

Health and Adult Social Care Scrutiny Board

Tuesday 20 June, 2017 at 12.30 pm in Committee Room A, at the Town Hall, West Bromwich

Agenda

(Open to Public and Press)

- 1. Apologies for absence.
- 2. Members to declare:-
 - (a) any interest in matters to be discussed at the meeting;
 - (b) the existence and nature of any political Party Whip on any matter to be considered at the meeting.
- 3. Minutes of the meeting held on 30 March, 2017.
- 4. Re-Establishment of Joint Health Scrutiny Arrangements with Birmingham City Council.
- 5. Re-Establishment of Joint Health Scrutiny Arrangements with Wolverhampton City Council.

J Britton
Chief Executive
Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution:

Councillor E.M. Giles (Chair); Councillor Ahmed (Vice-Chair); Councillor Meehan (Vice-Chair); Councillors Crompton, Downing, Goult, O Jones, Hevican, S Jones, Lloyd and Shaeen.

Agenda prepared by Scrutiny Unit Democratic Services Unit - Tel: 0121 569 3200 E-mail: scrutiny_unit@sandwell.gov.uk

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Agenda Item 3

Minutes of the Health and Adult Social Care Scrutiny Board

30th March, 2017 at 3.00pm at the Sandwell Council House, Oldbury

Present: Councillor Y Davies (Chair).

Councillors Jarvis and Lloyd (Vice-Chairs);

Councillors Hevican, S Jones, Millard, Shaeen and

White.

In Attendance: Bill Hodgetts (Sandwell Healthwatch).

Apologies: Councillors Downing and Edis

4/17 Minutes

Resolved that the minutes of the meeting held on 16th February, 2017 be approved as a correct record.

5/17 Findings of the Vice-Chair's Work Stream on Female Genital Mutilation

The Board received a report detailing the findings of Vice-Chair, Councillor Jarvis' work stream for the 2016/2017 municipal year, which had looked at the Council and partners' efforts to tackle female genital mutilation in Sandwell.

It had become clear early on that there was already a lot of work taking place to tackle female genital mutilation therefore the Vice-Chair had focussed on seeking assurances in relation to the effectiveness of this work.

Following a review in 2015 West Midlands Police had established a Regional Task Force to take forward a number of recommendations.

The Domestic Abuse Strategic Partnership, a Priority Group of the Safer Sandwell Partnership, had established a sub-group in October 2015 – Sandwell Stopping FGM Sub-Group – in response to the increasing media attention of the issue. The Sub-Group's terms of reference and action plan were aligned to the work and priorities of the West Midlands Regional Task Force. The Sub-Group was chaired by a member of the Task Force, who was employed by Sandwell and West Birmingham Clinical Commissioning Group. The Board noted the list of 13 other organisations represented on the Sub-Group.

The Sub-Group, had received widespread praise for its contributions towards the Task Force's objectives and the Board noted its achievements.

It had proven difficult to identify the scale of the problem in Sandwell due to its data being collected under the auspices of Sandwell and West Birmingham Clinical Commissioning Group. Efforts had therefore been largely focussed in the town of Smethwick and in particular the ward of Soho and Victoria, where there was a high proportion of residents from communities known to practice female genital mutilation. However, in late 2016 the Safer Sandwell Partnership Police and Crime Board had commissioned an analyst to develop a problem profile for Sandwell to gather data from a range of sources and this work was expected to be completed in April 2017.

The Board noted the health implications for victims of female genital mutilation. Whilst the Department of Health had issued guidelines for health professionals, there were no specific services commissioned by Sandwell and West Birmingham Clinical Commissioning Group to support victims.

The West Midlands Police and Crime Panel's report had found that community engagement was critical to tackling female genital mutilation and highlighted the crucial role that councils, health organisations and schools needed to play. Consequently the service level agreement that the Council held with Rights Equality Sandwell had been amended to include focussed work towards tackling female genital mutilation. 10 community champions had been recruited and trained in partnership with Birmingham and Solihull Women's Aid to support community engagement work. However, further development work was needed equip the volunteers with sufficient knowledge and skills to undertake the community engagement required. External funding was being sought to deliver some of this work in partnership with lleys Community

Association, the Somali Women's Association and Brushstrokes.

The West Midlands Police and Crime Panel's report had also identified that councillors could play a vital role in tackling female genital mutilation by giving a high profile to policy interventions as decision makers; making it a priority area for action across the partnership, engaging with local people in their communities as ward councillors and as scrutineers investigating the work that the Council and partners were doing and suggesting improvements. Through the Domestic Abuse Strategic Partnership an e-learning module had been developed for all staff and councillors. Data showed that only five elected members had completed the module on Domestic Violence and Abuse, which covered Female Genital Mutilation.

The Board welcomed the report and its recommendations and thanked Councillor Jarvis and the officers involved for their input.

Resolved:-

- (1) that the work of the Domestic Abuse Strategic Partnership's Sandwell Stopping Female Genital Mutilation Sub-Group be endorsed, along with the Group's 2017/2018 Action Plan;
- (2) that the Cabinet Member for Public Health and Protection, and Sandwell and West Birmingham Clinical Commissioning Group be requested identify funding to support the delivery of the Sandwell Stopping FGM Sub-Group's 2017/2018 Action Plan and associated work to enhance the long term sustainability of community interventions to tackle female genital mutilation in Sandwell, including:-
 - raising community awareness
 - engagement work with boys and men
 - engagement and support work with girls and women
 - the production and circulation of appropriate awareness raising materials
 - developing and supporting community champions
 - the holding of an event to launch the Joint Policy of the Adult Safeguarding Board, Children's Safeguarding Board, Health and Wellbeing Board, Safer Sandwell Partnership and Domestic Abuse Strategic Partnership on tackling female genital

mutilation

and that the Cabinet Member be asked to lead on this work from a member perspective;

- (3) that Sandwell and West Birmingham Clinical Commissioning Group be asked to consider commissioning health specific services including psychological support for victims of Female Genital Mutilation;
- (4) that all elected members be encouraged to undertake the Artemis training module on Domestic Violence and Abuse, which covers female genital mutilation;
- (5) that awareness raising materials in relation to tackling female genital mutilation be circulated across the partnership, including libraries and community centres in Sandwell:
- (6) that the Safer Sandwell Partnership be asked to develop a non-financial rewards package to recognise the contribution of the community champions in supporting the work to tackle female genital mutilation in Sandwell.

6/17 Updates from the Chair and Vice-Chairs

The Chair reported that she had attended a meeting of the Joint Health Overview and Scrutiny Committee with Birmingham on 18th January 2017. The Committee had received a presentation from Sandwell and West Birmingham Clinical Commissioning Group on a consultation exercise which was due to take place on the withdrawal of a number of items currently available on prescription. A further Joint Committee would be held to consider the formal consultation.

Councillor Lloyd (Vice-Chair) reported that the work of the Joint Working Group, with members of the Housing Scrutiny Board which had been established to carry out a review of the Council's policy on Aids and Adaptations.

As part of its evidence gathering, the Working Group had noted that the Council did not currently keep a register of its adapted properties. Also, there was no register of those who had requested adaptations. The Group felt that having such registers would assist the Council in making the best use of its stock, and potentially save resources by matching the features of an already adapted property to the needs of applicants wherever this was possible.

The Group had also heard that occupational therapist functions were currently split between the Neighbourhoods directorate – having one Occupational Therapist and Adult Social Care – with a team of seven Occupational Therapists. This had the propensity to create a backlog of cases when the single therapist in Neighbourhoods was out of the office. It was therefore felt that the bringing together of all of the therapists in to one team would reduce the single person dependency placed upon the single therapist in Neighbourhoods and expanding the capacity of the function.

Officers had also reported to the Working Group that managing applicants' expectations could often be challenging. The Group felt that a case management approach, whereby the applicant has a single point of contact to advise them on the process, discuss the options available to them to meet their particular needs and manage their expectations, would be beneficial.

The Board noted that the review was not yet complete and would be placed for consideration on the work programme of the appropriate scrutiny board in 2017/2018.

Resolved:-

- (1) that the Interim Director-Neighbourhoods be requested to create a register of previously adapted Council properties to assist the Council in making best use of its housing stock and managing demand for adaptations;
- (2) that the Interim Director-Neighbourhoods be requested to create a register of Council tenants who have applied for adaptations to their property, to be used in connection with the register of adapted properties referred to in (1) above, to make best use of the Council's housing stock by matching resources to need where possible;

- (3) that the Executive Director Adult Social Care, Health and Wellbeing and the Interim Director Neighbourhoods be asked to review staffing structures to bring together all posts of Occupational Therapist in to one team;
- (4) that the Executive Director-Adult Social Care, Health and Wellbeing and the Interim Director–Neighbourhoods be asked to trial a case management approach to support applicants through the process of applying for aids and adaptations.

(Meeting ended at 3.25pm)

Contact Officer: Stephnie Hancock Democratic Services Unit 0121 569 3189



Health and Adult Social Care Scrutiny Board

20 June, 2017

Re-Establishment of Joint Health Scrutiny Arrangements with Birmingham City Council

1. Summary Statement

- 1.1 Within its terms of reference the Scrutiny Board has the powers of overview and scrutiny in relation to all functions of the Council, as contained in the National Health Service Act 2006 and regulations and directions made under that act. It also has the powers of overview and scrutiny in relation to functions of the Council as contained in regulations and directions made under the Health and Social Care Act 2001, and the Health and Social Care Act, 2012.
- 1.2 Joint health scrutiny arrangements with Birmingham City Council have been re-established annually since the 2004/05 Municipal Year. Arrangements for last year involved five representatives from each authority.
- 1.3 The joint scrutiny arrangements allow for both informal working arrangements and the establishment of a formal Committee. This enables Birmingham and Sandwell to jointly review and scrutinise matters relating to the planning, provision and operation of health services in the area affecting both local authorities.
- 1.4 Issues ongoing or still to be the subject of joint health scrutiny (either on an informal or potentially formal basis) with Birmingham City Council include:-
 - Development of the Midland Metropolitan Hospital and any substantial variations arising from service reconfigurations;
 - A watching brief on any issues relating to service provision within the Sandwell and West Birmingham Hospital Trust area;
 - The implementation of the Black Country Sustainability and Transformation Plan and any substantial variations arising.
 - Consultation on the medicines available by prescription.

1.5 The Health and Adult Social Care Scrutiny Board is requested to consider the appointment of five members for joint health scrutiny working with Birmingham City Council during 2017/18, both on an informal basis and as a joint committee, if required.

Further details are attached for information.

2. Recommendation

That arrangements for joint health scrutiny working with Birmingham City Council be re-established for 2017/2018 and that the Board appoints five members to the Joint Health Overview and Scrutiny Committee.

Darren Carter Executive Director-Resources

Contact Officer

Stephnie Hancock Scrutiny Officer 0121 569 3189

3. Strategic Resource Implications

The Guidance on Overview and Scrutiny of Health issued by the Department of Health advocates that local authorities participating in joint committees should share the cost and resource implications of working together. The work generated by joint working is absorbed within existing resources.

4. Legal and Statutory Implications

The purpose of the arrangements proposed in this report is to ensure that the Council efficiently executes its responsibilities with regard to scrutiny of the health service as contained within:-

The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002

Directions to Local Authorities (Overview and Scrutiny Committees Health Scrutiny Functions) dated 17 July 2003

The Guidance on Overview and Scrutiny of Health issued by the Department of Health dated July 2003

The National Health Service Act 2006 and regulations and directions made under that Act

The Health and Social Care Act 2012.

5. Implications for the Council's Scorecard Priorities

The Board works across health and adult social care so is able to contribute to a wide variety of scorecard priorities. In particular the following:-

Sick people need to reach GPs and other health services quickly. We will join up NHS health and council social services so that people benefit from the best possible care.

We will continue to give choice and control over their lives to those with long-term disabling conditions, the frail and elderly and people with mental health needs. This means:

- encouraging them to use services so they can live independently (rather than go into hospital or a care home);
- supporting people who need to remain in their homes; and
- 'personal care budgets' so people can buy services they need to live as they choose.

We value carers' contributions to helping people maintain health and independence. We will support carers so they remain in good health themselves and can get useful information and advice.

6. Background Details

6.1 NHS bodies have responsibilities to overview and scrutiny committees to consult on matters of substantial variation to services, this is in addition to the duty under S11 of the Health and Social Care Act 2001 to involve and consult patients and public. Experience has shown that there is a need for authorities to be ready to respond quickly to such consultations.

For this reason, the Council agreed to delegate its functions with regard to overview and scrutiny under the NHS Act 2006, the Health and Social Care Act 2001, the Health and Social Care Act 2012, and the regulations and directions arising therefrom to the Health and Adult Social Care Scrutiny Board.

- 6.2 Under health scrutiny legislation, local authorities must form joint committees to respond to NHS consultations on proposals for substantial variations in NHS services that may affect residents of more than one local authority area. In addition, local authorities may choose to join together proactively to form joint committees to consider health issues that cross boundaries. Where a joint committee has been established to consider a substantial variation, only that joint committee may make comments on the proposal and any associated consultation exercise. The joint committee cannot make recommendations to its respective authorities for consideration and approval.
- 6.3 In accordance with the provisions of the Local Government Act 2000 and specific guidance from the Secretary of State, the political balance requirement must be applied in respect of each joint committee which may be established. However, it is possible for political proportionality to be waived subject to the agreement of all parties involved.

Source Documents

The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 (S.I.2002 No. 3048);

Directions to Local Authorities (Overview and Scrutiny Committees Health Scrutiny Functions) dated 17 July, 2003;

The Guidance on Overview and Scrutiny of Health issued by the Department of Health dated July, 2003;

Council Minute Nos. 23/04 (6 January, 2004) & 63/10 (18 May 2010);

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Health and Adult Social Care Scrutiny Board

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- 1.2 Joint health scrutiny arrangements with Wolverhampton City Council have been re-established annually since the 2004/05 Municipal Year. Arrangements for last year involved five representatives from each authority.
- 1.3 The joint scrutiny arrangements allow for both informal working arrangements and the establishment of a formal Committee. This enables Wolverhampton and Sandwell to jointly review and scrutinise matters relating to the planning, provision and operation of health services in the area affecting both local authorities.
- 1.5 The Health and Adult Social Care Scrutiny Board is requested to consider the appointment of five members for joint health scrutiny working with Wolverhampton City Council during 2017/18, both on an informal basis and as a joint committee, if required.

Further details are attached for information.

2. Recommendation

That arrangements for joint health scrutiny working with City of Wolverhampton Council be re-established for 2017/2018 and that the Board appoints five members to the Joint Health Overview and Scrutiny Committee.

Darren Carter Executive Director-Resources

Contact Officer

Stephnie Hancock Scrutiny Officer 0121 569 3189

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