

BIRMINGHAM CITY COUNCIL

**BIRMINGHAM HEALTH AND
WELLBEING BOARD
3 OCTOBER 2017**

MINUTES OF A MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON TUESDAY 3 OCTOBER 2017 AT 1500 HOURS IN COMMITTEE ROOMS 3 AND 4, COUNCIL HOUSE, BIRMINGHAM

PRESENT: - Councillor Paulette Hamilton in the Chair; Graeme Betts, Andy Cave, Dr Andrew Coward, Chief Inspector Karen Greasley, Andrew Harkness, Councillor Brigid Jones, Dr Adrian Phillips, Dr Gavin Ralston and Stephen Raybould.

ALSO PRESENT:-

Margaret Ashton-Gray, Head of City Finance, BCC
Wayne Harrison, Assistant Director of Public Health, BCC
Paul Jennings, Interim Chief Executive, Birmingham CrossCity, Birmingham
South Central and Solihull Clinical Commissioning Groups
Mike Walsh, Head of Service, Commissioning, BCC
Dr Dennis Wilkes, Assistant Director of Public Health, BCC
Paul Holden, Committee Services, BCC

APOLOGIES

204 Apologies were submitted on behalf of Councillor Lyn Collin, Jonathan Driffill, Professor Nick Harding, Chief Superintendent Chris Johnson, Tracy Taylor and Alison Tonge.

NOTICE OF RECORDING

205 It was noted that the meeting was being webcast for live or subsequent broadcast via the Council's Internet site (www.birminghamnewsroom.com) and that members of the press/ public may record and take photographs. The whole of the meeting would be filmed except where there were confidential or exempt items.

DECLARATIONS OF INTERESTS

206 In referring to agenda item No 6 (Minute No 209 refers), Stephen Raybould declared a non-pecuniary interest because Birmingham Voluntary Service Council's (BVSCs) was the Accountable Body for Birmingham Changing Futures Together which had a strategic and delivery function related to aspects of the Health and Wellbeing Strategy. The member also declared a pecuniary interest in relation to agenda item No 10 (Minute No 213 refers) as BVSC may

deliver activity resourced through the Birmingham Better Care Fund.

MINUTES

207 The Minutes of the Board meeting held on 4 July 2017 were confirmed and signed by the Chair.

Further to Minute No. 203, Dr Adrian Phillips reported that he had been in contact with the managers for the Birmingham and Solihull Sustainability and Transformation Plan and was continuing to press for a suitable date for an informal meeting with the members of this Board.

CHAIR'S UPDATE

208 The Chair highlighted that summer had been a very busy and eventful time at Birmingham City Council with the bin strike being very traumatic for the City's citizens - something for which she could not apologise enough. However, she pointed out that the Council was negotiating with the Unions through the Advisory, Conciliation and Arbitration Service to come to a satisfactory conclusion for all concerned. In referring to some other developments since the last meeting the Chair advised members that she had:-

- 1) Attended a meeting at the West Midlands Combined Authority where interesting topics were discussed around the wellbeing agenda and mental health that she considered would be important going forward.
- 2) Accompanied social workers from Lifford Lane during a number of their visits to residents' homes. The Chair placed on record her thanks to the social workers and residents for allowing her to be present.
- 3) Met with a number of partners including Paul Jennings, Interim Chief Executive of the Birmingham CrossCity, Birmingham South Central and Solihull Clinical Commissioning Groups.
- 4) Joined the Local Government Association Community Wellbeing Board as a full member.
- 5) Raised with Government Ministers the fact that Birmingham was set to lose monies from the Better Care Fund because its performance in respect of Delayed Transfers of Care had fell short of the national target. She pointed out that if Birmingham did not win the argument on this issue it would put the City in a very difficult position. It was indicated that members would receive an e-mail on this issue. The Chair also thanked the Clinical Commissioning Groups and other NHS colleagues for their support on the matter.

In concluding, the Chair reported that she would be going to Buckingham Palace on 10 October 2017 to meet Prince William, the Duchess of Cambridge and Prince Harry and receive a commendation for her work around mental health.

HEALTH AND WELLBEING STRATEGY UPDATE

The following report was submitted:-

(See document No. 1)

Stephen Raybould declared a non-pecuniary interest in relation to this agenda item (see Minute No 206).

Dr Adrian Phillips, Director of Public Health and Wayne Harrison, Assistant Director of Public Health introduced the information contained in the report.

The following were amongst the issues raised and responses to questions:-

- 1) In relation to improving the wellbeing of people with Multiple Complex Needs, Stephen Raybould considered that there was an opportunity for Birmingham Changing Futures Together to provide leadership in terms of driving matters forward at a Birmingham level. The member also suggested a movement from crisis intervention to maintenance / stability amongst that client group as a possible early indicator of progress.
- 2) Dr Andrew Coward referred to the health benefits of active means of transport and mentioned a study carried out by the University of Glasgow which showed a 50 per cent reduction in cancer and vascular disease amongst people who cycled to work.
- 3) Further to 2) above, the Board was informed that there was a need not only for a shift from driving diesel and petrol vehicles to electric powered ones but also a move from using cars to more active means of transport for air quality in Birmingham to improve to a satisfactory level. It was highlighted that active transport was win-win owing to the increase in physical activity and also cleaner air.
- 4) The Director of Public Health reported that the Council was drawing up a policy aimed at improving the air quality in Birmingham and that what more stakeholders / partners could do to help on the issue would be covered in the document. He highlighted that the policy was being developed on the back of a Scrutiny report, 'The Impact of Poor Air Quality on Health' submitted to City Council in September 2017 and considered that it would be useful if that report was circulated to members.
- 5) It was pointed out by the Director of Public Health that in terms of causes of early deaths in Birmingham only tobacco (about 1,450) was worse than air pollution (up to 900). Furthermore, he reported that it was estimated that outside peak travel times about a quarter of all traffic in cities was health and social care related.
- 6) The Director of Public Health highlighted that power generation from renewable energy (e.g. wind, solar) was becoming more competitive and that the stage may be reached where it was more economical to use non-hydrocarbon sources for most of the country's electric power.
- 7) Councillor Brigid Jones referred to the unpleasant conditions (e.g. food waste / odours, insufficient heating in the winter) that she often experienced as a daily bus user. She felt that until this was satisfactorily addressed by the bus companies there would not be any massive shift to using public transport. Councillor Brigid Jones also made reference to

sites such as the University of Birmingham and Queen Elizabeth Hospital that bordered the Ward that she represented. The member highlighted that she did not believe that it was possible in the main for employees on lower salaries to be able to afford to live within an active travel distance of the locations. Consequently, the member considered that until the housing supply / cost issues at these and other sites where house prices were inflated (e.g. locations along the Cross-City railway line) were addressed the shift hoped for in terms of how people travelled in such areas would not happen.

- 8) Further to 7) above, the Director of Public Health commented that the safety of passengers on buses particularly children and the elderly was also a big issue. He reported that bus companies were making efforts to improve the image and quality of services and cited the National Express West Midlands Platinum bus service as an example. It was pointed out that there was also a report scheduled to go to Birmingham City Council's Cabinet on a pilot scheme for some hydrogen fuelled buses. However, he considered that bus travel was not cheap and indicated that most of the increased usage of public transport was journeys by metro and rail. Moreover, the Director highlighted that unlike places like Oxford, Birmingham did not have well-developed park and ride services.

209

RESOLVED:-

- (a) That the developments related to the Strategy be noted;
- (b) that members report on how the Strategy relates to their organisational objectives;
- (c) that specific leadership be provided by members to individual objectives.

USING THE IMPACT OF CHILDHOOD ADVERSE EXPERIENCES TO IMPROVE THE HEALTH AND WELLBEING OF BIRMINGHAM PEOPLE

The following report was submitted:-

(See document No. 2)

Dr Dennis Wilkes, Assistant Director of Public Health, BCC presented the following PowerPoint slides circulated with the agenda papers:-

(See document No. 3)

The following were amongst the issues raised and responses to questions:-

- 1) Dr Andrew Coward congratulated the Assistant Director of Public Health on the work that he had carried out and referred to the tremendous opportunity that existed. He therefore proposed that representatives of the Birmingham Safeguarding Adults and Children's Boards, the Birmingham Community Safety Partnership and this Board meet to discuss what the strategic priorities should be coming out of the work taking place to ensure there was alignment across the City.

- 2) Stephen Raybould considered that there was a big challenge for the City around how activity should be constructed and commissioned. The member pointed out that at present there was a lot of focus on short term gains but that a good deal of the work covered in the papers received was concerned with having an impact over very long periods of time which was very difficult to evaluate. He was therefore pleased that the need for evaluation had been identified amongst the PowerPoint slides.
- 3) Chief Inspector Karen Greasley stressed that the Board had the full support of the Birmingham Community Safety Partnership which she considered had a big part to play in the work going forward.
- 4) The Assistant Director of Public Health reported on the added-value of the work taking place in terms joining-up thinking, providing a common purpose / focus and aligning different areas of activity e.g. Think Family, Early Help and Family Support.
- 5) Dr Gavin Ralston welcomed that no universal screening process was proposed and believed that the issue of childhood adverse experiences should be raised in a holistic manner in a trusted therapeutic relationship. Furthermore, he felt that it would be useful to highlight to clinicians the potential effects of childhood adverse experiences on a person's life and behaviour.
- 6) Andrew Harness referred to a substantial amount of work that Public Health Wales had been doing on childhood adverse experiences and enquired whether it would be possible to utilise their learning on the subject matter and work collaboratively with the organisation.
- 7) Further to 5) and 6) above, the Assistant Director of Public Health indicated that Birmingham had taken on some of the learning by Public Health Wales but considered that in the end it was a journey that the City would have to take itself. He also reinforced the benefits to be gained through opening up discussion in a trusted relationship, not so people relived them and were driven by the past, but to build a new future. The Assistant Director also referred to the importance of Birmingham Changing Futures Together in this area of work.
- 8) The Assistant Director of Public Health confirmed that the Birmingham Domestic Abuse Prevention Strategy was being taken on board and highlighted that the Birmingham Freedom Project would have an important part to play in work going forward.
- 9) The Director of Public Health pointed out that as research around childhood adverse experiences was moving forward at a rapid pace, developments needed to be monitored very closely. However, he underlined that untangling a person's brain so that it was less stressed and able to make the right connections could not be achieved simply by taking medication, unlike with a number of medical conditions. Furthermore, he referred to the need to identify how to make children and adults more resilient and better able to withstand adverse experiences as there were some in life that just could not be avoided. Mention was also made of excellent violence prevention work that was taking place at Washwood Heath Academy using peer mentoring and he emphasised the importance of properly dealing with the issue of childhood adverse experiences to break the intergenerational cycle that could run through families.

The Chair put the recommendations and the proposal in paragraph No. 1) to the meeting and it was:-

210

RESOLVED:-

- (a) That this Board should broker the strategic drive for Primary Preventative effort;
- (b) that the Early Help and Safeguarding Partnership should:-
 - (i) Use the evidence to establish a common cultural understanding of the impact of adverse experiences in childhood, especially in schools, and nurture locality multi-agent learning to embed it;
 - (ii) broker an action learning set of specialist services to identify the opportunities and benefits of using Routine Enquiry of adverse experiences in childhood in their client groups;
 - (iii) align its outcome work stream to take account of the impact of the preventative focus and its implications;
- (c) that arrangements be made for representatives of this Board, the Birmingham Safeguarding Adults and Children's Boards and the Birmingham Community Safety Partnership to meet to discuss what the strategic priorities should be coming out of the work taking place to ensure there was alignment across the City.

DRAFT BIRMINGHAM HOMELESSNESS PREVENTION STRATEGY 2017+

The following report was submitted:-

(See document No. 4)

Mike Walsh, Head of Service, Commissioning, BCC introduced the agenda item and particularly drew members' attention to the five elements of The Positive Pathway Model outlined on pages 11-16 of the draft Strategy. He highlighted that the multi-agency and cross sector Homelessness Positive Programme Pathway Board was currently working on the development of an implementation plan.

The following were amongst the issues raised and responses to questions:-

- 1) The Chair considered that it was an excellent draft Strategy and asked that her comments be conveyed to its authors and the Homelessness Positive Programme Pathway Board by the Head of Service. She believed that a real difference could be made if partners worked together in the way proposed in the paper. She considered that the expectations would be difficult to achieve but nevertheless felt that there was a need to aim high.
- 2) The Head of Service reported that it would be part of the work of the Task and Finish Groups under the Homelessness Positive Programme Pathway Board to engage with people who had experienced

homelessness. Furthermore, he highlighted that although The Positive Pathway Model had first been developed by St Basil's in respect of young people at risk the Draft Strategy had also been informed by the Birmingham Homelessness Review and Council Scrutiny Inquiries.

- 3) Councillor Brigid Jones commented that she believed it was a great draft Strategy and particularly welcomed the upstream work many years before an individual might otherwise reach a crisis point.
- 4) Dr Gavin Ralston highlighted that anyone including people from well-off backgrounds could end up homeless by taking the wrong steps in life.

The Chair thanked the Head of Service for reporting to the meeting.

211

RESOLVED:-

That the development of the draft Birmingham Homelessness Prevention Strategy 2017+ and how it relates to the priorities and ambitions in the Health and Wellbeing Strategy be noted.

BIRMINGHAM CITY COUNCIL'S VISION AND STRATEGY FOR ADULT SOCIAL CARE SERVICES

The following report was submitted:-

(See document No. 5)

Graeme Betts, Interim Corporate Director, Adult Social Care and Health, BCC introduced the information contained in the report and confirmed that the Birmingham City Council's Cabinet had earlier in the day approved the Vision and Strategy. However, he pointed out that it was the next implementation phase that was especially important and reported that he would be bringing forward further strategies and plans that would include a community asset based approach.

The following were amongst the issues raised and responses to questions:-

- 1) Stephen Raybould advised members that the Vision and Strategy for Adult Social Care Services had been very well received by the Third Sector and highlighted that the comment had been made that it was the most coherent one presented to the Third Sector.
- 2) Andy Cave underlined the importance of co-production and highlighted that Healthwatch Birmingham could offer support in this regard.
- 3) In reiterating the importance of the implementation phase, the Interim Corporate Director thanked the members for their comments. He underlined that they were committed to engaging with residents and organisations.
- 4) Dr Andrew Coward expressed his support for the Vision and Strategy and reported that he had previously been involved with Andy Cave on a Healthy Villages project founded on similar principles. He highlighted that one of the features that had become apparent from the project was that

when people received help they wanted to give back into the system - resulting in a wonderful cumulative effect within communities.

- 5) The Chair highlighted that she was delighted with the Vision and Strategy and that so many people were excited with the proposed way forward. Furthermore, she welcomed what the Third Sector and others were saying because the Council would not be able to implement the Vision and Strategy without the help and support of its partners as it did not have the resources or sufficient staffing to meet service users' needs alone.

The Chair thanked the Interim Corporate Director for reporting to the meeting.

212

RESOLVED:-

That the Vision and Strategy for Adult Social Care Services be noted and supported.

BIRMINGHAM BETTER CARE FUND PLAN 2017/18/19

The following report was submitted:-

(See document No.6)

Stephen Raybould declared a pecuniary interest and did not take part in consideration or determination of this agenda item (See Minute No 206).

Mike Walsh, Head of Service, Commissioning, BCC introduced the information contained in the report and Margaret Ashton-Gray, Head of City Finance, BCC commented on the financial elements.

In also briefly referring to the BCF plan, Graeme Betts, Interim Corporate Director, Adult Social Care and Health, BCC highlighted that feedback on the document had been positive.

The Chair thanked the officers for reporting to the meeting.

213

RESOLVED:-

That the narrative plan and planning template be approved.

CARE QUALITY COMMISSION: REVIEW OF SOCIAL CARE AND HEALTH SYSTEM

The following report was submitted:-

(See document No.7)

Graeme Betts, Interim Corporate Director, Adult Social Care and Health, BCC introduced the information contained in the report.

Following brief comments from the Chair who highlighted that the Local Government Association had also offered assistance, it was:-

214

RESOLVED:-

- (a) That the contents of the report and the intention to provide a progress report to the Health and Wellbeing Operations Group in November be noted;
- (b) that this Board agrees to promote the Care Quality Commission Review across the Adult Social Care and Health System.

SUSTAINABILITY AND TRANSFORMATION PLAN (STP) – SYSTEM CHANGES UPDATE

215

Members were informed that the leaders on the STP had been asked to attend the July and now this meeting but unfortunately it had not been possible to secure any representation. The Chair highlighted that she hoped that the position would change because she would be expected to give a full report and account of the engagement that had been taking place on the STP to City Council. Furthermore, the Chair highlighted that she'd been informed that Paul Jennings would give an oral update but considered this to be unacceptable. It was pointed out that as Interim Chief Executive of Birmingham CrossCity, Birmingham South Central and Solihull Clinical Commissioning Groups, Paul Jennings was on the commissioning side. The Chair advised members that she was unhappy with the current position particularly as it had previously been indicated that engagement with partners on the STP would be taking place this week. The Chair highlighted that while beginning to have some concerns she remained positive and pointed out that the only way forward was to work jointly together.

CLINICAL COMMISSIONING GROUPS – CHANGES UPDATE

216

Paul Jennings, Interim Chief Executive, Birmingham CrossCity, Birmingham South Central and Solihull Clinical Commissioning Groups (CCGs) reported that a lot of work had been taking place on bringing the three organisations together as one and explained that the final document would be submitted to NHS England on 6 October, 2017. Members were advised that it was understood that the document would then be formally considered at a meeting towards the end of the month, where it was anticipated that NHS England was likely to support a formal merger, as it was believed that particular concerns raised (e.g. the West Birmingham and finance issues) had been addressed. In relation to the finance issue, he explained that going forward there would be a single plan for the proposed new CCG and also indicative budgets for the localities so that it was clear where funds were flowing. The Interim Chief Executive indicated that he was very confident and optimistic about what the proposed new single larger organisation operating with about 2 per cent of the NHS budget could achieve and which would include working in communities using an asset based approach.

The following were amongst the issues raised and responses to questions:-

- 1) The Interim Chief Executive explained that the work carried out so far had been around how the three organisations should operate as a single CCG

at a strategic level. In relation to communicating with citizens on the impact of the integration of the three CCGs, he pointed out that that work would be taking place in the localities and with social services at a constituency level. However, that work in terms of building from a General Practice level upwards had not yet started.

- 2) Graeme Betts, Interim Corporate Director, Adult Social Care and Health, BCC highlighted to members that he was very pleased to be working with the Interim Chief Executive and pointed out that his service area was already benefiting from the positive approach Paul Jennings had brought around the Better Care Fund Plan.
- 3) In relation to the Solihull CCG's financial position, the Interim Chief Executive reported that the organisation had to achieve a controlled total budget deficit of £5.5m for this year. Furthermore, the CCGs would be required to have balanced budgets from April 2018. Consequently, at the point at which the new CCG was created the historic deficit in Solihull and historic surplus in Birmingham would be brought together in accounting terms to balance each other out except for a small surplus in Birmingham. The plan for next year was a balanced budget for the whole system although as mentioned earlier the new CCG would also be operating with local indicative budgets so that there were no flows of money in any direction other than where positive choices were made to transfer resources to areas most in need.

The Chair thanked the Interim Chief Executive for attending and reporting to the meeting.

WEST MIDLANDS MENTAL HEALTH COMMISSION BRIEFING PAPER

The following report was submitted:-

(See document No.8)

217

RESOLVED:-

That the contents of the report be noted.

TRACY TAYLOR – LOCAL NHS PROVIDER REPRESENTATIVE

218

The Chair reported that Tracy Taylor would be leaving the Birmingham Community Healthcare NHS Trust and placed on record her appreciation for all Tracy's hard work as the Local NHS Provider representative on this Board.

The Chair thanked everyone for attending and highlighted that the next meeting was scheduled for Tuesday 16 January 2018.

The meeting ended at 1657 hours.

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CHAIRPERSON