

Minutes of the Public Health Select Committee

Monday 31st July, 2023 at 6.00 pm
At Saltwells Education Development Centre, Bowling Green
Road, Netherton

Present:

Councillor J Clinton (Chair)
Councillor R Collins (Vice-Chair)
Councillors M Evans, M Hanif, D Harley, P Lowe, E Taylor and K Westwood; J Griffiths (Co-opted Member)

Dudley MBC Officers:

M Abuaffan (Acting Director of Public Health and Wellbeing), J Pritchard (Public Health Manager) (Directorate of Public Health and Wellbeing); J Scobie (Assistant Team Manager – Waste, Fleet and Licensing), Leigh Whitehouse (Street Scene Group Manager) (Directorate of Environment); and H Mills (Senior Democratic Services Officer) (Directorate of Finance and Legal).

Also in attendance:

Councillor I Bevan (Cabinet Member for Public Health)
Councillors D Corfield (Cabinet Member for Highways and Environmental Services) (for Agenda item no. 6)
Councillor D Borley (Invitee as Ward Councillor for Lye and Stourbridge North) (for Agenda Item no. 6)
P Gass – Dudley Integrated Health and Care NHS Trust (for Agenda Item no. 6)
D Howells – Black Country Healthcare NHS Foundation Trust (for Agenda Item no. 7)
N Bucktin – Black Country Integrated Care Board (for Agenda Item no.8)
Together with Councillor J Foster and 3 members of the public.

1 **Apologies for Absence**

Apologies for absence from the meeting were submitted on behalf of Councillors M Dudley and W Little.

2 **Appointment of Substitute Member**

No substitute members were appointed for this meeting.

3 **Declaration of Interest**

Councillor R Collins declared a non-pecuniary interest in relation to agenda item no. 7 – NHS Quality Accounts, as a participant in the Research and Innovation activities.

Councillor P Lowe declared a non-pecuniary interest due to his current employment and being an active UNITE Trade Union Member.

Councillor K Westwood declared a non-pecuniary interest as an employee at Dudley Group NHS Foundation Trust.

Councillor I Bevan declared a non-pecuniary interest as an employee at Dudley Group NHS Foundation Trust.

Councillor E Taylor declared a non-pecuniary interest as her daughter was employed by Dudley Group NHS Foundation Trust.

4 **Public Forum**

Councillor J Foster, on behalf of constituents, raised questions in relation to High Oak Surgery, in respect of why Pensnett constituents were being denied an appropriate Healthcare Service, the amount of remuneration paid to a part-time GP and Locum GP's and what the current registration status was for High Oak Surgery at Brierley Hill Health and Social Care Centre, as it did not appear to be registered with the Care Quality Commission (CQC).

The Chair confirmed that apologies had been received from representatives of Dudley Integrated Health and Care NHS Trust (DIHC), and therefore requested that questions be submitted in writing, so that a written response from the DIHC could be arranged.

A member of the public raised concerns with regards to the lack of funding and support provided to the Lye area. The gentleman stated that he was a member of the Lye Community High Street Clean Campaign, who volunteered approximately 25 hours per week to clean the High Street and reported that he collected on average around 150 bags of rubbish per week. He expressed concerns with regards to the lack of environmental health visits to food premises within the High Street, particularly as there were known to be rat infestations within the area and the lack of enforcement with regards to the implemented No Alcohol Zone restrictions. He also raised concerns with regards to unfit properties located within the High Street and Vicarage Road which were dilapidated and the number of premises which appeared to house more people than it was designed for or safe to do so and it was questioned why these properties were not checked or inspected. He confirmed that several issues had previously been raised through Dudley Council Plus and local Ward Councillors, but to no avail.

The Acting Director of Public Health assured the Select Committee that food inspections were conducted in accordance with Food Standards Agency guidelines. Any concerns or complaints in relation to specific premises should be reported to Dudley Council Plus, which would be responded to immediately.

The Chair stressed that the remit of the Select Committee was in relation to Public Health functions, and that Street Care issues did not fall within the remit of this Committee, however endeavoured to ensure that all concerns were portrayed to the relevant Directorates.

The three Ward Councillors for Lye and Stourbridge North unanimously concurred with the comments raised by the gentleman, however stressed that they were all active Members within the community and were willing to work collectively and collaboratively with the residents to try to resolve ongoing issues.

5 **Programme of Meetings and Business Items for 2023/24**

Members of the Committee considered the programme of meetings and potential items of business for the Public Health Select Committee during 2023/24.

In considering the suggested items of business and taking into account the comments made during the Public Forum agenda item, Members were of the view that an update on Life in Lye should be a standing item for future meetings.

In referring to paragraph 9 of the report submitted, Councillor P Lowe commented on the proposed consequential updates to the Council's Overview and Scrutiny arrangements and emphasised the importance in ensuring that the current call-in and scrutiny arrangements remained, in that individual Select Committees be responsible for the scrutiny of any call-ins and budgetary implications relevant to their specific service area/Directorate. It was recognised however that the scrutiny of Borough wide issues should be undertaken by the Overview and Scrutiny Committee.

Resolved

- (1) That the programme of meetings for 2023/24, be noted.
- (2) That subject to the comments referred to above, the business items as outlined in paragraph 4 of the report submitted, be noted and agreed.
- (3) That the Overview and Scrutiny Committee be recommended to continue with the existing arrangements for call-in and that the Medium-Term Financial Strategy report continue to be submitted to individual Select Committees for scrutiny.
- (4) That the Lead for Law and Governance, in consultation with the Chair and Vice-Chair, be authorised to make all necessary arrangements to enable the Select Committee to undertake its work during the 2023/24 municipal year.

- (5) That, subject to any necessary amendments as a result of resolution 3, the draft terms of reference for the Select Committee, as set out in Appendix 1 of the report submitted, be noted.
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6 **The Life in Lye Programme**

Members considered a report of the Acting Director of Public Health and Wellbeing providing an overview of the 'Life in Lye' programme and its approach to improving community cohesion and reducing health inequalities in Lye through a system-wide, place-based approach.

In presenting the report, the Acting Director of Public Health and Wellbeing commented on the different approach that was being taken for Lye and the challenges faced around community cohesion and safety.

J Pritchard (Public Health Manager) outlined the challenges in Lye, together with the features different communities in Lye had in common. It was stated that prior to the Pandemic, some community insight had been gathered through the 'Stories in Lye' project and that partners had previously met to share work updates and issues through the Lye Community Cohesion, Health and Engagement Group. Post pandemic, a wider group of partners had come together to consider how they could collaborate and utilise resources more effectively and efficiently to achieve better outcomes for the people living in Lye, which had resulted in the establishment of the 'Life in Lye' programme.

Members were advised that funding for the initiative had been received from the Integrated Care Board (ICB) and the Police and Crime Commissioner (PCC) and a core group had been convened. An asset-based approach would focus on values, principles and ways of thinking and would provide support to the community to build on their own strengths to increase resilience and reduce service dependency.

It was recognised that it would be a long-term process to mobilise a community that was disengaged, and it was important to listen and understand the perspectives of all communities.

The year one scope for the programme was referred to, which it was indicated would focus on health inequalities and community cohesion. The ways in which this would be achieved were also outlined and it was reported that progress was reported on a quarterly basis to the ICB and PCC.

Arising from the presentation of the report, Members asked questions, made comments and responses were provided where necessary as follows:-

- a) In response to a question raised by Councillor R Collins with regards to what quick fixes could be implemented immediately to encourage communities to get involved, J Pritchard (Public Health Manager) advised that some initiatives were already in operation, namely litter picks and community walks. Listening events were taking place to establish what the community aspirations were and how these could be progressed by the community with support. However, building trust and relationships with the community would take time and some of the complex issues would not be resolved overnight.
- b) Arising from a comment made by the Chair, J Pritchard (Public Health Manager) confirmed that the Lye Action Group that was previously established by the Chief Executive was different to the Life in Lye Core Group, however regular updates on work through the programme were provided via email to the Head of Chief Executives Office.
- c) Councillor E Taylor commented on the proposals to change the community's mindset, however emphasised the importance of ensuring existing resources were used effectively, in particular ensuring that Closed Circuit Television (CCTV) was fully operational and not obstructed to help identify and penalise acts of anti-social behaviour and fly-tipping. The need for enforcement by the Local Authority and West Midlands Police was also emphasised.
- d) In response to a comment made in relation to the need for all Council Directorates to work collaboratively to address issues within Lye, J Pritchard (Public Health Manager) confirmed that collaboration across Council Directorates and external partners was a core feature of the programme and was facilitated through a 'Welcome to Lye' network, which had met for the first time on 21st July, 2023 and which was attended by over 40 stakeholders.

- e) Members recognised the difficulties experienced in engaging with different communities and how the issues in Lye also had a negative impact on neighbouring Wards. Officers emphasised that expectations would need to be managed as issues would not be resolved quickly and it would take a significant amount of time to engage all communities. It was commented that similar programmes were implemented and had worked successfully in Birmingham and other areas of the Country, although it had taken some time for benefits to be evident.
- f) Councillor P Lowe commented positively on the report and model approach being used and suggested if successful could be transferred to other areas of deprivation and poverty within the Borough. However, it was considered that significant investment would be necessary to continue to make a positive impact and it was important to operate a twinned approach of cheap quick wins, together with long-term projects. The exceptional work undertaken by Public Health in changing mindsets and early intervention was recognised, however it was vital that all health partners and senior leadership were all on board with the project.
- g) Councillor M Hanif also welcomed the report and the many initiatives that were already in place, however considered that the year one scope did not tackle the direct issues with regards to fly tipping and the significant costs that were incurred by the Local Authority as a result of clearing the waste. It was considered vital that all Directorates were involved to ensure issues were addressed. It was commented that numerous requests had been made for CCTV data to be provided but to no avail. He also questioned whether and where funding for the project would be obtained after March 2024. In responding, J Pritchard (Public Health Manager) confirmed that alternative funding avenues were actively being pursued.

- h) In referring to fly tipping issues, the Cabinet Member for Highways and Environmental Services provided data for the Lye area from the beginning of 2023 and it was stated that there had been 45 fly tipping incidents, with 8 fines issued; 155 fines had been issued for littering, with notification of the fines published in the local newspaper. The Cabinet Member also confirmed that the issues previously experienced with the Councillor Contact application were being reviewed by the Cabinet Member for Corporate Strategy and all backlog issues were proactively being addressed. Moving forward it was the intention to provide updates on a monthly basis to all Councillors, which would also be published in the public domain of all works completed by the Street Care teams.
- i) Councillor R Collins referred to Appendix 3 of the report submitted, in particular the poor response by residents to the leafletting request that cars are moved to enable a deep cleanse and suggested that more decisive action was required to ensure effective cleansing was accomplished. In response, the Cabinet Member for Highways and Environmental Health commented that as part of the Phases 2 Environmental Health Directorate restructure a different way of working would be operated which could support this action.
- j) In referring to complaints raised by Members with regards to tree branches obstructing CCTV cameras within the Lye area, the Cabinet Member for Highways and Environmental Health agreed to pursue this matter following the meeting.
- k) Arising from a question raised by Councillor E Taylor with regards to how fly tipping incidents were reported, it was stated that a small proportion were from public reporting, however the majority were identified via CCTV or patrol. It was further stated that photographic footage of fly tipping culprits were published on Dudley's You've Been Shamed webpage, which it was suggested should also be circulated to Ward Councillors for information and possible identification.

Following deliberations, the Acting Director of Public Health and Wellbeing concurred that quick wins would inspire residents and agreed to pursue the matter further to identify suitable quick win actions, however emphasised that quick wins would not be sustainable unless communities were engaged and supported to change behaviours in the long term.

Resolved

- (1) That the report and activity that had already taken place with regards to Life in Lye and the alignment with the Council Plan, Health and Wellbeing Board Strategy and the Forging the Future Dudley Borough Vision, be received and noted.
- (2) That the requirement for Public Health to submit quarterly reports to the Integrated Care Board (ICB) and the Police and Crime Commissioner (PCC) on activity in line with the agreed funding proposals, be noted.
- (3) That the Acting Director of Public Health and Wellbeing pursue a twinned approach of quick fix options, together with long-term projects.
- (4) That issues raised with regards to fly-tipping, street cleansing and houses in multiple occupation, which fall outside of the remit for Public Health Select Committee, be referred to the appropriate Directorate.

7 **National Health Service (NHS) Quality Accounts – Black Country Healthcare Trust**

The Committee considered the published Quality Accounts of the Black Country Healthcare NHS Foundation Trust for 2022/23, including priorities set out for their services for the forthcoming year.

Following the presentation of the report by D Howells – Chief Nursing Officer, Members made comments and responses were provided were necessary as follows:-

- a) Members commented on the complexity of the report and the need for this to be amended to reflect the audience in which it was intended. D Howells (Black Country Healthcare NHS Foundation Trust) concurred with the comments, however advised that the structure of the report was set nationally.

- b) In response to Councillor E Taylor's comments with regards to violence experienced by staff and what measures were being taken to abate violence in the workplace, D Howells (Black Country Healthcare NHS Foundation Trust) stated that following implementation of the Violence and Aggression Strategy Group and the additional training provided to staff, as well as mitigation strategies put in place, violence and aggression in the workplace had reduced slightly. Measures continued to be implemented to improve staff wellbeing following an incident of violence, with a follow-up meeting held with a Director level member of staff and wellbeing support offered.
- c) Councillor D Corfield commented on the lack of Mental Health intervention for the younger cohort, in particular the 8 to 21-year-old age bracket. He also commented that local charity support, namely The What Centre, was not appropriately utilised. In response, D Howells commented that the Children and Young Person Strategy was currently being updated and may be an area of interest for further scrutiny at a future meeting. A written response with regards to why resources at The What Centre were not utilised would be provided following meeting.

Resolved

- (1) That the Quality Accounts of the Black Country Healthcare NHS Foundation Trust for 2022/23 and the priorities set out for the service for the forthcoming year be received and noted.
 - (2) That D Howells – Chief Nursing Officer provide a written response with regards to the utilisation of local charities, namely The What Centre, to assist with providing mental health support to young people.
 - (3) That a further report be submitted to a future meeting, a date of which to be confirmed, in relation to Children and Young People's Mental Health.
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8 **Development of Dudley's Integrated Model of Health and Care**

A report of the Dudley Managing Director – Black Country Integrated Care Board was submitted to advise the Committee on the progress in relation to the development of an integrated model of health and care for the people of Dudley.

In presenting the report, the Dudley Managing Director – Black Country Integrated Care Board referred to the cessation of the Integrated Care Provider procurement process in November 2022 and the review of Dudley Integrated Health and Care Trust (DIHC) as a result. The extensive work that had been undertaken to identify how services provided by ICP were referred to, together with the ongoing work to identify how services provided by DIHC would be provided in future.

Arising from the presentation, and in response to a comment made by Councillor P Lowe with regards to whether a special meeting of the Committee should be arranged to consider the impact to Dudley, the Dudley Managing Director – Black Country Integrated Care Board commented that work was currently ongoing and a report providing a clearer position of DIHC and the ICP was expected to be presented to the ICB in September. A further update was already programmed to be provided at the next meeting of the Select Committee in September.

In response to a question raised by Councillor M Hanif with regards to the excessive waiting time and 6 month delay for a young person to access the Early Years Speech and Language service, the Dudley Managing Director – Black Country Integrated Care Board agreed to report back on this matter, as he was not aware that the delay was that significant, although acknowledged that since the pandemic there had been a much higher demand for the service.

The Acting Director of Public Health and Wellbeing advised the Committee that Public Health Services that were provided by DIHC had now been put out to tender.

Resolved

- (1) That the current position in relation to the development and implementation of an integrated model of health and care for Dudley residents, be noted.

- (2) That the Dudley Managing Director – Black Country Integrated Care Board provide details of waiting times for young people accessing the Early Years Speech and Language service.
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9 **Update on High Oak Surgery**

As discussed during Agenda Item No. 4 - Public Forum, apologies had been received on behalf of representatives from Dudley Integrated Health and Care NHS Trust (DIHC). A written update had been circulated to Members of the Select Committee in advance of the meeting.

10 **Update from the Director of Public Health**

The Acting Director of Public Health and Wellbeing gave a verbal update on the Brockmoor and Pensnett Innovation Project and in doing so referred to the relocation of the High Oak surgery during the Covid pandemic. It was stated that Public Health had conducted a needs analysis and developed a cross party group to support the case of returning the surgery to the Ward.

It was stated that Brockmoor and Pensnett was the 2nd Ward in the Borough with the highest level of deprivation and that residents in that Ward were likely to live 9 years less than those in more affluent Wards in the Borough. It was also identified that Brockmoor and Pensnett had the highest level of obesity in children in England, which it was recognised would transpose into adulthood and the consequential impact this would have on system wide resources were outlined, together with other unmet needs identified.

The Acting Director of Public Health and Wellbeing advised that a system wide task and finish group had been established to try to reduce health inequalities, which would focus on three main aspects, namely, what professionals can do for communities, what professionals and communities can do together and what communities can do and an update on the progress made to date was provided. It was confirmed that the project group had secured 24 months support from the Connecting Health Community Initiative and a report had been submitted to the Economy Board asking for further support.

It was recognised that this approach was different to that being used in the Lye Community and should both be successful, the programmes would be adapted and implemented in other deprived Wards.

Arising from a question raised by Councillor R Collins with regards to whether Dudley would be the first Council to link obesity to poverty, the Acting Director of Public Health and Wellbeing confirmed that she believed that Dudley would be, although stressed that whilst quick wins could be implemented, it would take numerous years for there to be any evidence of tackling child obesity.

It was suggested by Councillor P Lowe that the Chair of the Public Health Select Committee should also be invited to attend future meetings of the Task and Finish groups.

Councillor P Lowe commented positively on the work being undertaken by Public Health to address inequalities, with limited resources and the need for this to be actively promoted and praised.

Resolved

That the verbal update be noted.

11 **Questions under Council Procedure Rule 11.8**

There were no questions to the Chair pursuant to Council Procedure Rule 11.8.

The meeting ended at 7.55 pm

CHAIR