

## HEALTH AND WELLBEING PARTNERSHIP

Thursday 30<sup>th</sup> June 2022

Remote meeting held via Zoom

### MINUTES, DECISIONS & ACTIONS

#### Present

|                               |                                                           |
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| CLlr Jan Cairns (JC) Chairman | Councillor, Royal Sutton Coldfield Town Council           |
| Olive O'Sullivan (OOS)        | CEO, Royal Sutton Coldfield Town Council (TC)             |
| Alan Eaton (AE)               | Sutton Coldfield United Reformed Church                   |
| Namrata Mukherjee (NM)        | Locality Partnership Manager, NHS B'ham and Solihull CCG  |
| Liz Parry (LP)                | Public Governor University Hospitals Birmingham, SC South |
| Rob Pocock (RP)               | Councillor, Royal Sutton Coldfield Town Council           |
| Alison Seabrooke              | Independent Advisor/Consultant                            |
| Tina Swani (TS)               | CEO, Sutton Coldfield Charitable Trust (SCCT)             |
| Tracey Quirk (TQ)             | Head of Operations, Compass Support                       |

#### Minutes

Jessica Johnson (JJ), Community Engagement Officer, Royal Sutton Coldfield Town Council

|   |                                                       | Decision / Action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Owner |
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| 1 | <b>Welcome and Introductions</b>                      | Apologies received from Peter Millington and Pippa Pollard.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |
| 2 | <b>Minutes of previous meeting</b>                    | JJ circulated Parish Nurse update to members.<br><br>JJ reported that she met with the Compassionate City Lead and will update the group during AOB.<br><br>JJ set up an Asset Mapping Task and Finish Group and will report to the group during the allocated agenda item.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |
| 3 | <b>Health and Wellbeing Progress Paper (attached)</b> | The Chairman welcomed AS to deliver a presentation on her Health and Wellbeing Progress Paper.<br><br>AS reported that she had expected this to be the final report, however many practical opportunities had arisen.<br><br>As of Friday 1 <sup>st</sup> July, B'ham and Solihull CCG will transfer their statutory functions and responsibilities to the ICB (Integrated Care Board). She added that she had been working closely with NM who has been forging links to different parts of the NHS and within BCC statutory services.<br><br>She added some RSCTC Cllr's are also BCC Cllr's which is positive as the aim is for the P'ship work to be broader than clinical health and include wider determinates of health, and the aims to reflect these and how. BCC |       |

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|  |  | <p>committees may help to forge these links more deeply, around housing and training for example.</p> <p>TS asked what the new entity would be called.</p> <p>AS replied that it is the BSol ICB. RP added that the ICS was the system, and the board is the Statutory Body for the NHS.</p> <p>AS reported that BSol ICB is split into six localities, five of which are across Birmingham. The NHS estimate population to be 200-250,000 for each Locality. SC is in the North locality with Erdington and SC (population of latter is around 95,000). This then goes into a Neighbourhood population of around 30 - 50,000. There are plans in the Autumn to set up a Neighbourhood Integration Team, looking at wrap around care and how services come together around a patient</p> <p>There is also a focus on the ICP, this body will undertake the operational duties. It a statutory committee and will include members of the ICB and local authorities. The TC has a strong case to be on the ICP.</p> <p>The North Locality had a workshop in April and on 11<sup>th</sup> July will be having a North Locality Forum. Members are non -delivery focused and mainly include members of BCC and the NHS.</p> <p>AS reported that she along with OOS and TS meet with Anna Hammond, CCG Director of Place, and NM on a monthly basis.</p> <p>AS commented that ICB board minutes and papers were useful to read, including slides on NHS pressures. This gives an insight into what the drivers are from an NHS perspective and how to mitigate these at a community level.</p> <p>LP asked whether board papers include information on pressures in social care system, such as delayed discharge, waiting lists.</p> <p>AS said she believed that discharges was covered in the board pack and would send over the link to these papers.</p> <p>LP commented that under partnership development, there were a few people missing including UHB, Ambulance Trust, Adult Social Care Providers and the 2<sup>nd</sup> PCN, Alliance of Sutton Practices.</p> <p>AS replied that she had the lead contact name for the 2<sup>nd</sup> PCN but would welcome an introduction.</p> <p>OOS commented that the P'ship previously had representation from the Ambulance Trust and that the TC have been notified of a staff change and she will pass on the contact details to AS, as it may be helpful to set up a meeting. She can also pass on a contact for the 2<sup>nd</sup> PCN. OOS added that AS had also made contact with the Head of Adult Social Care in B'ham and AS can feedback on these discussions.</p> |  |
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|  |  | <p>In regard to the TC being represented on the ICP, OOS commented that she would be able to discuss this with Anna Hammond.</p> <p>Through the North Locality Workshop, it was decided that Falls and Frailty would be the focus for SC and Mental Health would be the focus in Erdington with the age profile to be decided. NM will be setting up working groups for these priorities, people from both areas can join either workshop if they have an interest.</p> <p>The B'ham Health and Wellbeing Board Strategy was also now finalised, and it was important to take account of this strategy as BBC has statutory responsibility for Health and Wellbeing. Reflecting this in the position and progress papers helps to create a tangible connection. AS also set out the consultations that had taken place within SC.</p> <p>All of these had been summarised in tables around clinical priorities and holistic support. There were a lot of interdependencies, for example, if an individual is suffering with mental health, it may be that they also need support around debt advice and employment. It will also be a priority to check all priorities against equality, diversity and inclusion. As these priorities span across the town, and can be supported by the VCSE, it was also felt that a focus on capacity building, infrastructure support and resourcing should be considered, so that the VCSE was fully equipped to play its role within integrated care.</p> <p>LP commented that it would be helpful if a table could be created that has clinical priorities on one side, with holistic on the other with ticks that allows us to correlate which type of holistic support helps which clinical priority.</p> <p>AS replied that she had begun to construct this table, however it was becoming quite complicated. She added that it may be helpful to consider them under the categories in the B'ham H&amp;W Strategy: Getting the best start in life, Living and Working Well and Ageing and Dying well. This allows people to come together around age profiles and which clinical priorities fit in with each cohort.</p> <p>LP replied that when looking at holistic support, what bits of holistic support will help meet which clinical priority. For example, for falls and frailty will not have much connection with debt advice whereas exercise and mobility may. This may help show which areas had lots of areas of activity and where need may be. She added that domestic abuse may fit better under clinical priority rather than holistic support. AS said that she had originally placed domestic abuse in clinical priorities and would review this.</p> <p>LP asked whether we had figures from A&amp;E attendance of Sutton Residents at Good Hope. Once we begin to look at the clinical priorities it will be needed to measure whether the admissions are decreasing.</p> <p>The Chairman added that to reduce A&amp;E attendance, groups need to work closely with others, for example rapid response teams and adult social care to keep patients at home and manage conditions at home.</p> |  |
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|  |  | <p>AS responded that she and OOO would raise this with Anna Hammond next week.</p> <p>NM joined the meeting at 10:30am.</p> <p>AS suggested, she put together a grid for each of the headings to begin to hone in on discussion points in order for it to be manageable and to attract those who work in the area.</p> <p>AS invited JJ to report on the Community Hub Meeting.</p> <p>JJ reported that on Wednesday 19<sup>th</sup> June, the TC convened a Community Hubs meeting, focusing on SC venues with lots of activity, for different sections of the community. Some activity was directly delivered by the venues, other activities by organisations renting space.</p> <p>Attendees included local churches, community centres and cafes. The current delivery and offering were firstly discussed as many are already delivering health and wellbeing centred activities. Gaps and needs were also discussed and themes such as debt advice, mental health and employment support arose. JJ added that she relayed conversations that she and AS were having with health professionals who want to go out into the community and deliver their services in community venues. The focus would be on preventive care. For example, JJ reported that she had been to visit the Occupational Therapy team based at Whitton Lodge to see how this may be replicated in Sutton Coldfield adding that they are looking to get this service embedded in Sutton Coldfield as soon as possible. Adult Social Care services were also discussed, who are looking to run drop in within venues to raise their profile and engage residents.</p> <p>Venues are keen to be involved and she was waiting for attendees to look at their timetable and report back. She added that not all venues will be suitable for all opportunities.</p> <p>Mental Health support was a key theme that was apparent at the meeting with people feeling ill equipped to deal with complex needs. There was also a discussion around employment. Whilst there are more vacancies available people are finding it difficult to secure these positions. There was also an increased need for food banks with the need only rising. Those who use the food banks are now stopping to socialise with others.</p> <p>TS said that it was excellent to see this work moving forward. She asked whether the community hubs would be age specific? For example, focusing on the needs of children and families or elderly people.</p> <p>AS replied that most of them covered all ages. She suggested it would be useful to have a conversation with TS regarding resources and to see whether the needs match with the trust's social needs review. Furthermore, it may be useful for the TC, SCCT, BVSC and the NNS to meet to discuss where there was a collective need of the VCSE and what can be put in place to support that need.</p> |  |
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|   |                                                      | <p>TS replied that she would welcome that as an opportunity to bring the work together. TS added it would be useful to know the results from the 2021 census to work with a more update demographic data.</p> <p>AS replied that this is something that she will be able to gather as and when the data is released.</p> <p>LP suggested that there were other community venues that could be contacted to ensure coverage across all wards. AS said that this was their intention, however there is more to be done to engage with further venues and she would welcome suggestions.</p> <p>AS invited JJ to report on the Asset Mapping Task and Finish Group.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| 4 | <b>Update on Asset Mapping Task and Finish Group</b> | <p>JJ reported that on Tuesday 7<sup>th</sup> June, the TC convened an Asset Mapping Task and Finish Group meeting. Attendees included AS, NM, BVSC representatives, NNS, Our Place and BCC who all undertake asset mapping within SC.</p> <p>The first step was to assess what platforms and databases already exist and are being used by residents as well as professionals to sign post. This included Discover Sutton Coldfield, internal databases and websites such as Connect 2 Support. Some platforms are suited to specific audiences. She also noted that some databases are readily available, whereas some are held by organisations who have contact with particular groups of residents.</p> <p>She added that as there are many various sources of information it may be confusing for residents and professionals to know where to look for information. The aim of the meeting was to begin to bring all of the information together. In the short term, the group will be looking to put links within each website and platform to link them to each other.</p> <p>JJ reported that work is underway to assess where residents go to find out information regarding local support services. This may be through Google analytics, looking at searches as well as website hits. The group are due to meet again in July.</p> <p>AS added that the work on asset mapping will help practitioners who are regularly signposting to services. Awareness raising would need to follow.</p> <p>OOS added that the town council were already working with the local youth services to help map their activities on the Discover Sutton Coldfield website. Part of the website can be made accessible to external members and therefore organisations are able to update their own information.</p> <p>AS replied that this asset mapping proposal was a practical step, was not costly and would allow organisations to be responsible for their own information.</p> <p>The Chairman commented that this is a great foundation for future work.</p> |  |

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|   |                                              | <p>AS reported that due to COVID, NHS age related Health Checks had been suspended. She suggested that SC could maximize the familiarity of residents being invited to a venue for a health service such as at the town hall, for a health check. There could also be information available at the same time. AS added that she will discuss this further with NM.</p> <p>The Chairman noted that this would be counted under the Every Contact Counts agenda, maximizing opportunities to engage with residents.</p> <p>RP left the meeting at 10:56.</p> <p>JJ played a video from a PCN and partners, to stimulate discussion about how priorities could be approach.</p> <p>AE commented that they were already pressures on venues within SC. Many spaces are not available to groups due to cost and time. Services that may have been mapped are provided by volunteers who are also facing pressure.</p> <p>TS noted that she had shared the asset mapping of the social needs review with AS and JJ.</p> <p>The Chairman thanked AS for her work and her feedback to the group.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |
| 5 | <b>Update on North Locality Developments</b> | <p>NM reported that the first locality forum will take place on Monday 11<sup>th</sup> July. Attendees include OOS, PCN, BVSC, NNS and commissioners. Terms of Reference will be discussed and hopefully agreed.</p> <p>NM reported that she had met with Dr Rahul Dubb Sutton Coldfield Group Practice PCN (SCGP) to discuss the work they do to avoid hospital admissions and support provided to over 70's. She added that the CCG is looking to set up a Falls Prevention Group who will be looking at PSI (Postural Stability Instructor); she has recommended this be piloted in the North Locality, if possible.</p> <p>Following the first locality forum, the next steps will be to look at, for example task and finish groups and/or steering groups. It is proposed that there will be one locality forum meeting every 8 weeks.</p> <p>The Chairman asked whether NM has linked with the Good Hope Falls Team. NM responded that after speaking with UHB they suggested that once the ToR's and forum had been set up, they would then look to see who the representative on the group would be.</p> <p>The Chairman suggested this may be a good link as SCGP has a regular clinic within Good Hope Hospital and have a discharge policy in place; this was critical as there was high instances of falls within SC. NM replied that anticipatory care policy may also include elements of falls and frailty. The Chairman felt that it would be interesting to see what their CQC outcome was on Falls.</p> <p>NM added that Dr Rahul Dubbs is a part of the locality forum and that the Neighborhood Integration Teams will be part of the local PCNs.</p> |  |

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|   |                | <p>LP asked if the SC H&amp;WP'ship could be involved within the organisation chart that sits below the forum. NM replied the ToRs are currently in draft and she will bring this up with partners. She added that through OOS and AS there will be P'ship representation.</p> <p>AS added she had ensured she had included ICS/ NHS key terminology and information in her report. She will also be looking into the governance of the SC H&amp;WP'ship to make it more strategic to link in with the locality forum.</p> <p>TS asked whether information on causes of admissions was available. The Chairman added that the CCG will hold that information in order to assess against their commissioning targets. She added that the Falls Team will also know the local figures.</p> <p>NM was able to screen share information with the group. NM reported that the information showed the PCN breakdown of falls She suggested that she break it down to Sutton data, but hospital data may be more accurate and then share this with the P'ship.</p> <p><b>AS, JJ and NM will gather information on A&amp;E admissions and bring back to the P'ship.</b></p> | AE, JJ, NM.                   |
| 6 | Partner Update | <p>AE reported that URC would be hosting their first Health Fayre on Thursday 5<sup>th</sup> July and all were welcome. Sue Richards, URC Parish Nurse has now also passed her Parish Nurse accreditation.</p> <p><b>JJ to share flyer for health fayre with P'ship.</b></p> <p>TQ reported that Compass had been commissioned by the CCG to take part in research looking at why patients don't take up cardiac rehabilitation. The questionnaire can be completed online and on paper.</p> <p><b>TQ to share social media with JJ.</b></p> <p>AS reported that she had been sent some research regarding care needs. This can be circulated to the P'ship.</p> <p><b>JJ to share research opportunities with P'ship.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                      | <p>JJ</p> <p>TQ</p> <p>JJ</p> |
| 7 | AOB            | <p>JJ reported that following the last P'ship meeting she met with Emma from Compassionate Cities to discuss the work involved. She reported that her next step would be to attend the Birmingham Network and report back to the P'ship at the next meeting.</p> <p>JJ reported there is currently a BSol Dementia Strategy Consultation taking place for 2022-2027. Residents, group and professionals are encouraged to share their thoughts.</p> <p><b>JJ to share consultation with the P'ship.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | JJ                            |

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| 8 | <b>Date of Next Meeting</b> | <p>Thursday 8<sup>th</sup> September 2022.</p> <p>LP gave apologies for 8<sup>th</sup> September meeting.</p> |  |
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