

Public Health, Community Development and Equality Committee - MINUTES

Venue: Room 13, Education Centre,
Sandwell General Hospital

Date: 26th July 2019, 15:00-16:30

Members:

Prof. K Thomas (KT) Chair, Non-Executive Director
Mr R Samuda (RS) Chairman
Cllr W Zaffar (WZ) Non-Executive Director
Mr T Lewis (TL) Chief Executive
Mrs R Goodby (RG) Director of People & OD
Dr D Carruthers (DC) Medical Director
Mrs P Gardner (PG) Chief Nurse

In Attendance:

Ms C Rickards (CR) Trust Convenor
Ms R Stone (RS) Executive Assistant

Apologies:

Mrs R Wilkin (RW) Director of Communications

Minutes	Reference
1. Welcome and Introductions	Verbal
The Chair welcomed the members and those in attendance to the meeting. The Committee members provided an introduction for the purpose of the recording.	
2. Apologies and Declarations of Interest	Verbal
There were no declarations of interest noted. There was one apology, from Mrs R Wilkin.	
3. Minutes from the meeting held on 16 May 2019	PH (07/19) 001
The minutes of the meeting held on 16 May 2019 were accepted as a true and accurate record.	
4. Action log and matters arising from previous meetings	PH (07/19) 002
<p>The Committee reviewed the action list from previous meetings:</p> <ul style="list-style-type: none"> • <i>PH (05/19) 002 – RG to submit a Period Poverty Project summary to the Councils to highlight and promote their work.</i> <p>RG provided an update on the Period Poverty Project, which had been implemented for a couple of months:</p> <ul style="list-style-type: none"> ○ RG had been working with Sandwell Council and their Public Health Team on a collaboration with the Red Box Project. Two red boxes would be installed in the adolescent wards. ○ Would submit a joint proposal with Sandwell Council to become a Period Positive Town. ○ RG noted that they had an agreement with Neelam Heera to support the work she was undertaking in the Muslim and Sikh communities, and for Ms Heera to visit Colposcopy and retranslate some of their materials (with cultural sensitivity). TL queried if the Paediatric Ward was in the same position. RG noted that she would discuss that with Paediatrics. 	

TL noted where period positiveness naturally arose in their service delivery and what they could do to further that work and follow it through. It was noted to be particularly aware of those wards that naturally did not have dispensers, such as medicine.

- PH (05/19) 008 - TL to bring back progress report on interpreting to the meeting in January 2020.

TL noted that there would be a detailed discussion at the August CLE meeting.

- PH (02/19) 004 - Consider inclusion of the early release (Muslim Council) in the relaunch proposition of the Site Practitioners and RCNPs.

TL stated that the action would need to be completed by the next committee meeting.

Action: RG to discuss with the Paediatric Ward their need for translation (by Neelam Heera) of the materials available in the Ward.

MATTERS FOR APPROVAL OR DISCUSSION

5. SBAF: Analysis of controls

PH (07/19) 003

RG noted that the SBAF item was around improving mental health and wellbeing across their workforce. She queried the Committee if they had any comment on the assurances of the SBAF item. The following discussion points were noted:

- Could be better at proactively identifying those becoming unwell/potential to become unwell.
- The feedback loop was not in place to gather feedback on activities to help with mental health wellness (yoga etc).
- Work related vs home related mental health. Decisions to be made on a case by case basis, not an overall general decision.
- Concerns were expressed around the incorrect “labelling” of staff with a potential mental health issue in ED, as there may be a stigma that could affect patient care, particularly patients with their own mental health issue.
- More secure and robust personnel confidential processes – possibly a factor in not reporting mental health. Need to review their processes and refresh their norms.
- Consideration to gaps in measures of mental wellbeing amongst staff. RG noted that the weconnect data would be useful in that area.

RG agreed to consider mitigations and plans to try and address the concerns raised.

6. Tackling the Interpreting ‘gap’

Presentation

The committee discussed the material gap between the volume of translation assistance used and the make-up of the population served. The intention is to develop an improvement proposition for 2020. Committee members noted the data and commented as follows:

- RG noted their responsibilities for mental health patients, especially on the weekend. RAID (mental health assessors) would only assess patients if there was an interpreter present. There were difficulties getting face-to-face interpreters on the weekend and at short notice. A risk-based assessment would need to be performed as to the engagement of Language Line or relatives for translation. The legal implications of sectioning a patient without proper interpretation was noted.
- It was suggested that this be discussed further at CLE in regard to interpreter availability and back-ups.
- TL noted that there were interpreting employment opportunities within the wider city and that could be explored.

7. Review of smoke free implementation and next steps

PH (07/19) 004

RG noted that the Trust had gone smoke free on 5 July and was progressing successfully. She noted the following:

- Fines issued – only a small amount issued.
- People following advice to move along.
- Lots of positive engagement with smokers.
- More signage to back-up verbal warnings. Some signs defaced. Need signs in different languages.
- Lots of press coverage, including the New York Times.
- Other Trusts requesting advice on toolkit/approach used.
- Lead to increased number of people smoking off-site. Bins provided just within the boundary line in which the Trust managed. Rain and snow conditions to be considered.
- Need to capture data on the amount of people that sign up to the NRT replacement/stopping smoking clinics.
- Would launch 'Quitter on the Month' in Heart Beat magazine.
- Less progress made on patient prescription, had modest data – patients opting out or going out to smoke. Need to identify the wards that were asking the patients and how to implement those processes in other wards.
- All NHS Trusts from March 2020 would have a smoke free roll out program – presents a commercial opportunity to package the Trust's toolkit.
- The staff were motivated about the program.
- Improvement of collateral awareness of who were lingering onsite.
- There was a landscaping project approaching which they had purchased a truck that could be used to enforce the Smoke Free Policy.
- Enforce the uniform cover-up in Winter (Oct/Nov).
- Noted to thank those people that went offsite to smoke and how to offer further assistance in quitting.
- Taking the time to promote/establish the program and offering the vaping alternative was the basis of the success.
- Promotion of the Smoke Free Policy in partner GP Clinics.

8. Public Health Plan: update on objectives

PH (07/19) 005

TL noted the Public Health Plan had 14 objectives of which the Committee had categorised as to where they believed they were positioned. Six areas where there was plan but no evidence of progress, and three areas where they need a coherent plan. The areas where progress had been made:

- Neo-natal mortality.
- High flu vaccination rates.
- Smoke Free.
- Green Champion – multiple data points; waste, energy etc.
 - Plastics – were in the fourth month of rolling out one plastic waste related initiative per month, for four months.
 - Water – use of tap water instead of water dispensers.

- Alcohol admissions and staff alcohol misuse:
 - Lack of understanding of alcohol units.
 - Alcohol tests available if staff member appeared to be under the influence.

Six areas to grip a little bit:

- Mental health – pre-emptive assessments.
- Vaccination – need an agreement with GP’s on the shared efforts for vaccinations. Uptake rates in Sandwell and West Birmingham was low.
- Making every contact count – every single contact completed, a penny to be allocated to that directorate’s budget. Unity would have the ability to track every conversation.
- Employment and procurement:
 - Employment – the Trust had a compelling employment offer.
 - Procurement – would need to redefine the postcodes of what was ‘local’.

Work to be done:

- Obesity:
 - Had collated 17 pages of ideas.
 - Sandwell Council were leading thinking across all West Midlands Councils. Lisa would present at the September committee meeting.
 - TL noted the Council’s document outlining the areas to have a handle on to be serious about combating obesity, including:
 - explaining obesity,
 - physical exercise and food choices,
 - wellbeing, and
 - opening the conversation.
 - Since the success of the Smoke Free Policy, there was more enthusiasm to introduce the Obesity Plan.
 - Suggestions for the Plan:
 - Change food in canteen.
 - Walking groups.
 - Provide Fitbits.
 - Active Wellbeing Society may be able to offer assistance.

TL noted that they would need to work a successful combination without targeting certain groups.

- Isolation – TL noted that Ruth Williams was progressing work, and the Trust was working with Sandwell’s Director of Public Health on data points for isolation in regard to making every contact count.

9. Overview of WRES, pay gap and DES actions for 19-20	PH (07/19) 006
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RG noted the Paper outlined the national reporting requirements:

- 1) Gender pay gap.
- 2) Workforce Race Equality Standard (WRES).
- 3) Workforce Disability Equality Standard (WDES) – first time submitting.
- 4) Stonewall Equality Index – the Trust came in 254th position and had an action plan in place.

RG advised that they no longer had a Head of Equality and Diversity and Estelle was working on driving it through the staff networks. RG advised that they did not have a Chair or Vice-Chair for the LGBT Staff Network and that elections would take place.

The Human Resources profile would be restructured to include equality and diversity to support the staff networks to drive the work forward and ensure they were providing the required reporting.

TL noted that they need to identify which of the actions were their key focus as the list was long.

RG noted that she would revisit the key metrics in the People Plan to identify if that was sufficient and the Committee review them. TL noted that they need to look closer at the data rather than the symptoms and improvements – to review the pay gap and report back to the Committee at the next meeting.

Action: RG to review the pay gap and report back to the Committee with her findings in September.

8. Trust-wide work on disposable plastics	Verbal
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As discussed at agenda item 8.

FOR INFORMATION/NOTING

9. Matters to raise to the Trust Board	Verbal
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The Committee identified the following matters to raise to the Trust Board:

- Detecting mental health problems in staff before they became an issue.
- Looking at areas where staff might be at high risk.
- Smoking and obesity.
- Refining their targets to ensure that they were effective in meeting them.

10. Meeting effectiveness feedback	Verbal
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Not discussed.

11. Any other business	Verbal
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No other business.

12. Details of Next Meeting

The next meeting will be held on 28 September, 15.00 pm in Room 13, the Education Centre, Sandwell General Hospital – the meeting will focus on Obesity.

Signed

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Date