



Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 28 November 2024

2.00 pm

Council Chamber, Third Floor,
Southwater One, Telford, TF3 4JG

Democratic Services: Lorna Gordon 01952 384978

Media Enquiries: Corporate Communications 01952 382406

Committee Members: A J Burford (Co-Chair), S Whitehouse (Co-Chair), S P Burrell, K Middleton, S J Reynolds, K T Tomlinson, P Watling, J Britton, N Carr, P Davies, S Fogell, S Froud, E Hancox, H Onions, C Parker and M Vivian

Agenda

Page

9.0 Telford & Wrekin Integrated Place Partnership (TWIPP)

3 - 26

To receive a verbal report on TWIPP governance and priorities.

This page is intentionally left blank

Meeting Name:	Shropshire, Telford & Wrekin Integrated Care Board						
Agenda item no.							
Meeting Date:	28 November 2024						
Report title:	Telford & Wrekin Integrated Place Partnership Committee Update Report						
Report presented by:	David Sidaway						
Report approved by:	Fliss Mercer						
Report prepared by:	Sarah Downes						
Meeting report previously presented:	N/A						
Action Required (please select):							
<input type="checkbox"/> A=Approval	<input type="checkbox"/> A	<input type="checkbox"/> R=Ratification	<input type="checkbox"/> S=Assurance	<input type="checkbox"/> D=Discussion	<input type="checkbox"/> I=Information		
Executive Summary							
<p>This report provides an update on the evolution of the Telford & Wrekin Integrated Place Partnership (TWIPP) into a formal committee of the Shropshire, Telford & Wrekin Integrated Care Board (ICB). The report will also provide information on the emerging priority areas and alignment to the Joint Forward Plan.</p> <p>Appendices include: Appendix A – TWIPP Agenda for 07.11.2024 meeting Appendix B – TWIPP Terms of Reference Appendix C – TWIPP Priority areas</p>							
Recommendation/Action Requested:							
<ol style="list-style-type: none"> To review and approve the new Terms of Reference for Telford & Wrekin Integrated Place Partnership acknowledging further developments are underway as part of the Good Governance Institute Committee Review. To note the new priorities for Telford & Wrekin Integrated Place Partnership and its approach to developing a new strategic plan. To agree to receive the new Strategic Plan for Telford & Wrekin Integrated Place Partnership for approval in Quarter 1 of 2025/26. The ICB and its members supports the Telford and Wrekin Ageing Well Partnership review of membership and engages in its priorities. 							
Does the report provide assurance or mitigate any of the strategic threats or significant risks in the System Board Assurance Framework?							
<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, please detail:					
How does this report support the ICB's core aims:							



Ambition



Compassion



Optimism



Focus

Improve outcomes in population health and healthcare	Yes – please see TOR for further details		
Tackle inequalities in outcomes, experience, and access	Yes – please see TOR for further details		
Enhance productivity and value for money	Yes – please see TOR for further details		
Help the NHS support broader social economic development	Yes – please see TOR for further details		
Conflicts of Interest			
None at this time.			
Implications			
Engagement with Shropshire, Telford & Wrekin residents, and communities	X		
Resource and financial	X		
Quality and safety	X		
Sustainability	X		
Equality, Diversity and Inclusion	X		
Impact Assessments	Yes	No	N/A
Has a Data Protection Impact Assessment been undertaken?			X
Has an Integrated Impact Assessment been undertaken?			X
Has the Integrated Impact Assessment been reviewed by the Equality & Involvement Committee?			X



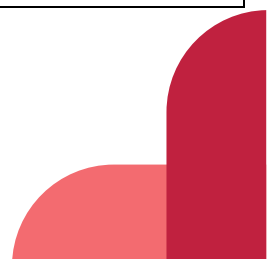
Shropshire, Telford & Wrekin Integrated Care Board

27 November 2024

Key Issues Report

Report of:	Telford & Wrekin Integrated Place Partnership
Last meeting details:	<p>Date: 07 November 2024</p> <p>Attendees: David Sidaway, Cllr Paul Watling, Fliss Mercer, Simon Froud, Helen Onions, Louise Cross, Claire Parker, Dr Nitin Gureja, Carla Bickley, Steve Ellis and David Crosby</p> <p>Apologies: Cllr Shirley Reynolds, Jo Britton, Simon Fogell, Gemma Smith, Lorna Clarson, Dr Ian Chan, Cathy Riley and Mike Carr.</p> <p>Quoracy (Y/N): Y</p> <p>Any conflicts of interest declared and how these were managed: None</p>
Agenda:	<p>The group meets bi-monthly, next meeting scheduled for 9 January 2025.</p> <p>The agenda for the meeting is attached as Appendix A</p>
1a	<p>Alert <i>Matters of concern, gaps in assurance or key risks to escalate</i></p> <ul style="list-style-type: none"> • The involvement of all partners is key to ensuring the development, and subsequent delivery, of the new TWIPP strategic plan. Whilst quoracy has been achieved in the meetings, further work is needed to ensure that all key partners are able to attend every meeting. • As part of the meeting, TWIPP received a report on the Telford and Wrekin Ageing Well Partnership which also highlighted the involvement of all partners. TWIPP members agreed that all partners should be engaged in this partnership to ensure the delivery of its plan.
1b	<p>Assure <i>Positive Assurances and highlights of note</i></p> <ul style="list-style-type: none"> • TWIPP is moving through its evolution into a Committee of the ICB and agreed its new Terms of Reference in September. Please see Appendix B. • TWIPP has agreed 3 priority areas to focus on for the next 18 – 24months. These areas are: <ol style="list-style-type: none"> 1. Supporting General Practice by working together to reduce and manage demand for GP services/appointments 2. Improving all-age mental health services and support (prevention, early intervention and specialist services) 3. Healthy Ageing - preventing, reducing and delaying frailty <p>These areas have been identified through a review process, please see Appendix C for further details.</p> • Whilst the areas have been identified, TWIPP is currently moving through a process of scoping each priority and agreeing the key deliverables to include in the revised TWIPP Strategic Plan. This will be completed in readiness for the new financial year. The scoping approach enables TWIPP to ensure its principles are met and that TWIPP adds value to the priority areas. • The priority areas are aligned to the STW Joint Forward Plan and will support the delivery of the Integrated Care Strategy. • The priorities are also aligned to the findings from the Independent Investigation of the NHS in England (Darzi Report, September 2024).

		<ul style="list-style-type: none"> Engagement activity around TWIPP and its new priorities is ongoing. Most recent engagement includes the Telford and Wrekin Health Scrutiny Committee, GP Informal Board and South East Telford Primary Care Network Neighbourhood Steering Group. Upcoming engagements in November include NHS Shropshire, Telford and Wrekin Staff Update Session (Virtual Huddle) and Lunch and Learn Session, Telford & Wrekin Health and Wellbeing Board and the ICB.
1c	Advise	<ul style="list-style-type: none"> GP Out of Hours Procurement updates continue to be provided to enable all members to seek assurance on the impact on residents as and when needed.
1d	Review of Risks	<ul style="list-style-type: none"> Following the National Budget announcement in October, the impact of the increases in National Minimum Wage and National Insurance on the health and care sector was raised. In particular, the financial impact on the provider care market and local authorities. Local conversations are underway to understand the full impact of these changes and national lobbying is also taking place. The risk remains at present and should be understood by all ICS Partners.
1e	Sharing of Learning	<ul style="list-style-type: none"> Throughout the meeting learning was shared about the current position on Health Ageing, what has worked and what the opportunities are. The presentations have been shared with all members.
2	Actions to be considered follow up actions or actions you require colleague support.	<ul style="list-style-type: none"> TWIPP discussed the gaps and opportunities within the Healthy Ageing priority and agreed priority actions as part of meeting. These will be agreed by TWIPP and be incorporated into the revised Strategic Plan. Ongoing discussions with the Good Governance Institute through their Committee Review are underway and will inform the terms of reference, and the role of TWIPP in relation to the ICB moving forward.
3	Recommendations	<p>That the ICB:</p> <ul style="list-style-type: none"> Reviews and approves the new Terms of Reference for Telford & Wrekin Integrated Place Partnership acknowledging further developments are underway as part of the Good Governance Institute Committee Review. Notes the new priorities for Telford & Wrekin Integrated Place Partnership and its approach to developing a new strategic plan. Agrees to receive the new Strategic Plan for Telford & Wrekin Integrated Place Partnership for approval in Quarter 1 of 2025/26. And its members supports the Telford and Wrekin Ageing Well Partnership review of membership and engages in its priorities.
Report compiled by:		Sarah Downes, Assurance and Integration Programme Manager and Telford and Wrekin Place Lead, Telford & Wrekin Council
Date report compiled:		14 th November 2024
Report approved by:		Fliiss Mercer, Vice-Chair of TWIPP and Interim Executive Director for Adult Social Care, Housing and Customer Services
Minutes/action log available from:		Sarah Downes via TWintegratedplacepartnership@telford.gov.uk





AGENDA

Meeting Title	Telford & Wrekin Integrated Place Partnership (TWIPP)	Date	07.11.2024
Chair	David Sidaway	Time	14:30 – 16:00
Minute/Action Taker	Sarah Downes	Venue/ Location	Wellington Civic, Room 1.

A=Approval R=Ratification S=Assurance D=Discussion I=Information

Ref	Agenda Item	Presenter	Purpose	Paper	Time
TWI07/10 /24 – 01	Welcome, Introduction and Apologies	Chair	N/A	N/A	1 min
TWI07/10 /24 – 02	Declarations of Interest	Chair	N/A	N/A	2 mins
Priority Focus: Healthy Ageing					
TWI07/10 /24 – 03	What's the current position and what's happening now? <ul style="list-style-type: none"> a) STW Healthy Ageing (Frailty) Strategy b) STW Acute Frailty programme c) Implementing the Ageing Well Strategy and Ageing Well Partnership d) Community falls prevention approach 	Anna Morris, NHS STW Alison Massey, NHS STW Leeona Marsh, TWC Rachel Threadgold / Louise Mills, TWC	D	Presentations to be shared after the meeting	30 mins
TWI07/10 /24 – 04	Discussion opportunity for members looking at: <ul style="list-style-type: none"> a) Where are the gaps in what we've heard? b) What and where are the opportunities? 	Sarah Downes	D	N/A	30 mins

	c) What are the priority actions that TWIPP should focus on? <i>(Group discussions with feedback)</i>				
TWI07/10 /24 - 05	Plenary <i>(inc if this approach worked)</i>	Chair / Vice-Chair	A	N/A	15 mins
Other business					
TWI07/10 /24 - 06	GP Out of Hours Procurement Update	Gemma Smith	I	Verbal	2 mins
TWI07/10 /24 - 07	Topic for the next meeting	Chair	D	Verbal	5 mins
TWI07/10 /24 - 08	Areas of risk identified and escalation needs	Chair	S	N/A	2 mins
TWI07/10 /24 - 09	Any Other Business	All	I	Verbal	3 mins
For information					
TWI07/10 /24 - 10	Minutes from last meeting 12.09.2024	N/A	I	Attached	N/A
Next Meeting Details					
9 January 2025, 1.30-3pm at Wellington Civic, Room 1					





Telford & Wrekin Integrated Place Partnership

(Committee of Shropshire, Telford and Wrekin Integrated Care Board)

Terms of Reference

1. Constitution and Authority

- 1.1. Telford and Wrekin Integrated Place Partnership Committee (TWIPP) has evolved from the Telford & Wrekin Integrated Place Partnership that was created in 2019.
- 1.2. TWIPP is a formal committee of the Shropshire, Telford & Wrekin Integrated Care Board (ICB) and as such it will deliver delegated ICB functions when formalised.
- 1.3. These terms of reference set out the membership, remit, responsibilities and reporting arrangements of TWIPP and may only be changed with the approval of TWIPP and its Chair.
- 1.4. Where appropriate TWIPP will also interface and work with the:
 - 1.4.1. Joint Health Overview and Scrutiny Committee (and other Telford & Wrekin Council Scrutiny Committees as and when appropriate),
 - 1.4.2. Telford and Wrekin Health & Wellbeing Board;
 - 1.4.3. Shropshire, Telford & Wrekin Integrated Care Board committees and groups, including but not limited to the Quality and Performance Committee and Population Health; and
 - 1.4.4. Telford & Wrekin Safeguarding Children and Adult Boards.

1.5. Authority

TWIPP is authorised by the ICB Board to:

- Oversee the delivery of key priorities of thematic partnership boards
- Agree key priorities for community centred health and care in Telford and Wrekin
- Create task and finish groups or working groups to develop and deliver action plans to deliver the agreed priorities for community centred health and care in Telford and Wrekin

Upon agreement of delegation from the ICB this section will be expanded to include the delegated responsibilities.

2. Our Vision

“Working together for children, young people and adults in Telford and Wrekin to enable them to enjoy healthier, happier and more fulfilling lives”

3. Purpose

- 3.1. The purpose of the Telford and Wrekin Integrated Place Partnership Committee (TWIPP) is to agree and drive the delivery of proactive, preventative, high quality community centred health and care integration at place.
- 3.2. Using population health intelligence and feedback from local residents, TWIPP will have a key focus upon reducing health inequalities, improving place-based proactive prevention and delivering seamless, accessible, safe, high quality community centred health and care services for all Telford and Wrekin residents.
- 3.3. TWIPP will understand how effectively the improvements in quality and safety within Telford and Wrekin are being driven forward. This is aligned to the quality statements set out by the Health and Care Act in 2022 and outlined in the CQC [Integrated Care System Assessment](#) process.

Upon agreement of delegation from the ICB this section will be expanded to include the delegated responsibilities.

4. TWIPP Principles and Responsibilities

- 4.1. TWIPP has an agreed set of principles to help it achieve its priorities. These align with principles of the Integrated Care Strategy, as well as from all member organisations and are adapted from the Local Government Association's Six Principles to achieve integrated care¹.
 - 4.1.1. **A person-centred approach** - All partners plan and deliver care and support with individuals and, where they wish, with their families, to achieve the best health and wellbeing outcomes. Co-production is a core principle, ensuring that the people who use services are at the centre of design and delivery of services. Ensuring that seldom heard groups and those experiencing inequalities are also included.
 - 4.1.2. **A proactive preventative, assets-based population health approach** that maximises health and wellbeing, independence, and self-care in or as close to people's homes as possible in order to reduce their need for health and care services. This will improve health and wellbeing for all, including addressing inequalities and the wider determinants of health. Using engagement with people and communities to find out if change is working.
 - 4.1.3. **Collaborative local leadership with a shared vision, culture and values** to support transformation. All TWIPP members / partners are respected and valued and discussions are open and honest. They contribute and support the development and delivery of plans to deliver TWIPP priorities and support the contributions of other members / partners. All members communicate regularly within their own organisations and networks to promote the work and priorities of TWIPP.
 - 4.1.4. **Subsidiarity** – the Board and TWIPP are committed to making decisions at the most local level, as close as possible to the communities that they affect. Accountability mechanisms will build on existing structures. Governance structures are open, transparent and locally accountable.
 - 4.1.5. **Building on what already works and learning from others** - where areas are working effectively, learn from them, build on them and scale up. TWIPP is enabled to develop

¹ <https://www.local.gov.uk/six-principles-achieve-integrated-care>

neighbourhood level approaches according to what is appropriate for them, rather than adhering to a rigid national or system blueprint. Empower organisations to be innovative, collaborative and maximise digital opportunities.

- 4.1.6. **Achieving best value and sustainability** – All members and partners work together to ensure that the delivery of priorities represents the best value, including, of securing the best possible health and wellbeing outcomes using safe and high-quality services, while ensuring the sustainable use of resources.

5. TWIPP Outcomes

TWIPP's current priorities are:

1. Supporting General Practice by working together to reduce and manage demand for GP services/appointments
2. Improving all-age mental health provision (prevention, early intervention and specialist services)
3. Preventing, reducing and delaying frailty (with a focus on healthy ageing)

The outcomes TWIPP will achieve will be defined by each priorities area within their Programme Initiation Documents.

In addition to its priority areas, TWIPP will:

- Work with the system to devolve decision making and resources to place and neighbourhood where appropriate;
- Act in an oversight capacity for the Better Care Fund Board, the Ageing Well Partnership, the Mental Health Partnership, Learning Disability Partnership, Autism Partnership and Children, Young People and Families Board. This will include at least annual updates to TWIPP along with providing where needed an escalation route.

6. Role of Members

6.1. As a collective TWIPP members will ensure that the principles of TWIPP and its purpose is championed throughout the Integrated Care System and in their own organisations.

6.2. TWIPP members will:

6.2.1. Ensure that all that we do in terms of development adopts a person-centred, preventative, strengths and community asset-based approach to transformation and delivery.

6.2.2. Work collaboratively on all aspects of work including:

- Seeking to release resource to contribute to the development and delivery of plans to deliver key TWIPP priorities;
- Across our statutory duties to achieve best outcomes for local children, young people and adults;
- Looking at all opportunities to pool resources to improve outcomes for local people
- Sharing information, experience and resources to identify solutions, eliminate duplication of effort, mitigate risk and reduce cost
- Developing the workforce; and
- Sharing intelligence to achieve the TWIPP priorities.

6.2.3. Learn from people of all ages who experience our services and best practice of partner organisations, and/or other areas, and seek to develop as a partnership to achieve the full potential of the relationship.

6.2.4. Resolve issues of difference positively and professionally.

6.2.5. Utilise the agreed branding when presenting about the integration work (internally and externally).

7. Membership and Attendance

7.1. Attendees

Organisation	Representative	Title/Role
Telford & Wrekin Council	David Sidaway	Chief Executive and Chair of TWIPP
	Cllr Paul Watling	Lead Cabinet Member for Adult Social Care and Health Systems and Telford and Wrekin Resident's Champion
	Cllr Shirley Reynolds	Lead Cabinet Member for Children, Young People, Education, Employment & Skills
	Jo Britton	Executive Director of Children and Families (Statutory DCS)
	Fliess Mercer	Executive Director for Adult Social Care, Housing and Customer Services
	Simon Froud	Director of Adult Social Care (Statutory DASS)
	Helen Onions	Director of Health and Wellbeing (Statutory DPH)
Lived Experience Representative	<i>Representatives to be identified (potentially through Making it Real Board and other expert by experience groups)</i>	
Voluntary, Community and Social Enterprise Sector	Louise Cross and Richard Nuttall	Co-Chairs of Chief Officer Group
Healthwatch	Simon Fogell	Chief Executive
NHS Shropshire, Telford & Wrekin	Claire Parker	Director of Strategy and Development
	Gemma Smith	Director of Strategic Commissioning
	Lorna Clarson	Chief Medical Officer <i>(also responsible for Primary Care in ICB)</i>
Primary Care Networks (PCNs)	Dr Ian Chan	TELDOC PCN Clinical Director
	Dr Derrick Ebenezer	Wrekin PCN CD
	Dr Stefan Waldendorf	Newport/Central PCN CD
	Dr Nitin Gureja	South East Telford PCN CD
Shrewsbury and Telford Hospital NHS Trust	Carla Bickley	Associate Director of Strategy & Partnership
Shropshire Community Health NHS Trust	Steve Ellis	Deputy Director of Operational Service Development
Midlands Partnership Foundation NHS Trust	Cathy Riley	Managing Director Shropshire, Telford & Wrekin Care Group
Robert Jones and Agnes Hunt Orthopaedic Hospital	Mike Carr	Deputy Chief Executive and Chief Operating Officer
Shropshire Partners in Care	David Crosby	Chief Officer

- 7.1.1. Only members of TWIPP have the right to attend Committee meetings, but the Chair or Vice Chair may invite relevant staff to the meeting as necessary in accordance with the business of TWIPP.
- 7.1.2. The Chair may ask any or all of those who normally attend, but who are not members, to withdraw to facilitate open and frank discussion of matters.
- 7.1.3. Members are expected to attend 75% of meetings held each calendar year.

7.2. Chair and Vice Chair

- 7.2.1. The Group will be chaired by the Chief Executive of Telford & Wrekin Council.
- 7.2.2. In the event of the Chair being unable to attend, the Executive Director of Adult Social Care, Housing and Customer Services at Telford & Wrekin Council will chair the meeting as the Vice Chair.
- 7.2.3. In the absence of the Chair, or Vice Chair, the remaining members present shall elect one of their number to Chair the meeting.
- 7.2.4. The Chair and Vice Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these terms of reference.

8. Meeting Quoracy and Decisions

8.1. Meetings

- 8.1.1. The Group will meet on a bi-monthly basis and arrangements for meetings will be made in accordance with the ICB's Standing Orders.
- 8.1.2. Additional meetings may take place as required.
- 8.1.3. The Board or Chair may ask TWIPP to convene further meetings to discuss particular issues as and when needed.
- 8.1.4. TWIPP may meet virtually or face to face. If TWIPP meet virtually the meeting will be recorded.

8.2. Quorum

- 8.2.1. For a meeting to be quorate there must be at least three members of different organisations present.
- 8.2.2. If any member of TWIPP has been disqualified from participating on an item in the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.
- 8.2.3. If the quorum has not been reached, then the meeting either may be postponed until the meeting can be quorate or the meeting may proceed if those attending agree, but no decisions may be taken.
- 8.2.4. Decisions deemed by the Chair to be 'urgent' can be taken outside of the meeting via email communication, and with the agreement of a quorate number of members. Where this happens, the decision made in this way must be reported to the next meeting to ensure it is captured in the minutes.

8.3. Decision Making and Voting

- 8.3.1. Decisions will be taken in accordance with the ICB's Standing Orders. TWIPP will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.
- 8.3.2. Only members of TWIPP may vote. Each member is allowed one vote and a majority will be conclusive on any matter.
- 8.3.3. Where there is a split vote, with no clear majority, the Chair of TWIPP will hold the casting vote.

9. Reporting

- 9.1. The Chair of TWIPP is the conduit for reporting to and receiving updates and requests from the Board.
- 9.2. The Chair's report of TWIPP will be shared with Board to provide updates on activity and risks.

10. Conflicts of Interest

- 10.1. TWIPP will maintain a standing register, as per any other corporate decision-making body. In advance of any meeting of TWIPP, consideration will be given as to whether conflicts of interest are likely to arise in relation to any agenda item and how they should be managed. This may include steps to be taken prior to the meeting, such as ensuring that supporting papers for a particular agenda item are not sent to conflicted individuals.
- 10.2. At the beginning of each meeting of TWIPP, members and attendees will be required to declare any interests that relate specifically to a particular issue under consideration. If the existence of an interest becomes apparent during a meeting, then this must be declared at the point at which it arises. Any such declaration will be formally recorded in the minutes for the meeting. Members must ensure that they continue to comply with relevant organisational policies / guidance.
- 10.3. The Chair of TWIPP will determine how declared interests should be managed, which is likely to involve one the following actions:
 - 10.3.1. Requiring the individual to withdraw from the meeting for that part of the discussion if the conflict could be seen as detrimental to TWIPP decision-making arrangements.
 - 10.3.2. Allowing the individual to participate in the discussion, but not the decision-making process.
 - 10.3.3. Allowing full participation in discussion and the decision-making process, as the potential conflict is not perceived to be material or detrimental to TWIPP decision-making arrangements.

11. Meeting Support

- 11.1. The meeting will be supported by Assurance & Integration Programme Manager and Telford and Wrekin Place Lead.
- 11.2. The meeting will be serviced by a Secretariate or a member's PA and will operate using the following principles:
 - 11.2.1. Agenda items will be sought from the members of The Group 14 days prior to the meeting.
 - 11.2.2. The Chair will agree the final agenda.
 - 11.2.3. Papers will be circulated 5 working days before each meeting.

11.2.4. Additional items for the agenda will be taken by exception with the knowledge and agreement of the Chair in advance of the meeting commencing.

11.2.5. The minutes of each meeting will be circulated within 10 working days of the meeting being held and will be ratified at the following meeting.

11.2.6. All correspondence will be through TWintegratedplacepartnership@telford.gov.uk

11.3. A chair's report will be created from the minutes.

Version control

Version	Date	Author	Comments
DRAFT 0.1	19.08.2024	S. Downes	Review and re-write of TOR
DRAFT 0.2	23.08.2024	S Downes	Amended following comments from FM
DRAFT 0.3	30.08.2024	S Downes	Amended following comments from JB and system meeting parameters
FINAL DRAFT	26.09.2024	S Downes	Amended following feedback from TWIPP members (see minutes for more detail). Sent to Vice Chair for final check before finalising as per agreement at TWIPP on 12/09/2024.
FINAL	03.10.2024	S Downes	Finalised following agreement from Vice-chair

This page is intentionally left blank



NHS

Shropshire, Telford and Wrekin

Shropshire Community Health NHS Trust

NHS

The Shrewsbury and Telford Hospital NHS Trust

NHS

Midlands Partnership NHS Foundation Trust
A Keele University Teaching Trust

NHS



Telford & Wrekin Integrated Place Partnership (TWIPP)

Priority Pack

Sarah Downes, Telford & Wrekin Place Lead

Sarah.downes@telford.gov.uk

Page 17



Priority areas for 2024-2026

1. **Supporting General Practice** by working together to reduce and manage demand for GP services/appointments
2. **Improving all-age mental health services and support** (prevention, early intervention and specialist services)
3. **Healthy Ageing - preventing, reducing and delaying frailty**

Sources of evidence:

- JSNA
- STW Big Conversation 2023
- NHS GP Experience Survey
- Healthwatch Telford and Wrekin GP Access Report
- Telford & Wrekin Council's Resident's Survey 2023
- Health & Wellbeing Strategy Consultation 2023
- Annual Public Health Report 2024
- Other strategy development consultations
- Experts by Experience/ group feedback
- Elected Members feedback from conversations with constituents
- Scrutiny, Health and Wellbeing Board and Integrated Care Board discussions
- NHS England

Priority area 1: Supporting General Practice

What is the evidence telling us?

- Demand on GP services is high - 9% increase in appointments in General Practice since pre-pandemic (ICB, Dec 2023 report). Not all appropriate demand.
- Inequality of access and quality across Telford and Wrekin. From the 2023 GP Patient Satisfaction Survey, results varied from 5% of people find it easy to get through to someone on the phone to 80%. Similarly, those reporting good experiences of GP practices varied from 42% to 91% across the practices.
- Impact on people – feedback from residents through various evidence routes (see previous slide) not only highlights how important it is to them but the impact of not being able to access good quality sustainable general practice is significant.
- Impacting on acute services – if people think they cannot get a GP appointment, they go elsewhere such as to A&E. In STW, we have some of the most stretched A&E departments in the country, impacting on waiting times and ambulance delays. (ICB, Dec 2023 report)
- People want joined up, high quality, accessible health services
- Significant opportunities for health and care integration across place to support improvements. Including but not limited to:
 - Integrated Neighbourhood Teams based on a proactive care model
 - Community Prevention approaches (e.g. Live Well Hubs)
 - Prevention and early intervention services
 - More care closer to home
 - Supporting residents to understand what services are available and how to access them in their community

“Once you manage to get into the surgery, the treatment/care is excellent”

“Saturday & late evening phone appointments have also been very helpful”

“Waiting times must be reduced”

“Had to go 30hours in A&E with pneumonia because I ... can't get to speak to a dr”

Priority area 2: All age mental health services and support

What is the evidence telling us?

- Premature morbidity in adults with severe mental illness is worse in TW than England average. The suicide rate in the borough for 2019-21 (11.4 per 100,000) was similar to the England average (10.4) but was the highest rate recorded for the borough since 2012-14.
- The rate of pupil suspensions at secondary school is higher than the national average (T&W rate of 26.2 compared to England rate of 14.0) (source DfE LAIT Tool 2021/22)
- Residents are reporting, through various routes mentioned in slide 3, a poor experience (pre-specialist service active involvement)
- Impact of Adverse Childhood Experiences and the impact of the pandemic on mental health is significant.
- Concerns raised around:
 - Accessibility
 - Waiting lists and availability of appointments
 - Support before reaching crisis point not available
 - Providing more services locally
 - Lack of awareness of how to manage own mental health
- Significant opportunities for health and care integration across place to support improvements. Including but not limited to:
 - Mental health prevention and early intervention services for all ages
 - More support/care closer to home
 - Role of VCSE
 - Supporting residents to understand what services are available and how to access them in their community

“Early help is needed”

“It should be easy to access mental health services”

“Lockdown causing isolation and now the cost-of-living crisis and other global events together clearly affecting their mental health and emotional wellbeing and their motivation and hopes for the future”

“There is more support that I am looking for but it is hard to find and I don't drive or use buses...”

Potential priority area 3: Healthy Ageing (Frailty)

What is the evidence telling us?

- Frailty is generally characterised by issues like reduced muscle strength and fatigue. Around 10% of people aged over 65 live with frailty. This figure rises to between 25% and a 50% for those aged over 85. Frailty (rather than age) is an effective way of identifying people who may be at greater risk of future hospitalisation, care home admission or death.
- TW Population of 65+ increased 35.7% since the previous census (this was the largest increase in the West Midlands and one of the largest in England). 14.9% of those 65+ reported they had bad or very bad health.
- 30% of people aged 65 and over will fall at least once a year. For those aged 80 and over it is 50%. They are the number 1 reason older people are taken to A&E.
- People want to stay as independent as long as they can and to be able to remain living in their own home.
- Concerns raised around:
 - Access to primary care services for health checks and mental health support
 - Access to support groups locally
 - Access to health screen and vaccinations locally
 - Support to age well
 - Risk of loneliness and isolation
 - Lack of joined up health and care
- Significant opportunities for health and care integration across place to support improvements. Including but not limited to:
 - Multi-disciplinary approaches using risk stratification and population health management approach to target those most at risk
 - Role of VCSE
 - Falls pilots and pathways

Community-centred approaches - prevention and reducing demand on care and support services

Strengthening communities

- Use of data and insight
- Place based projects (health inequalities and prevention)
- Live Well Hubs

Volunteer & peer roles

- Health Champions
- Feed the Birds (loneliness & isolation)
- Cancer Champions
- Blood Pressure Champions

Collaborations & partnerships

- TWIPP
- Ageing Well Strategy
- All-age Carers Strategy
- Mental Health Strategy
- Excess weight prevention
- Physical Activity

Connecting people to community resources & practical help

- Making Every Contact Count training / staff health & wellbeing
- Social Prescribing
- Healthy Lifestyles Services (Independent Living Centre & in the community)
- Calm Cafes
- Falls Prevention 'Moving On' classes
- CVS
- Age Concern
- Low level support for people leaving hospital



Example: Development of local 24/7 supported accommodation

- No provision locally for people with mental health needs resulting in out of area placements
- Multi-agency work to develop local option (including commissioners, housing, a local developer, operational health and care teams)
- Rehab teams involved in the local delivery of care and support
- Multi-agency approach to prioritising placements whilst ensuring compatibility and reducing risk

Impact for residents:

- Moving back to telford, closer to family, friends and support network
- Have their own front door
- Develop daily living skills and increasing independence in their own home

Additional community support;

- ✓ Re-location of a Calm Café to the same locality to enable residents to access this preventative support and access other community services
- ✓ Connections to the Donnington Energize project which will provide residents opportunities to increase their levels of physical activity to secure wider health benefits



[Acura Living - White Cottage Apartments \(youtube.com\)](#)

Example: Community Preventing Falls through Exercise

- Public health funding to support the delivery of weekly 'Moving on' sessions in the community
- Mary joined the Falls Prevention class following an unsuccessful knee operation. Mary's walking has now improved, and she regularly attends the local Moving On session. She can now walk 3 miles at once; she volunteers and leads local walks close to where she lives.

Page 24

"I feel good about the classes, they keep me going and allow me to do the things I do"



**Telford's NEW over 50's
gentle exercise classes are here!**

Classes start across Telford
from **April, 8 2024** and
only **£3 per class**
or buy 4 classes for £10



Find out more information at fit4allonline.co.uk/movingon

For further information on TWIPP please contact: Sarah Downes,
sarah.downes@telford.gov.uk

Page 25



This page is intentionally left blank