



**Telford & Wrekin**  
**C O U N C I L**

Addenbrooke House Ironmasters Way Telford TF3 4NT

**HEALTH & WELLBEING BOARD**

Date **Thursday, 17 June 2021** Time **2.00 pm**  
Venue **To be Confirmed**

**Enquiries Regarding this Agenda**

Democratic Services	Stacey Worthington	01952 384382
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Lead Officer	Partnership Manager	01952 382186

**Committee Membership:**

J Baker	Community Safety Partnership
J Britton	Executive Director: Childrens Safeguarding & Family Support
Cllr A J Burford	Cabinet Member for Health & Social Care, TWC
S Dillon	Director: Adult Social Care
Cllr I T W Fletcher	Conservative Group, TWC
Cllr K Middleton	Labour Group, TWC
(Chair)	
L Noakes	Director: Health, Wellbeing & Commissioning
Nicky O'Connor	Shropshire Telford & Wrekin Sustainability and Transformation Partnership
A Olver	Voluntary Sector Representative
B Parnaby	Healthwatch, Telford & Wrekin
Pepper	Shropshire, Telford and Wrekin Clinical Commissioning Group
Cllr S A W Reynolds	Cabinet Member for Children, Young People, Education & Lifelong Learning, TWC
J Rowe	Executive Director: Adults Social Care, Health Integration and Wellbeing.
Skidmore	Shropshire, Telford and Wrekin Clinical Commissioning Group
Cllr K T Tomlinson	Liberal Democrat / Independent Group, TWC
Cllr P Watling	Cabinet Member for Co-Operative Communities, Engagement and Partnerships

**AGENDA**

1. **Apologies for Absence**
2. **Declarations of Interest**
3. **Minutes of the Previous Meeting** 3 - 8
4. **Public Speaking**
5. **Reframing the Health & Wellbeing Board & Terms of Reference** 9 - 16  
To receive the report on Reframing the Health and Wellbeing Board.
6. **The Year of Wellbeing** Verbal Report  
To receive the presentation on The Year of Wellbeing from the Service Delivery Manager Health Improvement & Libraries, Telford & Wrekin Council.
7. **Prevention & Healthy Lifestyles** 17 - 28  
To receive the report of the Service Delivery Manager Health Improvement & Libraries, Telford & Wrekin Council.
8. **Homelessness Health** 29 - 34  
To receive the joint report of the Director for Public Health and Director for Housing, Employment & Infrastructure, Telford & Wrekin Council.
9. **Children and Young People with Mental Health Update** 35 - 42  
To receive the presentation of the Managing Director, Shropshire, Telford & Wrekin Care Group.
10. **Ageing Well - Celebrating Later Life In Telford And Wrekin** 43 - 56  
To receive the joint report of the Director for Adult Social Care, Telford & Wrekin Council, the Chief Executive, Age UK Shropshire, Telford & Wrekin, the Chair, Healthwatch Telford & Wrekin and the Deputy Director of Partnerships, Shropshire, Telford & Wrekin Clinical Commissioning Group.

## HEALTH & WELLBEING BOARD

### Minutes of a meeting of the Health & Wellbeing Board held on Thursday, 25 March 2021 at 2.00 pm in Remote Meeting

#### Present:

Councillor A J Burford – Cabinet Member for Health & Social Care, TWC  
J Baker – Community Safety Partnership  
J Britton – Executive Director: Children’s Safeguarding & Family Support, TWC  
S Dillon – Director: Adult Social Care, TWC  
D Evans – Accountable Officer, Shropshire, Telford & Wrekin CCGs  
Councillor I T W Fletcher – Conservative Group, TWC  
Councillor K Middleton – Labour Group, TWC (Chair)  
L Noakes – Director for Public Health, TWC  
N O’Connor – Shropshire, Telford & Wrekin Sustainability and Transformation Partnership  
A Olver – Voluntary Sector Representative  
B Parnaby – Acting Chair, Healthwatch Telford & Wrekin  
J Rowe – Executive Director: Adults Social Care, Health Integration & Wellbeing, TWC  
Councillor K T Tomlinson – Liberal Democrat/ Independent Group, TWC  
Councillor P R Watling – Cabinet Member for Cooperative Communities, Engagement and Partnerships

#### In Attendance:

N Minshall – Service Delivery Manager, TWC  
M Bennett - Service Delivery Manager, TWC  
T Guest – Housing, Nuplace Service Delivery Manager, TWC  
L Mills - Service Delivery Manager Health Improvement & Libraries, TWC  
S Downes – Integration Programme Manager, TWC  
J Galkowski – Democratic & Scrutiny Officer, TWC

Apologies: J Povey and Councillor S A W Reynolds

#### **HWB1      Declarations of Interest**

None.

#### **HWB2      Minutes of the Previous Meeting**

**RESOLVED** – that the minutes of the meeting held 3 December 2020 be approved

#### **HWB3      Public Speaking**

None.

#### **HWB4     Outbreak Control Plan**

The Board received the report of the Director: Public Health and the Service Delivery Manager: Health Protection, Health, Wellbeing and Commissioning. The presentation included the latest infection rates and hospital admission rates. The Board heard that the Borough had just over 10,000 infections over the course of the pandemic, the fifth-lowest rate within the region.

The Board was reminded that it had approved the Local Outbreak Plan in July 2020 and heard that the Department of Health & Social Care had asked that it be refreshed to continue to be able to respond to future outbreaks and be prepared to move forward through the next stage of the pandemic with a focus on improving immunisation uptake and reducing inequalities. The Board was informed that the Plan had been submitted to the regional team and feedback had indicated that it was a strong plan with good outbreak control structures, good knowledge within the team and demonstrated a good understanding of our communities.

The Board was informed that the review required a look back at the Council's best practice when responding to outbreaks and that the Department of Health & Social Care had set out a number of expectations of the updated Local Outbreak Plan, some of which were current expectations and some which had been added since the Plan was first adopted.

Members commented that this presented an opportunity to reflect on the Covid journey to date and to express thanks for the hard work from Council officers but also that of other agencies and the Council's third sector partners in the community and voluntary sector. This was testament to the fact that Telford worked on difficult issues together.

Members made reference to the aspect of the Plan which referred to funding and the limited nature of this. A question was asked of the Director of Public Health regarding what indications the government had given that further funding would become available particularly with the possibility of a third wave that the country is being told may arrive. The Director of Public Health explained that there was a sustainable financial plan in place to continue with the core funding of the Council's Health Protection Hub at the moment but that it was not possible to say how the pandemic would develop and progress move forward and, if there were significant surges or a significant third wave, then it was difficult to say how much funding would be required to respond to these. However, currently, the Director of Public Health was comfortable with the current resources available to support the ongoing work of the Health Protection Hub and other work relating to the pandemic.

Members commented that they were happy to see the Council and partners taking a joint approach to communications in relation to both precautionary testing and vaccination as it was important to reinforce those messages to ensure that the uptake of both was as high as possible and, therefore, helping to reduce inequalities caused by the pandemic.

**RESOLVED** – that the refreshed Telford & Wrekin Local Outbreak Management Plan March 2021 be approved.

**HWB5 Independent Living Centre**

Members received a presentation from the Service Delivery Manager: Prevention and Enablement on the Independent Living Centre which was due to be launched in Telford Town Centre and was the outcome of a joint venture between the Council and the Council for Voluntary Services in Telford. As part of the digital offer, the Board also learnt about the virtual house that would be available for customers to interact with to aid understanding of the devices and equipment to enable people to live well and independently in their own homes.

Members of the Board asked how a person without family support would be able to access the Independent Living Centre and the virtual house. They heard that, prior to discharge from hospital, the professionals working with an individual would be able to undertake a virtual tour of the house with that individual and would also book an appointment for the individual to attend the Independent Living Centre should they need it with support from Locality Workers.

The Board was also given a demonstration of how the virtual house operates which was set out in collaboration with Anwyl Homes. The house demonstrates the various pieces of equipment including bath aids, tactile bands and bed sensors to support those with a wide variety of conditions such as limited sight or hearing, memory loss and sensory impairment.

Members of the Board considered the work would be of significant benefit to residents and their carers and commended all involved on the quality of the product.

**HWB6 Housing Allocation Policy**

The Board received a report from the Service Delivery Manager: Housing Solutions on the Council's Housing Allocation Policy. It was explained that, a good quality home impacted upon health, wellbeing and good outcomes across all aspects of a person's life. The Policy sets out how the Council would nominate residents to Housing Association properties and what would be taken into account by Housing Associations. Some individual housing partners would operate their own banding system; some would be taking nominations from the Council or advertising on a wider platform. The document was about to be opened up for consultation for an 8 week period.

The Council provides advice and assistance to those who are homeless or are facing homelessness. The Council has a website which includes details of all registered housing providers operating within the Borough and how many vacant properties they have.

The Allocation Policy prioritised residents who fall into specified categories such as those with disabilities or armed forces personnel.

In response to questions from the Board, the SDM explained that there were multiple platforms by which residents could access properties. The SDM also provided assurance that Council officers would be providing assistance to residents by signposting them to the appropriate information to assist in accessing housing.

Some Members expressed concern regarding universal credit and the system of how housing benefit is paid and whether or not people can request housing benefit to be paid directly to the landlord or to the tenant. The SDM explained that this was operated by the Department of Work and Pensions but that tenants could choose for the Housing Benefit element of Universal Credit to be paid to the tenant and there were some limited circumstances in which the Landlord could insist that it is paid to them.

### **HWB7     COVID-19 Community Support Response**

The Board received the report of the Housing, Nuplace Service Delivery Manager and the Senior Public Health Commissioner. The Council created a Community Support helpline at the outset of the pandemic, mobilised a team of Council staff to redeploy into roles to provide direct support and also had a team of volunteers and partners working hard to provide practical crucial support to some of our most vulnerable residents – access to food, prescriptions and a social network through safe and well visits and keeping in touch calls. Now, with the anticipated easing of restrictions, it was timely to think about next steps.

The next steps have evolved through the work the Council has undertaken with partners. Loneliness and isolation will remain even when lockdown restrictions ease and the Council had been working with the voluntary sector to continue to provide support to these residents. The Council had also worked with residents to ask what would help them to feel support and what activities they would engage in to help reduce feelings of loneliness and isolation.

In response to some Members commenting that there had been a delay at the outset of the pandemic, the SDM explained that there was a complex national picture with uncertainty around what each agency was going to be providing such as the NHS Responder, national volunteering and similar.

Other Members of the Board recognised that, nationally, there had been a delay in mobilising resources but that the Council's response had been speedy and prompt – now that the infrastructure for coordinating volunteers, then the Council would be able to step up even more quickly than previously. The quick action of the Council led to 50,000 free school meals being delivered during the period when the national system had failed to provide for children who needed it most.

## **HWB8 Shropshire, Telford and Wrekin Sustainability and Transformation Partnership Update**

Members received an update from the STP Programme Director covering the Integrated Care System, Winter Planning including Covid-19 and the vaccination programme. The Board heard that, by April 2021, Integrated Care Systems would cover the whole country evolving and growing from the current network of Sustainability and Transformation Partnerships with the regulatory framework contained within the NHS Long Term Plan (2019). The purpose of the ICS is to provide better, and more joined-up, care for patients with different organisations working together ultimately helping people to live healthier lives for longer and reduce health inequalities. The update included reference to the White Paper published in February 2011 which set out proposals for health and care integration. Shropshire, Telford and Wrekin had submitted a delivery plan to NHS England and Improvement with the purpose of becoming a shadow ICS from April 2021. This delivery plan contained 10 pledges which have been co-produced by partners.

Members recognised that the ICS would present an opportunity to address the wider determinants of health outcomes and, working together, there would be an opportunity to take a holistic approach in doing that relying upon expertise from all partners. Members were keen to learn more about how the Board with sit within the wider ICS.

## **HWB9 Integration of Health and Social Care - Telford's 'Place' Approach**

Members received the report of the Integrated Place Partnership Manager who explained to the Board that Telford and Wrekin Place Partnership (TWIPP) covered all place-based developments to ensure better prevention, community focus and a proactive and collaborative approach. The TWIPP links to the STP working on the NHS Long Term Plan to improve benefits for the community and improve financial sustainability. The report set out the updated priorities of the TWIPP for the next 2 years and also updated on the governance arrangements for the TWIPP.

Members felt the report provided a good summary of the importance of the TWIPP and that it was important to recognise the work that it had achieved, including avoiding admissions to hospital. The Board was encouraged by how effective the TWIPP had been in ensuring that hospital discharges had been carried out effectively.

Members recognised that the TWIPP provided opportunity to build strong foundations with the third sector and that it was important not to hamper the effectiveness of the TWIPP by taking a “top heavy” approach to matters.

Before the meeting closed, Members of the Board thanked the Accountable Officer, Shropshire, Telford & Wrekin CCGs for his hard work over the last 9 years and his commitment to the Health and Wellbeing Board during that time.

The meeting ended at 4.00 pm

**Chairman:** .....

**Date:** Thursday, 17 June 2021



**TELFORD & WREKIN COUNCIL**  
**HEALTH & WELLBEING BOARD 17<sup>TH</sup> JUNE**  
**REFRAMING THE HEALTH & WELLBEING BOARD & TERMS OF REFERENCE**  
**REPORT OF THE CLLR KELLY MIDDLETON (CHAIR)**

**PART A) – SUMMARY REPORT**

**1. SUMMARY OF MAIN PROPOSALS**

1.1. This report identifies a series of challenges and opportunities for the Health & Wellbeing Board moving forward. To enable the Board to respond effectively to them, it is proposed that the Board’s terms of reference and membership is reviewed and, therefore, that the current Terms of Reference are re-approved pending the outcome of that review.

**2. RECOMMENDATIONS**

It is recommended that the Board:-

- 2.1. Approves the terms of reference attached at Appendix A; and
- 2.2. That the Board approves the proposal for a wholesale review of the Terms of Reference to be presented to the Board in September 2021.

**3. SUMMARY IMPACT ASSESSMENT**

<b>COMMUNITY IMPACT</b>	Do these proposals contribute to specific Co-Operative Council priority objective (s)?	
	Yes	Every child, young person and adult lives well in their community
	Will the proposals impact on specific groups of people?	
	Yes	
<b>TARGET COMPLETION/DELIVERY DATE</b>	N/A	
<b>FINANCIAL/VALUE FOR MONEY IMPACT</b>	No	There are no direct financial implications arising from the recommendation in this report. Any financial impact of the revised terms of reference and membership will be identified within the report presented to the Board in September 2021

		TAS 7.6.21
<b>LEGAL ISSUES</b>	Yes	The Council's Constitution sets out that each Committee/Board is required to agree its terms of reference at the start of each municipal year. It is important to ensure that the terms of reference are fit for purpose and enable the Council, together with partners, to best meet the changing and complex health and wellbeing landscape. The proposals contained within this report enable that to be done and also ensure compliance with the Council's Constitution. AL 9/06/2021
<b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b>	N/A	
<b>IMPACT ON SPECIFIC WARDS</b>	Yes	Borough-wide but particularly wards with the highest levels of socioeconomic deprivation and health inequalities.

#### **4. PART B) – ADDITIONAL INFORMATION**

4.1. In summer 2020, the Board approved a new strategy setting out four priorities:

- Develop, evolve and deliver our Telford & Wrekin Integrated Place Partnership (TWIPP)
- Tackle health inequalities
- Improve emotional and mental wellbeing
- Ensure people's health is protected as much as possible from infectious diseases and other threats

4.2. As we move into my second year as Chair of the Health & Wellbeing Board, I wanted to use this first Board meeting of the new municipal year to recognise that there are emerging challenges and opportunities that will impact on the Board's potential to drive delivery of these priorities:

- The Government's White Paper "Integration and innovation" which will shape the future of our health and care economy which, following the necessary legislation, will see the creation of a Shropshire and Telford & Wrekin Integrated Care System. It is essential that the Board has meaningful prominence in the ICS to ensure that the challenges and opportunities for Telford & Wrekin are heard and understood so that the system can respond effectively.
- The need to address the impact of Covid 19 on our communities and on our health and care services. There is already clear evidence that the pandemic has had greater impact in specific communities including BAME communities

and the Borough's communities which have the greatest levels of social disadvantage.

4.3. Recognising these two challenges, our Board Development session on the 26th May explored health inequalities and, through a series of studies, considered different approaches to service delivery which have successfully addressed specific challenges. These included:

- Targeting smokers in routine and manual jobs
- Drug & alcohol service transformation

4.4. From this discussion, we identified a number of principles as to how the Board could move forward to address its priorities:

- The importance of evidence based decision making - exploring data at a locality and community level not simply at a borough level. This approach has enabled different delivery models to be successfully targeted at different communities. We should also develop "deep dives" into issues, to fundamentally understand them. This approach should shape the ongoing development of our Joint Strategic Needs Assessment.
- The need to take a targeted prevention approach that is focussed on early intervention. Partners will need to shift resources to deliver this model.
- The need for collaboration across the health and care system – where partners align practice and resources to address specific challenges. There are excellent examples of where this has already happened. To achieve this, the membership of the Board would need to be reviewed to ensure that the right organisations are represented.
- The need for the Board to be clear what it will focus on delivering against its priorities, to tackle a small number of challenges with commitment and energy. To embed this approach, it was proposed that there should be a Board Member Champion for the priority issues.
- The critical importance of a community asset based approach and the need for effective community engagement when seeking solutions to challenges. Co-production should be core to driving the Board's priorities, as should the engagement of experts by experience.
- The need for the Board to more, effectively communicate about its work and the impact that it can have on the day to day issues that affect people's lives. The Board should create better opportunities and mechanisms to hear the views of individuals and organisations that have an interest in the issues that the Board is considering.

4.5. To embed these ways of working, I want to propose that the Board's terms of reference and membership are reviewed with the goal of establishing them as principles by which the Board should function. I want to work with Members of the Board through the summer to develop draft proposals so that a revised set are presented to our next meeting in September for our consideration and adoption.

- 4.6. This is both an exciting and challenging time for the Board and I want to ensure that together we really can influence and shape how services are delivered, so that we make a positive difference to the lives of borough residents through the delivery of our Priorities.
- 4.7. In the interim period, it is recommended that the Board approves the Terms of Reference attached at Appendix A pending the outcome of the review.

## Appendix One

### Telford & Wrekin Health and Wellbeing Board - Terms of Reference and Procedure

The Board has the responsibility for public health and health and wellbeing responsibilities within the Borough.

#### TERMS OF REFERENCE

1. The Health and Wellbeing Board is responsible for
  - 1.1. the development of a joint Health & Wellbeing Strategy for Telford & Wrekin based upon the needs identified in the Joint Strategic Needs Assessment (JSNA)
  - 1.2. the ongoing development of the JSNA and the development, review and oversight of the delivery of actions identified in the joint health and wellbeing strategy and other key plans and strategies that may be developed from time to time
  - 1.3. the encouragement of joint and co-commissioning between health and care sectors, including Telford and Wrekin CCG, Telford and Wrekin Council, and NHS England and ensuring that commissioning activity of the relevant organisations are aligned with the priorities set out in the Health & Wellbeing Strategy
  - 1.4. the general oversight of the Council's Public Health responsibilities and receiving the annual report of the Council's Director of Public Health
  - 1.5. the receiving of reports from and making recommendations to Full Council, NHS England, and the Clinical Commissioning Group Board and Boards and sub-committees that it may establish (and delegate functions to) and from other Boards and organisations involved in the provision of that influence of health and well-being outcomes for the whole population within the Borough.
2. The Health and Wellbeing Board will link to the Local Strategic Partnership and local Adults and Childrens' Safe-guarding Boards
3. **General**
  - 3.1. At the first meeting after the Annual Council Meeting and in response to any further guidance consider its terms of reference, structure, membership and activities.

#### PROCEDURE

##### 4. General

Unless specifically provided for in these Terms of Reference the [Council Procedure Rules](#) govern the way that committees operate but these may be varied or suspended<sup>1</sup> at the discretion of the Chairman of the Committee in the interests of efficient and effective management of the committee

##### 5. Membership

- 5.1. Members of the Health and Wellbeing Board will comprise representatives from the Telford & Wrekin Clinical Commissioning Group, Telford & Wrekin Council, HealthWatch and NHS England Local Area Team. The core members are:
- 5.2. An elected Member of Telford & Wrekin Council (Chairman of the Health and Wellbeing Board)
- 5.3. Cabinet Member for Health & Social Care
- 5.4. Cabinet Member for Enforcement, Community Safety and Customer Services.
- 5.5. Cabinet Member for Cabinet Member for Children, Young People, Education and Lifelong Learning.
- 5.6. Cabinet Member for Cabinet Member for Co-Operative Communities, Engagement and Partnerships.
- 5.7. Director responsible for Health Integration and Wellbeing
- 5.8. Director responsible for Adult Social Care
- 5.9. Director responsible for Children's Services
- 5.10. Director of Public Health
- 5.11. NHS England Local Area Team representative
- 5.12. Joint Chair of Shropshire, Telford and Wrekin Clinical Commissioning Groups (CCGs) (Vice Chair Health and Wellbeing Board)
- 5.13. Non-Executive Director from Clinical Commissioning Group
- 5.14. Chief Officer from Clinical Commissioning Group
- 5.15. Representative of local HealthWatch
- 5.16. Chair of the Community Safety Partnership
- 5.17. Each opposition Group with 4 or more elected members shall have one place on the Health and Wellbeing Board with voting rights.
- 5.18. Such other persons, or representatives of such other persons, as the Local Authority thinks appropriate
- 5.19. The members of the Board will be advised and supported by officers from the local authority and CCG.
- 5.20. Members agree to share all relevant information and data, to allow performance, and other joint working arrangements, to be properly monitored and managed.

## **6. Quorum**

- 6.1. Quorum of one quarter is required, with a minimum of one Councillor Board member from Telford & Wrekin Council and one Board member from the CCG required in attendance.

## **7. Disqualification for Membership**

- 7.1. Any person who would be disqualified from being able to stand for election as a councillor will be disqualified from being a member of a committee or sub-committee of a local authority. The regulations state that these disqualifications will be retained for Health and Wellbeing Board, but the regulations will ensure the disqualifications do not apply to Health and Wellbeing Board in so far as they cover disqualifications in respect of

members of the board holding any paid employment or office in the local authority – this allows the Directors of Adult Social Services, Children's Services and Public Health to be formal members of the Health and Wellbeing Board.

- 7.2. The following disqualifications will be retained for members of the Health and Wellbeing Board:
- 7.3. Being the subject of a bankruptcy restrictions order or interim order
- 7.4. Having been convicted in the United Kingdom, the Channel Islands or the Isle of Man of any offence and has had passed a sentence of imprisonment (whether suspended or not) for a period of not less than three months without the option of a fine.

## **8. Voting Rights**

- 8.1. All Members of the Health and Wellbeing Board will be able to vote alongside the elected representatives. This applies to any additional board members appointed in addition to the statutory membership set out in the Health and Social Care Act 2012.

## **9. Meetings**

- 9.1. The Health and Wellbeing Board will meet quarterly and in public. Dates and times of meetings will be agreed and published in advance. Note - the press and public may be excluded during consideration of any matter which would involve the disclosure of confidential or exempt information.
- 9.2. Agendas and supporting papers will be issued at least five clear days before each meeting and action notes will be produced, confirmed as a true record of the meeting and signed by the Chair. Note - documents that may disclose confidential or exempt information, will be made available for public inspection five days before the meeting.
- 9.3. Members of the public and press will have access to the meetings and there will be provision for public speaking section at each Health and Wellbeing Board meeting. A procedure for public speaking at the Health and Wellbeing Board is in place and is available on the Council's website or by contacting Democratic Services.

## **10. Code of Conduct and Declaration of Interest**

- 10.1. The Health and Wellbeing Board will adopt the Council's code of conduct. Any interests in item(s) on the agenda should be declared at the start of the meeting.

## **11. Reporting Mechanisms/Accountability**

The actions of the Health and Wellbeing Board will be subject to independent scrutiny by the relevant Scrutiny Committee of the Council.

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**TELFORD & WREKIN COUNCIL**

**HEALTH & WELLBEING BOARD – 17<sup>TH</sup> JUNE 2021**

**PREVENTION AND HEALTHY LIFESTYLES**

**REPORT OF LOUISE MILLS - SERVICE DELIVERY MANAGER: HEALTH IMPROVEMENT**

**LEAD CABINET MEMBER – CLLR ANDY BURFORD**

**PART A) – SUMMARY REPORT**

**1. SUMMARY OF MAIN PROPOSALS**

1.1 This report summarises the main programmes of work contributing to the Health and Wellbeing Strategy priority prevention and healthy lifestyles with a focus on the following strategy commitments: enhancing prevention activities to improve pregnancy and birth outcomes for women, their babies and families; and encouraging a healthy weight and increasing physical activity.

1.2 The report provides an update on our main prevention and healthy lifestyle services with a focus on Covid-19 recovery and work undertaken by providers to implement alternative ways of supporting residents whilst services have had to be suspended in line with government guidelines. In many cases services have seen advancements in providing support digitally which has delivered positive outcomes and will therefore continue as part of our service offers going forward.

1.3 The report highlights a number of new initiatives that have been made possible from one off funding again linked to the pandemic.

**2. RECOMMENDATIONS**

It is recommended that the Health and Wellbeing Board:-

2.1 Notes the impact that Covid-19 has had on the provision of prevention and healthy lifestyle services,

2.2 Notes the action taken by service providers to work creatively and flexibly to continue to provide some support during the pandemic to people wanting to make positive changes to their lifestyle.

2.3 Notes a number of initiatives have been made possible from non-recurrent funding linked to Covid 19 grants – consideration will need to be given to how we can sustain activity for those initiatives that deliver improved outcomes linked to our priorities.

**3. IMPACT OF ACTION**

The prevention and healthy lifestyles work stream contributes to improving a number of public health outcomes – initiatives and services are targeted towards supporting the most vulnerable and to reduce the inequalities gap.

## SUMMARY IMPACT ASSESSMENT

<b>COMMUNITY IMPACT</b>	Do these proposals contribute to specific Co-Operative Council priority objective(s)?	
	Yes	Every child, young person and adult lives well in their community A community-focussed, innovative council providing efficient, effective and quality services
	Will the proposals impact on specific groups of people?	
	Yes	This work is expected to have a positive impact for the following: Lower socio-economic groups Black, Asian and minority ethnic communities Disabled people People living with a long term health condition Pregnant women
<b>TARGET COMPLETION/DELIVERY DATE</b>	The prevention and healthy lifestyles work programme is ongoing – the report includes a number of initiatives that have been funded for 1 to 2 years from non-recurrent grant funding	
<b>FINANCIAL/VALUE FOR MONEY IMPACT</b>	Yes	For the successful prevention and healthy lifestyles programmes, mentioned in the report that have non-recurrent grant funding, to continue beyond the initial period, further funding will need to be identified e.g. from new grant funding, public health grant or Health & Wellbeing reserves.  One off grants mentioned, e.g. Healthy Weight Programme and Happy, Healthy Active Holidays, are time limited/specific, the service need to ensure the funds are spent in line with the grant determination guidance.

		<p>Public Health Grant funded base budget services are dependent on this grant remaining at current level in future years. There was a small increase in the 21/22 Public Health grant above that received in f 20/21 .</p> <p>Partners will need to ensure they have appropriate funding in place for any programmes that they wish to continue.</p> <p>MSB 09/06/21</p>
<b>LEGAL ISSUES</b>	No	
<b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b>	Yes/No	<i>If yes, briefly list any other significant impacts, risks &amp; opportunities- see separate guidance note for areas to consider</i>
<b>IMPACT ON SPECIFIC WARDS</b>	No	Borough-wide impact

## **PART B) – ADDITIONAL INFORMATION**

### **INFORMATION**

#### **1.0 Healthy Pregnancy**

##### **1.1 Smoking in pregnancy**

1.1.1 Smoking in pregnancy is the main modifiable risk factor for a range of negative outcomes for both mother and baby. Reducing smoking in pregnancy rates in line with national ambitions remains a priority for the Local Maternity and Neonatal System (LMNS). Nationally, a 'smoking at time of delivery' (SATOD) target is set as 4% by 2026 with the aim of achieving a smoke-free start for all children from 2030. The LMNS has a nationally set target to make new NHS smoke free pregnancy pathways available for up to 40% of maternal smokers by March 2022.

1.1.2 The current Tobacco Control Plan for England sets a target of reducing SATOD rates to less than 6% by 2022. The Shropshire, Telford and Wrekin LMNS has SATOD rates above the national average and more than double the 2022 target with a SATOD rate in 2020/21 for Telford and Wrekin at 14.3%. This is however a significant improvement when we look back over the years where rates have been close to 25%. Through one off funding from the Local Authorities, CCG and LMNS in Shropshire, Telford and Wrekin, a new Healthy Pregnancy Support Service is being implemented which will provide an enhanced level of support for women to stop smoking during pregnancy. This service will also support women to improve their health and wellbeing in general including in relation to healthy weight. Through this funding, the service can operate for a year, with substantive NHS funding expected nationally to enable the service to continue.

##### **1.2 Continuous Glucose Monitoring**

The NHS Long Term Plan includes the commitment that “by 2020/21, all pregnant women with type 1 diabetes will be offered continuous glucose monitoring [CGM], helping to improve neonatal outcomes.” Shropshire, Telford and Wrekin were successful in securing funding as an early implementer for Continuous Glucose Monitoring for all pregnant women. All pregnant women with Type 1 diabetes in Shropshire, Telford and Wrekin are now offered Continuous Glucose Monitoring through the new pathways in place.

##### **1.3 Breastfeeding Peer Support**

Through the LMNS, the Breastfeeding Network (BfN) is being commissioned to provide Breastfeeding Peer Support across Shropshire, Telford and Wrekin. This will include the provision of 12 new qualified BfN Helper Peer Supporters to be trained in year 1 and 12 New qualified BfN Helper Peer Supporters in year 2 with a total of 24 new volunteers to be trained by the end

of March 2023. This will be delivered alongside training for Peer Supporters and Breastfeeding Drop In groups for women and their families.

#### **1.4 Healthy Weight**

The Maternity Voices Partnership (MVP) are keen to run a programme of initiatives to promote healthy weight as obesity in pregnancy is a key issue locally. However, due to current restrictions and priorities these have not progressed to implementation. A pilot healthy exercise in pregnancy video has been developed and is awaiting approval. The MVP also started an initiative to co-produce a healthy eating book, but this has been paused due to other priorities currently.

#### **1.5 Homestart Peer Support**

The LMNS has commissioned Homestart Telford and Wrekin to provide a programme of county-wide peer support for families. The support offered will be focussed in communities and will address key areas of need including support for families affected by COVID 19. The project aims to deliver improvements against a range of outcomes, including in relation to breastfeeding, confidence, parenting skills, mental health, self-esteem, reduced isolation, improved healthy lifestyles and social interactions.

#### **1.6 Maternal Mental Health**

The NHS Long Term Plan set out the ambition to establish Maternal Mental Health Services (MMHS), which will integrate maternity, reproductive health and psychological therapy for women experiencing mental health difficulties directly arising from, or related to, the maternity experience. Shropshire, Telford and Wrekin were successful in securing early implementer status for the establishment of a MMHS which involves joint working between maternity and mental health colleagues at all levels. The service provides targeted care and support to those whose needs would not be well met in other services. Specialist mental health midwives employed by SaTH are an essential part of MMHS as are health visitors, nurses / OTs from community mental health alongside psychological / therapeutic staff members employed by MPFT.

### **2.0 Healthy Child Programme**

2.1 The Healthy Child Programme (0-19 years) is a national framework that offers a robust evidence-based approach aimed at supporting children and young people across the life course, from early years to school age. The Healthy Child Programme consists of Health Visitors, School Nurses and Family Nurses.

2.2 The service has responded to the Covid-19 pandemic with direction from NHS England and the local needs of our families with prioritisation of:

- Telephone support and availability of robust single point of access

- New birth visits and supporting follow up of high risk mothers and infants in centrally located clinics
- Safeguarding (co-ordinated approach with social care)
- Emotional health and wellbeing support via phone and text
- Family Nurse Partnership – by definition, all vulnerable/young mothers (supporting and responding in respect of safeguarding concerns)

2.3 Since March 2020, the service has developed systems and processes to implement new ways of working using digital platforms to connect with families. An example is a virtual new parents support group which has been well received. As a result we have seen an improvement of 97.4% of all new Birth contacts completed within 10-14 days. Leads within the service are also supporting the Perinatal Mental Health group and have continued to strengthen partnership working with Maternity Voices and Midwifery.

2.4 The Healthy Child Programme is now restoring the service, delivering a blended approach to meet the health needs of our families underpinned by evidence, best practice and robust risk assessments. The service is experiencing an increase in referrals for emotional health and wellbeing support, particularly around anxiety and toileting which we continue to monitor and link to other support services within the Borough.

2.5 Further developments include:

- Continued learning and embedding virtual platforms to continue to improve health outcomes of our families
- Development of school vision screening
- Resume the National Child Measurement Programme in selected schools
- Planning for the anticipated increase in vulnerabilities and increase in emotional health and wellbeing of our babies, children and young people as a result of the pandemic.

### **3.0 Healthy Weight**

3.1 Supporting people to achieve a healthy weight remains a key public health issue locally with 70.9% of adults being overweight or obese. This is significantly higher than the national average of 62.8%. People being less active is a contributing factor. The most recent Active Lives Survey reports 23.7% of our adult population as physically inactive which is similar to the national average.

3.2 Prevalence of excess weight and obesity in children and young people continues to rise with 26% of reception age children and 40% of year 6 children reporting to be above a healthy weight – both are significantly higher than the national average.

3.3 Towards the end of 2018 the Director of Public Health published an Annual Public Health Report – Excess Weight and Obesity in Telford &

Wrekin. The Service Delivery Manager for Health Improvement is currently working with partners to review progress against the recommendations arising out of that report and to identify areas where further action is required. A number of fixed term posts are being created to increase capacity within the Council's public health team to drive forward this work at pace which will include an increased focus on community growing projects; community food programmes; food poverty and the food environment.

#### **4.0 Let's Get Telford Healthy**

4.1 In September, the Council's Health Improvement Team launched Let's Get Telford Healthy; a local campaign in support of the national campaign "Better Health". Both campaigns shared the aim of encouraging local people to help themselves to lead healthier lives in response to Covid-19.

4.2 Let's Get Telford Healthy used digital platforms to provide support and encouragement during a time when people had to stay at home. It included:

- A 12 week email campaign featuring localised information on how to live healthier,
- Encouraged people to sign up to the campaign and join a Facebook support group with our Healthy Lifestyle Advisors,
- Regular email reminders to keep people on track and change behaviour; and
- Individuals with poor health were targeted to take part in the campaign.

The campaign has been very successful in its first year with 1300 residents taking part. Participants reported that since joining Let's Get Telford Healthy:

- 58% experienced an improvement in their wellbeing
- 35% lost weight
- 35% improved their energy levels
- 23% were sleeping better
- 12% reduced blood pressure

4.3 The campaign continues to run and now provides the Healthy Lifestyles Team with an online offer for people looking to help themselves or keep themselves on track with or without the support of a Healthy Lifestyles Advisor – increasing the reach of the service and supporting more people to improve their health and wellbeing.

*"The emails have inspired me to walk more and start running as well as look at my diet which has resulted in me losing 16lb in weight. Thank you"*

#### **5.0 Healthy Lifestyle Service**



5.1 The Council's Healthy Lifestyle Service supports people to make changes to improve their health and wellbeing with a focus on support to: lower blood pressure; lower cholesterol; reduce risk of developing type 2 diabetes; manage weight; be more active; improve mental wellbeing; and support to quit smoking. Support consists of 6 structured one to one appointments over a 12 week period and includes signposting to community based support. The service has been suspended during the Covid pandemic in line with government guidelines and the team redeployed to assist with the Community Support Line. The service has been taking referrals for telephone and video call appointments since October 2020 with a view to offering face to face appointments when it is safe to do so. Since the relaunch in October 2021 people have been supported through the service with a further 109 people currently accessing support on a 12 week plan.

5.2 The service has capacity to support 2500 people through a 12 week programme each year so the team is now working hard to re-engage with residents and partners to increase referrals. Examples include targeted work with IAPT; the Diabetes Specialist Team at SaTH; the Hospital and Community Respiratory team, GP's; social prescribing link workers and the cancer pathway.

5.3 In March this year, the Government announced new funding for the current financial year for local authorities to help people achieve a healthier weight. The funding will be used to recruit 6 additional Healthy Lifestyle Advisors on a fixed term contract until 31<sup>st</sup> March 2022. This will provide capacity to support an additional 1344 people during this time.

5.4 In addition to supporting people to achieve a healthy weight the service includes a small team of advisors who provide support for quit smoking. We have seen a continued downward trend in smoking prevalence which is currently 15.4% (national average 13.9%). Smoking prevalence amongst routine and manual workers is 21.4% which for the first time is below the national average of 23.2%. The service was suspended and re-launched in October 2020 and has since provided support to 258 people; a further 103 people are currently receiving support.

5.5 The Healthy Lifestyle Service has taken time during the pandemic to focus on service improvements including: recording and reporting client feedback, accessibility of the service; and simplifying the referral pathway.

Client testimonials:

*"I cannot find the perfect words to thank you. The guidance you have given me regarding the exercise and nutrition has proved to keep me healthy. It helped me to reduce my blood sugar level from 84 to 31 in just 3 months period. I was very tense as I am quite young. But now I am feeling much better and my medicine doses have also been reduced by 50%."*

*“Thank you so much for taking such good care of me. You are very supportive and shown me the right direction. I am really happy the way you talked with me. Many people (like me) need your services and your experience will help others to live a healthy life.*

*Please continue with the good work you are doing.”*

*“The team have helped and supported me throughout my quitting smoking. I am now 10 weeks without any tobacco and have been 4 days without gum. I cannot thank the team enough. I have been a smoker for 44 years and with the support and guidance I can with some confidence say that I have now quit for good.”*

*“Ollie was a fantastic support. I don't think I could have nailed the quit smoking had he not been so supportive. I really appreciate him helping me. I'm a none smoker after 16 years!”*

*“Considering the circumstances around Covid I found the service to be brilliant. My appointed team member has been very helpful and encouraging in assisting my time quitting smoking. He's been punctual and clear with appointments made, has helped with any questions I have had and very supportive so a big thank you!”*

*“I've been following the advice that Jackie gave me and I'm happy to say I've lost weight and I am very happy. Jackie also helped me lose weight because I was told from the doctors that I could be possibly diabetic. And Jackie advised me that I have to change my life style and I've been checked again all is good and I'm not diabetic. Jackie has been brilliant throughout and I recommended your team to every person that needs to change their ways and be healthy.”*

## **6.0 Social Prescribing**

Our Primary Care Network social prescribing link workers continue to support some of our most vulnerable residents and are integral to our prevention offer. As a partnership we are benefitting from being part of a Midlands Social Prescribing Network and a Regional Learning and Development Programme. This is providing valuable insight and is helping to shape our local delivery plan and services. A small steering group continue to meet to develop this programme of work. So far we have:

- Established a link worker network
- Secured a training grant of £5000 from Health Education England
- Partnered with Energize Active Partnership and Shropshire County Council to secure funding to deliver a Green Social Prescribing Programme

- Recruited a Community Sport & Health Apprentice within the Sutton Hill Partnership
- Developed the social prescribing functionality of the Live Well Telford online directory

Over the next 6-12 months we plan to:

- Expand the network to include more partners
- Engage all link workers and community practitioners in a training programme to develop their knowledge and skills
- Apply for grant funding to further develop our approach
- Connect with our Active Partnership, Natural England and the Arts Council to develop our community offer
- Map our social prescribing pathway to identify areas requiring more focus
- Continue to develop partnerships with our community hubs
- Recruit Community Connectors to support patients to connect with community support
- Deliver a 2 year Green Social Prescribing Programme
- Pathway development with wider support services (debt advice, housing)

## **7.0 Physical activity**

7.1 The Tackling Inequalities Fund forms part of a £210 million support package to help the sport and physical activity sector through the ongoing coronavirus (Covid-19) crisis. Based on early insight from national surveys, it quickly became clear that certain groups of people were being disproportionately affected by the pandemic and it was significantly impacting their ability to be physically active. In response, the Tackling Inequalities Fund was created to try and help reduce the negative impact on activity levels in these under-represented groups, with a specific focus on: lower socio-economic groups; black, Asian and minority ethnic communities; disabled people; and people with long-term health conditions. To date, 25 local community organisations have benefitted from the fund totalling £40k.

7.2 Partnering with Energize, our Active Partnership, additional funding has been awarded by the National Sport Council to deliver projects in the Donnington ward focusing on mental wellbeing, inequalities and physical activity. The Everyday Cycling Project started in May 2021 and is being delivered by the Shropshire Cycle Hub with a view to supporting local residents to get back to using a bike or to ride for the first time.

## **8.0 Happy Healthy Active Holiday Programme**

Telford and Wrekin Council's Happy Healthy and Active Holiday programme is about creating positive, enriching and engaging activities that are inclusive for local children and young people aged 5-16 years. Encouraging children to be

active and to eat healthily is a main aim of the programme. The new programme is being funded by the Department for Education through the Holiday Activity Fund totalling £842,000 for Telford and Wrekin. The programme is inequalities driven, providing support to those children and young people who are less likely to access organised out-of-school activities, who are in receipt of free school meals and are more likely to experience additional pressures during this time. A steering group of key partners coordinated a digital offer for families during the Easter Holiday and are now working collaboratively to develop the summer programme.

## **9.0 Working with schools**

Working together we know we can help children to be more active; take part in enriching and engaging activities and; eat more healthily and understand more about this. Work is underway to coordinate a package of support for schools which includes contributions from key partners including Energize the Active Partnership, Youth Sport Trust and internal council services including leisure, Travel Telford, catering and Learn Telford. The support to all primary schools will include a digital toolkit bringing together in one place all available resources and links to local providers who can provide support to schools. A small number of schools with the highest levels of obesity will be invited to take part in a pilot project funded from the public health grant which will involve more targeted support and interventions.

### **4. IMPACT ASSESSMENT – ADDITIONAL INFORMATION**

No further information to add

### **5. PREVIOUS MINUTES**

None

### **6. BACKGROUND PAPERS**

None

Report prepared by:

Louise Mills Service Delivery Manager (Telford and Wrekin Council)

Fiona Ellis Programme Manager Better Births, Shropshire, Telford and Wrekin (Local Maternity and Neonatal System)

Stacey Norwood Senior Public Health Commissioner (Telford and Wrekin Council)

## **TELFORD & WREKIN COUNCIL**

**HWB – 17<sup>th</sup> June 2021**

**TITLE: COVID RESPONSE TO HOMELESSNESS AND HEALTH**

**REPORT OF LIZ NOAKES - DIRECTOR HEALTH, WELLBEING & COMMISSIONING  
AND KATHERINE KYNASTON - DIRECTOR HOUSING, EMPLOYMENT &  
INFRASTRUCTURE**

**LEAD CABINET MEMBERS – CLLR ANDY BURFORD AND CLLR DAVID WRIGHT**

### **PART A) – SUMMARY REPORT**

#### **1. SUMMARY OF MAIN PROPOSALS**

1.1 This report updates the Health & Wellbeing Board on the COVID response to those experiencing homelessness and rough sleeping in Telford & Wrekin.

Key points:

- The coronavirus pandemic poses significant risks for those experiencing or threatened with homelessness and rough sleeping. To address this the Council and partners have put in place specific measures to support and provide accommodation for this group. 'Everyone In' was first launched in March 2020 and the Council has since committed to 'No Return to Rough Sleeping'.
  - A multi-agency approach has underpinned the Borough's response ensuring partners are jointly responding to clients and data is shared in order to provide emergency accommodation and develop a plan for clients to be accommodated and supported on a longer term basis.
  - The Rough Sleeping Task Force established by the Council in March 2020 meets daily and includes Telford & Wrekin Council (housing and adult mental health teams), Maninplace, Kip@Maninplace, STAY, STaRS, MPFT (Midlands Partnership Foundation Trust) and the Police. Through the Task Force to date:
    - Over 360 clients have been supported from sleeping rough in Telford & Wrekin through providing emergency accommodation.
    - Over 320 clients have been re-housed into their own accommodation.
  - All clients have been supported to register with a GP to ensure they get the treatment they need.
  - A Covid-19 vaccination programme has been arranged to offer vaccinations to those within emergency accommodation.
- 1.2 The Council has successfully accessed in excess of £1.5m of external funding matched by Council investment to develop a Telford Housing First programme. An initial phase of 13 properties have been acquired to provide 'move on' accommodation with tailored wrap around support for clients referred through the Task Force. This is part of the Council and partners commitment to 'no return to rough sleeping'.

1.3 Further funding from partners including the NHS has enabled the development of key support services particularly around mental health. Much of this funding however is fixed term and there is a continued need to develop the partnership working and to seek more sustainable funding.

The Council has submitted the T&W Rough Sleeper Task Force model for an APSE 2021 Award for collaborative working across the public and third sectors.

**2. RECOMMENDATIONS**

The Health & Wellbeing Board is asked to recognise the specific impact of the pandemic on those experiencing homelessness and rough sleeping and the innovative arrangements put in place to address this and the success this has achieved to date.

The Board are asked to note the need to maintain this focus and to support the continued development of support services and identification of ongoing investment to improve resilience and address health inequalities faced by all those threatened with homelessness.

**3. SUMMARY IMPACT ASSESSMENT**

<b>COMMUNITY IMPACT</b>	Do these proposals contribute to specific Co-Operative Council priority objective (s)?	
	Yes	<ul style="list-style-type: none"> <li>Protect and support our most vulnerable Adults</li> </ul>
	Will the proposals impact on specific groups of people?	
	Yes	
<b>TARGET COMPLETION/DELIVERY DATE</b>	N/A	
<b>FINANCIAL/VALUE FOR MONEY IMPACT</b>	Yes	<p>A number of initiatives referred in this report are possible because of fixed term Government grant and partner funding. The Council have been successful in securing external funding from MHCLG, and funding from partners, i.e. CCG, to provide accommodation and support for mental health and substance misuse to this vulnerable group.</p> <p>At this early stage of the financial year, it is anticipated that the costs associated with Rough sleepers and Homelessness will be met from within the allocated grant and partner identified funding and existing budgeted resources. Consideration of budgetary impacts including future ongoing resource</p>

		will be considered as part of the Council's service and financial planning governance structure. AEM/RP 03/06/2021 (Telford & Wrekin Council)
<b>LEGAL ISSUES</b>	Yes	In addition, it has duties to provide advice and assistance to those who are homeless or facing homelessness. The details contained within this report set out how the Council is discharging its duties in this respect.  AL – 9/06/2021
<b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b>		
<b>IMPACT ON SPECIFIC WARDS</b>	Yes	Borough-wide but particularly wards with the highest levels of socioeconomic deprivation and health inequalities.

#### **4. PART B) – ADDITIONAL INFORMATION**

- 4.1 People who are homeless have some of the worst health outcomes and are more likely to experience and die from preventable and treatable medical conditions and to have multiple and complex health needs. Many people who sleep rough experience a combination of physical and mental ill health and drug or alcohol dependency.
- 4.2 Alongside these needs, people who sleep rough face barriers to accessing health and care services due to complex administration processes and previous negative experiences. This means continuity of care is a challenge and health issues may not be picked up until they become acute.
- 4.3 COVID-19 Response**
- 4.3.1 The government's advice on social distancing and self-isolation during the coronavirus pandemic is challenging for people experiencing homelessness and rough sleeping with people often experiencing multiple disadvantages. This led to the national 'Everyone In' scheme with local authorities required to provide accommodation for this vulnerable group.
- 4.3.2 Telford & Wrekin response in March 2020 was to set up a multi-agency Rough Sleeping Task Force to place, monitor and identify emergency accommodation and support for those facing rough sleeping. The Task Force meets daily and discusses in-depth individual clients and identifies actions to move clients into their own home. The Rough Sleeper Task Force includes: Telford & Wrekin Council (housing and adult mental health team), Maninplace, Kip@Maninplace, STAY, STaRS, MPFT (Midlands Partnership Foundation Trust) and police.

- 4.3.3 Since March 2020, the task force has provided emergency accommodation to over 350 clients and has supported over 320 of these clients into their own accommodation. The approach taken to working intensively with these clients and understanding their needs has illustrated the multiple complex needs including general poor health, varying degrees of mental health and substance misuse.
- 4.3.4 Critical to addressing these complexities is a joined up response in order to support them to thrive long term. Additional support has been provided through the appointment of a dual diagnosis nurse who provides support wherever the client is located.
- 4.3.5 In addition, the Task Force has ensured all client are either registered with a GP or has supported them to access a GP. This has included setting up a Covid-19 vaccination offer to those within emergency accommodation.
- 4.3.6 Homelessness and rough sleeping has been a particular focus at both the Council's internal gold command COVID-19 response group and the multi-agency Shropshire, Telford & Wrekin Tactical Coordinating Group.

#### **4.4 Telford & Wrekin Homeless Network**

4.4.1 To further strengthen the multi-agency response and future proof and provide resilience in the light of continued public health risks a Telford & Wrekin Homeless Network has been established with representatives from the Task Force, Voluntary Sector partners, MPFT (Midlands Partnership Foundation Trust), and CCG (Clinical Commissioning Group). The regular meetings and discussions among partners have enhanced local partnership working and delivered a step-change in support between voluntary sector organisations and service providers including;

- Strengthened existing pathways into specialist services such as drug and alcohol and mental health services
- Initiated the establishment of a peer mentor led model of support for people who are homeless in the Borough in partnership with Telford Mind.
- Provided specialist training on alcohol misuse, mental health and complex needs to circa of 25 housing staff from a range of agencies to support learning and development

The Network will continue to take forward and embed the learning, good practice and positive partnership working with a focus on prevention.

#### **4.5 Sustaining Services**

4.5.1 The Council and partners have successfully accessed a range of external funding programmes to maintain and embed the work initiated over the last 18 months.

In late 2020 the Council was awarded over £1.3m from the MHCLG Next Steps Accommodation Programme (NSAP) to support delivery of support and move on accommodation options for rough sleepers and develop the Telford Housing First model- ;



- £174,784 to fund emergency accommodation placements and move on funds,
  - £1,076,653 to acquire 13 properties to accommodate those who have experienced rough sleeping or multiple episodes of homelessness with wrap around intensive support.
- 4.5.2 The Council has also invested directly matching this investment to increase emergency accommodation provision and to create new provision to continue to work intensively with some of the most complex clients preparing them for independence.
- 4.5.3 Telford & Wrekin Council were also successful in a recent bid for funding through MHCLG Rough Sleeping Initiative of £508,929 to provide additional support worker capacity based with the Council and partners up to March 2022 including:
- Tenancy Sustainment Officers – helping clients maintain their tenancies
  - Rough Sleeper Co-ordinator – supporting those presenting as rough sleeping
  - Outreach worker – the first point of contact and identifying those rough sleeping
  - Urban Kip Worker – providing support where the client is to help find accommodation.
  - Mental Health Support Worker –
  - Substance Misuse Worker –
  - Dual Diagnosis Nurse – providing clinical support where the client is located
- 4.5.4 As a result of an independent review of the harm caused by drugs by Professor Dame Carol Black, the Government announced an extra £80m as part of the government’s efforts to cut crime. Telford & Wrekin Council was eligible to bid for additional funding up to the value of £291,000. This funding will support a number of initiatives including enhanced harm reduction for those people experiencing homelessness and rough sleeping.
- 4.5.5 Additional funding secured via the NHS Winter Funds is targeting mental health discharge. This will provide:
- Wrap Around Support Service – a 3 month project provided by Maninplace and Branches (£17,000) offering mental health support to those discharged from Redwoods to B&B / other temporary accommodation.
  - Mental Health nurse and support worker – fixed term roles based within the Rough Sleeping Task Force to improve connections with the mental health NHS services, and to provide support and guidance to the Task Force. £40,000 for an initial 3 month term.
  - Support workers and Peer support workers based within a couple of voluntary sector providers (Telford Mind and Stay) to support people being discharged or who are in the community and are at risk of admission without additional support.
- 4.5.6 Alongside these new services, the development of a Telford & Wrekin Mental Health Alliance enables key voluntary sector providers of mental health support plus statutory services to work together to better plan and allocate joint support plans, improve information sharing around risk and strategies of support, as well as identifying where there is possible duplication between partners all supporting the same individual.

#### **4.6 Non clinical crisis interventions**

4.6.1 Additional bids have been submitted by the Council to the CCG to provide non clinical crisis interventions for people who are in mental health crisis and also use substances. Building on the success of the Calm Café, funding is being sought for additional social work support, a support worker to run the café, and peer support workers to support and encourage engagement. We know there is a high level of unmet substance misuse and mental health needs amongst people who sleep rough so targeted support using a local model could have a positive impact.

#### **5. IMPACT ASSESSMENT – ADDITIONAL INFORMATION**

None

#### **6. PREVIOUS MINUTES**

None

#### **7. BACKGROUND PAPERS**

None

#### **Report prepared by**

Toni Guest, Service Delivery Manager – Housing Solutions

Stacey Norwood, Senior Commissioner – Public Health

Steph Wain, Commissioning Specialist – Mental Health



**Shropshire, Telford & Wrekin**  
Integrated Care System

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# Update: Children & Young People (CYP) with Mental Health

Cathy Riley

SRO for Mental Health, Learning Difficulties & Autism

# Section 31 Conditions in Shrewsbury and Telford Hospitals (SaTH- March 2021)

Six conditions were made affecting Children & Young People admitted but two had an impact on the wider system:

1. The registered provider (SaTH) must not admit patients; under the age of 18 who present with isolated acute mental health needs or who do not have physical health needs that require inpatient assessment and treatment
2. The registered provider must adopt an effective system to enable them to identify where all patients under 18 are located within the hospital. Appropriate oversight of the care of these patients must be provided by suitably competent staff. This must include continuous oversight by a registered mental health nurse and regular oversight from a child and adolescent psychiatrist for patients under 18 who are admitted with acute mental health needs, learning disabilities and behaviours that challenge. This system had to be in place by 12 March 2021

# Immediate actions taken to improve the care and support for CYP at SaTH:

- ▶ Implemented an MDT's Resolution Standard Operating Protocol (SOP) support to CYP in crisis
- ▶ Implemented daily meetings between MPFT CAMHS team and the paediatric ward team (7 days/week)
- ▶ Appointed a CAMHS Consultant Psychiatrist to provide consultancy leadership and support
- ▶ Systems in place to ensure all children admitted to SaTH are known
- ▶ Weekly supervision meetings between MPFT/SaTH/LA colleagues to promote stronger team working and learning

# Actions Internal to SaTH

- ▶ Embedded standard operational procedures regarding choice for 16 & 17 year olds
- ▶ Implemented training programme
- ▶ Reviewed and updated safe-guarding policies
- ▶ Established clear lines of escalation and appointed a Matron for C&YP with a focus on LD, Autism and Mental Health
- ▶ Ensured that MH risk assessment is in place

# At System Level:

- ▶ A weekly system operational and professionals meeting is held to provide senior support
- ▶ We are also delivering a 12-week evaluation of the new SOPs and new ways of working. Key learning to date has been discharge planning from the point of admission and early MDT meetings when discharge appears complex

# Current Impact

This has happened in the context of increased demand from CYP in crisis post lockdown, since schools have re-opened e.g. CYP presenting late and with high acuity

- ▶ In SaTH, on average, there are currently 10 of the 26 beds occupied with CYP with mental and physical health problems, 2 requiring Tier 4 beds
- ▶ In Redwoods on average 2 x 16/17 yo admitted to adult MH wards and one child being cared for in the only s136 bed for the system
- ▶ The system looks forward to the additional Tier 4 beds being commissioned regionally through Specialised Commissioning



# Mitigating the Impact of Section 31

- ▶ Concluded the best option was to maintain focus on keeping attendances away from SaTH e.g. 24/7 CYP Crisis & Home Treatment Service, LA prevention offers, mental health support teams in schools, school nurses (all in place but focus by CCG on joining up)
- ▶ Adding additional capacity to the CYP crisis team to offer an in-reach service to SaTH - with specific focus on Children with Eating Disorders (CED's) and complex needs
- ▶ Finding space for a calm, safe environment for de-escalation post triage at A&E (in place)
- ▶ Increasing the capacity of the community CED's team
- ▶ Continuing the support from the CAMHs consultant (in place)
- ▶ Providing additional support to social care

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## TELFORD & WREKIN COUNCIL

HEALTH AND WELLBEING BOARD – 18 JUNE 2021

AGEING WELL – CELEBRATING LATER LIFE IN TELFORD AND WREKIN

### REPORT OF:

SARAH DILLON, DIRECTOR ADULT SOCIAL CARE, TELFORD & WREKIN COUNCIL; HEATHER OSBORNE, CHIEF EXECUTIVE, AGE UK SHROPSHIRE TELFORD & WREKIN; BARRY PARNABY, CHAIR, HEALTHWATCH TELFORD AND WREKIN; AND TRACEY JONES, DEPUTY DIRECTOR OF PARTNERSHIPS, SHROPSHIRE TELFORD & WREKIN CLINICAL COMMISSIONING GROUP

## PART A) – SUMMARY REPORT

### 1. SUMMARY OF MAIN PROPOSALS

1.1. *“Covid-19 has laid bare the urgency of improving the state of ageing...The pervasiveness of poor health, unsafe and low-quality housing, and a lack of social connections – particularly among the poorest in our society – has exacerbated the impact of the pandemic on those who already faced the most challenging prospects in later life.”*

(The State of Ageing in 2020, Centre for Ageing Better)

1.2. It is well recognised that the population in Telford and Wrekin will change significantly over the next 10 years. In particular the increase in the older population with the numbers of people aged 80+ years old increasing by 50% by 2031<sup>1</sup>.

1.3. The Covid pandemic has further highlighted the growing inequalities in our ageing population, including:

- 29% of adults report putting on weight and 27% report drinking more;
- Loneliness and social isolation worsened in lock down with depression and anxiety has doubled (up to 19% of adults);
- Excess early death rate for people with serious mental illness; and
- 1 in 10 will suffer long COVID<sup>2</sup>.

1.4. This paper outlines the approach that the Telford & Wrekin Integrated Place Partnership is taking to address these emerging challenges with the aim of enabling people to age well and celebrating later life. This video summarises these aims: <https://youtu.be/RygsAVFtCbw><sup>3</sup>

<sup>1</sup> ONS Population projections, as at April 2021

<sup>2</sup> Please refer to the report being presented to the Health and Wellbeing Board on Health Inequalities and the pandemic impact for more information.

<sup>3</sup> Rethink Mental Illness – We are Undefeatable YouTube video, August 2019



## 2. RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

- 2.1 Support and champion the direction of travel focusing on the positive contribution that people later in life can make within our communities;
- 2.2 Remain part of the journey to improve outcomes, independence and opportunities for people in later life in Telford and Wrekin; and
- 2.3 To challenge all organisations and services in our place to take a positive, enabling and independence-led approach to people in later life.

## 3. SUMMARY IMPACT ASSESSMENT

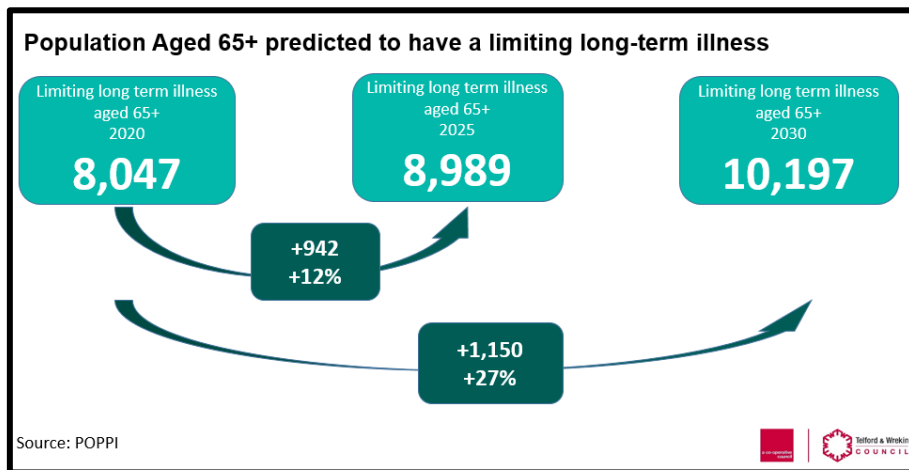
<b>COMMUNITY IMPACT</b>	Do these proposals contribute to specific Co-Operative Council priority objective(s)?	
	No	<ul style="list-style-type: none"> <li>• Every child, young person and adult lives well in their community</li> <li>• All neighbourhoods are a great place to live</li> </ul>
	Will the proposals impact on specific groups of people?	
	No	The programme of work will impact on all residents.
<b>TARGET COMPLETION/ DELIVERY DATE</b>	Ongoing programme of work aligned to the Telford & Wrekin Integrated Place Partnership, the Integrated Care System and the Health and Wellbeing Board Strategy.	
<b>FINANCIAL/ VALUE FOR MONEY IMPACT</b>	Yes	<p>The actions (next steps) and recommendations proposed, including the appointment of a fixed term Commissioning Specialist, for the Council, will be met from within existing Council resources.</p> <p>Actions proposed by the strategy will be considered when the strategy is proposed for adoption.</p> <p style="text-align: right;"><i>(RP - 03.06.2021)</i></p>
<b>LEGAL ISSUES</b>	Yes	The actions identified in this report demonstrate the steps that the Council, together with its partners, are

		taking to promote the health and wellbeing of those living within the Borough. <i>(AL – 09.06.2021)</i>
<b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b>	Yes	There are opportunities relating to sustainability and improved efficiencies through delivering on the integration agenda.
<b>IMPACT ON SPECIFIC WARDS</b>	Yes	The programme of work impacts across the population of the Borough and includes targeted activity within those wards reporting higher levels of health and wellbeing need and inequalities.

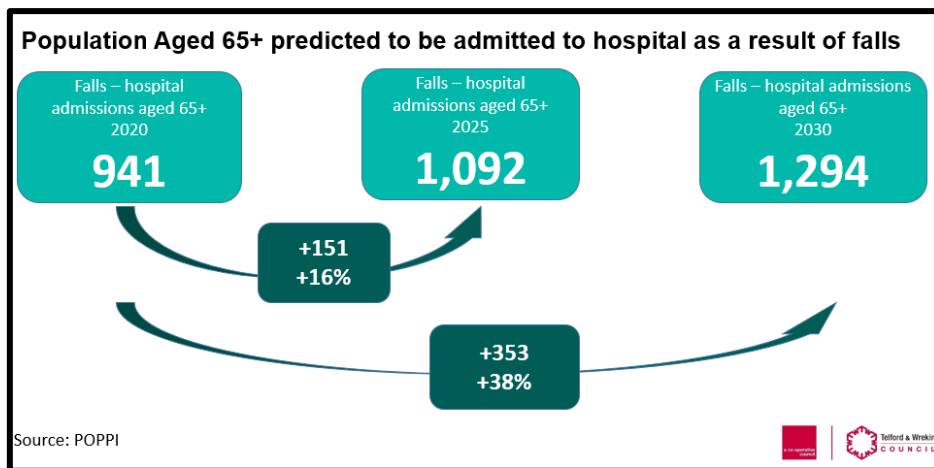
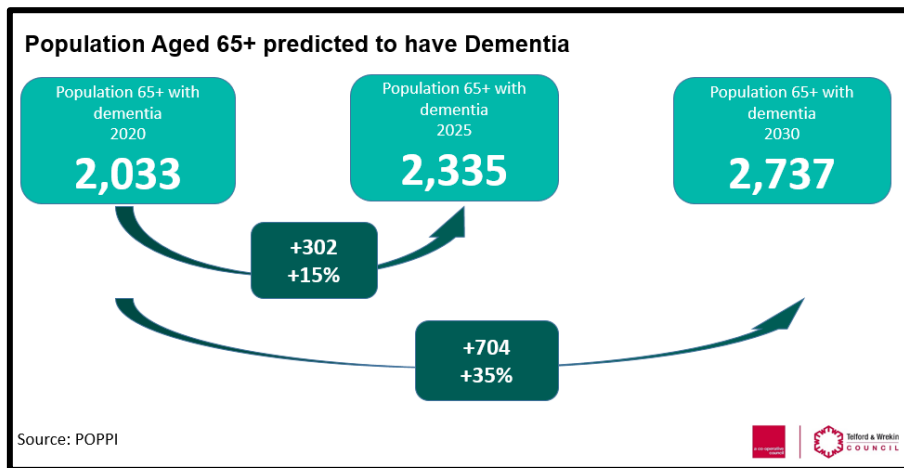
**PART B) – ADDITIONAL INFORMATION**

**5. BACKGROUND INFORMATION**

- 5.1. It is well recognised that the population in Telford and Wrekin will change significantly over the next 10 years. A specific aspect within the population changes is the increase in the older population, in particular those aged 80+ years old where we are expecting to see a 50% increase by 2031<sup>4</sup>.
- 5.2. In addition to the number of people aged 80+ within Telford and Wrekin increasing it is also expected that the number of people aged 65+ with limiting long term illnesses, dementia and having admissions to hospital as a result of falls will also increase. The following graphs illustrate the predicted changes.



<sup>4</sup> ONS Population projections, as at April 2021



5.3. During the Covid pandemic the impact on older people was clearly seen and several recent reports<sup>5</sup> have highlighted some of the specific impacts Covid has had on older people:

- Impact of Covid will be felt more intensely for older people over the next 20 years;
- Current crisis has highlighted health inequalities in how we age;
- Planning rules make it hard to insist that homes are built to lifetime standards;
- People reported greater sense of belonging to community during Covid but much less for those who were struggling financially;
- Decreased mobility and movement – one in three have less energy and one in four are unable to walk as far as they were pre-covid;
- Lack of stimulation has impacted on people’s dementia, cognitive function and mental health;
- People with long term conditions felt isolated due to shielding, with a loss of independence, confidence and lack of movement; and
- Loneliness and isolation was amplified – digital exclusion.

5.4. Older people are a resource for their families, communities and economies in supportive and enabling living environments. WHO<sup>6</sup> regards active ageing as a lifelong process shaped by several factors that, alone and acting together, favour health, participation and security in older adult life.

<sup>5</sup> The Impact of Covid on Older People, Age UK 2020; The State of Ageing 2020, Centre for Ageing Better

<sup>6</sup> [Global Age-friendly Cities: A Guide](#)

5.5. The Telford & Wrekin Integrated Place Partnership (TWIPP) recognised that the population changes, coupled with the impact from Covid, would impact significantly on residents, communities and services (health, social care, VCSE). It is important that together we focus efforts now to foster a preventative and proactive approach. Our Placed Based plan needs to enable people, as they approach later life, to plan for their future, maintain their independence and social contact and importantly continue to contribute within our Telford and Wrekin communities. There are also many 'assets' particularly within our Telford and Wrekin communities, such as skills and knowledge, that can be mobilised to promote health and wellbeing.

5.6. This approach is now a key priority for TWIPP, and all partners, for 2021/2022.

5.7. There is a good track record in Telford and Wrekin of working together, with residents, communities, VCSE and statutory organisations, to improve outcomes including:

- Telford Senior Citizens Forum
- Age UK Shropshire Telford & Wrekin
- Age Friendly work
- Age of Creativity and Art of Wellbeing work
- Wellbeing Hub Network
- Telford Wellbeing and Independence Partnership – including Carers Centre
- Independent Living Centre

5.8. Building on this previous work in Telford and Wrekin, to harness the experience of people in later life and those working across our Telford and Wrekin Place and look at the best way forward in addressing this agenda further develop relationships, an Integration Workshop was held. The aim of the workshop was to look at "What good looks like for older people in later life in Telford and Wrekin" and what do we need to be doing now to plan for a more independent later life.

## **6. FEEDBACK FROM THE INTEGRATION WORKSHOPS**

6.1. The workshop was developed by Telford & Wrekin Council, Healthwatch Telford & Wrekin, Age UK Shropshire Telford & Wrekin, Healthwatch UK and Shropshire, Telford and Wrekin Clinical Commissioning Group and was not focused purely on health and social care, but on active ageing, a proactive preventative approach with contribution of those in later life in our local communities. There was also a focus on:

- The wider determinants of health, including housing and financial poverty;
- The impact of social isolation upon outcomes for people; and
- The use of digital technology and innovative approaches to maintain independence.

6.2. Across the workshops 68 people attended from 17 different organisations. Please refer to Appendix A for a copy of the Workshop Outcomes report. Some of the key themes, and quotes from the workshops, emerging from the workshop are shown in the following diagram.

Prevention	One size does not fit all	Adopting a positive approach	Communication and use of language
Training and development	Intergenerational approaches	Loneliness and Isolation	Integration
Co-production	Use of technology	Accessibility	Integrated intelligence-led decision making

Our ambition should be that *"Telford is the best place to grow old in"*

We should *"support people to make healthy choices earlier and understand what is available for them when they get older and might need access to help and support"*

Our principles should include *"independence, valued, choice...respect lifestyles and cultures"*

A barrier is *"housing and accommodation aren't built for life"*

We should have *"Team Telford Training – we want our staff to understand our strength based approach and make connections between services early on"*

We should *"be positive about what being older means"*

We should *"use technology alongside the human approach"*

We should *"be more integrated...and stop people being pushed around (from service to service)"*

6.3. The outcomes of the workshop will be used to inform the development of an Ageing Well Strategy (name to be agreed through the development process). Please see the Next Steps section of this report for more information.



## 7. **NEXT STEPS**

7.1. We want to develop a framework for living well in later life in Telford and Wrekin that includes:

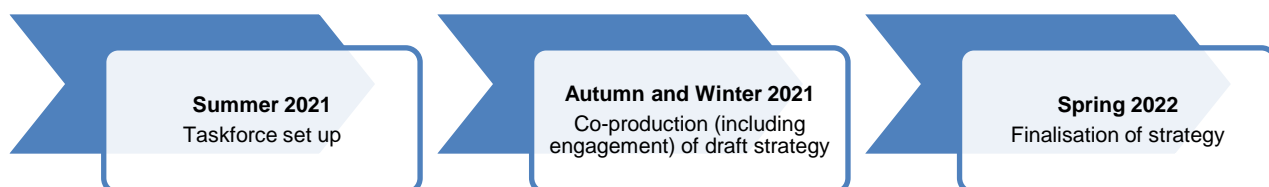
- Recognising the wide range of capacities and resources among older people;
- Anticipating and responding flexibly to ageing-related needs and preferences;
- Respecting their decisions and lifestyle choices;
- Protecting those who are most vulnerable; and
- Promoting their inclusion in, and contribution to, all areas of community life.

7.2. To take forward this area of work we propose that a Task Force is set up. The role of the task force would be to:

- Oversee the development, co-production and consultation of an Ageing Well Strategy (name to be agreed through the development process) and associated action plan;
- Influencing other campaigns strategies in development at Place and at Shropshire, Telford and Wrekin system level;
- Work with Telford & Wrekin Public Health Team on the Year of Wellbeing Campaign particularly around later life; and
- Bring together all relevant work-streams that are already in existence to reduce duplication and improve efficiencies.

7.3. The Task Force would include a wide range of statutory and non-statutory agencies including the Senior Citizen's Forum, Healthwatch, Age UK Shropshire Telford & Wrekin, NHS Providers, CCG, Telford & Wrekin Council, Primary Care, Housing, Transport, Citizen's Advice, and Shropshire Chamber of Commerce. Other organisations and services will be co-opted on as and when required.

7.4. The draft timeline for this work is shown below:



7.5. To further support the development of the strategy and action plan, Telford & Wrekin Council are currently recruiting for an Older People Commissioning Specialist and Officer for 12 months to work with all partners and local people to co-ordinate this important work.

## 8. **PREVIOUS MINUTES**

N/A

## 9. **BACKGROUND PAPERS**

[Telford and Wrekin Population Characteristics](#)

Health and Wellbeing Board Strategy 2020-2022

Ageing Better Transforming Later Lives Strategy 2018, Centre for Ageing Better

The Impact of Covid on Older People, Age UK 2020  
The State of Ageing 2020, Centre for Ageing Better

**Report prepared by:**

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## Appendix A – Workshop Outcomes



# **Telford & Wrekin Integrated Place Partnership Integration Workshop: What does good look like for older people in Telford and Wrekin?**

## **Workshop Outcomes**

### **1 INTRODUCTION**

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On 07 and 13 May 2021, Telford & Wrekin Integrated Place Partnership (TWIPP) hosted two integration workshops focusing on 'What does good look like for older people in Telford and Wrekin'.

The aims of the two hour workshops were to look at the way in which we can work together to improve outcomes for older people in Telford and Wrekin. By the end of the workshops we hoped to:

- Have an ambitious vision,
- Agree a key set of principles,
- Have an understanding of partners, skills and contributions,
- Know the gap in provision, and
- Know the potential priorities.

The workshop was developed by Telford & Wrekin Council, Age UK, Healthwatch UK and Shropshire, Telford and Wrekin Clinical Commissioning Group. The workshops included the following areas:

- Introduction to TWIPP and the ICS
- Telford and Wrekin Population Change summary
- Setting the Scene – including the impact of Covid
- Case Studies
- Two breakout sessions:
  - What does good look like?
  - Skills and gaps
- Next steps and thank you.

For a copy of the slides of the session please refer to Appendix 1.

Click on this link to view a recording of the session:

[https://www.youtube.com/watch?v=kOE\\_ZFOocYs](https://www.youtube.com/watch?v=kOE_ZFOocYs)

Attendance at the event was invited from:

- Practitioners across health and social care organisations;
- Voluntary, Community and Social Enterprise sector workers; and
- Care sector staff

## **2 ATTENDEE SUMMARY**

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Across the both sessions we had 61 people attend (33 and 28 people respectfully) and 7 presenters for both sessions.

This included people from 17 different organisations/services:

- Bradeney House
- Carers Partnership Board
- Citizen's Advice
- Coverage Care Services
- Healthwatch Telford & Wrekin
- Lloyds Bank Foundation
- Midlands Partnership Foundation Trust
- SAND (Safe Ageing No Discrimination)
- Shropshire Community Health Trust
- Shropshire Partners in Care
- Shropshire and Telford & Wrekin Clinical Commissioning Group
- Shropshire Rainbow Film Festival
- STW Age UK
- Telford MIND
- Telford & Wrekin Council – Libraries, Community Support, Home improvement, Adult Social Care, Armed Forces Covenant Health Improvement,
- TW Senior Citizen's Forum
- Wrekin Housing Group

## **3 BREAKOUT SESSION ONE – WHAT DOES GOOD LOOK LIKE?**

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This session asked participants to think about 4 questions in particular:

1. What is our ambition for the vision?
2. What are the key principles we should all be working towards?
3. What is the art of the possible? Are there areas that we work as 'one team'?
4. Are there any barriers to achieving the art of the possible?

This is what participants shared:

## Breakout Session One – What does good look like?

### Our ambition

- Telford is the best place to grow old in.
- An age friendly place, where people can age well and infrastructure is there for that to happen
- Seamless transition for all, whatever needs are
- Accessible for all
- Integrated working across Telford and Wrekin
- Greater integration
- Prevention rather than cure should inform the vision
- more timely services for those at the higher end of need
- Making older people part of their community
- People to feel empowered and be able to make decisions
- Feeling safe
- Joined up data
- Ask older people what they think good looks like
- Having accessible accommodation facilities, close to GP's, close to amenities.
- More in the community - independent as long as we can, live at home, people should have a choice in what they want, access to health services and remaining healthy.
- Community place infrastructure, people feeling supported through social connections.
- People should have a choice on how they choose to live. eat well exercise, medicate, hydrate, warm and safe are the main things.

### Key principles

- Good support for older people with well-connected communities.
- Co-ordination and clear support to navigate the journey to independence.
- Timely and preventative.
- Good infrastructure helping people to plan for a good retirement.
- Educating communities pre-old age of how they can future proof their support.
- Reducing loneliness and isolation.
- Management of change.
- One size doesn't fit all
- Independence, valued, choice
- Respect lifestyles, values, cultures
- Aligning strategies
- Using place and environment as a starting point creative connected communities
- Deter from using the word frail
- Positive risk taking to be encouraged
- Family person and practitioners having the conversation together
- Being positive about what being older means
- Maintaining health
- Respect differences and celebrating similarities.

### The art of the possible

- Innovative ways of working.
- Embracing technology to meet needs.
- Manage risk around social isolation.
- Team of people to support innovation.
- Marketing and implementation team to drive new initiatives.
- Whole workforce, including volunteers and the community, are advocates for older people providing information and guidance.
- No waiting lists for services or support.
- Build on community response to the pandemic the willingness is present and needs to be built on.
- Engaging with people you are younger now (50+) so that they start to - support people to make healthy choices earlier and understand what is available for them when they get older and might need access to services/help
- Feedback from dom care staff being the social contact principle could be the importance of social contact and social support
- Thinking about the value of employment and supporting people with this
- Residents in care homes - offer a reach out and make connections between those in homes and those in the communities
- Additional support and encouragement needed to prevent isolation
- Mobility classes needed to improve mobility post pandemic
- Digital workshops at the ILC
- "Welcome to the next phase in your life"
- Capitalising on the skills of our older population
- Intergenerational contact very important
- Clinicians to meet with those at grass root and meet in the middle - A new engagement officer from SATH will help with this.
- Decisions are made at a higher level and those doing the role face to face need to be part of discussions higher up.
- Stock take on team Telford and look at what is currently being done.
- Engagement with voluntary sector/public needs to be a priority.
- Work with GP's to educate them more on services locally
- Live Well Telford to be used and promoted
- Annual council tax bill use this as a way of signposting to services sending with a bill catches the eye

### Barriers

- Housing and accommodation (life time homes).
- Transport.
- Financial inequalities
- Engagement with wider partners.
- Expectations.
- Understanding peoples roles.
- Educating and updating partners.
- Constant change - change management needed
- Managing risk positively.
- Recognising barriers
- Knowing where to invest
- Organisational and bureaucracy barriers
- Challenging that people need to be involved in all new processes
- Capacity of volunteer banks
- Financial uncertainty for charities and smaller groups
- Supporting people who are in receipt of care and support
- Use of language on the person, their confidence and ambitions
- Digital exclusion and access to the internet
- People to work hands on with the electronics
- Aiming something solely at people over 65
- Lack of integration -- silo working
- Lack of mixed age groups
- Segregation due to being over 65
- Access to primary care
- If don't have right access the first time it causes more issues
- Lack of knowledge about what is available
- Employment opportunities
- Poor communication

## 4 BREAKOUT SESSION TWO – SKILLS AND GAPS

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This session asked participants to think about 3 questions in particular:

1. What skills do we already have to achieve our vision?
2. What skills do we need to achieve the art of the possible?
3. Where are the gaps?

This is what participants shared:

### Breakout Session Two – Skills and Gaps

#### Skills already in place

- Motivation
- Knowledge
- Expertise
- People with Lived Experience/ Experts by Experience
- Community assets and good foundation
- Engaged communities due to pandemic
- Telford is a new forward thinking town
- Massive amount of skills across the voluntary sector
- Community Centre staff skills
- Person centred approaches

#### Skills we need

- Communication
- Co-ordination
- Co-production
- Education
- Listening and learning from others.
- Broadening partners and wider audience
- Teaching and supporting partners with implementation of technology and digital offer.
- Using technology - make use of it alongside a human touch.
- Technology skills
- Creativity
- What can we use instead to meet these individual needs?
- Sharing our learning, skills and knowledge with others
- Matching volunteers to the vulnerable person
- A stronger network of wanting to share information
- Assisting older people to learn
- TEAM TELFORD TRAINING we want our staff to understand our strength based approach make connections between services early on and as part of inductions - roll out of person centred approaches to all workers
- Outreach support
- Intergenerational working
- How to have a positive conversation with an older person
- How to help develop and support social enterprises
- Skills to help smaller organisations become and remain sustainable
- How to engage with people from ethnic and minority backgrounds

#### The gaps:

- Communication
- Community champions
- Networking priorities
- New ways of looking at delivering services i.e. befriending
- Community kindness – see [Carnegie Trust UK](#)
- Using older members of the community who would love to share their skills and knowledge
- Need to be aware of the strategy and match the skills and then identify the gaps
- To broaden services to meet the needs of all - so people don't fall down the gaps
- Funding to meet the needs
- Slim line services to become more efficient but use resources to meet the needs of all
- To work more openly and share-to stop people being pushed around
- More integrated services across the borough
- Increase in resources are needed to support this
- Involvement of businesses
- Make sure people know about what's on offer
- Growing natural communities
- Cultivating confidence in building back broken connections
- Role of supermarkets
- Leaflets and booklets – but need keeping up to date
- Access to technology
- Pre-retirement plans
- Medical vs social model
- Linking computer systems
- Keeping and building on our volunteer base post covid.



## 5 NEXT STEPS

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The outcomes of this workshop will be used to shape the development of the Older People Taskforce's focus and the development of an associated strategy and action plan.

Throughout the next stages of this work, co-production with people with lived experience, their families and carers, and those who work with and support older people will be a priority.

## 6 APPENDIX 1 – WORKSHOP SLIDES

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Older People  
Workshop slides - N

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