because there was a drain on the resources, but the fact that more people were living to a longer life span (which was something to be celebrated

as it was a good news story), but they had to make appropriate provision as they had not done so and they had to make appropriate provision for older people for whom they no longer required to provide acute health care in terms of hospital beds.

- j. This was the reason they had made it a focus as they knew the demography would lead to an increasing number of people who had more than one illness and could be cared for by working with Social Care and the Community Trust and better alternative provisions for people in their own homes.
- k. Far too many people more than the national average, more than people who stated that they wanted to die in hospital than at home.
- l. In terms of workforce, the points made were fair and they were referenced on page 11 of the document where they exposed the problem. The hypothesis was that there was a major shortage of health and social care workers across the country some of which was a national issue and some were embracing issues, but there were things they could do locally to make Birmingham and Solihull as an attractive ways as possible for people to come and work in social care.
- m. They look forward to having greater public health involvement as this was something that was written by everybody else. The elements had come from public health and it was over to them to look to revise that. This was the only STP strategy of all of them in the country that makes air quality a stated priority.
- n. They did not want to start the consultation in August as it would be lost in the summer holidays. They would be consulting in the autumn. There were lots of things in the draft document that they were doing as a health and social care system. It was hoped to have something by the end of the year. They would be happy to do a session with councillors.

The Chair thanked Dame Julie Moore and Lawrence Tallon for attending and presenting the information.

HEALTH AND WELLBEING STRATEGY UPDATE – ACCOMMODATION AND EMPLOYMENT (ADULTS WITH A LEARNING DISABILITY)

The following report was submitted:-

(See document No.3)

Melanie Brooks, Assistant Director, Adult Social Care and Kalvinder Kohli, Head of Service, Adult Social Care Commissioning presented the item and drew the Board's attention to the information contained in the document.

At this juncture, Antonina Robinson, MBE, Department for Work and Pension (DWP) affirmed the DWP's offer and made the following statements: -

- (i) This was not limited to Birmingham and Solihull, but also includes the difficulties in Sandwell and West Birmingham. She advised that all of their staff

Birmingham Health and Wellbeing Board – 19 June 2018

were undergoing training in mental health and already had training recognising Asperger's spectrum. They would all receive that awareness training by March 2019.

- (ii) They had in place Community Partnership Managers who were devoted to mental health which covers learning difficulties. They also had in-house support offer for those people who were seeking work and the Midlands Engine Team.
- (iii) The DWPs offer was whatever Table they needed to sit around to ensure that the Pathways - Housing first and then ensure that they maximised what people were entitled to in benefits and support so that they could get on the journey towards employment support, they were eager to offer that support.

In response to questions, the officers made the following statements: -

1. The work in Adult Social Care had started, but it was immature within themselves - as a system and collection of organisation it had not started. It was helpful to get some affirmation from different partners about their engagements and it was hoped that this would be broadened.
2. They had some actions and the key ones were the opportunities for some configuration which would be presented to Cabinet in July which sets out how they were going to move away from the system of providing lifelong day care to a system where they had some aspiration for individuals they could make some contribution to their community.
3. This was a piece of work that was for three years and employment would be prioritised within that, but they were expecting to be some difference in this financial year.
4. In terms of additional investments, they were awarded £6m from the European Social Fund (ESF), the focus of which was vulnerable people who were furthest away from the labour market which includes people with learning disabilities, mental health, people experiencing domestic abuse and people with a history of homelessness, offending, substance misuse.
5. The timescale for this was tight and a report would be submitted to Cabinet in July 2018, seeking approval to accept the award and start the implementation plan. They had two years to implement the plan which includes the delivery model. There was still a risk which relates to sustainability.
6. The challenge they had around all employment schemes was that they had been short lived as the funding was precarious. They had not done the cultural change work with employers in the city in terms of their understanding of how they retain and sustain those initiatives after the funding had stopped. There was real opportunity in terms of how they use the Birmingham Business Charter to reinforce some of that.
7. The cultural change ethically and morally was the right thing to do regardless of whether there was a funding stream behind it. There was a bigger piece of work to be done around that change over a period of years.
8. Ms Brooks noted Professor Harding's comment concerning *what would be a good rate of workfulness etc.* and the suggestion that *the figures be reported*

regularly at the HWB meetings so they could review where they were and advised that the obvious benchmark would be the National English Average which was 5.7%. She added that this had some low aspiration, but was something that they could aim for, but their task was to give the timeframe for which they could deliver that.

9. They knew the best performing local authorities – some of which had a figure of around 20% – 30%. There was some learning for them in looking at how they achieved that and what that would mean and this would be something that they would be building into their plan. This would give them a minimum of what they should be which was at least average.

The Chair commented that she was keen on following up on Professor Harding's comments in relation to getting the figures back to the Board quarterly so that they could keep an eye on what was happening. The prevention document which was an excellent document could be passed to the Committee Manager for circulation to the HWB members.

10. Ms Kholi noted the Chair's comment concerning work with private landlords and advised that they were doing work with private landlords through another work stream i.e. work around the Development of the Homeless Positive Pathway relating to sustainable housing solutions for people who were at risk. Within that, they were looking across a range of tenure which includes BCC, Registered Social Landlords, private landlords and the different housing models around live and work schemes etc.
11. In terms of new developments around the city, this was an area where they could be better joined up. One recommendation was for there to be dialogue with the Corporate Director for Adults Social Care, Economy, Place and the Children's Trust in terms of how they have a coherent approach around house building which was affordable.
12. In relation to work being done with larger employers, there had been various initiatives over a number of years either through ESF or Birmingham Business Charter where they had encouraged employers particularly around construction, for example, to take on apprenticeships and people into paid work.

The Chair thanked Melanie Brooks and Kalvinder Kohli for attending and presenting the information.

260

RESOLVED:-

That the Health and Wellbeing Board was requested to:

- (i) Approved the development of an accommodation and support pathway for people with learning disabilities.
- (ii) Approved a new employment indicator within the Health and Wellbeing strategy for people with learning disabilities.
- (iii) Noted the variety of funding streams and partners engaged in providing employment support across the City.

- (iv) Authorised the taking of urgent steps to ensure that these funding streams are properly coordinated and positive outcomes are maximised, alongside the development of a city-wide vulnerable persons' employment strategy.

NHS BIRMINGHAM AND SOLIHULL CLINICAL COMMISSIONING GROUP UPDATE

The following report was submitted:-

(See document No.4)

Paul Sherriff, Director of Organisational Development and Partnership, NHS Birmingham and Solihull CCG introduced the item. He advised that the merger of the CCGs was now completed and that they did not have any authorisation conditions from their regulator NHS England. They could now start to consolidate the organisation and move forward in the development of their partnership and strategic planning.

Mr Sherriff highlighted that the new organisation came into effect on the 1st April 2018 and then drew the attention of the Board to the information contained in the slides in particular to the focus on the CCG around two core elements.

Following a brief discussion and comment from the Board it was

261

RESOLVED:-

That the Health and Wellbeing Board received and noted the presentation.

BIRMINGHAM BETTER CARE FUND (BCF) PLANNED SPEND FOR 2018/19 INCLUDING THE IMPROVED BETTER CARE FUND (IBCF)

The following report was submitted:-

(See document No.5)

Margaret Ashton-Gray, Head of Finance, Adult Social Care and Health Directorate presented the item and drew the attention of the Board to the information in the report.

262

RESOLVED:-

That the Health and Wellbeing Board approved the spending planning template.

HEALTH AND WELLBEING STRATEGY LEAD – ROLE SPECIFICATION

The following report was submitted:-

(See document No.6)

Dr Wayne Harrison, Assistant Director of Public Health, BCC introduced the item and drew the attention of the Board to the information in the report.

263

RESOLVED:-

That the Health and Wellbeing Board consider the role specification for the Board and Operational lead for specific areas of the Health and Wellbeing Strategy and feed any comments back before July meeting.

WHAT DOES INTEGRATION MEAN TO YOU/US? WHAT ARE OUR AMBITIONS?

264

Professor Graeme Betts, Corporate Director for Adult Social Care and Health, BCC introduced the item and advised that in conversation with the Chair it was felt that they needed to have a discussion on what integration meant for the Board. He highlighted that it was about the Board's ambition in terms of outcomes. The issue was what outcomes as a Board they wanted to achieve for Birmingham's citizens, what did that mean for integration and what did they want to deliver. He added that one of the reasons the HWB was set up was to improve integration.

Professor Betts stated that the proposal was to think about the outcomes they were interested in and from that have a conversation on what they wanted to achieve and what were the opportunities. He suggested that it might be useful for colleagues to do a short note, but their thoughts were to stimulate that discussion at the next meeting in July 2018.

The Chair commented that going forward they had to set that line so that they know why they sat here. She added that with new people coming on board/others leaving they lose that clarity.

Professor Betts noted Professor Harding's comments regarding colleagues doing a short note concerning integration and clarified that he meant for someone to write something to stimulate the discussion.

OTHER URGENT BUSINESS

265

The Chair agreed that the following items could be considered as other urgent business in order to deal with them expeditiously: -

a) HWB Vice Chair

The Chair advised that the announcement concerning the Vice-Chair to the HWB will be made at the meeting in July 2018.

b) Interim Director of Public Health

Becky Pollard stated that it was a great opportunity to join Birmingham as the Interim Director of Public Health and that she acknowledged the work of Dr Adrian Phillips. She added that it was hoped that she could build on the work that Dr Phillips had done. Ms Pollard then advised that the following four key priorities were what she would like to work on: -

- i. Building on the Joint Strategic Needs Assessment and address some of the issues that came out of the CQC; making sure it was serving the Commissioners across the city. It was recognised that there were opportunities with the Place Based focus now and they needed to consider this. The citizens voice, the public's voice and how they were making sure that they were feeding this into the Joint Strategic Needs Assessment. Looking at what the evidence tells us and how they could drive evidence based commissioning where possible.
- ii. The Director of Public Health report - to focus on specific issues perhaps around child poverty and children and young people.
- iii. What the priorities were for Birmingham and ensuring that it ties in with the Health and Wellbeing Strategy at the CCG and STP and ensuring they were focussing on a few things they could deliver well.
- iv. To give commitment that she would be supporting colleagues, Councillor Hamilton, Chair of the HWB and others round the table in making this Board as effective as possible. She supports the idea of doing some more developmental discussions not necessarily on a structured agenda.

c) Margaret Ashton–Gray

The Chair advised the Board that today was Margaret Ashton-Gray's last meeting as she was leaving BCC. The Chair thanked Ms Ashton-Gray on behalf of the HWB for her hard work, dedication and commitment and wished her all the best for her future endeavours.

DATE OF NEXT BIRMINGHAM HEALTH AND WELLBEING BOARD MEETING

266

It was noted that the next Birmingham Health and Wellbeing Board meeting will be held on Tuesday 31 July 2018, at 1500 hours in Committee Rooms 3&4 Council House, Victoria Square, Birmingham B1 1BB.

The meeting ended at 1640 hours.

CHAIRMAN

