

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD - 22 March 2021

MINUTES

Present: Councillors: Mrs D Holl-Allen MBE (Chairman), K Blunt (Vice-Chairman), A Adeyemo, J Burn, A Hodgson, D Howell, A Mackenzie, W Qais and R Sexton

Cabinet Members by invitation

Cabinet Member for Adult Social Care and Health – Councillor Karen Grinsell

Officers: Lizzie Edwards – Assistant Director for Adult Care and Support
Joe Suffield – Democratic Services Officer
Ruth Tennant – Director for Public Health
Jenny Wood – Director for Adult Care and Support

1. APOLOGIES

No apologies were received.

2. DECLARATION OF INTERESTS

There were no declarations of interests.

3. QUESTIONS AND DEPUTATIONS

There were no questions or deputations.

4. MINUTES

The minutes of the meeting held on 17th February were presented.

RESOLVED

The minutes of the meeting held on 17th February were approved.

5. CABINET MEMBER REVIEW OF PRIORITIES INCLUDING WORK OF HEALTH & WELLBEING BOARD

The Cabinet Member for Adult Social Care and Health presented their review of priorities report. The Cabinet Member highlighted a number of points referenced in the report, which included the work undertaken to respond to the COVID-19 pandemic locally.

Members made comments and asked the following questions:

- A Member referenced the work that had been undertaken to tackle social isolation and loneliness. They asked who was in the steering group, how the pilot was communicated to residents and whether Councillors could suggest people to be involved in the pilot. In response, the Cabinet Member explained that the steering group contained Officers from Solihull Council, charities and other external organisations that worked with people who were lonely. The pilot was communicated through Age UK's befriending service as well as through safe and well calls to shielded residents. The pilot was in the process of being evaluated. From this it was hoped that the service would be expanded and a

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD - 22 March 2021

process could be introduced for Councillors and members of the public to refer residents.

- A Member sought further clarity on the response to increased remote working by social care staff, and feedback from the use of digital engagement. The Cabinet Member noted that remote working had saved staff time and had enabled them to support more residents. The Assistant Director for Adult Care and Support further elicited that no issues had been identified by service users upon completion of an intervention. The digital approach would only be used if it was suitable for the individual and would be tailored for their needs. Additionally, a digital programme manager worked alongside social care teams to provide support, and tablets had been sourced for care homes. The questionnaire sent to potential service users had been amended to include specific questions about digital communication, and a question had been added to assessment documentation to include how the assessment took place.
- Members queried the suicide prevention work; whether the data could be made available and if extra money had been made available. The Director for Public Health confirmed that the data would not be in the public domain. Also, extra funds had been made available to the mental health support line during COVID-19 to increase capacity.
- A Member questioned whether the Council would be able to comply with the new requirements of the Domestic Abuse Bill in terms of safe accommodation. The Cabinet Member confirmed that this was in the process of being determined.
- A Member asked whether the running track would be likely to reopen in line with other sports facilities. The Director for Public Health confirmed a recovery plan was in place. It was likely to reopen alongside the leisure centres, which would reopen when national restrictions were lifted.
- A Member requested further information on whether there had been cross portfolio work to tackle educational and health inequalities. The Cabinet Member noted that there was work across the Council to tackle health inequalities through inclusive growth. There had been a particular emphasis on support for older teenagers, such as on future training and skills. The Director for Public Health added that there would be a focus on 0-5 service, which would be closely monitored. From this, it would be determined if further support would need to be provided to these children.
- A Member asked whether the changes to mental health and bereavement services would continue during the COVID-19 recovery period, and if there would be funds available to support this. The Cabinet Member confirmed that these services would continue to develop with support from partners, and funding would be reserved for mental health services.
- A Member noted that there had been a reduction of adults active during the COVID-19 pandemic, and queried what targeted support would be implemented. The Cabinet Member outlined that they would initially target those who had been least active during the pandemic, but aimed to expand this in the future. It would be important to restart community groups to support these residents. This would be undertaken with partner organisations, as part of an emphasis on “place”.
- A Member sought further information on the support provided to GP surgeries. The Cabinet Member explained that this had been discussed at the Solihull Health and Wellbeing Board. There had been additional requirements placed on GP surgeries to support the COVID-19 vaccination programme, and they had received further resources to aid this. To respond to the pandemic, there had been virtual appointments alongside face to face appointments. Hospitals

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD - 22 March 2021

had surge capacity plans in place and were in the process of considering restoration and recovery work.

- A Member queried when the Solihull Active survey was carried out, as during the winter it would be more difficult to be active, especially during the pandemic. The Director for Public Health explained that it was taken from Sport England's quarterly survey of activity levels. This would enable the results to be benchmarked against previous years to account for seasonal differences. Although there were some differences, it highlighted that there had been a reduction in activity.
- A Member highlighted that those who had shielded were likely to have a Vitamin D deficiency, and what work could be done to promote this supplement. The Director for Public Health explained that there had been national guidance on Vitamin D, and they would potentially look into including this in future communication messages once lockdown had eased.
- A Member asked whether young people had been engaged with on the health inequalities strategy. The Cabinet Member outlined that they worked with Urban Herd, who were an organisation who engaged specifically with young people. The next phase of the health inequality strategy would focus on community consultation.
- A Member noted that the list of inactive adults was very substantial and queried whether there would be engagement work to encourage people who worked from home to continue to be active. The Cabinet Member reiterated the importance of being active, and they would continue to promote the health benefits of an active lifestyle in the future. A suggestion for a virtual commute was considered. The Director for Public Health highlighted that there had been a number of schemes which encouraged Solihull Council staff to stay active, as well as information provided to shielded residents on exercises they could do at home.

The Cabinet Member extended their thanks to the staff in the Adult Care and Support Directorate and Public Health Directorate during the COVID-19 pandemic.

RESOLVED

The Board expressed their gratitude to the Adult Care and Support Directorate and Public Health Directorate for their work in response to the COVID-19 pandemic over the past year, and to the Officers who had taken the time to support the Board.

The Board noted the report from the Cabinet Member

The meeting finished at 7.00 pm