

SOLIHULL HEALTH & WELLBEING BOARD - 19 January 2021

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19 JANUARY 2021

Present: Councillors: Cave, Hunjan, K Grinsell (Chair), K Meeson, J Wood, Tennant, L Rees, P Jennings, Minter, F Hughes, Hastings and Davenport

Officers:

Apologies: Councillors: Ingham

89. APOLOGIES

The following apology was submitted:

Dr Peter Ingham – Bsol Clinical Commissioning Group, (Dr J Davenport – substitute)

90. DECLARATIONS OF PECUNIARY OR CONFLICTING INTERESTS FROM MEMBERS

There were no declarations of interest.

91. QUESTIONS AND DEPUTATIONS

No questions or deputations were submitted.

92. MINUTES

The Board received the minutes of the previous meeting held on 10th November 2020.

RESOLVED

That the minutes of the meetings held on 10th November 2020 be confirmed as a correct record.

93. CORONAVIRUS UPDATE

Ruth Tennant provided an update on current circumstances, highlighting the following points:

- Since the previous Board meeting, there had been a significant rise in cases, following the new variant. On Boxing Day rates were at approximately 273 per 100,000 people, whilst the current rate was 511.6.

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- In regards to the impacts locally – they were reporting over 1000 new cases per week, the highest rate at any stage of the pandemic. There were currently more people admitted to hospital and in intensive care than at the peak in March.
- Particular parts of the country, specifically London, the South East and the East, were starting to report a decline in cases, following a previous extremely sharp rise.
- Within the West Midlands region, they were beginning to see a plateauing of the rates, following the introduction of the lockdown measures. However, they were continuing to see extremely high rates and expected continued severe pressure on the local health and social care system for several more weeks.
- There had been a significant expansion of testing, with record numbers of people coming forward for testing with symptoms. They were also expanding asymptomatic testing, especially for key workers.
- School testing had also been introduced – Ruth Tennant emphasised this had been a major logistical challenge and expressed her thanks to all schools and teaching staff involved.
- There had been an increase in enforcement activity – Environment Health had taken action against premises' that were in contravention of the restrictions, whilst the Police had continued significant levels of enforcement action.
- There had been significant pressure on the local contact tracing team, where they contacted all local cases – this service was extremely important, in order to identify whether anyone needed additional support or financial help to self-isolate.
- Ruth Tennant expressed her thanks for the considerable work undertaken by all organisations involved in the Covid-19 response, including the Voluntary Sector, Schools, as well as the Council and Health and Social Care sectors.

Councillor Meeson noted supermarkets were ensuring greater compliance with restrictions within their stores; however, he expressed concern they were not introducing one way systems. Ruth Tennant explained how the public engagement team was working closely with local supermarkets, to reinforce messages about compliance. They were also reinforcing public communications on the importance of people being very careful wherever they go, due to the extremely high levels of transmissibility of the new variant.

Superintendent Ian Parnell confirmed the police continued to engage with the public to ensure compliance with rules and, where necessary, undertook enforcement action. They also engaged in the three-times weekly Incident Management Team meetings, where they considered the potential threat areas within the Borough and agreed actions with partner agencies, including the Council.

Councillor Sexton highlighted how the booking sites for national testing advised it was necessary to provide photo-ID. She expressed her concern this could

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potentially discourage people from booking a test. Ruth Tennant confirmed they would feedback these concerns to the national testing programme.

94. BIRMINGHAM AND SOLIHULL CLINICAL COMMISSIONING GROUP (CCG) UPDATE

Paul Jennings provided the following update on the local NHS system:

- There were currently approximately 1000 patients who were Covid-19 positive, admitted to hospital.
- They had a third more people admitted to hospital than at the first peak of the pandemic. The average age of people currently in the Intensive Care Units was 58 years.
- There was significant pressure on their Intensive Therapy Unit, with just under 150 patients currently receiving intensive care, with a further 30 people seriously ill who were being admitted.
- There had been a fantastic response from the health system overall, both in terms of the mutual aid in place between hospitals, as well as from staff redeployed from other areas.
- There had also been a great response from Community Services, as well as the Social Care sector, in ensuring people got the necessary support beyond hospital.

Paul Jennings provided the following update on the delivery of the local vaccination programme:

- Vaccines were being rolled out very quickly, with a really well organised system in Solihull. Their capacity to deliver vaccines continued to grow – there were 27 local vaccination sites locally within Solihull and Birmingham, whilst a number of hospital hubs were providing vaccines also.
- The CCG's focus on vaccines was very clear, with strong guidance from the Joint Committee on Vaccinations and Immunisations in regards to priority groups. The CCG was initially focusing on delivering to the over 80's, residents in Care Homes, people who were housebound, as well as Health and Social Care staff. The importance of vaccinating staff was emphasised, to help ensure they were available to deliver the programme.
- At Birmingham Millennium Point, they had opened their first vast vaccination site – they intended to gradually increase the capacity of this site, with the potential of delivering up to 2,500 vaccinations a day there.
- Paul Jennings expressed his thanks to Primary Care, emphasising the volume of work being undertaken to support the delivery of vaccines in addition to managing ongoing winter pressures.

Councillor Grinsell also expressed her thanks to all Health and Social Care staff, as well as the Primary Care sector, for all their work in supporting people suffering with Covid-19, as well as the delivery of the vaccination programme.

Members raised the following questions:

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- Gianjeet Hunjan, Birmingham and Solihull Mental Health Foundation Trust, sought assurances there were appropriate support mechanisms in place for all staff, due to the significant challenges they faced in supporting patients.
- Paul Jennings confirmed there was a clear set of support mechanisms in place for staff, including mental health support. They were conscious that many staff members had faced traumatic circumstances over the last few months – Paul Jennings emphasised the strong links they had with the Mental Health Foundation Trust, who were also providing ongoing support.
- Gianjeet Hunjan detailed how, in regards to the vaccination programme, there appeared to be a lot of misinformation on social media regarding the content of vaccines – she queried what action could be undertaken here, to encourage uptake of the vaccine amongst all groups.
- Paul Jennings detailed how there had been clear communications from the manufacturers regarding the content of the vaccine. He highlighted how there was a significant amount of engagement work being undertaken to encourage uptake of the vaccine, including with faith groups and community leaders.
- Ruth Tennant detailed how they'd been closely working with a Community Champions network, which included faith leaders and met on a weekly basis. This had been very helpful, both in terms of understanding peoples' concerns as well as sharing information. They were also considering a health inequalities framework for the delivery of the vaccine programme, to help monitor uptake and identify whether any groups may need additional support.

95. INTEGRATED CARE SYSTEM - UPDATE

Paul Jennings provided the Board a verbal update, following the STP's approved application to become an Integrated Care System (ICS). It was anticipated that, over the spring, legislation would be considered in Parliament that would provide further detail on the role of ICS's. There was an enthusiasm to bind relations between the Health Sector and Local Government more closely, to facilitate more cooperation and joint commissioning. Also, transition plans would be developed, both for the system overall and specifically for the future role of CCG's.

Paul Jennings also emphasised that, within BSOL CCG, they had focused on maintaining strong relations with Local Government. They wished to continue and strengthen these arrangements, to support fundamental improvements in peoples' lives. There was a need for continued close collaboration with Local Government on the social determinants of health, including housing, education and employment.

Councillor Grinsell thanked Paul Jennings for the update and requested for a future update of the development of the ICS to be scheduled for a future Board meeting.

96. SOLIHULL 2020 PLACE SURVEY

Sarah Barnes, Head of Business Intelligence and Improvement, presented the report, which updated the Board on the findings of the 2020 Place Survey. She explained how the Place Survey was a local resident perception survey undertaken; every two years – for 2020, the survey focused on the following two broad elements:

- Satisfaction with life in Solihull and community; and
- Questions to assess the impact of Covid-19 on wellbeing.

Sarah Barnes detailed how there were a number of positive findings stemming from the Place Survey – this included how a large majority of people were satisfied with their areas as a place to live. She also explained how there was a mixed result in regards to civic participation, whilst there had been a downward trend in the percentage of people feeling safe after dark in North Solihull.

Sarah Barnes also explained how the Place Survey was used and its findings addressed. This included informing the development of strategies that supported better health and wellbeing outcomes, such as the Health Inequalities Strategy. In regards to next steps the results of the place survey were due to be presented to the Safer Solihull Board at their next meeting. It was also noted the results would be shared with the North Locality Group to consider, in particular resident's perception of safety after dark.

Members raised the following queries and observations.

- Councillor Grinsell expressed her thanks to all the officers involved in the completion of the survey. She highlighted how the survey was undertaken via telephone and queried whether there were any plans to conduct future surveys online.
- Sarah Barnes explained the rationale behind undertaking a telephone survey was to help ensure a representative sample of the local population. It was agreed the use of online surveys was something that could be explored for future surveys.
- Councillor Sexton highlighted the question 'do people from a different background get on well together?' She queried the rationale behind this question and also how respondents may have understood it.
- Sarah Barnes explained how a national Place Survey used to be undertaken and a decision was made locally that it was helpful to continue with this question. It was explained how the question was focusing on diversity in all its forms, including age, gender, disability and ethnicity. Sarah Barnes confirmed she could share the detailed wording of the question outside of the meeting. She also explained it could be possible to provide a breakdown of the responses to this question, according to the different groups.
- Councillor Sexton flagged up how 46 percent of respondents believed their area had got worse over the last 2 years and queried whether there was any further information available on this.
- Sarah Barnes detailed how they had assessed these individuals' responses to other questions in the survey, in particular the things that

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needed improving in their local area, such as levels of crime and traffic congestion. She explained how a further breakdown of this was provided in the detailed Place Survey findings report.

RESOLVED

The Health & Wellbeing Board:

- (i) Noted the key findings of the 2020 Place Survey, and;
- (ii) Noted how the findings of the survey are being used and its findings addressed; and
- (iii) Requested that further potential ways of engaging with local residents be explored for future Place Surveys, including the possible use of online surveys.

97. HEALTH INEQUALITIES STRATEGY UPDATE

Rob Davies, a Consultant in Public Health, presented the report, which updated the Board on the progress in regards to drafting a Health Inequalities Strategy and Action Plan for 2021-24.

Rob Davies explained how they had initially undertaken evidence gathering to establish what was currently known about health inequalities today. They had then produced a long list of 9 potential action areas and engaged with partners to prioritise a smaller number. Following this, they had agreed guiding principles for action, along with 3 key priority areas and three enabling actions to take forward.

The Board was informed how the delivery of the Strategy would be supported by an Action Plan - here there would be focus on potential actions that could be taken forward by the Council and its partners to support specific groups, which didn't necessarily form part of existing strategies. Examples here included specific actions to support those currently furthest from work into employment. Rob Davies detailed how the Action Plan would follow the whole life-course approach of the Health and Wellbeing Strategy.

Members raised the following questions and observations:

- Councillor Sexton emphasised she welcomed the development of the Strategy and queried whether there could be greater focus on young people – including how the pandemic had impacted upon their education, their prospects when entering the job market, as well as potential mitigating actions. Rob Davies confirmed this could be investigated further, whilst taking into account the existing strategies in place to support young people.
- Jenny Wood also welcomed the report and emphasised the importance of the ongoing engagement with Partners, prior to the final Strategy being presented to the Board, to enable full ownership and ensure effective delivery going forward.

RESOLVED

The Health and Wellbeing Board noted progress on developing the Strategy and Action plan.

98. DEVELOPING A PROVIDER COLLABORATIVE FOR MENTAL HEALTH IN BIRMINGHAM AND SOLIHULL

Jo Carney, Director of Joint Commissioning for BSOL CCG, provided the Board a presentation on the ongoing development of a Provider Collaborative for Mental Health in Birmingham and Solihull. The points highlighted included the following:

- In the autumn of 2020 a mandate was secured across the Boards of BSOL CCG, Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) and Birmingham Women and Children's Hospital (who run Forward Thinking Birmingham) to progress work on how the organisations could become more closely aligned in the delivery of their care across the Mental Health system.
- Following this, they had established governance arrangements that were chaired by the Chief Executive of BSMHFT and included representation from all key local partners, including Solihull and Birmingham Councils, experts by experience and the Voluntary and Community sector.
- BSMHFT would continue to act as a lead provider in future; in an equal partnership with Forward Thinking Birmingham, as well as Solar, the locally commissioned service within Solihull. This was to support close collaboration at a 'Place' level.
- A bottom-up approach would be undertaken for the future development of the collaborative, engaging closely with the workforce, clinical teams and wider partnerships.
- The structure of the programme recognised the importance of localised, community-level working, whilst also acknowledging what provision was better achieved at scale.
- The Collaborative took into account how good health outcomes were reliant on strong links with wider partners and work-streams, including Special Education Needs and Disability (SEND) support, safeguarding arrangements, as well as employment access work. There would also be a continued focus upon the transition from children into adult services.
- The ongoing development of the Collaborative had been impacted by the third wave of the Covid-19 pandemic. Jo Carney explained that, due to the current pressures providers were facing, it had been necessary to pause the programme – however, she reassured the Board the development of the Collaborative would resume at an appropriate stage.

Members raised the following questions and observations:

- Councillor Meeson highlighted the ongoing review of the Mental Health Act, noting the consultation currently being held. He queried whether it was proposed for this consultation to be considered by the Board. Councillor Grinsell confirmed this could be considered as part of future work planning and, if necessary, the consultation link could be circulated to Board members for their consideration
- Andy Cave, Healthwatch Solihull, offered support from Healthwatch on the development of the Collaborative, in regards to patient voice and

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user involvement. Jo Carney expressed her thanks for this, emphasising how they welcomed the opportunity to strengthen the service user voice in any future development of services provision.

RESOLVED

The Health and Wellbeing Board noted the update on the development of a provider collaborative for Mental Health in Birmingham and Solihull.

99. UPDATE ON SUPPORT FOR CHILDREN, SCHOOLS AND FAMILIES DURING COVID-19

Louise Rees provided a presentation, updating the Board on the challenges and responses from the Children's Services Directorate in supporting children, families and schools during Covid-19. The points highlighted included the following:

- The Board was updated on the Social Care response during Covid-19. It was emphasised that all children referred into Social Care had had their needs assessed and a safety plan put in place.
- There had been an increase in the number of children in care – this had risen from 461 in March 2020 to 523 in January 2021. There had also been an increase in complex, multi-faceted safeguarding referrals.
- On average, 31% of all referrals during the pandemic had a domestic abuse related concern; however, this rose to 63% over the Christmas period.
- The Board was also updated on the support provided to the workforce. Additional agency staff had been employed to help relieve the pressure, whilst additional psychological support had been provided to staff.

Louise Rees also updated the Board on the continuing support for schools during Covid-19, detailing the following:

- With Public Health colleagues, they had been monitoring outbreaks, tracking transmission and holding Incident Management Team (IMT) investigations as appropriate.
- There had been an ongoing development of the Free School Meals offer.
- Ongoing communications – this had included daily headlines to head teachers and chairs of governors, as well as frequent letters to parent/carers supporting key messages from schools and Public Health.
- The Council continued to work closely with schools to support their remote learning offer.
- In regards to current outbreaks, the Board was informed there were 22 pupil confirmed cases, with 323 pupils isolating. There were also 30 staff cases, with 110 staff isolating.
- The Council had also stepped up its vulnerable children tracking arrangements.

Louise Minter, Chair of the Schools Strategic Accountability Board provided the following update:

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- It had been an incredibly challenging couple of weeks for all schools, following the new arrangements, announced at extremely short notice, for the majority of pupils to be remotely educated.
- Louise Minter emphasised how she was very proud of all her teaching staff, for the efforts they made in embracing remote learning.
- Parents had made considerable efforts to support their children with remote learning; however, this could be very difficult for larger families, all requiring access to devices. It was recognised how remote learning could be extremely challenging for working parents in particular.

RESOLVED

The Health and Wellbeing Board note the work being undertaken to support children, families and schools across the Borough.

100. CORPORATE PARENTING IN SOLIHULL

Yvonne Obaidy, Children's Improvement and Standards Manager presented the report, inviting the Board to consider the progress and current position in relation to corporate parenting in Solihull.

Yvonne Obaidy explained how everyone who was employed by, or a partner to the Council was a corporate parent and had a role in supporting better outcomes for the children and young people they looked after. As an example, Yvonne Obaidy explained how, after the previous occasion of reporting to the Board, an Officer from University Hospital Birmingham had contacted the Council and was now working with officers to provide support and engagement with young people

Yvonne Obaidy detailed a number of the corporate parenting achievements over the last year. This included exceeding their donation target for the care experienced young people's Christmas appeal, with over £4000 being raised. It was noted how Councillors had voted for their care experienced young people living in Solihull to be exempt from paying council tax up to the age of 25.

The Board was also informed of the corporate parenting challenges this year. This included the celebration event for Children Looked After and Care Experienced young people being postponed due to lockdown restrictions.

Yvonne Obaidy emphasised how she would be happy to work with any Board member to help develop their corporate parenting offer and she provided her contact details.

RESOLVED

The Health and Wellbeing Board is recommended:

- (i) To receive this report, be aware of current progress and take relevant actions to support the development of corporate parenting in Solihull.
- (ii) To note and implement the preference of Children and young people that all council officers and partners to use these new

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terms - “Children looked after and care experienced young people”.

101. HEALTH AND WELLBEING SCORECARD

Rob Davies, consultant in Public Health, presented the report, which updated the Board on progress in developing the Health and Wellbeing Scorecard, as well as a performance update.

The Board was informed how the current Health and Wellbeing Strategy Scorecard summarised progress against key performance indicators linked to the five Health and Wellbeing Strategy priorities.

Rob Davies explained that, due to ongoing national developments, it was proposed to add two new indicators for future reporting, for Priority 5 – All age: Impact of the Covid-19 Pandemic. The proposed indicators were as follows:

- Local vaccine update broken down by the Joint Committee on Vaccination and Immunisation priority groups; and
- Support arrangements for post COVID syndrome (Long COVID).

RESOLVED

The Health and Wellbeing Board:

- (i) To note current developments and performance.
- (ii) To endorse a proposal to include two new indicators as part of COVID-19 impact (Priority 5) when they become available; the first on COVID-19 vaccine roll-out; the second, on monitoring support to people with post-COVID syndrome, also known as Long COVID.

102. FOR INFORMATION - SUICIDE PREVENTION STRATEGY ANNUAL UPDATE

The report was noted for information.

103. FOR INFORMATION - SOLIHULL'S ECONOMIC RECOVERY PLAN

The report was noted for information.

104. FOR INFORMATION - BETTER CARE FUND (BCF) UPDATE

The report was noted for information.

105. FOR INFORMATION - HEALTH AND WELLBEING BOARD WORK PLAN

The report was noted for information.

4.05 pm