

BIRMINGHAM CITY COUNCIL

**JOINT HEALTH
OVERVIEW & SCRUTINY
COMMITTEE
(BIRMINGHAM &
SOLIHULL)
2 DECEMBER, 2021**

**MINUTES OF AN INFORMAL MEETING OF THE
JOINT HEALTH OVERVIEW AND SCRUTINY
COMMITTEE (BIRMINGHAM AND SOLIHULL)
HELD ON THURSDAY 2 DECEMBER, 2021 – AT
BIRMINGHAM MIDLAND INSTITUTE,
MARGARET STREET, BIRMINGHAM**

PRESENT: - Councillor Mick Brown in the Chair;

Birmingham: Councillors Peter Fowler, Deborah Harries and Rob Pocock

Solihull: Councillors Andy Hodgson, Martin McCarthy, Dave Pinwell and Rosemary Sexton.

Attendees: Paul Athey, Chief Finance Officer, BSol CCG
Birmingham and Solihull CCG)
Lisa Stalley-Green, Chief Nurse, University Hospital
Birmingham
Paul Firth ICS Wellbeing Workstream Lead
David Melbourne, Birmingham and Solihull ICS, Interim
Designate Chief Executive
Sofie Nottingham, PricewaterhouseCoopers

Officers: Solihull Council - Joe Suffield – Democratic Services Officer
Birmingham City Council - Gail Sadler – Scrutiny Officer
Ceri Saunders – Overview and Scrutiny Manager
Louisa Nisbett – Committee Manager

NOTICE OF RECORDING/WEBCAST

1. The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's meeting You Tube site (www.youtube.com/channel/UCT2kT7ZRPFCXq6_5dnVnYlw) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

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1. **CHAIRMAN’S WELCOME**

The Chair welcomed all to the meeting also formally welcoming Councillor Deborah Harries to the Committee.

APOLOGIES

3. Apologies were received from Councillors Diane Howell and Martin McCarthy – Solihull.
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The business of the meeting and all discussions in relation to individual reports are available for public inspection via the web-stream.

MINUTES

4. **RESOLVED:-**

That the Minutes of the Joint Health Overview and Scrutiny Committee meeting held on 29 September, 2021 having been previously circulated were received and noted.

MINUTES – MATTERS ARISING

5. The Chair informed that information related to Primary Care access page 8 had been circulated to Members in November.
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MID-YEAR REPORT ON THE STAFF ENHANCED WELLBEING OFFER

Lisa Stalley-Green, Chief Nurse, University Hospital and Assistant Lead, Birmingham and Solihull Health and Wellbeing and Paul Firth, ICS Wellbeing Workstream Lead gave a detailed presentation to the Committee with the use of slides giving the background to the enhanced employee wellbeing offer and an update on programme delivery and proposals for the future. Full details were in the presentation

The challenges faced by staff and keeping staff supported during the extreme new circumstances were highlighted. A bid had been submitted for funding to help to address Staff Health and Wellbeing. It had been challenging for staff to deal with circumstances in the workplace in the pandemic.

Health and Wellbeing Hubs had been set up for staff within hospital sites as safe spaces for staff.

Staff psychological first aid training had been rolled out for 1400 staff and Leaders equipped with commissioning skills. They had carried out a number of live broadcasts and webinars by psychologists and people with military experience. Also providing physical support for staff.

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They had commissioned and developed some digital resources eg for menopause and bereavement.

The staff Mental Health Hub was the first of its kind in the country. People had been fast tracked into the triage system. As well as their own staff the service had been accessed by GP's and people in Social Care. They expected more medical colleagues to come forward to access the service and say what they needed in order to be reassured about confidentiality.

They wanted Birmingham and Solihull to be the best place to work with good positive careers. They had looked at retention support and keeping people for longer in the workplace.

Partnership working was going well and a workshop had been held with all NHS and Social Care organisations to discuss the strategic offer and plan the way forward. Staff Health and Wellbeing was one of the strategic priorities and they would ensure that its value was felt and appreciated by staff.

In response to questions the following points were made:-

Councillor McCarthy queried trained staff numbers in Psychological First Aid Training and the Committee was informed that the information was collated from various organisations with one organisation taking the lead.

With regard to the offer for Birmingham and Solihull, West Midlands ambulance service had its own offer however crews had attended and were welcomed to take part.

In reply to Councillor Pocock's comments about the Wellbeing Hub and Birmingham, some funding was available this financial year. It was difficult now to identify a suitable location so they had discussed virtual activities and held webinars etc. Colleagues had been fully committed in their work. It would be helpful to have some feedback from the Committee to include in the evaluation. The Chair said that Councillor Pocock's offer of the Committee doing what they could to assist should be taken up.

Councillor Sexton referred to the pie charts on page 4 and relatively low numbers of social care workers involved and asked whether there will be the opportunity for feedback. She was aware that some reasonable workplace adjustments could help people return to work and his issue could be followed up outside the meeting. With regard to the online offers she felt they were not the same as in person and some people found it hard to engage online therefore it should be ensured that alternatives were accessible and available. Home working – staff felt obligated to respond outside of working hours. The issue was on the radar. With regard to attitude and culture - It was important that people felt valued and appreciated and there were boundaries so that their work did not impact on their personal life.

In reply to comments from Councillor McCarthy about the activities of Well Being Guardian. In the new term they would ensure there was the right climate for people to speak out. The Guardian was accountable to the chair of the board and would ensure people were supported.

Councillor Pocock queried whether medical referrals by job role was a potential issue. According to research in medical culture and behaviours there were varying degrees of acceptability and recognition of the need to seek help.

The Chair thanked the representatives for their presentation and attendance.

6. **RESOLVED:-**

That the Committee note the content of the presentation and recommendations.

**PLANNING AND THE DEVELOPMENT OF A MULTI-YEAR
RECOVERY PLAN**

Paul Athey, Chief Finance Officer, Birmingham and Solihull Clinical Commissioning Group gave a detailed presentation with the use of some slides with the main headings:-

Summary of national priorities
Key risks and mitigations
Elective recovery challenges
Financial planning
System efficiency schemes
Multi year recovery plan
Next steps

The absence relating to covid was now starting to reduce but was still higher than pre-covid. They were looking at how to increase staff levels.

There had been challenges for Primary Care over the last few months. The Government had supported Primary Care with access to funding. There were Hubs in each part of the City. They were looking at how to support primary care networks at a local level.

Urgent and Emergency Care was the biggest challenge. They were on target with the national targets set. It needed to be ensured that the right patients were getting the support they need.

With regard to elective recovery, access had been challenging over the last few months and they were not at pre-covid level in terms of delivering this. They needed to ensure patients were not waiting excessive times for treatment. It was expected that numbers would reduce down to the target by 2023. Without the actions identified they would not be able to achieve the targets.

During the discussion and In response to questions the following points were made:-

- In reply to Councillor McCarthy's comments about a strategy for standard appointments, patients were contacted beforehand. There was a standby list

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and patients were also asked if they would accept a cancellation appointment at short notice although this was not always possible to achieve.

- In reply to Cllr Sexton's comments about workforce shortages and what could be done locally, although the government had provided enough funding, the local workforce was not available. They had looked at international recruitment as an area to explore. Nurses had been recruited and trained in 2022 as a short-term solution. They would ensure there were links with training providers and a lot of work was ongoing with universities to keep students and trainees in the City.
- Concerns were raised about the urgent care system and enhanced triage processes and to ensure inequalities were not created owing to people not being able to explain themselves to get better outcomes. The triage models were a combination of in person and digital solutions. Paul Athey said he was happy take away the issue and look at it with colleagues. Re the triage models they would have additional capacity
- With regard to communications more should be done to communicate with people as they felt they had been left hanging when operations were cancelled. In reply to comments about the confusion whether appointments were virtual or in person, this would be looked at as part of the protocol. They would also look at funding streams for a central contact who would be the equivalent of a customer service so patients could contact them. They would feedback about the level of detail provided on the letter sent to patients
- Hospital have productivity programmes. For example, the maximum theatre capacity and downtime. A lot of work had been done with regard to discharges and support for patients. There were a number of programmes to support patients when they were discharged to community care.

There was a discussion on patient waiting times for treatment and the details were explained to Members. Councillor Pocock noted the challenges to the recovery and suggested a bulletin or table to track progress month by month and the representatives undertook to ensure this was done.

- Any intervention programme would ensure all funding was included. All patients would be reviewed by staff who would work out which of the interventions had made an impact.
- It was anticipated there would be additional funding. There were a number of national funding pots held centrally and opportunities to access funding. They need to ensure they had community support in place for services. The targeted investment fund had been introduced to provide additional capacity on UHB sites

They had been asked to develop and put into place a recovery plan and the plan was in its final stages. When this is finalised it is anticipated they could discuss the detail in 2022. There was work to monitor the impact of all of these changes and which of the interventions were having the biggest impact. Next year's allocation was unknown. They have been assured there will continue to be a mechanism to access additional funding and support for systems.

7. **RESOLVED:-**

That the Committee note the content of the presentation.

ICS UPDATE AND THE ROLE OF SCRUTINY

David Melbourne, Birmingham and Solihull ICS, Interim Designate Chief Executive and Sofie Notingham gave an update with the use of a presentation and slides on the role of Scrutiny on ICSs using the main headings

Overview of the work
What will help to make this successful
Summary of recommendations
The role of scrutiny in our developing ICS
Developing our ways of working
What this could mean in practice

During the discussion that ensued the following main points were made:-

- it was great to see scrutiny recognised.
- Noted that the roles of review and scrutiny is different.
- It was questioned whether the Health and Wellbeing Board was in the correct column also noted that the role for the Health and Wellbeing Board was changing. David Melbourne was happy to take this on board and happy to amend.
- Overseeing and overseeing progress was a key role.
- Feedback from Members and Officers would contribute to how best to deliver the service at a local level.
- Members would email comments to the Chair. The key word is to establish trust between Scrutiny and ICS.
- More about sharing data and information and more communication needed.
- A look at ways of working at the different localities. Noted that what works in Birmingham may not work in Solihull.
- Agreement with the work and look at what can be done to improve things
Some disappointing feedback from officers. Scrutiny to feed back to make the system better.
- It was agreed that this is the correct direction to be going in.
- It was difficult to get views of people on the agenda. The agenda making process could be more representative.

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- There should be openness and transparency with regard to localities.
- Overview and Scrutiny was a critical friend
- There should be a Link with the Heath Authority.
- A draft report will be shared with Members

8. **RESOLVED:-**

That the Committee note the content of the presentation and a further update be made on 10 March, 2022.

DATE OF NEXT MEETING

9. The next meeting will be on 10 March 2022, 1530 hours at Civic Suite, Solihull.
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OTHER URGENT BUSINESS

10. There was no other urgent business.

The meeting ended at 1605 hours.