

**Health and Adult Social Care
Scrutiny Board**

Monday 19 March, 2018 at 5.30 pm
In Committee Room 1, at Sandwell Council House, Oldbury

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 22 January, 2018.
4. Sandwell and West Birmingham Clinical Commissioning Group - Treatment Policies Harmonisation Programme.
5. Aids and Adaptations Policy Review.
6. Update from the Chair and Vice-Chairs on their activities in relation to the Board's work programme.

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

Distribution:

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

Agenda prepared by Stephnie Hancock
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Minutes of the Health and Adult Social Care Scrutiny Board

**22nd January, 2018 at 5.30pm
at Sandwell Council House, Oldbury**

Present: Councillor E M Giles (Chair);
Councillor Ahmed (Vice-Chair);
Councillor Rouf (Vice-Chair);
Councillors Downing, Goult, Hevican, and Lloyd.

Apologies: Councillors Crompton and S Jones, and Shaeen.

1/18 **Minutes**

Resolved that the minutes of the meeting held on 11th November, 2017 be approved as a correct record subject to the inclusion of a summary of the update provided by Councillor Ahmed relating to his work on maintaining oversight of the Black Country Sustainability and Transformation Plan.

2/18 **Sandwell Safeguarding Adults Board Annual Report 2016/2017**

The Board received the Sandwell Safeguarding Adults Board (SSAB) Annual Report 2016/2017 and a presentation from the Chair and the Manager of the SSAB.

The Chair advised that the service user experience and feedback had been extremely important and that the Board had sought focus on prevention as well as abuse in the 'See something do something campaign'. The Manager advised that the Sub-Group contribution had been positive.

The Board was advised of several initiatives and work in the community to raise awareness of safeguarding adults and highlighted that the West Midlands Ambulance Service had a strong focus on Adult Safeguarding issues both on its website and in its work with PALS and service users. The Board was advised that the West Midlands Fire Service was raising awareness of fire safety and

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when doing so, asked residents how safe they feel, this work was appreciated and was good practice.

The presentation highlighted the following:

- What's new – The website, Appointment of Lay Member, Launch of the Hoarding Pathway;
- Partner Contributions Key highlights;
- Sub-Group Strategic Objectives 2016/17;
- Sub-Group Contributions Key Highlights;
- Safeguarding Performance Data;
- SSAB Priorities 2017/18.

From the comments and questions by Scrutiny Board Members during and after the presentation the following responses were made and issues highlighted:-

- The number of enquiries concluded had dropped from 1074 in 2015-16 to 444 in 2016-17. In 2016-17 there was greater management over sight of the referrals. The reduction was due to more robust processes in place and some changes to data recording.
- There were new procedures for recording and dealing with incidents such as missed medication, which previously would have warranted an enquiry. Currently there was a record of incidents which was monitored.
- The Board was concerned that enquiries related to Care Act 2014 part 1, Safeguarding adults at risk of abuse or neglect Section 42 (S42). Concerns had decreased considerably in a year and the Board was assured that although low now, the numbers of incidents would continue to be monitored.
- Colleagues and Members had been invited to carry out a peer review of Adult Social Care to invite external review and validation; feedback would be provided to the next Scrutiny Board meeting.
- The private sector Adult Safeguarding performance data was disappointing. There were several factors which had to be taken into account and that could distort the performance data such as:
 - anti-social hours in the NHS or Police and ambulance service out of hours services.
 - was it all or some of the services that had impact on the incident;
 - was it organisational abuse or the whole abuse of a person.

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- To address safeguarding issues there were a number of actions, such as:
 - the resident(s) could be removed;
 - staff could be suspended;
 - staff could be retrained;
 - the organisation could be reported to the regulators (CQC).
- Meetings were held every six weeks to consider providers where there were concerns. CQC could require improvements and there would be a partnership approach about how to implement them.
- There was confidence that the priorities as outlined in the presentation were being delivered.
- There was a suggestion that the Prevention Sub Group should include a representative from black and minority ethnic groups (BME) on its membership.

The Chair welcomed the progress being made and thanked the Chair and the Manager for the update and presentation of the Sandwell Safeguarding Adults Board Annual Report 2016/2017.

Resolved that the Sandwell Safeguarding Adults Board Annual Report 2016/2017 be received.

3/18

Strategy to Reduce Infant Mortality in Sandwell

The Specialty Registrar in Public Health provided a summary of the strategy which was developed by Sandwell and West Birmingham Clinical Commissioning Group (SWBCCG) and Sandwell Local Authority to address infant mortality and stillbirths within the Clinical Commissioning Group (CCG).

The strategy outlined current services which were designed to reduce infant mortality, suggested modification to current services and additional services which would reduce infant mortality in Sandwell. The Specialty Registrar in Public Health provided a presentation of the current position.

From the comments and questions by Scrutiny Board Members during and after the presentation the following responses were made and issues highlighted:-

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- The rates of still birth were higher in Birmingham compared to Sandwell. The still births were measured in rates not cases. Across the Clinical Commissioning Group (CCG) in 2017 there were 150 still births and 140 infant deaths.
- Smoking in pregnancy was the highest risk factor and linked to most deaths. There were fewer women smoking in pregnancy (20%) reduction, however still 750 women smoked throughout their pregnancy in 2017.
- The information relating to breast feeding was old data (2014-15) a more recent figure had been requested.
- The Equality data indicated that there were twice as many Pakistani and Caribbean deaths in Sandwell, but it was difficult to link the deaths directly to ethnicity or age of mother. It was more likely to be linked to other factors as well.
- There was a need to try to reduce the language barrier and to work to communicate and get messages through to new to UK and non-English speakers resident in Sandwell.
- Deprivation and child poverty were linked to infant deaths in Sandwell but could not be solely responsible. Deprivation was linked to a range of other factors such as smoking, breast feeding etc.
- Programmes were in place to specifically tackle issues such as smoking and breast feeding in Sandwell, and there was an awareness that certain areas would have worse infant mortality rates than others but that rates would fluctuate.
- Maternity services in neighbouring Authorities were often chosen by mothers, some chose Russell's Hall Hospital, Walsall Manor Hospital or New Cross Hospital. Further information was requested about out of Borough births to a future meeting.
- It was not known if vaping in pregnancy had an adverse impact on the infant, it was however considered to be safer than smoking in pregnancy.
- Some mothers were not truthful about their smoking habits. It was considered that screening tests on all mothers would take the stigma away from smoking in pregnancy.
- Many parents were aware of the impact of passive smoking near infants. Smoking in public places and in cars had been addressed but early years of the infants could be impacted if the parents smoke indoors.
- Breast feeding data did not demonstrate how long the breast feeding continued in early weeks and months following birth. Budding schemes were available and breast feeding had

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become more acceptable in public with special facilities and places being made available for nursing mothers.

- Life expectancy and the best possible start in life were priorities for Sandwell and it was anticipated that the effect of early intervention in maternity care would see generational improvements.

The Board welcomed the update and felt that progress had been made to deliver the strategy to reduce infant mortality in Sandwell

Resolved that the update be received and further information be submitted to a future meeting in relation to the number of out of Sandwell Borough births.

(Meeting ended at 7.00 pm)

Contact Officer: Deb Breedon Democratic Services Unit 0121 569 3896

Health and Adult Social Care Scrutiny Board

Apologies for Absence

The Board will receive any apologies for absence from the members of the Board.



Health and Adult Social Care Scrutiny Board

Declaration of Interests

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.

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD

Subject:	Sandwell and West Birmingham Clinical Commissioning Group - Treatment Policies Harmonisation Programme
Contribution towards Vision 2030:	 
Contact Officer(s):	Stephnie Hancock - Scrutiny Officer stephnie_hancock@sandwell.gov.uk

1 PURPOSE OF THE ITEM

To update the Board on Sandwell and West Birmingham Clinical Commissioning Group's programme to harmonise treatment policies in relation to procedures of lower clinical value.

2 RECOMMENDATION

That the Board considers and comments upon the presentation from Sandwell and West Birmingham Clinical Commissioning Group.

3 IMPLICATIONS FOR SANDWELL'S VISION

This programme links to the following ambitions set out in the Council's Vision 2030:-


Ambition 2 – Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for.

Ambition 10 – Sandwell now has a national reputation for getting things done, where all local partners are focused on what really matters in people's lives and communities.

Surjit Tour
Director – Monitoring Officer

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD

19 March 2018

Subject:	Aids and Adaptations Policy Review
Contribution towards Vision 2030:	
Contact Officer(s):	Stephnie Hancock - Scrutiny Officer stephnie_hancock@sandwell.gov.uk

1 PURPOSE OF THE ITEM

The Board will receive a presentation in relation to the Council's review of its policies on the provision of aids and adaptations.

2 RECOMMENDATION

That the Board considers and comments upon the information provided in the presentation.

3 IMPLICATIONS FOR SANDWELL'S VISION

The review of policies in relation to the provision of aids and adaptations supports the following ambitions in the Council's Vision 2030:-

Ambition 2 – Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for.


Ambition 5 – Our communities are built on mutual respect and taking care of each other, supported by all the agencies that ensure we feel safe and protected in our homes and local neighbourhoods.

Ambition 10 – Sandwell now has a national reputation for getting things done, where all local partners are focused on what really matters in people's lives and communities.

Surjit Tour
Director – Monitoring Officer

HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD

19 March 2018

Subject:	Update from, Chair and Vice-Chairs on their activities in relation to the Board's work programme
Contribution towards Vision 2030:	
Contact Officer(s):	Stephnie Hancock - Scrutiny Officer stephnie_hancock@sandwell.gov.uk

1 PURPOSE OF THE ITEM

The Board will receive a verbal report from the Chair and Vice-Chairs on the work they have carried out in relation to the Board's work programme.

2 RECOMMENDATION

That the Board considers and comments upon the activities reported.

3 IMPLICATIONS FOR SANDWELL'S VISION

The work of the Board supports the following ambitions in the Council's Vision 2030:-

Ambition 2 – Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for.

Ambition 5 – Our communities are built on mutual respect and taking care of each other, supported by all the agencies that ensure we feel safe and protected in our homes and local neighbourhoods.

Ambition 10 – Sandwell now has a national reputation for getting things done, where all local partners are focused on what really matters in people's lives and communities.

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Director – Monitoring Officer