

# Agenda

## Health and Adult Social Care Scrutiny Board

**Monday 5 September 2022 at 6.00 pm**  
**In Committee Room 2 - Sandwell Council House, Oldbury**

**1 Apologies for Absence**

**2 Declarations of Interest**

Members to declare any interests in matters to be discussed at the meeting.

**3 Minutes**

5 - 12

To confirm the minutes of the meeting held on 10 August 2022.

**4 Additional Items of Business**

To determine whether there are any additional items of business which, by reason of special circumstances, the Chair decides should be considered at the meeting as a matter of urgency.

**5 Re-development of Edward Street Hospital**

13 - 28

To consider and comment on the planned redevelopment of Edward Street Hospital, Sandwell.



- |   |   |         |
|---|---|---------|
| 6 | <b>Health and Wellbeing Strategy</b>  | 29 - 52 |
|   | To consider and comment on the draft Health and Wellbeing Board strategy content and design.                  |         |
| 7 | <b>West Midlands Ambulance Service - Development of Winter Plan 2022/23</b>                                   | 53 - 60 |
|   | To consider and comment on the development of West Midlands Ambulance Service (WMAS) Winter Plan for 2022/23. |         |
| 8 | <b>Scrutiny Action Tracker</b>  | 61 - 66 |
|   | To monitor progress on the Board's recommendations.   |         |
| 9 | <b>Work Programme and Cabinet Forward Plan</b>  | 67 - 70 |
|   | Standing item to consider the work programme of the Board.  |         |

**Kim Bromley-Derry CBE DL**  
**Managing Director Commissioner**  
Sandwell Council House  
Freeth Street  
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**Distribution**

Councillor E M Giles (Chair)  
Councillors H Bhullar, Akpoteni, Allcock, Choudhry, E A Giles, S Gill, Fisher, Melia, Randhawa and V Smith

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## Minutes of Health and Adult Social Care Scrutiny Board

**Wednesday 10 August 2022 at 6.00pm**  
**Committee Room 1, Sandwell Council House**

**Present:** Councillor E M Giles (Chair);  
Councillors Choudhry, E Giles, S Gill, Randhawa and Smith.

**Officers:** Lisa McNally (Director of Public Health);  
Alexia Farmer (Manager – Healthwatch Sandwell);  
Christine Anne Guest (Service Manager – Commissioning  
and Integration);  
Kevin Balchin (Interim Policy Officer).

### 28/22 **Apologies for Absence**

Apologies were received from Councillors Akpoteni, Allcock, Bhullar and Fisher.

### 29/22 **Declarations of Interest**

Councillor Smith declared a pecuniary interest in the matter referred to at Minute No. 32/22 (Adult Social Care Contributions Policy Consultation) in that she was a carer and could be directly affected by any changes to the Policy.

### 30/22 **Minutes**

**Resolved** that the minutes of the meeting held on 28 March 2022 are approved as a correct record.



## 31/22 Additional Items of Business

There were no additional items of business to consider.

[Having declared a pecuniary interest, Councillor Smith left the room during the consideration of this item.]

## 32/22 Adult Social Care Contributions Policy Consultation

The Board was consulted on proposed changes to the Adult Social Care (ASC) Contributions Policy and was asked to consider the equity issues within the models proposed for calculating non-residential care contributions and the methodology the public consultation.

On 18 May 2022 the Cabinet had given approval for public consultation to be undertaken on three alternative models (Minute No. 104/22 of the Cabinet refers). The revised policy would be effective from 1 January 2023.

The Board was informed that the existing Policy had been found to contain out of date references that conflicted with the Care Act 2014, the new state benefits framework and other regulations. Some aspects of the existing policy were also no longer consistent with recent case law and rulings by the Local Government Ombudsman.

Some of the aspects of current policy that were deemed inconsistent with the Care Act and case law included:-

- Joint financial assessment of couples: This was no longer permitted under the Care Act, therefore, in the consultation it was proposed to end this practice.
- Short-term (respite) care charges: The consultation proposed to base contributions on a financial assessment and the actual costs of the service, rather than a flat-rate fee, to account for people's individual circumstances and be compliant with the Care Act and Local Government Ombudsman rulings.



- Disability Related Expenditure (DRE): The consultation proposed amending the method of allowing people's DRE costs (a statutory requirement for non-residential services) to allow the full sum of any such costs against income, up to the total of an individual's disability benefits. This proposed change reflected recent rulings by the Local Government Ombudsman on types of expenses that should be considered.

The Board noted that Sandwell's current policy allowed people to retain 53% of their disposable income (if any), and based contributions only on the remaining 47%. In contrast, benchmarking with 27 other councils had identified that one based contributions on 75% of disposable income, one on 90%, and the remaining 25 on 100%.

The Board considered equity issues associated with the proposed models for calculating non-residential contributions. It was noted that non-residential services were a discretionary service and as such authorities had choice in how they charged for such services, providing that it did not discriminate against a given sub-set of clients with a protected characteristic.

The Board was presented with an assessment of the effects of each of the three proposed non-residential contributions models, based on a statistical sample of 195 non-residential clients. Some of the conclusions from this modelling were that:-

- All models were predicted to deliver a net increase of income of between £1.2-£1.4 million.
- All three models improved the position of people with Disability-Related Expenditure (DRE) costs, as these would no longer be set against the 'Sandwell Allowance', i.e. the revised models took account of DRE costs in full before any allowance was calculated.
- A significant group of people would face an increase in the contributions they would have to pay, which particularly affected people with a higher disposable income, which was often those of pensionable age.
- For some people the proposed models for charging contributions would be advantageous, notwithstanding the



overall increase, as their individual contribution would decrease due to the redistributive effects of the various models (particularly model 3). This was predicted to benefit people with disability related expenditure, lower disposable income and/or those of working age.

The following was noted in response to members' questions and comments:-

- The higher rate charged was normally disregarded when calculating non-residential care costs, unless the client received 24 hour care from the authority.
- An online calculator was available on the Contributions Consultation documents page of the Council website, which allowed people to calculate exactly how each of the three proposed models would affect them.
- The “minimum income guarantee” (MIG) was a minimum figure set by the government each year that everyone should be left with to live on after paying for their social care. There were a number of different MIG rates based on people's circumstances which meant there were disparities in MIG rates between various groups of service users.
- The number of days charged at flat rate for respite care (change from 56 to 28 days) was not part of the consultation but rather a clarification on amendments to be made in line with revised Adult Social Care and national policy.
- The consultation question on short-term (respite) care charges related to the method of calculating people's contributions. It had been proposed to base contributions on a financial assessment and the actual costs of care rather than a flat-rate fee that was used currently.

It was reported that the response rate to the public consultation, which had begun on 6 June 2022, had been very poor to date, with only 18 responses out of 3,000 people that could be affected. Direct communication had been sent to existing clients, all stakeholder groups such as voluntary organisations and partner statutory bodies; social media posts had published the consultation, an article had appeared in the June edition of the Adult Social Care staff update and also in the Sandwell Herald. It was acknowledged that the policy was a complex subject and



might present challenges in terms of engaging people in the consultation.

The consultation was due to close on 28 August 2022 and members and the therefore Board felt that more effort needed to be made to target those that would be affected.

**Resolved** that the Director of Adult Social Care urgently addresses the poor response rate to the consultation on the Adult Social Care (ASC) Contributions Policy thus far, to ensure that a statistically significant response rate is obtained, by promoting the consultation among the following groups and supporting those affected by the future changes to give meaningful responses:-

- faith networks
- councillors
- community champions network
- private care agencies.

[Cllr Choudhry left the meeting after consideration of this item.]

[Councillor Smith re-joined the meeting.]

33/22

## Joint Health Scrutiny Arrangements

The Board considered a report to re-establish Joint Health Scrutiny arrangements with Birmingham City Council.

Following changes to NHS boundaries in July 2022, members expressed an interest in exploring the establishment of a Black Country joint health scrutiny committee with Dudley, Walsall and Wolverhampton councils, to support the efficient and effective scrutiny of the delivery of services and outcomes of the Black Country Integrated Care System.

**Resolved: -**

- (1) that the Joint Health Scrutiny Committee arrangements for scrutiny of matters affecting the Sandwell and West



Birmingham area are re-established with Birmingham City Council;

- (2) that the following members of the Health and Adult Social Care Scrutiny Board be appointed to the Joint Health Overview and Scrutiny Committee with Birmingham City Council - Councillors Fisher, E M Giles, E Giles, S Gill and Smith;
- (3) that Director Law and Governance and Monitoring Officer approaches neighbouring Black Country authorities to explore the establishment of a Black Country Joint Health Overview and Scrutiny Committee.

### 34/22 **Scrutiny Action Tracker**

The Board noted an update on progress on previous actions and recommendations.

Members requested that outstanding actions be followed up as set out in the resolutions below.

#### **Resolved:-**

- (1) that officers be requested to ascertain whether representations have been made to the government in relation to the sustainability of funding for Community Diagnostic Centres (previously known as “hubs”);
- (2) that the resolutions of the Health and Adult Social Care Scrutiny Board on 4 October 2021 (Minute No. 33/21 refers) be re-affirmed and followed up with the Black Country Integrated Care System.

### 35/22 **Cabinet Forward Plan**

The Board noted the contents of the Cabinet Forward Plan.





It was agreed that two items on the cabinet forward plan be added to the work programme and pre-scrutinised by the Board – Adult Social Care (ASC) Direct Payments Policy and ASC Deferred Payments Policy.

36/22

## Work Programme 2022-2023

The Board considered its work programme for 2022/23.

The Directors of Public Health and Adult Social Care provided an overview of the roles and responsibilities of their respective directorates and the key challenges, that the Board may wish to add to its work programme in 2022-23.

It was acknowledged that, due to the impact of the covid-19 pandemic on key individuals' time, the Board's review into mental health services had been unable to proceed in 2021/22. In light of changes to the lead provider for mental health services in the borough, which took effect in July 2022, it was felt that time should be allowed for the new arrangements to embed before the review was progressed. However, representatives from the Black Country Healthcare NHS Foundation Trust would be asked to attend a future meeting to inform the Board of its plans for transforming services.

### Resolved:-

- (1) That the following items be included on the Board's 2022/23 work programme:-
  - Social isolation (Scrutiny Review)
  - Impact of social care charging cap
  - Intermediate Care
  - Health and Wellbeing Board Draft Strategy
  - Black Country Healthcare NHS Foundation Trust – the mental health, offer including social isolation prevention
  - Domestic Abuse Referrals.
  - Primary care access.



- (2) that a working group be established, comprising councillors E M Giles, E Giles, S Gill, Randhawa and Smith, to carry out a review into social isolation and that officers develop a draft scope for the review.

Meeting ended at 7.56pm

Contact: [democratic\\_services@sandwell.gov.uk](mailto:democratic_services@sandwell.gov.uk)





## Report to Health and Adult Social Care Scrutiny Board

**5 September 2022**

<b>Subject:</b>	Re-development of Edward Street Hospital
<b>Director:</b>	Marsha Foster Chief Executive Black Country Healthcare NHS Foundation Trust
<b>Contact:</b>	Judy McDonald Senior Clinical Lead Black Country Healthcare NHS Foundation Trust

### 1 Recommendation

To consider and comment on the planned redevelopment of Edward Street Hospital, Sandwell.


### 2 Reasons for recommendation

- 2.1 The Black Country Healthcare NHS Foundation Trust provides mental health services for older adults who live in Sandwell. This includes a range of community services, therapeutic and recovery services, outpatient appointments and two inpatient wards, all delivered from the Edward Street Hospital site.
- 2.2 Following almost £50m worth of investment as part of a national programme to eradicate dormitory wards (wards with shared sleeping arrangements), the Edward Street Hospital site will be refurbished and upgraded.
- 2.3. Plans include building an additional unit that will provide modern, en-suite accommodation for patients, and developing a therapies hub to support treatment and recovery.



- 2.4 Sandwell residents have been invited to provide feedback on the proposed refurbishment. The deadline for feedback is 30 September 2022.
- 2.5 This update will enable members to ask questions and scrutinise the plans and consider how benefits of this development to Sandwell residents can be maximised.

### 3 How does this deliver objectives of the Corporate Plan?

	<p><i>People live well and age well</i></p> <p>Health Scrutiny ensures that health matters affecting the population of Sandwell, including the delivery of healthcare by public bodies, are scrutinised by elected members.</p>
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### 4 Context and Key Issues

The redevelopment of Edward Street Hospital should lead to improved outcomes for older adult mental health services in Sandwell and should contribute to making a significant difference not only to our patient and staff environment, but also to the quality of care provided by Black Country Healthcare NHS Foundation Trust. The Committee is able to influence how this service will be run so that the benefit to Sandwell residents is maximised.

### 5 Appendices

Appendix 1 – Presentation – Re-development of Edward Street Hospital, Sandwell

### 6 Background Papers

None



# Edward Street Hospital refurbishment plans

Health and Adult Social Care  
Scrutiny Board, Sandwell



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# Investment in services

- Received almost £50m as part of national scheme to eradicate dormitory style (shared) accommodation
- Opportunity to look at how we maximise space and accommodation to help recovery
- Upgrade so patients have modern accommodation
- Pathway development over past few years has focused on enhancing community support and ensuring those in need have a bed available



Page 17  
**Visuals**



# About Edward Street Hospital

- Main base for older adult mental health services in Sandwell
- Has a range of services delivered on site:
  - Two older adult inpatient wards
  - Community mental health services for older people
  - Therapy and recovery services
  - Electro-convulsive therapy suite
  - Outpatient appointments





# Why change?

Page 10

- Accommodation is dated and there are no single rooms or en-suite facilities
- Current layout and accommodation is not dementia friendly
- Struggles to meet clinical standards – mixed gender, infection control, single bedrooms, accessibility etc.
- Eradicating dormitories will improve safety and the environment
- Layout is inflexible and can't provide the right type of space for patient care
- Highlighted as an area for improvement for Care Quality Commission



# Proposals

- Building of an additional unit where the two wards will move into that will have en-suite accommodation facilities
- A flexible therapy space will be created to support recovery
- An outside terrace area for patients, staff and visitors
- Refurbishment of other areas across the site





# Patient and staff moves

To maintain safety and comfort we will need to move staff and patients for the duration of the build

- Patients and staff on our wards will move to wards at Bushey Fields Hospital, Dudley (**January 2023**)
- Outpatient appointments will move to other suitable local sites within Sandwell – will give plenty of notice to service users (**October 2022**)
- Other community based staff will move to Jack Judge House in Oldbury

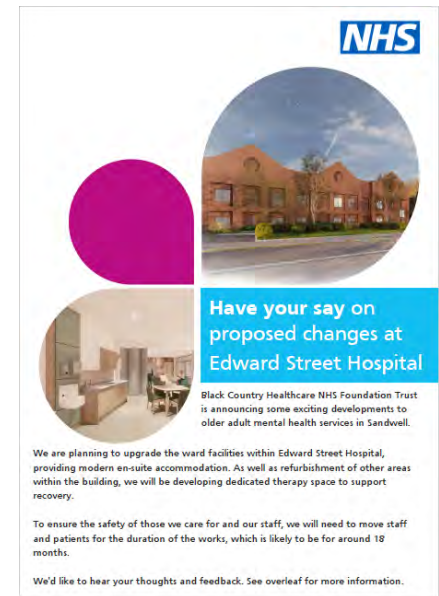


# Engagement approach

Page 22

We are committed to involving patients, carers, staff and partners in our plans

- Engagement exercise will run May – end September 2022
- Activities include:
  - Feedback gathering option
  - Regular staff briefing sessions
  - Public engagement events, mixture of in person and online
  - Website/social media campaign
  - Comms with partners i.e. voluntary, council



# Engagement plans – detail

Page 23

Activity	Audience	Timescales	Notes
Produce booklet, leaflets flyers posters	Patients/public	May	Leaflets and engagement document produced
Highlight in partner newsletters	Partners – public	On-going	Copy provided for engagement launch
Drop-in events	Patients, public	June/July	In person and virtual sessions
Briefing sessions	Staff	On-going	Sessions booked in
Governor briefings	BCH governors	On-going	Regular updates to our governors who represent patients, local community
Letter to MPs key councillors	MPs, key local councillors	March	Informing them of the plans and upcoming engagement



# Engagement plans cont.../

Page 24

Activity	Audience	Timescales	Notes
Social media posts	All audiences	On-going	Highlighting engagement exercise, events, etc.
Press release	All audiences	May, June, September	Highlighting engagement exercise and drop-in events
Website page	All audiences	On-going	Have developed feedback page and information on plans
1:1 meetings	Patients/carers	On-going	Inform them of plans and impacts
BCH stakeholder newsletter	Stakeholders	On-going	Regular updates to stakeholders



# Feedback themes

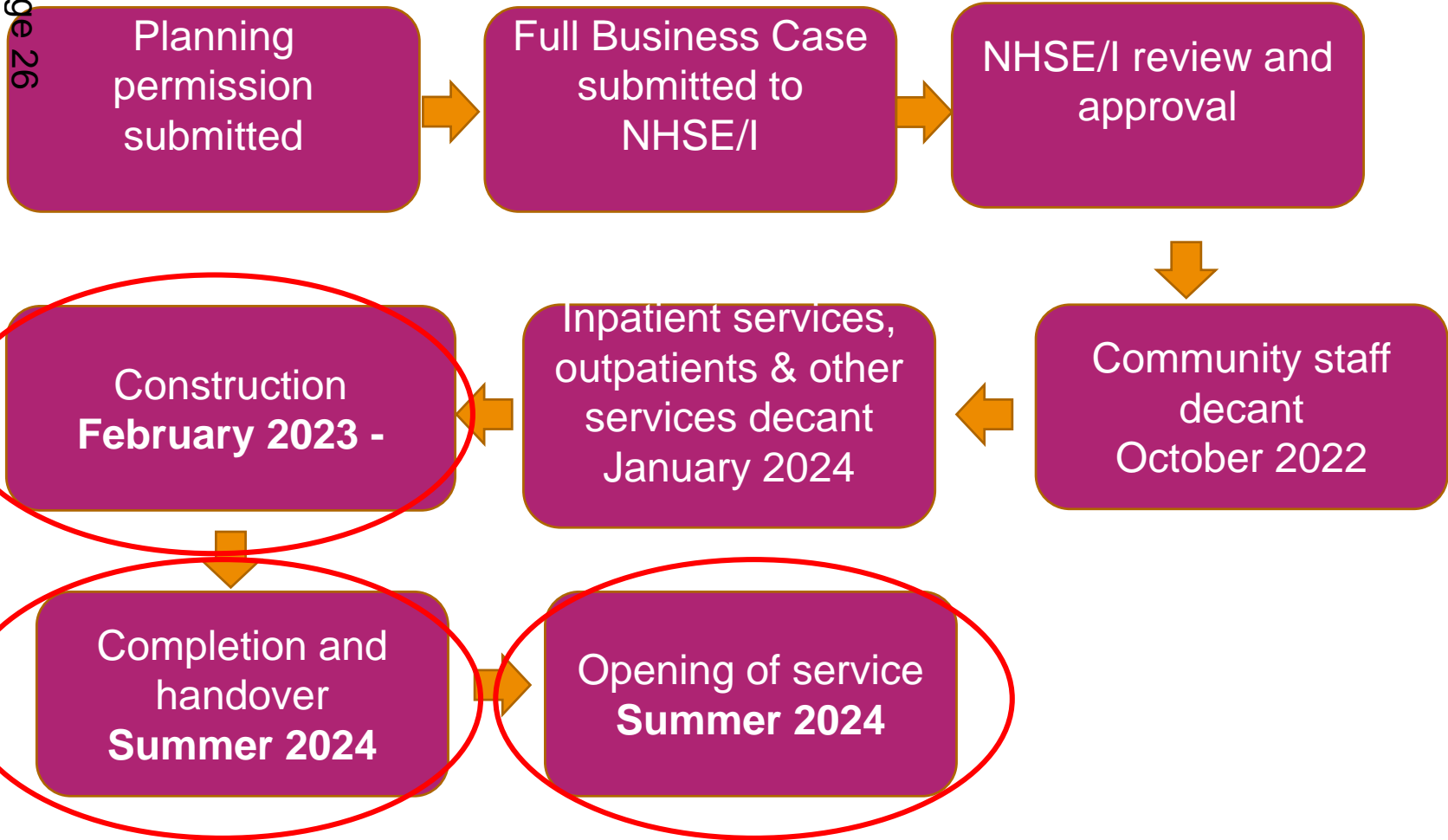
- Location for temporary services and how this may impact individuals
- Ensuring we take into consideration history of the building within design aspects of new build
- Making sure that the new build is dementia friendly

Engagement is on going until the end of September 2022.



# Timescales

Page 26



# Any questions?



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## Report to Health and Adult Social Care Scrutiny Board

5 September 2022

<b>Subject:</b>	Health and Wellbeing Strategy
<b>Director:</b>	Director of Public Health Lisa McNally
<b>Contact Officer:</b>	Director of Public Health, Lisa McNally, <a href="mailto:lisa_mcnally@Sandwell.gov.uk">lisa_mcnally@Sandwell.gov.uk</a>


### 1 Recommendations

- 1.1 That the board considers and comments upon the new joint Health and Wellbeing Strategy text document content and design cover examples.



### 2 Reasons for Recommendations

- 2.1 The previous Health and Wellbeing strategy from 2016 to 2020 is now out of date. The new strategy reflects system changes since then and is updated with current plans and projects. The strategy will now also cover the Sandwell Health and Social Care Partnership as well as the Sandwell Health and Wellbeing Board. It is important to have a current and up to date strategy based on the needs of the community for which it is there to help. Due to health inequalities locally, it is crucial that a relevant strategy is in place to guide future work projects and help Sandwell residents where and when they need support.

### 3 How does this deliver objectives of the Corporate Plan?

	<p>Best start in life for children and young people</p> <p>The Health and Wellbeing Strategy incorporates all parts of the life course. Giving examples of how children and young</p>
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	people can get involved with physical activity and learn about harmful choices such as drugs and alcohol we can equip them for the future to make healthier decisions.
	<p>People live well and age well</p> <p>The Health and Wellbeing strategy notes the reduced life expectancy and health of Sandwell residents. It provides recent examples of various projects that have improved health outcomes locally.</p>
	<p>Strong resilient communities</p> <p>By following the community-based approach, the Health and Wellbeing Strategy focusses on how Sandwell residents can help themselves and each other. By listening to the needs of the community and empowering them the get involved we can create more sustainable health improvement programmes that will benefit Sandwell resident's years down the line from now.</p>

## 4 Context and Key Issues

- 4.1 The strategy has been developed in line with the changing dynamic of the Health and Wellbeing Board. Keeping a focus on community involvement and putting Sandwell residents at the heart of our work. It is also reflective of the Sandwell Health and Social Care Partnership and the place-based partnership's approach to improving population health and wellbeing.
- 4.2 It brings together recent community project successes that have addressed the changing needs of Sandwell residents. Demonstrating the value of working with, not to our community.
- 4.3 Comments are invited from this Board before the strategy is considered at the next Health and Wellbeing Board on 21<sup>st</sup> September 2022. Once the final text version is complete and the choice of design has been made, the Health and Wellbeing Strategy will then be developed, complete with imagery and graphs where suggested in the notes.



## 5 Implications

<b>Resources:</b>	No implications at this stage
<b>Legal and Governance:</b>	The Health and Wellbeing Board is responsible for development of the joint Health and Wellbeing Strategy.
<b>Risk:</b>	No implications
<b>Equality:</b>	No implications at this stage
<b>Health and Wellbeing:</b>	The health and wellbeing of our communities is at the forefront of the strategy, ensuring that people's views and needs are listened to. The strategy outlines work that is done with and alongside communities in Sandwell rather than to them.
<b>Social Value</b>	No implications at this stage

## 6 Appendices

Appendix 1 – Health and Wellbeing Strategy document draft  
Appendix 2 – Health and Wellbeing Strategy design covers

## 7. Background Papers

None



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## Foreword

Include foreword here.

*“The power of community to create health is far greater than any physician, clinic or hospital.”*

Mark Hyman MD

## Section 1

### About Sandwell

#### Who are our people?

Sandwell is located within the heart of the West Midlands, comprising the six towns: Oldbury, Rowley Regis, Smethwick, Tipton, West Bromwich and Wednesbury. According to the latest population estimates from the Office of National Statistics, Sandwell has a population of around 341,900. Approximately 27% (93,200) of these are children and young people aged under 19, and 15% (49,700) are 65 and over.

Sandwell’s population size has increased by 11.0% over the last decade, from around 308,100 in 2011 to 341,900 in 2021. This is higher than the overall increase for England (6.6%) and reflects more rapid growth among children and working age adults, meaning that our population is ageing less quickly than in other parts of the country. Sandwell is also ethnically diverse, with 34% of residents from black and minority ethnic communities, the same as that of the West Midlands and higher than the regional England average of 20%.

#### Our place

As part of the Black Country, the borough has a proud industrial heritage. The local area’s economy was historically based on its rich coal and ironstone reserves, experiencing major industrial growth following the development of the canal network during the 18th century.

Sandwell has a unique position within the region of being ‘landlocked’ by other urban local authority areas, bordering with Birmingham, Wolverhampton, Dudley and Walsall. Despite the industrial environment and the challenges this brings, the borough has a wealth of parks and green spaces and has achieved 14 prestigious Green Flag awards.

Sandwell’s rich industrial heritage and cultural diversity are key strengths and community assets which can be developed through place-based approaches to improving the wider determinants of health. The six towns each have their own distinct cultures, identities and demographics despite common factors across the borough.

## Health inequalities

Sandwell is characterised by rich cultural diversity and vibrant communities but faces considerable socioeconomic challenges and health inequalities too.

Sandwell was ranked as the 8<sup>th</sup> most deprived Local Authority out of 317 in England (ONS Indices of Deprivation 2019). Life expectancy at birth in Sandwell is 76.1 years for males and 80.7 years for females compared to 79.4 for males and 83.1 for females in England. Our residents also spend more years in poor health. Healthy life expectancy at birth is 61.6 years for males and 60.5 for females (63.1 and 63.9 years in England respectively).<sup>1</sup> A high proportion of Sandwell residents work in healthcare, manufacturing or retail, and the borough has the poorest air quality outside London.

Overall levels of socioeconomic deprivation and inequalities in physical and mental health have meant that the area has been among those hit hardest by the COVID-19 pandemic, austerity and climate change. It is therefore even more important that agencies work together to provide **the right care, to the right people, at the right time and in the right place.**

## Partnership working

Collaboration is key to achieving better health and wellbeing in Sandwell and will be facilitated by the Sandwell Health & Wellbeing Board and the Sandwell Health and Social Care Partnership. This means collaborating with professional organisations such as the NHS as well as collaborating with people in our communities.

The **Sandwell Health & Wellbeing Board** is a statutory committee made up of councillors, local GPs, council officers and members from the faith and voluntary community sector. The board has been transforming into a place that welcomes local community groups to share their stories and experiences. Hearing the real voices of local people brought the meetings to life and inspired board members to take action. By showcasing the work being done on the ground alongside the strategies behind it, the board has generated new ideas and in-depth discussions for plans in the future, knowing that local people can genuinely benefit.

The **Sandwell Health & Social Care Partnership** brings professional agencies and the voluntary & community sector together in a slightly different way. This is a space where they can design new ways of working and new approaches to address system wide problems. As a subgroup of the wider Black Country Integrated Care Board, the main focus is on reducing health inequalities. The Partnership brings together Public Health and Adult Social Care partners with those from Primary Care, Secondary Care, Mental Health, Learning Disability and the Voluntary & Community sector.

This Partnership brings together the strengths of each of the two boards, with the Sandwell Health & Social Care Partnership looking into the system to innovate, and the Sandwell Health & Wellbeing Board looking out to engage communities. We also link with the Sandwell Children's Safeguarding

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<sup>1</sup> Source: Public Health Outcomes Framework

Board, Sandwell Safeguarding Adults Board, and the Safer Sandwell Partnership to achieve our strategic objectives.

Picture from Sandwell Health and Wellbeing Board, Holly's Race and SDCA logo

## The Health and Wellbeing Strategy

This Strategy is jointly owned by both boards. The next section will look back at some of our recent work, showing how we work together and what we have achieved, and some of the challenges we have faced.

Section 3 will look forward, describing our shared outcomes and joint workstreams across the system. Here we will explain how we will measure and monitor what we achieve.

The Strategy is not an exhaustive account of our work, but an illustration of how partnership working can help to improve the health and wellbeing of people in Sandwell.

The purpose of this strategy is not to overlap with other strategies from key boards and partnerships but to demonstrate where the pieces fit together. We recognise that there will be some crossover in interest in the work done by other boards and that not everything can be included in this strategy. Rather than duplicating that work, our aim is to look at how we can link together to improve the health and wellbeing of people in Sandwell.



## Section 2

### How we work

In Sandwell we seek to improve health and wellbeing by doing our work *with* our residents and not to them. At the core of our work is our community, those with gifts and skills and local knowledge. We recognise that the people in Sandwell are its asset and the experts on what they need. By working with our residents, we can build on our existing community strengths, and develop solutions where there are gaps. By investing time and money into our communities we can create environments where Sandwell residents can thrive and help each other, which will reduce demand on some services and in turn improve health outcomes. We take this approach across a wide range of public health priorities and outcomes including during the Covid19 pandemic, our drugs and alcohol work, physical activity and more.

#### COVID-19

The COVID-19 pandemic has brought challenges for physical and mental health, both from the direct effects of the virus and indirectly through social and economic impacts on people's lives. It has changed the way traditionally close communities interact, and how residents access help and support. Existing inequalities in Sandwell, and in the West Midlands and England overall, have been deepened. The lifestyles of people in Sandwell were more susceptible to the virus, as an area that has many people working in sectors where social distancing wasn't possible, so it had the potential to spread fast and wide.

Sandwell was one of the first Councils to establish a local Contact Tracing team alongside the national Test and Trace function. Our innovative model was cited as an example of best practice by the Local Government Association and was replicated by almost every Council in the country. We developed a supportive offer in partnership with the voluntary and community sector whilst also recruiting internal staff across departments to assist with the emergency response.

By understanding the Black Country culture and offering a familiar voice or language over the phone, we were able to increase engagement and reach more local people. In the last week prior to the launch of this service in July 2020, the national contact tracing service was failing to reach over 35% of COVID-19 contacts in Sandwell. This was the second worst performing local authority in the West Midlands region. One year after the launch of the Sandwell service the failure rate had reduced to less than 4% of contacts. Compared to the rest of the West Midlands, this was the best performance in the region of any upper tier local authority.

In addition, Sandwell ranked 80<sup>th</sup> out of 149 upper tier local authorities for infection rates and had the 3<sup>rd</sup> lowest case rates in the Black Country, just after Dudley. This in stark contrast to what would be expected given the levels of deprivation in the borough and can be largely attributed to putting our community at the heart of the response and adapting support where it was needed. There is nevertheless no doubt that the pandemic has been devastating for many individuals, families and communities, and has left a legacy of health needs and economic impacts.

Graph from Facebook



We know that Sandwell is rich in community assets, and this was brought to the forefront during the COVID-19 pandemic. Our community and faith leaders continued to support residents with key information to help them keep safe during unprecedented times - often working with groups who were more vulnerable to COVID-19 and less able to access this information themselves. Despite having to completely change the way they interacted, from face-to-face to virtual and over the phone, they maintained contact with those who needed support. As the pandemic developed, our local community groups continued to adapt to ensure continued access and provide information around vaccinations.

In 2021 we won the Local Government Chronical Award for our work to increase vaccination uptake in the borough, with a particular focus on black, Asian and minority ethnic groups, which traditionally have lower vaccination uptake rates. We worked in partnership with NHS and voluntary and faith organisations to provide vaccination clinics in mosques, gurdwaras, community centres and other venues, and with the Sandwell 'Vaccination Bus' at The Hawthorns Stadium. The public health team also trained influential people in the community to support people to get vaccinated. The 'Community Vaccination Leaders' course trained around 180 local people including faith leaders, community organisers and voluntary sector workers. The course proved so popular that other council teams in the UK came to Sandwell to learn how to deliver the course in their areas.

The Vision 2030 COVID-19 grants enabled groups to identify what was needed in their communities and put the right support in place. With over £250,000 grant funded to more than 25 community groups a huge range of tasks were completed, and support was given; proactive writing and calling to service users, social media coverage, 1 on 1 and group conversations and support, translation of guidance and culturally appropriate messaging, practical support to access vaccinations, vaccination champions and promotion of vaccination clinics.

*"Feedback from parent carers was very positive. Many said they were anxious about the vaccine but that the information we were able to provide was factual and timely and allowed them to make informed decisions. We were also able to provide information on vaccine clinics, pop ups and opportunities through pharmacies etc that families were not aware of. Parent carers were also able to register with their GP as a carer which will have longer term benefits for them and their healthcare."*

*"Focus groups created some change in understanding and attitude towards the vaccinations. The involvement of our 2 vaccine champions, Kurdish medical professionals and the Romanian health professional in RUDA's Facebook live session was extremely helpful in addressing some of the myths around vaccines."*

## Drugs and Alcohol

The young person's substance misuse service (DECCA) is commissioned by Sandwell Public Health and based in Sandwell Children's Trust. The service consists of three elements – universal prevention, early intervention and specialist treatment. Interventions that contribute to reducing admissions include work with education services to ensure young people are aware of the risks of substances, training for professionals to be confident when having conversations and providing accessible, non-time limited specialist treatments.

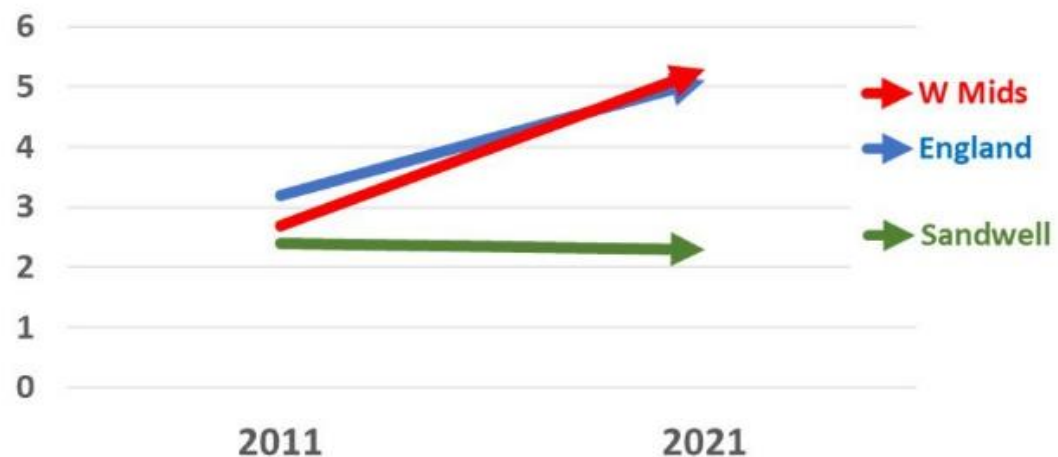
Continuity of care between prison and community substance misuse services is vital for improving offender health, reducing drug and alcohol related harm and reducing reoffending. Rates of continuity

of care in Sandwell are higher than both the regional and national averages. Effective partnership working and communication between probation services, prison healthcare, Sandwell’s substance misuse services and wraparound support such as housing plays a key role in successful outcomes for this group. Timely access to services is also vital and in Sandwell Cranstoun are able to offer appointments on the day of release where required.

In Sandwell we stick to the five principals on drug harm reduction. These include a holistic approach of wrap around support with housing, finance, legal problems, physical and mental health and social relationships. We also ensure we maintain our partnerships, as without a strong link between prison staff and the drug treatment teams there are gaps our residents could fall through. Cranstoun, as previously mentioned, are the third part of our principals, their first-class treatment using expertise and commitment through every level of staff from commissioner to the provider ensures that everyone’s needs are met. By taking the work to the people who need it rather than waiting for them to come to us we make sure life-saving naloxone and other interventions are provided in the place and at the right time. Finally, maintaining investment in these resources over the years has ensured a continued level of support and the ongoing support from stakeholders from seeing the cost-effective treatment reduce demand on other systems and services. Thanks to this approach we have achieved the lowest drug related deaths in the West Midlands and are within the lowest ten in the country.

## Drug Related Deaths

Rate per 100k population (ONS, 2022)



Graph showing change in drug related deaths over last 10 years



## Most prisoners who need drug treatment on release don't get it - but one council bucks the trend

A local authority has one of the best rates of engagement in the country, with 62% of prison leavers who need drug treatment receiving vital help. But how is Sandwell, a place with high rates of poverty offering people a lifeline?



**Inzaman Rashid**  
News correspondent @inzyrashid

Friday 22 July 2022 01:25, UK



### Screenshot from sky news article

#### Better Mental Health Programme

Last year Sandwell Council successfully secured £391,272 of funding for the Better Mental Health Programme. The Better Mental Health Programme works alongside community partners to develop exciting and innovative projects to improve mental wellbeing for the whole community. These projects recognise the importance that good mental health has to our overall wellbeing. Strong established relationships between Sandwell Council and the voluntary & community sector have been key to the success of the programme, providing the ideal opportunity to build on our unique assets and work with communities to reduce inequalities in mental health and wellbeing that were made worse by the pandemic. Our Better Mental Health programme is informed by what our communities have told us they need and what is important to them.

Ten diverse and unique projects to improve mental wellbeing were rolled out to the community as part of the programme. These were:

1. **Changes** – offers support for parents, helping them to navigate on their parenting journey through a range of activities. This project has enabled a wider choice of Early Years, Primary School Years and Secondary School Years courses to be offered for Sandwell parents to join.
2. **Activities for New and Expectant Parents** – provides free activities to promote physical health during pregnancy, selfcare and mindfulness, develop new friendships and peer support. Better Mental Health project funding has enabled a wide variety of activities and courses to be held in Sandwell's 6 towns.

3. **Sandwell Libraries and Archives** – libraries provide a safe and inclusive community hub. This project aims at providing parents and carers of under 5's with a range of social activities such as Play Talk Read and the Sandy Bear Scheme.

4. **Anti-bullying** - Children and young people in Sandwell have repeatedly highlighted bullying, including cyberbullying, as a key mental health issue. We are working to tackling this by delivering a whole school antibullying intervention and activities such as online training and classroom-based input. We're building on initiatives such as the successful Anti-Bullying Roadshow delivered during Anti-Bullying Week 2020 and adopting a whole-school approach to raising awareness for children and young people, teachers, parents and wider communities.

5. **The Voluntary and Community Sector Well-being Charter Mark** - Having successfully embedded the Schools' Wellbeing Charter Mark to adopt a whole school approach to mental health improvement across Sandwell, we aim to extend this throughout the community and voluntary sector in the hope to build emotional resilience by engaging in hobbies, interests and communities.

6. **Team Talk Albion** - The project aims to engage men (aged 18+) living in Sandwell with weekly 5 a side football matches located at the Portway Lifestyle Centre aiming to improve health and wellbeing through football.

7. **Tough Enough to Care** – These sessions include a 45-minute interactive presentation covering mental health basics and dispelling common myths about mental illness. The project also includes peer support groups which are open to all men aged 18+ from the Sandwell area.

8. **Ideal for All** - Supporting minority ethnic communities through targeted peer support, information and activity sessions. This project offers befriending and improved mental wellbeing through gardening and companionship.

9. **Mental Health Literacy** - This project has 3 elements, the first being i-act Understanding & Promoting Positive Mental Health & Wellbeing training courses. The next is the development of Community Mental Health Champions who can help raise awareness of mental health and challenge stigma within their respective communities. The last is through the charity Kaleidoscope Plus Group who have been delivering accredited courses such as the popular Mental Health First Aid course.

10. **Community Mental Health Grant Programme** - A grant programme focusing on promoting positive community mental health with funding being available to support activities that are run by local people for local people.

By the end of March 2022, a total of 1,402 unique beneficiaries had been reached, with a significant improvement in self-rated wellbeing among those participating in the programme. Projects have been very well received in our communities, and feedback from participants and service users highlighted social connection, improved confidence and wider wellbeing as key benefits. The success of Sandwell's Better Mental Health Programme to date gives us strong foundations to build on sustain its legacy, both through increased capacity in the voluntary & community sector and additional funding to continue and expand the programme.

“Sandwell Council has a strong track record of working closely with the voluntary and community sector, and their Better Mental Health programme is a clear example of asset-based community development in action. Feedback to date has been very positive and not only demonstrates immediate benefits of support for clients and community groups, but also a longer-term legacy for mental wellbeing promotion and reducing inequalities in mental health”.

- *Paul Sanderson, Health & Wellbeing Programme Lead, OHID West Midlands*

“I am getting my confidence back as a mother because I am able to stay calm and talk to my kids instead of shouting at them and telling them off. We now discuss problems instead.”

“I loved learning new things. I've had the confidence to attend other courses and the library.”

- *Feedback from parents, Changes Antenatal and Library Project*

“The project has helped us to reach a much wider and more diverse audience that we may not have really crossed paths with if we weren't involved in this project. The links we have established throughout Sandwell have not only helped us to grow as a charity but we are now in a much stronger position to support others and it has confirmed our thoughts that people do want to talk about mental health in Sandwell, but they never really had an outlet, this project has allowed us to become a route for these discussions and has helped 100 s of local residents”.

- *Stu Bratt, CEO, Tough Enough to Care*

### Commonwealth Games

Sandwell was proud to host the swimming and diving events for the Birmingham 2022 Commonwealth Games in Sandwell. The Sandwell Aquatics Centre is a world-class sporting facility that will benefit Sandwell people for decades to come when it becomes a public leisure centre in spring 2023 following the Games.

We have welcomed thousands of athletes and spectators over the summer, giving us the perfect opportunity to show what a friendly and diverse place Sandwell is on the world's stage. It has been a great time to celebrate our rich diversity, culture and heritage.

The new leisure centre is bringing to Sandwell a 50m Olympic-sized swimming pool, 25m diving pool, community swimming pool, activity studios, sports halls, gyms, cycling studio, dry diving centre, sauna, football pitch, urban park, children's play area and café. This will be a place where local people will gain immeasurable health, fitness and social benefits and where everyone is welcome and able to access activities that are suitable for them.

We now have a task to build and create a legacy from the Commonwealth Games with our residents to get people, especially young people into physical activity. We have already started to invest more into free swimming, now over £300,000 per year will be spent on free access to swimming as well as swimming lessons in Sandwell.

### Pictures of Aquatic Centre and local athlete's success

### Physical Activity

The latest Sport England survey shows that children in Sandwell are on average the most active in the West Midlands and fourth most active in England. The Active Lives Children and Young People Survey by Sport England looked at what proportion of children aged 5 to 16 are meeting the national physical activity guidelines of an average of at least 60 minutes moderate-vigorous intensity exercise per day. The percentage of Sandwell's children meeting physical activity guidelines has risen significantly over the last four years, to the current high position in 2020/21 with 59.7% of children meeting the target despite the disruption of the pandemic.

We are currently working with activity groups across all six towns, covering a range of activities such as; dance, football, martial arts, basketball, cricket, swimming, gymnastics, athletics and many more! It is important to maintain these activity levels throughout the life course to help reduce the risk of some major illnesses and as we know physical activity can help improve our mood, sleep quality and reduce risks of stress. We have ongoing work with adults to help them increase their physical activity levels and maintain them. From the Covid19 pandemic many people became more familiar and reliant on parks and green spaces, because of this we will have new activities happening across all of the towns for adults to engage with their local spaces and ensure they get the most out of it. In addition, we are working to increase cycling opportunities across the borough, so people not only feel more confident on a bike but are also able to access bikes locally to them.

There are already some great projects happening in Sandwell allowing children, young people and families to get involved with different activities such as cycling. The Sandwell Valley Explorer, a short family friendly guided bike ride for all abilities is just the beginning of our cycling work. Benson Community Project is also offering family bike rides and learn to ride sessions in Smethwick. This is providing a great way to learn new skills, help others and get more active. Led rides are also already running at Lightwoods Park, but we are also exploring opportunities to train more volunteers to help run similar activities across other areas of Sandwell. Cradley Community Link are one such group looking to train young people as some cycle champions to not only lead rides but also share skills on how to look after a bike.

Picture from cycling groups

## Section 3

This section is about looking forward and setting out our shared outcomes and joint workstreams across the system.

The figure below shows how each workstream contributes to our place-based approach to improving population health and wellbeing, and the lead organisations within each workstream.



The Joint Outcomes Framework sets out the priority outcomes for each organisation which will support the delivery of these workstreams and enable us to monitor our progress.



Joint Outcome Framework - Outcomes	
Organisation	Outcome
Adult Social Care	Further promotion of 'Home First' to support people to promote independent living at home
Adult Social Care	Workforce strategy
Adult Social Care	Asset/ strength- based practice
Adult Social Care	Having a strong community offer that improves and supports prevention
Adult Social Care	Improve the digital tools to allow for greater choice and independence for residents to remain in their own homes longer
Adult Social Care	Managing the market to ensure customers have a choice of quality and affordable providers to meet their care and support needs
Black Country Partnership	Estimated diagnosis rate for people with dementia
Black Country Partnership	Dementia care plan reviews
Black Country Partnership	People with severe mental illness (SMI) receiving a full annual physical health check (PHC)
Black Country Partnership	Learning disability registers and annual health checks delivered by GPs
Children's Services	Domestic abuse- children, victims and perpetrators
Children's Services	CYP SEND, Mental Health and Wellbeing
Children's Services	Early help- early intervention and prevention aligned to family hubs model
Children's Services	CYP Educational attainment inc. a focus on NEET for care leavers (19+) and Early Years, language development a step on from EYTA work
Children's Services	The youth offer aligned with wider regeneration opportunities to include employment and skills alongside apprenticeships
Children's Services	Preparation for adulthood - supporting the transitions between children and adults
Primary Care Network	Improve the diagnosis of patients with hypertension by 1.2% from current baseline
Primary Care Network	80% of all women have had screening for cervical cancer within the last 3 years if aged between 25-49 years and last 5 years if aged between 50-64 years
Primary Care Network	All care home residents will have personalised care and support plans agreed or reviewed at least annually at a MDT.
Primary Care Network	90% patient eligible for influenza and pneumococcal immunisations will have received their vaccinations
Primary Care Network	95% of all children will have received vaccinations as per the National childhood immunisation schedule as appropriate to their age
Public Health	Reduce Smoking Related Harm
Public Health	Reduce Alcohol Related Harm
Public Health	Reduce Drug Related Harm
Public Health	Reduce Obesity Related Harm
Public Health	Public Health Support to the Voluntary Sector
Public Health	Public Health Support to Infants
Sandwell Council of Voluntary Organisations	Strong and responsive voluntary and community sector
Sandwell Council of Voluntary Organisations	Making a difference where it's needed by making the most of what Sandwell has
Sandwell Council of Voluntary Organisations	Enabling access to support for all Sandwell Residents



Sandwell Council of Voluntary Organisations	Strong and responsive voluntary and community sector
Sandwell Council of Voluntary Organisations	Making a difference where it's needed by making the most of what Sandwell has
Sandwell Council of Voluntary Organisations	Enabling access to support for all Sandwell Residents
Sandwell and West Birmingham Hospital Trust	Reduce the total number of hospital bed days for people aged 65 and over
Sandwell and West Birmingham Hospital Trust	% of people achieving their preferred place of death
Sandwell and West Birmingham Hospital Trust	Improve the survival rates for people with a cancer diagnosis
Sandwell and West Birmingham Hospital Trust	Number of urgent (unplanned) readmissions to hospital within 30 days of discharge and benchmark against regional and national data
Sandwell and West Birmingham Hospital Trust	Improve the outcomes for children and young people - best start

*“Empowerment of individuals and communities is absolutely central. Getting the community involved in organising their own destiny has got to be a key part of it.”*

Sir Michael Marmot

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*Sandwell*

# HEALTH AND WELLBEING BOARD STRATEGY

2022



# Sandwell Health and Wellbeing Board Strategy

**2022**



# HEALTH AND WELLBEING BOARD STRATEGY

Included in this strategy:

- lorem ipsum
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# Sandwell Health and Wellbeing Board Strategy 2022





# SANDWELL HEALTH AND WELLBEING BOARD STRATEGY 2022



# SANDWELL HEALTH AND WELLBEING BOARD STRATEGY 2022



## Report to Health and Adult Social Care Scrutiny Board

**5 September 2022**

<b>Subject:</b>	West Midlands Ambulance Service Winter Plan 2022/23
<b>Director:</b>	Law and Governance
<b>Contact Officer:</b>	Pippa Wall - Head of Strategic Planning West Midlands Ambulance Service University NHS Foundation Trust <a href="mailto:pippa.wall@wmas.nhs.uk">pippa.wall@wmas.nhs.uk</a>

### 1 Recommendation







To consider and comment on the draft West Midlands Ambulance Service (WMAS) Winter Plan for 2022/23.

### 2 Reasons for Recommendations

- 2.1 The WMAS Winter Plan is an annual plan which details how the ambulance service will respond and cope with increased demand on its services during the winter period.
- 2.2 The Board will receive a presentation on the development of the 2022/23 Winter Plan.



### 3 How does this deliver objectives of the Corporate Plan?

		An ambulance service that is responsive to demand will mean more lives being saved.
		
		

### 4. Appendices

None

### 5. Background Papers



# West Midlands Ambulance Service

University NHS Foundation Trust

Page 55



## Winter Plan Summary 2022/23

Trust us to care.

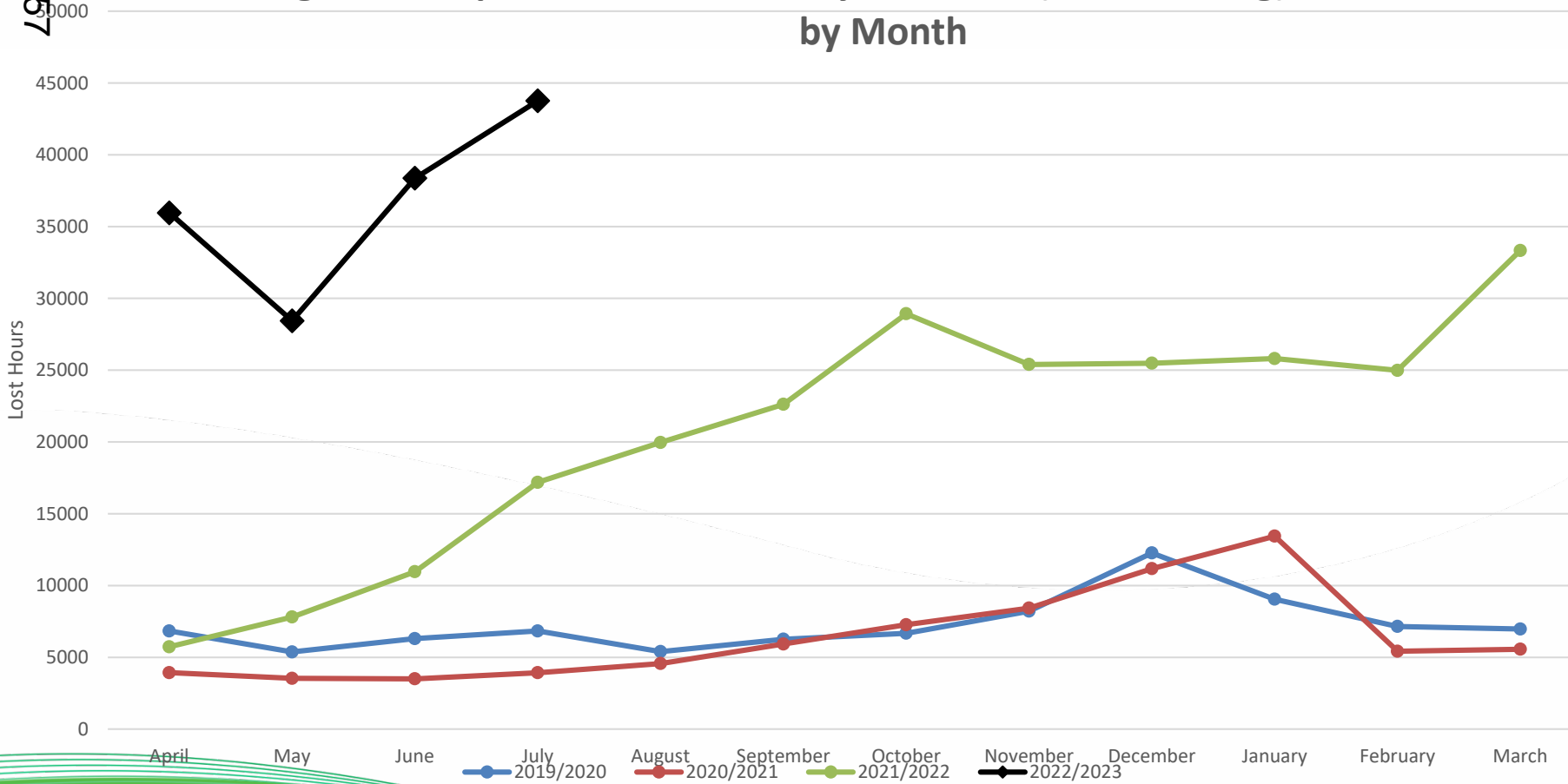
## Review of Winter 2021/22

- Significant delays in handing patients over to hospital staff, increasing by over 244% in July, impacting waiting patients in the community
- Average decrease in incidents by 6% from November to January for the 999 service which makes forecasting difficulty for the coming winter.
- Significant absences due to staff isolation and sickness that was very well managed by the Trust with LFD made available to staff and speedy PCR testing for staff & household/family
- 75% of patient facing staff received flu vaccine and 92% received Covid vaccines 1<sup>st</sup> & 2<sup>nd</sup> doses, with 67% having the booster.
- Trained and experienced Duty Director, based at Millennium Point working 7 days to supporting 999, 111 and PTS. This position primarily takes senior decisions to resolve live operational issues, and escalate where necessary
- In support of national arrangements through the winter and during the NHS level 4 critical incident, the NACC remained operational 7 days/20hrs 0600-0200hrs

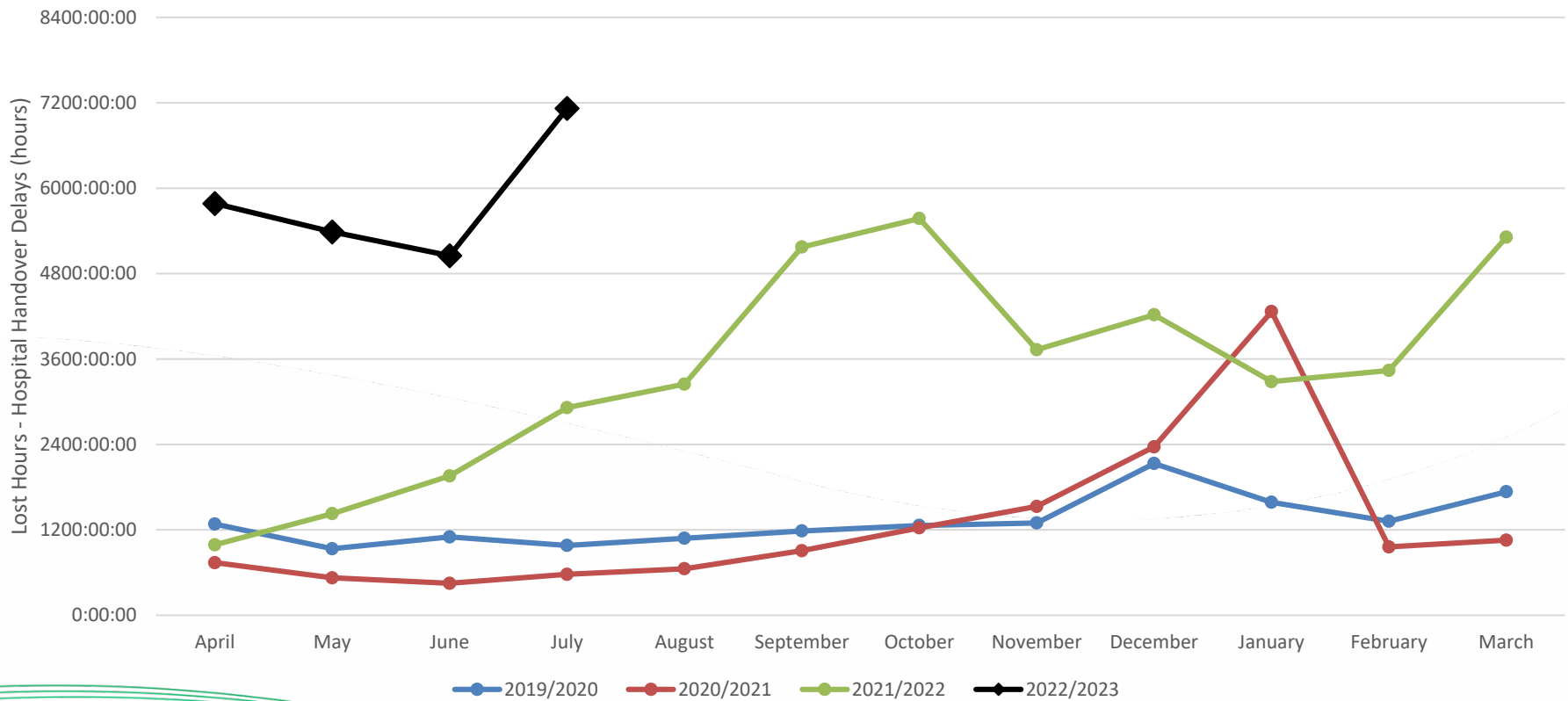
# West Midlands Ambulance Service

University NHS Foundation Trust

## Regional Hospitals Handover Delays >15mins (inc cohorting) - Total Hours by Month



## Black Country Hospitals Handover Delays >15mins (inc cohorting) - Total Hours by Month





# Arrangements for Winter 2022/23

- Fleet replacement programme completed in July to facilitate the Commonwealth Games
- All operational effort is to be focused on responding to patients and this includes all union reps, clinical managers, etc. from 15<sup>th</sup> December 2022 -11<sup>th</sup> January 2023
- The current arrangements for the 999 call centre is fully covered with experienced staff post the movement of the 111 contract to a different provider
- 170 Advanced Paramedics undertaking clinical validation of category 3 & 4 emergency calls, having achieved significant improvement to both Hear and Treat and conveyance rates
- Clinical Validation team able to identify patients that need community services and transfer the patient digitally into the service
- 500 staff will have completed training and be working on E&U ambulance by the festive period
- Additional Hospital Ambulance Liaison Officers at hospitals to support crews handing over
- Plan in place to deliver the seasonal Flu vaccination from 22<sup>nd</sup> September for all Trust staff
- Plans are in place to support staff, to signpost staff for this winters COVID booster vaccine
- New Sandwell hub opening September 2022, was used to support the Birmingham CWG's in July 2022



## Key Winter Plan Principles

- Ensure all incident types are allocated without delay
- Reduce downtime to the minimum and ensure hospital turnaround is tightly managed and escalated
- Ensure appropriate pathways are identified for patients (community or other non-ED wards)
- Maintain low sickness levels through robust and effective and timely supportive management of all sickness
- Ensure an effective Flu and COVID-19 booster vaccination plan is being delivered
- Early production of Festive Plan period rosters to ensure any identified resourcing issues can be addressed
- Maximise ambulance resource to ensure strong cover is in place for peak periods (weekends, Mondays and key dates)
- Continued focus on delivering a Paramedic on every ambulance
- Plan ahead for all staff coming from training in readiness for the festive period
- Vehicle Preparation Operative cover to be maximized with a priority recruitment plan underway



## Health and Adult Social Care Scrutiny Board

5 September 2022

<b>Subject:</b>	Tracking and Monitoring of Scrutiny Actions and Recommendations
<b>Director:</b>	Director of Law and Governance Surjit Tour <a href="mailto:Surjit_tour@sandwell.gov.uk">Surjit_tour@sandwell.gov.uk</a>
<b>Contact Officer:</b>	Stephnie Hancock Senior Democratic Services Officer <a href="mailto:stephnie_hancock@sandwell.gov.uk">stephnie_hancock@sandwell.gov.uk</a>

### 1 Recommendations







- 1.1 That the Board notes the responses from the Executive/Directors/Partners on recommendations referred since the Board's last meeting, as set out in the Appendix.
- 1.2 That the Board notes the progress on implementation of those recommendations approved by the Executive/Directors/Partners, as set out in the Appendix.
- 1.3 That the Board identifies any recommendations where progress is unsatisfactory and determines what action it wishes to take.
- 1.4 That the Board determines which recommendations no longer require monitoring.



## 2 Reasons for Recommendations

- 2.1 To facilitate the effective monitoring of progress on responses to and press with implementation of recommendations made by the Board and identify where further action is required.
- 2.2 Effective monitoring of recommendations facilitates the evaluation of the impact of the scrutiny function overall.

## 3 How does this deliver objectives of the Corporate Plan?

	Best start in life for children and young people	<p>The scrutiny function supports all of the objectives of the Corporate Plan by seeking to improve services for the people of Sandwell. It does this by influencing the policies and decisions made by the Council and other organisations involved in delivering public services.</p> <p>Effective monitoring of recommendations made supports this and allows scrutiny to evaluate its impact.</p>
	People live well and age well	
	Strong resilient communities	
	Quality homes in thriving neighbourhoods	
	A strong and inclusive economy	
	A connected and accessible Sandwell	

## 4 Context and Key Issues

- 4.1 The attached Appendix details the responses to and progress on the implementation of recommendations made by the scrutiny function.



## 5 Implications

<b>Resources:</b>	
<b>Legal and Governance:</b>	<p>The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000.</p> <p>The Local Government and Public Involvement in Health Act 2007 places a duty on the Executive to respond to Scrutiny recommendations within two months of receiving them.</p> <p>Scrutiny committees can require a response from NHS bodies within 28 days in relation to recommendations made to them.</p>
<b>Risk:</b>	<p>Any risk implications have been considered with the relevant Officer/Director/Cabinet Member/Risk Owner at the time the recommendations were referred to them by the Board.</p> <p>Any specific risks for the Board's attention are detailed in the Appendix.</p>
<b>Equality:</b>	<p>Any equality implications have been considered with the relevant Officer/Director/Cabinet Member/Equality, Diversity and Inclusion Team at the time the recommendations were referred to them by the Board.</p> <p>Any specific equality implications for the Board's attention are detailed in the Appendix.</p>
<b>Health and Wellbeing:</b>	<p>Any health and wellbeing implications have been considered with the relevant Officer/Director/Cabinet Member at the time the recommendations were referred to them by the Board.</p> <p>Any specific health and wellbeing implications for the Board's attention are detailed in the Appendix.</p>
<b>Social Value</b>	Any social value implications have been considered with the relevant Officer/Director/Cabinet



	Member/Equality, Diversity and Inclusion Team at the time the recommendations were referred to them by the Board.
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## 6 Appendices

Appendix A – Scrutiny Action Tracker - Monitoring Table

## 7. Background Papers

None.



Tracking and Monitoring of Actions and Recommendations of Health and Adult Social Care Scrutiny Board

Scrutiny Board Date	Agenda Item Title	Action/Recommendation	Responsible Director /Body	Activity Log as at 25 August 2022
<b>2021/22</b>				
04 OCT 21	Access to primary Care	Clinical Commissioning Group be requested to arrange a briefing session for all members on primary care services access; to be led by the Cabinet Member for Adults, Social Care and Health	CCG in consultation with Cabinet Member for Adults, Social Care and Health	A verbal update will be given at the meeting.
		A joint task force to look at ways in which to communicate the message to Sandwell residents about the variety of ways in which primary care services can be accessed	Cabinet Member for Adults, Social Care and Health in consultation with CCG and Director of Public Health	A verbal update will be given at the meeting.
14 MAR 22	Community Diagnostic Centres Update	That the Cabinet be asked to endorse the letter to Secretary of State for Health and Social Care asking for long-term revenue funding for CDC to be confirmed	Cabinet / SWBHT	A verbal update will be given at the meeting.
<b>2022/23</b>				
10 AUGUST 22	Adult Social Care Contributions Policy	<ul style="list-style-type: none"> <li>That the Director of Adult Social Care urgently address the poor response rate to the consultation thus far, to ensure that a statistically significant response rate is obtained, by targeting the following groups to disseminate the information and support those affected by the future changes in providing meaningful responses:-                             <ul style="list-style-type: none"> <li>faith networks</li> <li>councillors</li> </ul> </li> </ul>	Director Adult Social care and Health	A verbal update will be given at the meeting.

		<ul style="list-style-type: none"> <li>- community champions network</li> <li>- private care agencies</li> </ul>		
	Joint Health Scrutiny Arrangements	<ul style="list-style-type: none"> <li>• That the establishment of a Black Country joint health scrutiny committee be explored with Dudley, Walsall and Wolverhampton councils, to support the efficient and effective scrutiny of the delivery of services and outcomes of the Black Country Integrated Care System.</li> </ul>	Director Law and Governance	Black Country authorities have been contacted. A verbal update will be given at the meeting.

# Scrutiny Board Work Programme 2022/23

## Health and Adult Social Care



Meeting Date	Item	Presented by
12 September (additional meeting)	Mental Health Transformation Plans	Black Country Healthcare NHS Foundation Trust (Kuli Kaur-Wilson/Laura Brookes)
	Midlands Cardiac Pathway Improvement Programme	NHS England (Kieren Caldwell)
	Scrutiny Review into Loneliness and Isolation – Scoping	Director of Public Health/Director Law and Governance (Democratic Services)

21 November 2022	Primary Care Access	Black Country Integrated Care System (Michelle Carolan)
	Designation of Smoke Control Area (Update)	Director Public Health (Sophie Morris)
	CQC Inspection Ratings Sandwell and West Birmingham Hospitals Trust	Sandwell and West Birmingham Hospitals Trust (Richard Beeken)
23 January 2023	Adult Social Care Compliant Decisions	Director Adult Social Care (Customer Insights Team)
13 March 2023	HIV Commission Findings – Sandwell’s Response	Director Public Health (Maura Flynn)

### Items to be scheduled

Items to be considered in 2022/23:

- Day Services Transformation Plan Update (Changing Our Lives and Services Users to attend)
- Update on the Knowle Centre and Board Visit (when appropriate).
- Local Government Support Programme – Energy Savings Trust (Director of Borough Economy)
- Community Diagnostic Centres – Progress on Funding and Development
- Domestic abuse referrals

### Scrutiny Review

#### Loneliness and Isolation

At the time of writing the scope for the review was in development.



The following items set out key decisions to be taken by the Executive in public session:-

Title/Subject		Cabinet Portfolio Area	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
1	<p><b>Proposal to Declare the Whole of Sandwell as a Smoke Control Area (Revoking and replacing the existing 51 SCAs)</b></p> <p>Contact Officer: Elizabeth Stephens</p> <p>Director of Public Health Lisa McNally</p>	<p>Cabinet Member for Adults Social Care and Health (Cllr Hartwell)</p>	<p>28 September 2022</p>		
2	<p><b>Adult Social Care Deferred Payment Agreements Policy</b></p> <p>Contact Officer: Kay Murphy</p> <p>Director: Rashpal Bishop Director of Adult Social Care</p>	<p>Adults, Social Care and Health (Cllr Hartwell)</p>	<p>12 October 2022</p>		

Title/Subject	Cabinet Portfolio Area	Decision Date	Pre-decision Scrutiny to be carried out? (Board and date)	List of documents to be considered
<p>3 <b>ASC Contributions Policy – Outcome of the consultation and final policy proposals</b></p> <p>Contact Officer: Kevin Balchin</p> <p>Director of Adult Social Care: Rashpal Bishop</p>	<p>Adults, Social Care and Health (Cllr Hartwell)</p>	<p>16 November 2022</p>		