

Birmingham City Council

Health and Social Care Overview and Scrutiny Committee

Date 14th March 2023



Subject: Cabinet Member Priorities Update report
Report of: Cabinet Member for Health & Social Care
Report author: Cllr Mariam Khan

1 Purpose

- 1.1 To provide members with an update on priorities for the Health and Social Care portfolio as set out at the meeting of HOSC in September 2022.

2 Recommendations

- 2.1 That this be noted

3 Any Finance Implications

- 3.1 None

4 Any Legal Implications

- 4.1 None

5 Any Equalities Implications

- 5.1 None

6 Appendices

- 6.1 Report of the Cabinet Member

Health and Social Care Overview and Scrutiny Committee – 14 March 2023

Cabinet Member for Health and Social Care, Councillor Mariam Khan – Update on priorities

When I attended Health & Social Care O&S in September 2022, I was newly in post and set out my key priorities for the forthcoming year. Almost exactly six months later I am reporting back to you to update on what has progressed since then around those priority areas and highlight some other key areas and initiatives which I think you will find of interest.

In September I set out my key priorities for the year as follows:

- **Tackling Health Inequalities**
- **Post Pandemic Situation**
- **Cost of Living Crisis**
- **Maternal health**
- **Mental health**
- **Integrated Care Partnership**

These priorities remain at the forefront of my work, and cut across various policies, initiatives and service areas and this report elaborates on them throughout. Since September the cost of living crisis has been at the heart of a concerted cross-partner effort to help those most in need in the city, which almost certainly touches upon health inequalities, maternal and mental health. As Chair of the Health and Wellbeing Board I have put a strong focus on cost of living as a standing item and have dedicated the sub fora I chair to this topic.

And the reality of the post pandemic situation is felt most keenly by those still working in or users of the health care system which is suffering from a compounded lack of investment, resource and staffing, exacerbated further by the winter pressures of a country deep in this cost of living crisis and the reality of what that means for people scared to put the heating on or not feeding themselves properly.

I also meet regularly with the Chief Nurse and will be working with Local Maternity and Neonatal Services using my lived experience of the services for women.

I have set out the detail in the directorate service areas for ease.

Adult Social Care

1. Context

The context within which Adult Social Care is operating remains both challenging and highly pressured. Whilst the Directorate continues to actively support citizens, staff, providers and

partners with the cost-of-living crisis and winter pressures, the focus is very much again on accelerating delivery of the revised vision for Adult Social Care. The vision continues to drive changes which improve citizens' resilience and enhance their ability to live independent, healthy lives. It recognises too the key role played by our voluntary sector and our partners in enabling people to live good quality lives and enjoy good health and wellbeing. Implementing the vision for Adult Social Care is the key mechanism to addressing the Social Care challenges facing the city.

To highlight progress over the last six months, this update highlights the progress made in delivering against 5 of the key principles of the vision, namely that:

- People need to be able to access prevention and early intervention services quickly and at any time in their lives.
- People need to be able to access a wide range of community assets which are local, flexible and responsive.
- People's needs are often complex and require support and interventions from a range of organisations. Therefore, services need to be integrated and built on partnership working utilising multi-disciplinary teams and where feasible single points of access.
- People should expect to be treated equally and fairly and services should not discriminate on any grounds against citizens. Services should seek to improve social justice by tackling the reasons for discrimination and creating opportunities for all citizens.
- Underpinning all of this is the imperative to use resources effectively

2. Access to prevention and early intervention services

2.1 Early Interventions and Hospital Hubs

As highlighted in the informal update to HOSC at the end of January 2023, Adult Social Care has played a significant role in supporting the NHS and maintaining system flow over one of the most challenging winter periods ever seen. This work is a key part of the post pandemic priority I have identified in my previous report to HOSC.

The Hospital Discharge Service Requirements was introduced nationally in March 2020 as a result of the Covid-19 Pandemic and made a number of key changes to the way Health and Social Care supports Hospital Discharges. The policy document has been updated over the course of the pandemic and the current version titled Hospital Discharge and Community Support Guidance was published in March 2022 and updated in July 2022. The key changes introduced can be summarised at a high level as:

- A discharge to Assess Model
- Focus on the Home First Principle
- Health and Social Care pooling funding to commission discharge to assess pathways

In response to this, partners worked together to design and implement new integrated ways of working which built upon these key changes. The impact of the Birmingham Early Intervention Services and the Discharge to Assess Model has been significant. For example, between March 2020 and March 2022 the services:

- Achieved 120,000 bed days saved annually
- Avoided over 20,000 unnecessary admissions to hospital
- Reduced care needs by 6.5 hrs a week.

BSOL partners have publicly acknowledged the important role Adult Social Care has played in maintaining hospital flow. This is particularly impressive given the national picture where lack of Social Care in many parts of the country has been a major barrier to discharges.

The ongoing NHS pressures have been felt across Commissioning too and the Directorate have developed joint approaches and responses to support reducing NHS pressures wherever possible. This has included taking a leadership role in new areas, innovating and leading the Integrated Care System to making evidence based informed decisions about how funding could best be used. However, it is notable that our approach to supporting hospital discharge through our commissioned services, including the new Homelessness Pathways and our existing Pathway 1 and 2 commissioned services, has ensured we have supported good out of hospital flow.

2.2 Technology Enabled Care

Other preventive services are also being developed and invested in, including developing the role of assistive technology to improve citizens' experience of support. The aims of the Technology Enabled Care programme is to enable all people to live independently in their own homes for as long as possible with the right support; as well as utilising technology to reduce isolation and develop the support offer for Carers. This is an important tool in tackling health inequalities, as one of my key priorities.

A partner has been appointed to support the Directorate to achieve these outcomes and to create, co-produce and commission a transformed TEC service in 2024. The programme is working with citizen experts by experience at every stage, developing a service to go out to market ensuring a strong connection with:

- Early Intervention and Prevention
- Other council services - Children's, Housing and Public Health and their ambitions around TEC

A key element of this service will require the embedding of a TEC culture change programme for both citizens and practitioners enabling a think "TEC first". The aspiration over time is to work towards an integrated TEC service with the NHS.

2.3 Support for Carers

Following conclusion of the Carers Service procurement process, the new Birmingham Carers Hub will go live on 1 April 2023. Additional funding was secured for this procurement to develop carers services to include a wellbeing break/sitting service for carers to provide much needed breaks to support their mental and physical wellbeing; and to expand the health liaison project to support the carer when the person cared for returns home following discharge from hospital.

The new Carers Hub will build on the positive work over the past two years to further enhance support for carers in the city. Support to carers forms part of the Preventative Place-based Support, which creates the right conditions to enable those with care and support needs (including children) to be cared for at home and within their own communities. Supporting unpaid carers aims to raise the profile of carers, improve employment opportunities, and better identify, assess and support carers of all ages across the city.

The Directorate has been encouraged by the progress made in developing new projects such as the Health Liaison Project, a Transition Service For Young Carers Becoming An Adult Carer and the work with Dementia Carers. It is also important to note that Birmingham City Council is now a Carer Friendly Employer with a regular Carers Forum that meets each week. Importantly there is now a robust pathway for carers across the life course and strong links with the Integrated Care Board.

3. Development of Community Assets

3.1 Neighbourhood Networks for Younger Adults

People need to be able to access a wide range of community assets which are local, flexible and responsive. Through being able to access these resources people can continue to enjoy good quality lives while maximising their independence. Community assets are the wide network of services which range from very small, very local services provided by volunteers through to faith groups and community groups, national charities and private companies and businesses. They are all part of the wide network of community assets which provide choice and enable people to engage with others in activities they enjoy and which add meaning to their lives.

Neighbourhood Network support for older adults has been in place for some years and is now an established part of the Directorate's Community Offer. In order to deliver this element of the revised strategy, we have continued to further invest in local services for younger adults.

Resources have been made available for local groups to provide the wide range of support that enables people to remain in the community. This will include support for volunteers to run activities and for micro-enterprises to run services such as personal assistants and day opportunities.

A key element of ensuring this support works is the relationship between community assets and the link workers. They play a key role in ensuring that people with lower-level needs aren't left until they develop acute needs.

The success of these services was recognised when the Prevention and Communities Commissioning Team won the 'Keep it Local' Award. The statement issued by Locality (the national membership network supporting local community organisations), stated:

"Keep it local is Locality's campaign calling for councils to move away from bureaucratic commissioning and big outsourcing contracts. This award celebrates an outstanding local authority that has instead created strong local partnerships with local community organisations and worked in an innovative way to unlock the power of its community."

4. Supporting People through Partnership Working

4.1 Transitions and Preparation for Adulthood

The Transitions and Preparation for Adulthood Service launched on 30th January 2023. A pre-launch briefing was held on 27th January and was attended by more than 100 colleagues from across Adult Social Care, Children's and Families Directorates, Birmingham Children's Trust, voluntary community sector agencies and a number of special schools/colleges.

Within the first week, the service received 37 referrals which demonstrates the impact of the marketing to date across both Adult Social Care and wider partners. The team are continuing to work through a backlog of statutory work which had accrued over a two-year period when the recruitment and retention rates in the team were poor. As a consequence, there were numerous agency staff within the service which resulted in a lack of consistent support for young people. The new structure has taken account of these pressures by creating additional posts, some of which are new posts on higher grades to support succession planning. The team has worked to reduce the waiting allocations list from 500 to 392 in the space of three months. They have also written a number of processes to support colleagues in the team and undertaken a rigorous review of expenditure. Recruitment has been successful, and the new service has recruited to 40 of the 47 posts within the new structure.

4.2 Learning Disabilities and Autism Framework for Change 2023-2033

The Directorate is working with system partners and people with lived experience to develop a life course approach to the commissioning of services for children, young people and adults

with a learning disability and/or autistic people. The aim is to work within Birmingham to inform an integrated, collaborative approach to the delivery of joint commissioning priorities to ensure every individual with a learning disability and/or autistic people access the support they need to enable them to live healthy and happy lives.

The approach is enriched by a collective purpose, shared values, rights-based outcomes and a powerful connection between natural system leaders and people with lived experience. To support this to happen the Learning Disabilities and Autism Framework for Change: Our Plan for a Better Life Re-Imagined, will be supported by the growth of an Experts by experience Network which will be all-age and all-system and will reflect the communities by experience that are facing inequality and social justice across the city. This approach is based on a proof of concept in respect of the growth of a system network of people with lived experience which will foster intergenerational sharing of knowledge, the principles of life course and will enable system commissioners to think and test the art of the possible.

5. Improving Social Justice

The Corporate Director for ASC and the senior management team have played a proactive role in demonstrating inclusive leadership and have put in place an extensive programme of staff development to embed equalities and diversity with the Directorate. The Management Team are clearly visible in leading implementation of Everybody's Battle, Everybody's Business; and engaging with staff to secure their support. The Directorate has also led and supported the development of the equalities, diversity and inclusion (EDI) regional approach co-ordinated through the West Midlands ADASS network.

The ASC Vision is underpinned by the principle of social justice. People should expect to be treated equally and fairly and services should not discriminate on any grounds against citizens. Services should seek to improve social justice by tackling the reasons for discrimination and creating opportunities for all citizens. We promote this principle through our strengths-based practice and outcome-based commissioning practices. This is also self-evident through our commitment to tackling health inequalities.

The golden thread throughout our ASC People Plan 23-25, is our focus on social justice. Our plan sets out how we will celebrate diversity and how our workforce will represent the community it serves. We are committed to ensuring everyone has what they need in a just, safe and respectful place to work. Two new roles have been established to help drive forward our priorities: Assistant Director Community Services and Equality, Diversity and Inclusion and Equality, Inclusion and Diversity Manager.

The Social Care Workforce Race Equality Standard (SC-WRES) is a tool to measure improvements in the workforce with respect to the experiences of black and minority ethnic staff. The SC-WRES Standard comprises of 9 measurable metrics to examine disparities in race equalities. The ASC Directorate and Birmingham Children's Trust have piloted the SC-WRES,

working closely with the Department of Health and Social Care and 17 other pilot sites. Each organisation has developed a bespoke action plan based on an assessment of the metrics.

The Directorate works closely with partners to develop the health and care offer to citizens of Birmingham. This includes ensuring that gaps in service delivery are identified and addressed jointly where possible, for example through the Prevention and Early Intervention programme and development and support for the care home market. ASC is a core partner in the Integrated Care System and the Council has been established as the leader around 'Place' level activity due to the recognition of the knowledge and skill of the organisation in working at a local community level and responding to the diversity of need.

Welcoming new arrivals and communities to the city is a key component of the Council's response as a City of Sanctuary. ASC leads on the Commissioning of resettlement support and lessons around English as a Second Language for any refugees arriving in the city.

In November 2022, the Directorate launched our first intersectional Staff Equality Leaders' Forum. This exciting new forum offers diverse and invaluable insight, by representing the voices of employees – and perhaps most importantly, by critiquing policies and procedures through the lens of intersectionality. The concept of intersectionality describes the ways in which systems of inequality based on gender, race, ethnicity, sexual orientation, gender identity, disability, class and other forms of discrimination 'intersect' to create unique dynamics and effects. The new forum has representation from numerous services and departments within the Directorate. Staff equality leaders are key advocates for EDI and will provide guidance to support the Directorate in implementing initiatives that will promote an inclusive work culture and a positive staff experience.

6. Using Resources Effectively

6.1 Update on Recruitment & Retention of Registered Social Workers & Occupational Therapists, Approved Mental Health Professionals

To support the recruitment and retention of Social Care professionals the Council gave approval to pay the following allowances with effect from 1st June 2022:

- Golden Hello payment - £1k (upon appointment)
- Recruitment & Retention Payment - £5k (paid monthly over a 12month period, pro rata for part time staff)

Due to the number of vacancies which the Directorate was carrying; HR and Adult Social Care engaged a recruitment specialist to support the process of recruiting staff to Adult Social Care, including social media, video chats with staff and targeted advertisement of roles. This was accompanied with a simplified application process that commenced in June 2022.

As of 17 February 2023, 167 people have been recruited. 162 of those recruited are currently at an offer stage, with 38 new starters this month. 5 people are currently awaiting outstanding pre-employment check information and 3 people are at final offer stage that will proceed to being new starters once the payroll reopens for March.

6.2 CQC Assessment of Adult Social Care

From 1 April 2023 CQC will have new powers that allow them to undertake independent assessment of care at a local authority and integrated care system level.

They will start this process by reviewing data and published documentary evidence across all local authorities and they will publish their findings at an overall national level as a collection of evidence. CQC also intend to start a limited number of pilot assessments from April. These will cover up to 5 local authorities between April and September 2023. They plan to start formal assessments in September and aim to carry out up to 20 assessments between September and December. At this stage Birmingham Adult Social Care has not been advised as to when it may be assessed.

The Directorate's preparation for the introduction of CQC assessment process continues to progress. The service is finalising its internal self-assessment and is using this to identify any issues and gaps which will inform our improvement plans. A small team of staff is being appointed to assist in responding to any gaps including appointment of an Engagement Manager and a dedicated Head of Service.

Senior officers are also engaging with the WM ADASS region to prepare for CQC reviews including undertaking a Peer Review of Shropshire in March 2023; and preparing for the ADASS Readiness Review of Birmingham which will be undertaken by Warwickshire on 11 and 12 May 2023.

7. Integrated Care Systems and Place Committee

7.1 Birmingham and Solihull Integrated Care System (BSOL ICS)

Birmingham and Solihull Integrated Care System is one of 42 Integrated Care Systems (ICS) across the country that launched on 1 July 2022. The vision of the ICS is to make Birmingham and Solihull the healthiest place to live and work, driving equity in life chances and health outcomes for everyone. It is recognised as the biggest opportunity in a generation for the most radical overhaul in the way health and social care services in Birmingham and Solihull are designed and delivered.

The Council is a key stakeholder in the ICS and is working alongside local partners from the NHS, voluntary, community and faith sectors to achieve better outcomes for citizens across the area. All ICS partner organisations will work in collaboration, building on what has been achieved through integrated working so far. Integrated working has long been an ambition for the health and care system, with the Covid-19 pandemic accelerating how partners work together to meet the needs of the local population.

The objectives of the ICS are to:

- Improve health of our population
- tackle unequal outcomes and access
- enhance productivity and value
- support the broader social and economic development of Birmingham and Solihull.

7.2 Integrated Care Partnership

On 7th February I chaired our Birmingham and Solihull Integrated Care Partnership meeting which focused on the important issue of prevention in public health and violence reduction. As set out in our integrated care strategy, prevention is key to improving population health and curbing the ever-increasing demand for healthcare services. It was clear from the meeting that as prevention is key to addressing so many of our challenges, both within the health and care system and as a route for addressing wider issues in society, it was agreed that prevention will continue to be a theme for the next meeting in May.

The Integrated Care Partnership has been formed to provide inclusive, strategic leadership for the ICS. As such it is a multi-agency partnership charged with developing the long-term strategic plan for the ICS. Over the last 6 months the focus of the ICP has been to develop a draft Ten Year Strategy which:

- Sets the future vision for our integrated care system
- Establishes the principles and priorities for Birmingham and Solihull
- Agrees the important metrics of success to improve outcomes at 3, 5 and 10-year timescales

7.3 Integrated Care Board

The Integrated Care Board (NHS Birmingham and Solihull) is the statutory NHS body that leads the health element of the ICS. As such it is accountable for the use and allocation of NHS resources.

The last six months have been a period of intense pressure on health and social care services as a result of factors including:

- Increased demand on services already under pressure, as the system looks to recover the backlogs of care that resulted from the pandemic
- Increases in flu, covid cases and strep A have all had an impact from primary care through to the Intensive Care units
- Industrial action taken by nursing and ambulance staff to reverse declines in real-terms pay
- Increased staff absences due to flu, covid and strep A.

Operational pressures are also being experienced in mental health services, community services and primary care and social care.

The system [at the point of reporting] has not had to call a critical incident as a result of the pressures which other local systems have had to do to cope. Staff groups have worked tirelessly to ensure continued access for patients during periods of significant pressure.

On the 23 December 2022 the NHS issued Planning guidance and priorities for NHS organisations developed around three core principles:

- Recovery of core services and improving productivity.
- Making progress in delivering the key NHS Long Term Plan ambitions.
- Continue to transform the NHS for the future.

A report will be brought back to the Board over the next two months as more work is undertaken on the Birmingham and Solihull response. There is a duty to prepare a Joint Forward Plan before 1st April 2023 for consultation before the final plan is published by 30th June 2023.

7.4 Birmingham Place Committee - background

Place-based working and the principle of subsidiarity; taking decisions as locally as possible; is one of the principles for the ICS. The Place Committee is a sub-committee of the ICB with responsibility for driving collaboration and integrated delivery at the Birmingham Place level. The Place Committee was established to drive forward shared ambitions for neighbourhood working, earlier intervention and prevention, and for joined-up commissioning strategies to help us achieve better outcomes for citizens. Since the inception of the ICS in July 2022, the Place Committee has become established as a key part of ICS governance, establishing essential foundations to unlock exciting collaboration opportunities between the local authority, NHS providers and commissioners, and the voluntary and community sector.

7.4.1 The Fairer Futures Fund

This fund has been created by the ICS as a means to support individual, patient, community and clinical and professionally-led innovation that will support the system to move to new ways of working which bring teams together to think, plan and deliver services in a different way.

It is designed to seed-corn activities that will contribute to delivering the 4 core aims of ICBs:

- Improving population health and healthcare;
- Tackling unequal outcomes and access;
- Enhancing productivity and value; and,
- Supporting the broader social and economic development of Birmingham (and Solihull)

The Fund was allocated an initial £18m, of which £3m will form a system-level Challenge Fund, with the remaining fund being proportionately split between Birmingham and Solihull.

A proposed structure for the Fund is currently being developed, with an initial limited programme of small grants occurring soon.

Public Health

8. Cost of Living and the Food System

8.1 Cost of Living crisis

In response to the cost of living crisis, I have worked with the Food System Team and integrated their response into the work being done corporately to address the challenges.

The Food System team has led on the Food Provision workstream of BCC's Cost of Living response. This has included thus far (with more initiatives in the pipeline):

- Setting up and administering the Emergency Food Aid fund, a grant scheme for 100 foodbanks and other food projects in the city, for food and other consumables (as a response to increasing demand and decreasing support)
- Match funding the Holidays, Activities and Food Fund with the DFE to provide over 30,000 meals to 2,000 families during the Christmas holidays.
- Supporting 14 youth centres in Birmingham with kitchen facilities to provide nutritious, not young people.
- Setting up the Affordable Food Infrastructure Fund which will provide equipment such as fridges and cookers to 75 foodbanks and food pantries (open until 17th March).

9. The Food System Team

- The Birmingham Food System strategy has been rewritten following our successful consultation over the summer and is going through the approval process with a view to launch the strategy in May.
- We have launched the Birmingham Food Legends Fund to support food system initiatives in the city, to celebrate the launch of the Birmingham Food Revolution (grant scheme open until 10th March 2023) and I recorded a video to promote this for social media.
- The team will present at the national Sustainable Food Places conference in late March on the work in the city on food and our work to tackle food poverty (postponed from September due to train strikes).
- The second of our Creative Dinner events is taking place on Tuesday 14th March 2023 (the day of the HOSC meeting itself) to bring together diverse and innovative trailblazers to discuss food behaviour change, food innovation and food transformation. This inspiring platform will include insights from key speakers and a delicious three-course menu prepared by students from the College of Food. This comes on the back of the inaugural meeting on 28th November which I opened. We hope this conversation continues and I would be glad to welcome members of HOSC to a future creative dinner.
- We are seeking providers for two projects in the development of the diverse eating guides. The first project is exploring the development of the guides with professional groups/networks such as GPs, Nurses, Allied Health Professionals and Education Provider. The second project is exploring the development of the guides with

community groups such as children and young people, faith-based networks and ethnicity-based networks.

- Birmingham is influencing international food policy, including the European Farm to Fork policy and the legislative framework for sustainable food systems. I will be representing Birmingham at the Eurocities and Milan Urban Food Policy Pact high level event titled “bringing urban food policies to the table” in Brussels on 9th March 2023. This includes a closed-door meeting with cities, political representatives and representatives from the European Commission.

10. Tackling Inequalities

10.1 BLACHIR – Birmingham and Lewisham African Caribbean Health Inequalities Review

Since I launched the BLACHIR report as one of my very first official engagements as Cabinet Member in June 2022, we have made great progress and set up the BLACHIR implementation board. As we are seeking an independent chair for the board I have been chairing the sessions in an interim capacity until we appoint. This work has been a key component of our work on tackling health inequalities.

The BLACHIR implementation Board has been operational since October 2022 **and** is now focussed on implementation with a robust forward plan of activity until the end of March 2024.

This includes:

- Working with community engagement partners who are co-producing solutions to improving cultural competency, anti – racist practice and the collection of ethnicity data.
- Working with the ICS to take forward an improvement programme
- Delivering specific projects like targeted weight management programmes tailored for African and Caribbean Communities, developing community health profiles, piloting of free text-based ethnic self-identification in population surveys, delivering targeted mental health and suicide prevention interventions, developing culturally relevant healthy eating guidance.

The BLACHIR (Birmingham and Lewisham African Caribbean Health Inequalities Review) report was published in June 2022 and the implementation of the outcomes from the review are now underway.

Community engagement partners, who have been commissioned to facilitate community involvement in the implementation project, are actively promoting the findings from the review and supporting co-production activity.

The project team have developed a programme organisation that puts co-production with communities at the centre. The co-production involves developing consistent standards and costed proposals and packages for system partners to implement within their organisations

whether they are for raising levels of cultural competency in practice, improving ethnicity data collection and reporting or promoting anti-racist practices.

The NHS ICS has established a specific working group to focus on the opportunities for action relating to NHS provision and there is a GP lead, working to the Director of Public Health on moving this forward. ICS partners have presented their implementation plans already and will be progressing those within their organisations, using the co-produced standards.

The co-production process has already begun, with the initial focus on developing culturally competent organisations and services.

As a key strand of our tackling health inequalities priority, alongside the implementation board and co-production activities, there are a number of specific initiatives that have been progressed:

- Development of targeted weight management programmes tailored for African and Caribbean Communities in Birmingham supported through the DHSC Adult Weight Management Funding;
- Development of community health profiles to look deeper into differences between communities of African heritage, starting with profiles for Somalia, Kenya and Nigeria;
- Piloting the removal of 'black' from African and Caribbean ethnicity terms in population surveys and piloting of free text-based ethnic self-identification for greater granularity and understanding of different characteristics and experiences of the diverse communities;
- Implementation of targeted mental health awareness and suicide prevention interventions tailored for Black African and Black Caribbean communities supported through the DHSC Mental Health Prevention Fund; which of course addresses my key priority on mental health.
- Development of culturally intelligent healthy eating resources and through the opportunity of the Commonwealth Games - promotion of healthy eating with Caribbean and African communities co-delivered with CET, the Diverse Nutrition Association and WHISK platform.

10.2 Poverty Truth Commission

The Birmingham Poverty Truth Commission (BPTC) was launched on 19 May 2022 with 10 Community Commissioners (people with lived experience of poverty) and 8 Civic Commissioners (those in positions of power and influence) meeting monthly to discuss how to tackle poverty and destitution.

Commissioners have been involved in a variety of work since the launch of the BPTC. The main themes that have been explored by the BPTC are 'Housing', 'Poverty and Health', 'Children and

Families' and 'Poverty and Health – Food'. The assistance provided by Community Commissioners in the development of a new housing strategy for the city. Community Commissioners have also contributed to the development of the Birmingham Food System Strategy 2022 to 2030. The impact of the BPTC has extended beyond the Commission. Several Community Commissioners have undertaken the role of 'voluntary community champions' by attending events taking place across the city relating to the cost of living crisis and the impact of poverty.

Their contribution has been particularly valuable in defining the Warm Spaces programme. Several Community Commissioners are also contributing to national conversations about poverty through the National Poverty Truth Network. One Community Commissioner and one Civic Commissioner have been invited to join the Poverty Truth Network for a Parliamentary session with MPs around tackling poverty to take place in Spring 2023.

11. The People Team

11.1 Mental Health

When I first reported to HOSC in September 2022, I set out my commitment to mental health as one of my key priorities, and I am delighted that the Public Mental Health Team has successfully become a signatory to the Prevention Concordat for Better Mental Consensus Statement which is a system wide commitment to working towards the improvement of mental health.

The People Team applied to OHID on behalf of BCC to become a signatory to the Prevention Concordat for Better Mental Health Commitment consensus statement. The application has been successful and received extremely positive feedback, indicating that Birmingham's application was considered exemplar for future applications. The Prevention Concordat for Better Mental Health is underpinned by an understanding that taking a prevention-focused approach to improving the public's mental health has been shown to make a valuable contribution to achieving a fairer and more equitable society. The next step for the People Team is to determine how the Prevention Concordat's guiding principles and commitments will now be effectively incorporated into ongoing and upcoming projects and workstreams.

Fourteen Better Mental Health Fund projects have now been completed including a combination of universal programmes for example the Birmingham Mind Being Well Programme and Mental Health helpline, targeted interventions for specific population including ethnicity, for example The Delicate Mind: The Mindful Muslims Programme. Support for children and young people for example Birmingham Education Partnerships' teacher and pastoral staff training to achieve a whole school approach to mental health support, and support for the LGBTQ+ community, for example, funding increased counselling hours and provision of mental health awareness training to increase cultural competency. The interventions have led to increased mental health awareness, increased skills to provide support and increased understanding of and ability to use coping strategies improving resilience. The BCC evaluation has been commissioned and is in progress.

Three projects have been highlighted in the national OHID video on impact of funding and two projects were given presentation space at the national conference on the Fund impacts. The People Team have provided further funding to seven of the projects including those run by the Delicate Mind, Anawin, Cruse, Common Unity and Birmingham LGBT. The funding is to explore further potential of the projects and to enable time to work with the providers to identify ways to sustain activity.

The Suicide Prevention Advisory Group continues to oversee the suicide prevention plan. We are currently exploring a pilot of the Orange Button Scheme. The scheme gives those trained in the appropriate suicide prevention awareness training a signifier of an orange button to show they are trained and are comfortable having conversations around suicide. It has been successfully implemented in several other local authorities.

The People Team is in the process of appointing a joint Community Engagement Officer with a community partner to support Central and Eastern European Communities around mental health and wellbeing. This group has poorer mental health than their peers and access fewer services overall and later in the progress of their illness than others despite increased availability of interpreters. This post will facilitate engagement to assist in the design of acceptable and effective approaches to aid access to services when they are needed.

Those working in the construction industry have elevated risks and are overrepresented in poor mental health and suicide statistics. The Kier Group has expressed an interest in prototyping a series of workshops to see if this approach assists their workers with managing mental health and wellbeing. A structured evaluation and case study will capture the project outcomes and learning. Work is currently underway to appoint the providers of the workshops.

We continue to support development of real time surveillance for attempted and completed suicide in collaboration with Solihull. This approach has been successful in adapting and targeting suicide prevention interventions in other areas.

12 Conclusion

Finally, I just want to acknowledge the excellent work undertaken by all the Directorates associated with the Health and Social Care portfolio, and inform the Overview & Scrutiny Committee that several of BCC's submissions for the recent LGC national awards have been shortlisted, including Dr Justin Varney for outstanding personal contribution for his work during the pandemic and around the ICS and putting health inequalities at the forefront of his work, and the BLACHIR review has also been shortlisted for diversity and inclusion. I am sure members would want to join me in wishing them every success in the next stages of the competition.