

HEALTH AND WELLBEING PARTNERSHIP

Thursday 18th May 2023

Remote meeting held via Zoom

MINUTES, DECISIONS & ACTIONS

Present

Cllr Jan Cairns (JC) Chairman	Councillor, Royal Sutton Coldfield Town Council (TC)
Paul Campbell (PC)	Service Lead, Older People, Birmingham City Council
Sarah Chesters (SC)	Senior UEC Improvement & Transformation Manager, BSol ICS
Alan Eaton (AE)	Sutton Coldfield United Reformed Church
Pete Millington (PM)	Sutton Coldfield Neighbourhood Network Scheme (NNS)
Liz Parry (LP)	Public Governor University Hospitals Birmingham, SC South
Olive O'Sullivan (OOS)	CEO, Royal Sutton Coldfield Town Council
Indu Ravindranath (IR)	UEC System Improvement Manager – Care Homes, BSol ICS
Cllr Kath Scott (KS) Council	Councillor, Royal Sutton Coldfield Town Council and Birmingham City Council
Alison Seabrooke (AS)	Independent Advisor/Consultant
Arthur Steeds (AST)	Public Health Graduate, Birmingham City Council
Jo Tonkin (JT)	Interim Deputy Director of Public Health, Birmingham City Council
Eloise Watkin (EW)	Public Health Graduate, Birmingham City Council
Aruna Watson (AW) City Council	Public Health Programme Senior Officer (Older People), Birmingham City Council
Tracey Quirk (TQ)	Head of Operations, Compass Support

Minutes

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

		Decision / Action	Owner
1	Welcome and introductions	Apologies received from Pippa Pollard, Becky Bews, Sue Richards, Suzanne Cleary, Tina Swain, Shena Webb.	
2	Minutes and action points from previous meeting	JT reported that Public Health were in the process of re-procuring for and improving uptake of NHS Health Checks. JT added when data is updated and published it can be shared on the dashboard and discussed at the P'ship. LP asked where the dashboard will be hosted? JT replied that it will be added to the BCC Observatory.	

3	Paper (attached)	AS presented a paper on the priority of Falls and Frailty. The paper focused on the practical actions that can be taken as well as considering what is already and currently happening, identifying needs and gaps, and outlining next steps. In order to do so, the paper sets out plans for the Town Council to lead and facilitate an event in July. The event would bring together a range of health professionals and appropriate VCSE groups. This means that statutory organisations will be able to hear about the challenges faced ‘on the ground’ from frontline staff and volunteers and VCSE organisations can begin to understand where they fit into B’Sol ICS strategic framework. AS added that during the event the Town Council will deliver a background presentation on the work of the P’ship relevant to the event. Relevant staff from B’Sol ICS and BCC Public Health would also be asked to deliver a presentation to set out the wider context. Attendees will then go on to partake in rotating workshops. AS asked the P’ship if the aims and purpose as outlined in the paper, align with the needs of the P’ship? LP asked if the P’ship was communicating with the correct organisations in order to gain patient perspective and voice. The Chair commented the P’ship can act as co-ordinators to bring the right people together for the event, adding that there are PCN patient liaison teams who may be useful to contact. AS replied that representatives from the voluntary sector that attend should be able to accurately present the challenges being faced by service users, and she and JJ are in contact with the PCNs and so can find out about any Patient Participation Groups. PM replied that the NNS may be able to identify and communicate citizen feedback. He commended the inclusion of people recovering from a fall in the paper so that those at home were not forgotten about. JT commented that the event needed to be open to a wide range of stakeholders from both primary and secondary care as there are many involved in reducing frailty. JT added that it would also allow stakeholders to develop and grow their community connections. The Chair agreed, adding the event allows the NHS to engage with the VCSE sector and for the P’ship to look at ‘plugging’ any gaps identified. AS replied that she and JJ had created a full contact list and there are around 60 possible invitees from a range of organisations, many of whom have an operational or management decision making role. Appropriate representatives of the two PCNs will also be invited to the event, for example managers and falls leads. Representatives from the allied health	
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		professionals will also be invited as they are very much on the front line, in people's homes. The Chair asked if the emergency services were invited. JJ replied that contacts for the emergency services were on the list.	
4	Falls and Frailty - BSol ICS - Public Health	The Chair invited SC to deliver a presentation on the ICS work on the priority of Falls and Frailty. SC reported that the Falls Workstream will be embedded into BCHC to deliver, and IR will be leading on this. SC shared a falls governance structure that indicated whilst there was currently a pathway for falls in care homes there are significant gaps for neighborhood and community with no formal structure in place. SC added that they are looking into how to set up a pathway for community. SC presented data on a pilot scheme that delivered postural stability instruction (PSI). This was delivered to those over 80 for a 20-week period. The course looked at how to reduce falls but also how the individual can help themselves if they do. Responses from a 6-month post class telephone interview found: • 90% had not had another fall. • 99% did not have to call the ambulance following a fall. • 97% continued with the exercises learned with 91% undertaking 2 or more hours of exercise each week. A B'ham Falls Workstream was established in August 2022. Using UCR data the workstream will be completing a mapping exercise and a needs assessment. Additionally, looking at communications and marketing campaigns to create a single standardised approach. There had been funding bids submitted for a pilot of post fall management initiatives and strength and balance training to be delivered in care homes. OOS asked how the Sutton Coldfield locality could be used as a pilot area given its demographics. SC replied that IR will be hosting a workshop to develop the strategy and there is a need to identify governance and thus membership. OOS replied that the Town Council would request to partake in the workshop and be a member of the workstream. AS added that previously in the North Locality Workshops, due to Sutton Coldfield demographics, falls and frailty was identified as the priority. Whilst the area may not be an area of high deprivation there is a high risk of falls and practical actions could be implemented to help reduce hospital admissions. IR to send information to JJ regarding the Falls and Frailty workshop.	IR

	The chair commented that the community side was of importance to make sure you reach all residents particularly those who may be isolated in their homes. PM commented that social and wellbeing groups should also be a focus as they help create opportunity to help reduce falls by looking after other issues as well, taking a holistic approach. AE added that the current work seemed care home oriented and those at risk of falls are often in their own homes, looked after by family/friends and carers. SC replied that once the care home strand was working well and established, attention would divert to gaining funding to work with VCSE in community settings. JT commented that it was important for the Town Council to be involved in this work. AS commented that JJ can liaise with IR to share information and contacts that may be relevant to the work of falls and frailty. The Town Council has already mapped local services. It has also supported BCHC in the engagement around the older adult's hub. The Chair thanked SC for her presentation and invited PC to deliver an update on behalf of the BCC Public Health Older Adults Team. PC reported that a gap analysis and a review of the current system was being undertaken. The team were also undertaking a desktop literature review alongside this. PC reported that around 20% of those that fall sadly pass away within a year and 50% will no longer be able to live independently and therefore long-term planning is needed. One challenge identified was a lack of consistency across the city and lack of joined up working between partners and stakeholders. It is also felt there is a lack of marketing and communication about the services available with some users facing difficulty accessing information platforms. The team are beginning to explore the relationship between Cognitive Behavioral Therapy and falls with it looking to be helpful in raising individuals' confidence levels in their ability. Furthermore, a survey with residents is also being undertaken to assess their relationship with ageing and what it means to them. Focus groups will also be commissioned. AW reported that a review of self-compassion and self-care in menopausal women was being undertaken to assess a possible	
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		correlation with osteoporosis. Findings of the review could help women in the workplace, aiming to cultivate a culture of self-compassions and raise awareness of bone health. AS commented that the Town Council could help facilitate focus groups for the relationship with ageing survey, helping to make links with appropriate VCSE groups.	
5	Public Health Update	JT asked PC to give an update on the work of Compassionate Cities. PC reported that B'ham was the first city in the UK to be given the Compassionate Cities status. The charter worked towards aims to help normalise conversations around death and dying. Work is continuing to embed and move forward with the action plan. JJ commented that the Town Council were representatives on the Compassionate Cities Group. AE commented that the church was hosting bereavement training on Wednesday 7th June and to contact him for more details. JT reported on key updates on behalf of Public Health: • Working on a Children and Young People strategy and had recently received a rating of good from Ofsted. • B'ham Food Strategy had been signed off. • Working towards implementation of community profiles and subsequent actions to help tackle inequalities identified. • Undertaking a review of the health and community champions initiative and JT can update when the review is complete. JT to report on Health and Community Champion once the review is complete for the P'ship to consider how Sutton Coldfield can be involved.	JT
6	Update on Integrated Neighbourhood Teams	This item was postponed to the next meeting.	
7	Update on Dementia Friendly Communities	JJ reported that the Royal Town of Sutton Coldfield had been awarded Dementia Friendly Community Status by the Alzheimer's Society for 2023. The Town Council has been facilitating and convening the Royal Sutton Coldfield Dementia Friendly Communities Steering Group since September 2021. It is made up of representatives from local support services, faith groups, care homes and providers, residents, and the Town Council. The group has been working on a variety of projects within the 8 categories as set out by the Alzheimer's Society. JJ reported that it was currently Dementia Action Week and on Wednesday 17th May, the Town Council hosted a Dementia Awareness Afternoon at Sutton Coldfield United Reformed Church. It was well	

		attended by residents who were able to talk to a range of support services. Leaflets from the event will be added to the Town Council website for residents who were unable to attend to view. JJ commented that it was a well-deserved achievement for the town and thanked those who were involved. Adding that the group will continue to meet and work to make Sutton Coldfield more dementia friendly. The Chair thanked JJ for her work on Dementia Friendly Communities, adding it was a huge achievement.	
8	Partner Update	PC reported that BCC was currently running a BeHeard Survey on dementia where residents reflect on their lifestyle and behaviors in the form of a letter. PM reported that the NNS were hosting a networking and capacity building event on Wednesday 14th June. AE gave an update on the work at the church: • Hosting a bereavement training session on Wednesday 7th June • 'Sit down support' at Tuesday foodbank. Well supported with external agencies such as Adult Social Care and B'ham Mind attending to give support and signpost residents. • On Friday 9th June, in conjunction with Carers United, they will be hosting a Health Event. JJ to share around the BeHeard link, NNS event post and the Health Event poster with the P'ship.	JJ
9	AOB	None.	
10	Date of next meeting	Thursday 13 th July 2023	