



## Borough of Telford and Wrekin

### Health & Wellbeing Board

Thursday, 29 September 2022

2.00 pm

Fourth Floor, Addenbrooke House, Ironmasters Way, Telford, TF3 4NT

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**Democratic Services:** Lorna Gordon 01952 384978

**Media Enquiries:** Corporate Communications 01952 382406

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**Committee Members:** Councillor A D McClements (Chair), J Britton, Councillor A J Burford, S Dillon, J Dunn, N Dymond, Councillor I T W Fletcher, Councillor K Middleton, L Noakes, A Olver, B Parnaby, Councillor S A W Reynolds, J Rowe, Councillor K T Tomlinson and S Whitehouse

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	<b>Agenda</b>	<b>Page</b>
1.0	<b>Apologies for Absence</b>	
2.0	<b>Declarations of Interest</b>	
3.0	<b>Minutes of the Previous Meeting</b>	<b>3 - 10</b>
	To confirm the minutes of the previous meeting	
4.0	<b>Public Speaking</b>	
5.0	<b>Telford &amp; Wrekin Mental Health Update</b>	<b>To Follow</b>
	To receive an update on the development of the Mental Health Partnership Board, the wider context of mental health services locally and links to the Integrated Care System.	
6.0	<b>Telford &amp; Wrekin Integrated Place Partnership (TWIPP) Delivery</b>	<b>11 - 16</b>

## **Assurance Update**

To receive the Telford & Wrekin Integrated Place Partnership's delivery assurance update.

### **7.0 Better Care Fund update**

**17 - 22**

To receive an update on the Better Care Fund challenges and to approve the 2023/24 proposals.

### **8.0 Winter Preparedness Update**

**To Follow**

To receive an update on the system's preparations for winter pressures and lessons learnt.

### **9.0 JSNA and Census Update**

**23 - 38**

To receive an update on the Joint Strategic Needs Assessment website and use of Power BI.

### **10.0 Health & Wellbeing Strategy Refresh Proposals**

**To Follow**

To receive an update on the Health & Wellbeing Board Strategy following the recent development session.

### **11.0 ICB/ICP Update: Governance and Links to Other Boards**

**To Follow**

To receive the Integrated Care Board's Update on the ICS governance and role of other Boards.

### **12.0 Delivering Supported & Specialist Accommodation**

**Verbal Report**

To receive a presentation on the delivery of supported and specialist accommodation across Telford & Wrekin.

# Public Document Pack Agenda Item 3

## HEALTH & WELLBEING BOARD

### Minutes of a meeting of the Health & Wellbeing Board held on Wednesday, 22 June 2022 at 2.00 pm in Addenbrooke House, Ironmasters Way, Telford, TF3 4NT

#### **Present:**

Cllr A McClements (Chair of the Health & Wellbeing Board)  
J Britton (Executive Director Childrens Services)  
Cllr A J Burford (Cabinet Member for Adult Social Care and Health, Integration and Transformation);  
Cllr K Middleton (Cabinet Member for Leisure, Public Health and Well Being, Equalities and Partnerships);  
L Noakes (Director Health & Wellbeing);  
A Olver (Voluntary Sector Representative);  
B Parnaby (Healthwatch Telford & Wrekin);  
Cllr S A W Reynolds (Children, Young People, and Families);  
J Rowe (Executive Director: Adult Social Care, Health Integration and Wellbeing)

#### **In Attendance:**

L Gordon (Democracy Officer (Scrutiny));  
L Jones  
A Lowe (Director Policy & Governance);  
C Parker (Director of Partnerships, Shropshire, Telford & Wrekin Clinical Commissioning Group)  
G Robinson (Director of Delivery & Transformation, Shropshire, Telford & Wrekin Integrated Care System);  
C McInnes (Divisional Director of Operations, The Shrewsbury and Telford Hospital NHS Trust)  
Cllr D White (Chair of Scrutiny Management Board, Telford & Wrekin Council)

**Apologies:** M Brandreth, S Dillon, J Dunn, Cllr I T W Fletcher, N O'Connor, Pepper, Cllr S A W Reynolds and Cllr K T Tomlinson.

#### **HWB49 Declarations of Interest**

None

#### **HWB50 Minutes of the Previous Meeting**

It was noted that the minutes of the meeting of the 24 March 2022 referred an inclusion of delegated authority for the Better Care Fund within the Terms of Reference. It was clarified that no delegations were included within the Terms of Reference and that a report would need to be brought to the Board specifically recommending delegation at a later meeting.

**RESOLVED** – that the minutes of the meeting held Thursday, 24 March 2022 be confirmed.

## **HWB51 Public Speaking**

The Chair invited a member of the public to speak on the GP Access. They highlighted the lack of data in the paper provided for this item and requested that further information be provided.

The Chair advised that this will be addressed as part of the GP access item later in the meeting.

## **HWB52 Annual Public Health Report - Tackling inequalities: Everyone's Business**

The Director, Health & Wellbeing informed the Board that the Annual Public Health report was a statutory requirement and was produced on annual basis. Each year the report focused on a particular theme, with this year's report focusing on the widening of health inequalities and what the council and its partners had done to address the root cause. It was noted that there had not been a report produced in the last 2 years due to the pandemic.

The Board heard that the inequalities plan that was previously presented to the Board in September 2021, was intelligence led in order to understand the needs of different communities. This approach was both partnership and place based and allowed for services to be provided proportionate to need. The Director for Health & Wellbeing highlighted that the inequalities plan was based upon the Marmot themes and would like to see Telford & Wrekin move towards becoming a Marmot Borough. The inequalities plan was also influenced by the Building Back Fairer Report, which considered the effect of the pandemic on health inequalities.

Members heard that the first theme explored in the report was best start in life, which focused on the first 1001 days in life. Intelligence and case studies had been used to highlight what was understood about inequalities and what is being done to bridge the gap. The Director: Health & Wellbeing informed the Board that childhood poverty was above average across the borough. To combat this a perinatal strategy was being developed by the Council and partners. The second theme explored was economic opportunities. The Board were informed that a healthy income was important for our health. It was noted that whilst Telford & Wrekin had seen a recovery in employment levels, they were still low when compared to the national average. It was also noted that the employment gap between men and women, young and old, and affluent and poor had continued to widen. The Director: Health & Wellbeing advised Members that programmes such as Job Box, Kick Start and the Work Local Programme had been implemented, which supported local employers to find local employees.

The Director: Health & Wellbeing highlighted that in areas of public health and prevention Telford & Wrekin were under performing across a number of key indicators such as smoking, alcohol and weight. They noted that Princess Royal Hospital had recorded higher rates of alcohol related cases and lower

levels of cancer diagnoses than the national average. Members heard that the Healthy Lifestyles Team had done a lot of work to narrow inequalities, with 60% of the support they provided taking place in deprived areas. The Director: Health & Wellbeing advised the Board that further work was underway to improve health literacy across the Borough, particular within the BAME communities. Additionally, the Council had been successful in their bid for additional funding from the NHS to develop screening programmes and to raise awareness of early signs.

The Board heard that the environment and circumstances that we live in makes a difference to our health. Community and place were wider determinants of health and impacted significantly on inequalities. Members were informed that the inequalities plan took a community-centred approach which aimed to make people more connected and keep them living in their communities for longer. The Director: Health & Wellbeing highlighted how effective the Calm Cafes and ongoing work with Telford Mind had been in supporting people with autism, multiple sclerosis and dementia and homeless people looking for paths into the job market. Additionally, a core principle of the Marmot themes is healthcare integration which in Telford & Wrekin is facilitated by the creation of the Shropshire, Telford & Wrekin Integrated Care System (ICS). Members heard that the ICS was a partnership between the NHS, local government organisations and independent and voluntary sector groups.

The Director: Health & Wellbeing advised the Board that the recommendations outlined in the report and the Public Health Framework would also be presented before Cabinet.

The Board thanked the Director: Health & Wellbeing and welcomed the report. Members noted the detrimental effect that poverty and the cost of living crisis had on health inequalities and praised the intelligence led approach to addressing this. During the debate, Members highlighted that housing inequalities had not been embedded within the report. The Director: Health & Wellbeing recognised the impact that housing inequalities had and advised there would be an opportunity to capture more work around this.

### **HWB53 Improving GP Access: To receive a further update from the Shadow ICS**

The Director for Partnerships informed the Board that the information presented was based upon Shropshire, Telford & Wrekin data as per NHS England's instructions, but advised that a specific breakdown of Telford & Wrekin could be provided to Members following the meeting.

Members heard that at a Primary Care level there needed to be a more joint up approach that allowed the sharing of lessons learnt and best practice which promoted improvement. It was noted that in comparison to both regional and national averages, Telford & Wrekin had a high percentage of face to face appointments. At the time of the meeting 66% of appointments were face to face. The Director for Partnerships explained that these figures

included appointments that took place with nurse practitioners, physiotherapists and pharmacists among other clinical professionals. In order to facilitate this there had been an increase of a number of professionals working across the Primary Care Network. The Board were informed that although there had been a staffing increase overall, this did not include GPs. Across the system there had been a 12% reduction in GPs and a 27% reduction in GP partners.

The Director for Partnerships advised Members that there had been specific work carried out recently relating to telephone access and triage to manage the 100% increase in those accessing the telephone systems. This involved working with a number of practices, including TELDOC, to understand and improve each practices system. It was recognised that there needed to be better communication with the public around how best to access these services.

During the debate Members expressed that they had similar concerns to those raised during public speaking, so welcomed the commitment to provide additional data, particularly with reference to timescales for improvements. Members noted that if residents continue to be put off from accessing primary care services due to their inability to get through on the phone, health inequalities will only increase and would like to see this audited. The Director for Partnerships advised that auditing individual practices proved difficult as each served different demographics and numbers of patients. Additionally, GP practices were overseen by the Care Quality Commission (CQC), but commissioned privately. The role of the Clinical Care Group (CCG) was only to support with areas such as telephone systems. The Director for Partnerships highlighted that of the two Telford & Wrekin surgeries reviewed by the CQC in recent months, both had been rated 'Good' on access.

The Board welcomed promoting the use of other services such as pharmacists, but worried that people may not feel as comfortable to discuss additional issues. The Director for Partnerships noted that all Primary Care professionals were trained to be on the look-out for alternative diagnoses.

Members thanked the Director of Partnerships for their report and for their willingness to provide additional data to the Board. It was noted that this is an area of the biggest concern for residents so a detailed plan of action would be welcomed.

#### **HWB54 ICB Development Update including the proposed System Operating Model & Governance**

The Director of Delivery & Transformation, Shropshire, Telford & Wrekin Integrated Care System provided the Board with an update on the creation of the Integrated Care System (ICS) and its statutory functions. The ICS sought to create a partnership of organisations in order to improve services and remove the barriers that people experience when accessing the National Health Service (NHS). The ICS is made up of 2 Boards. The Integrated Care Board (ICB) and the Integrated Care Partnership (ICP). The Board heard that

the membership of each Board differed. The ICB membership consisted of independent chair: non-executive directors; members selected from nominations made by NHS Trusts/foundation trusts, local authorities and general practice. Whereas, the ICP was made up of representatives from local authorities, ICB, Healthwatch and other partners.

The Director of Delivery & Transformation informed the Board that the ICP was at the heart of the system and worked in partnership with the Telford & Wrekin and the Shropshire Health & Wellbeing Boards. Member's heard that there were still additional steps to be taken as to how the ICP, Telford & Wrekin Integrated Place Partnership (TWIPP) and the Health & Wellbeing Board (HWB) would work together in practice, but a steering committee had been appointed to cement that. At an ICB level Board members had now been appointed formally, however the shadow board had been in operation since 1 April 2022, meaning the transition was expected to be smooth. The Board were informed that the Constitution was in place which formally embedded the involvement of the voluntary and community sector.

During the debate Members raised concerns regarding Telford standing and influence in comparison with Shropshire. It was noted that Telford's make up and needs differed from Shropshire's and assurances needed to be made to ensure that those needs would be met. The Director of Delivery & Transformation advised the Board that the TWIPP was key to ensuring this as it would be responsible for executing the delivery of everything expect for system level issues. The Board noted that it was important that there was transparency around changes made within the system, especially given current financial restraints. The Director of Delivery & Transformation agreed, stating that resources are finite but the ICS wanted to use them to maximise impact when working towards the inequalities agenda. The Board thanked them for their report.

#### **HWB55 Ockenden Report into Maternity Services**

The Divisional director of Operations for Women's & Children's and the Director of Midwifery informed the Board that the Ockenden enquiry was intially launched in 2017, with the first findings being published in December 2022 and the final report was released in March 2022. The most recent report outlined 66 actions that must be completed, 50 of which required immediate and necessary actions.

The Board heard that the report highlighted significant failings and that its findings have had a continued effect on the service. The Divisional director of Operations for Women's & Children's recognised those failings and provided assurances that lessons had been learnt. Members were informed that significant work was underway to ensure that the best service was provided, in addition to implementing all 210 recommendations outlined in the reports. Of the 210, 65 actions had already been delivered and embedded.

The Divisional director of Operations for Women's & Children's advised that when the report was released it had been challenging but that they had

continued to support the staff, local communities and the patients as a matter of priority. The Board heard that the learning from the first report had been reviewed by the senior team and used to develop a robust management approach. The Board heard that all actions were deemed essential and immediate but needed to be prioritised and amalgamated into a single plan. This plan also included other issues that had been identified outside of the report that required addressing. Members were informed that this was recently re-launched and there would be additional engagement carried out. In order to ensure transparent and effective governance they must provide evidence that a completed action had been embedded and three monthly audit cycle takes place to provide additionally assurances that staff are compliant.

The Divisional Director of Operations for Women's & Children's assured the Board that for those actions which couldn't be progressed without regional or national involvement, working groups had been created. It was highlighted that following the development of this approach other services had approached them for learning advice to develop their own.

The Board thanked the Divisional Director of Operations for Women's & Children's for their update. Members stressed the importance of ensuring that all actions are completed and embedded both locally and nationally.

During the debate Members noted that the staff culture was important to ensuring that actioned were fully embedded. The Divisional Director of Operations for Women's & Children's agreed and stated that staff morale had been a key concern. Members were advised that staff were supportive of the required changes and accepted the upcoming challenges that they faced. The Board heard that people and culture was a priority for the ICS not just in maternity services but across the whole system.

The Divisional Director of Operations for Women's & Children's recognised the scale of the challenge ahead and assured Board Members that details of the actions completed could be shared and future updates on progress provided at further meetings.

## **HWB56 Scrutiny Work Programme Overview**

The Chair of the Telford & Wrekin Council Scrutiny Management Board provided the Board with an overview of the upcoming 2022/2023 Scrutiny Work Programme. The Board heard that the Council had received over 70 suggestions from members of the public, Councillors and our Council partners that made up the Work Programme. Members heard that some of the key areas of upcoming scrutiny included mental health, primary & urgent care, the Hospital Transformation Programme and this rising cost of living.

The Board welcomed the work programme and noted that it was important that the Health & Wellbeing Board and the various Scrutiny Committees had a joined up approach in order to prevent repetition. Members noted that in order for scrutiny to be effective openness and honesty was required. The Director



of Delivery & Transformation, Integrated Care System, noted that whilst there had been a decline in collaborative working with Councillors since the pandemic the Integrated Care Board welcomed more open conversations moving forward and would do what they can to provide assurances.

**HWB57 Terms of Reference**

The Director: Policy & Governance informed the Board that the Terms of Reference had been revised to reflect the structural changes from the Clinical Commissioning Group (CCG) to the Integrated Care System (ICS), Integrated Care Board (ICB) and the Integrated Care Partnership (ICP).

**RESOLVED** – That the Terms of Reference be approved subject to the inclusion of reference to the Telford & Wrekin Integrated Place Partnership in the membership.

The meeting ended at 4.17pm

**Chairman:** .....

**Date:** Thursday, 29 September 2022

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# Telford & Wrekin Integrated Place Partnership (TWIPP)

## Update to Health and Wellbeing Board – 29.09.2022



Jonathan Rowe – Executive Director: Adult Social Care, Health Integration and Wellbeing and Chair of TWIPP  
Sarah Downes – Integration Programme Manager, Telford and Wrekin

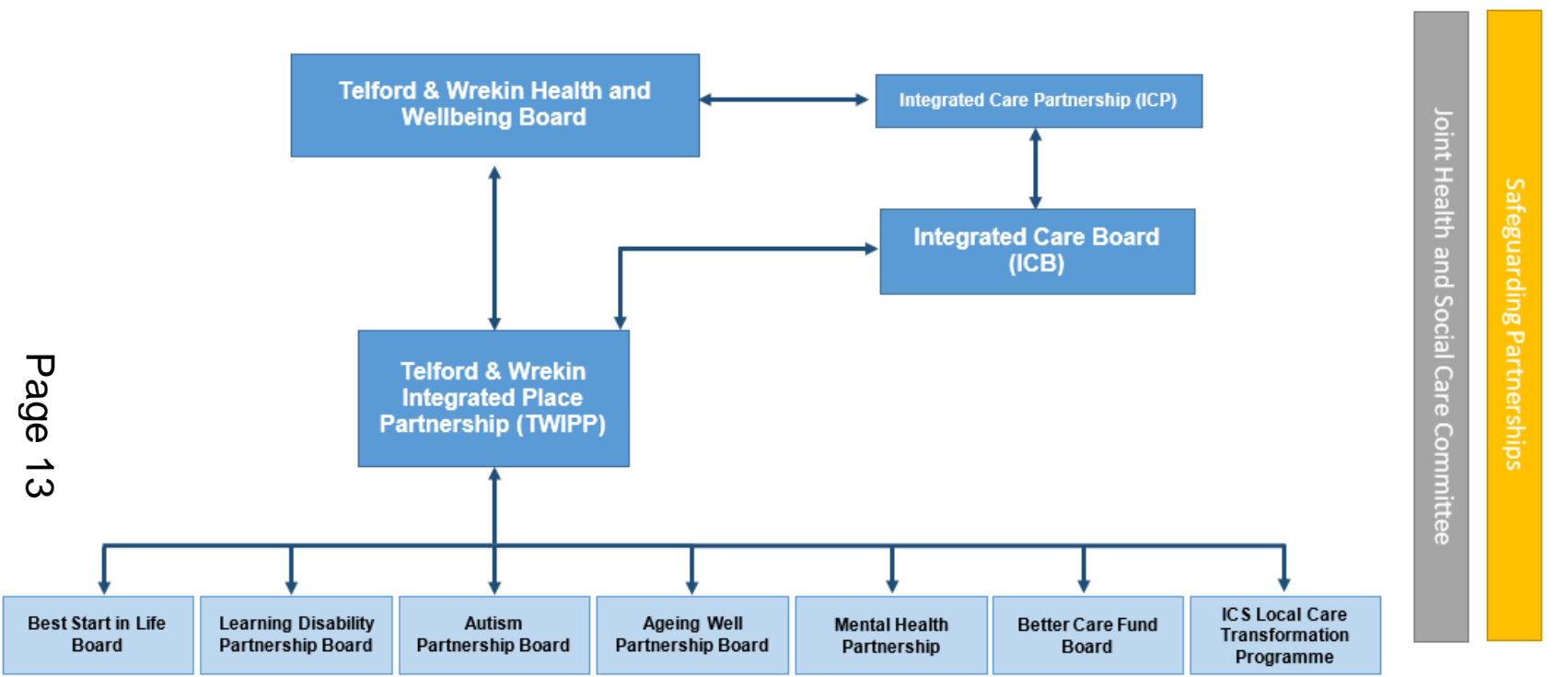


- In current format since March 2019
- Comprises of senior officers from:
  - Telford & Wrekin Council,
  - Shropshire, Telford and Wrekin NHS,
  - Primary Care Networks,
  - Midlands Partnership Foundation Trust,
  - Shropshire Community Health Trust,
  - Shrewsbury and Telford Hospital Trust,
  - Shropshire Partners in Care,
  - Healthwatch, and
  - the Voluntary and Community Sector
- Purpose: to agree and drive the delivery of community centred health and care integration at place.

## Our Vision

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

## Telford & Wrekin Integrated Place Partnership (TWIPP) Governance Arrangements



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TWIPP Co-production Forum (TBC)

Enablers: Workforce, Population and Business Intelligence, Digital and Technology Enabled Care, Housing, Economic Development, Finance, Commissioning, Quality Assurance, Co-production, Communication and Engagement

Other Key Partnerships/Groups: Safer Telford and Wrekin Partnership (Community Safety Partnership), Making it Real Board, Telford Patients first Telford Voices, Care Leavers Forum, Autism Hub, Marches LEP, Homelessness and Housing, Education, Corporate Parenting, Armed Forces Covenant



We are currently refreshing our priorities and associated deliverables.

The draft priorities for TWIPP are:

1. Population Health (e.g. reducing preventable diseases)
2. Prevention and early intervention (e.g. accessible information, advice and guidance)
3. Integrated response to inequalities (e.g. healthcare inequalities)
4. Working together stronger (e.g. best start in life)
5. Primary Care Integration (e.g. access to primary care)
6. Workforce (e.g. growing our own)

# How will we know we are making a difference?

- A set of agreed deliverables will sit underneath each priority and area of focus
- Feedback from residents and workforce on the deliverables will be key to understanding what difference is being made
- Progress against deliverables will be monitored and challenged through TWIPP (and subsequently the HWB and ICB).
- Key performance indicators will be identified which will be part of the TWIPP Performance Dashboard – monitored and challenged alongside the deliverables.

## Ask of Health and Wellbeing Board members:

- We would welcome any initial thoughts around the 6 priority areas
- We return to a future meeting to share the final version of TWIPP Strategic Plan.







Telford & Wrekin  
Co-operative Council

Protect, care and invest  
to create a better borough

## Borough of Telford and Wrekin

### Health and Wellbeing Board Reports

Thursday, 29 September 2022

#### Better Care Fund update

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<b>Cabinet Member:</b>	<b>Cllr Andy Burford - Cabinet Member: Adult Social Care and Health, Integration and Transformation</b>
<b>Lead Director:</b>	<b>Sarah Dillon - Director: Adult Social Care</b>
<b>Service Area:</b>	<b>Adult Social Care</b>
<b>Report Author:</b>	<b>Michael Bennett - Prevention &amp; Enablement Service Delivery Manager</b>
<b>Officer Contact Details:</b>	<b>Tel: 01952 381476 Email: michael.bennett@telford.gov.uk</b>
<b>Wards Affected:</b>	<b>All Wards</b>
<b>Key Decision:</b>	<b>No</b>
<b>Forward Plan:</b>	<b>August 2022</b>
<b>Report considered by:</b>	<b>Health and Wellbeing Board on 29 September 2022</b>

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#### **1.0 Recommendations for decision/noting:**

The Board is ask to:

- 1.1 Agree and approve the Better Care Fund Programme for 2022/23; and
- 1.2 Give delegated authority to the Chair of the Health and Wellbeing Board to approve future plans on behalf of the Board – subject to retrospective presentation and approval.

#### **2.0 Purpose of Report**

- 2.1 This report summarises the Submission of the Better Care Fund (BCF) and programme for formal approval.
- 2.2 The principal aim of the BCF programme locally is to transform the health and social care system, utilising the resources that supports the local system to successfully deliver the

integration of health and social care in a way that supports person-centred, sustainability and better outcomes for people and carers.

### **3.0 Background**

- 3.1 The Better Care Fund (BCF) is a national programme that is Place based to Telford and Wrekin. It is jointly led by Shropshire Telford and Wrekin Integrated Care System and Borough of Telford & Wrekin as a partnership approach.
- 3.2 To monitor and drive the development of the BCF, a Programme Board is in place which reports directly into Telford & Wrekin Integrated Place Partnership (TWIPP). Please refer to the TWIPP report also on the Health and Wellbeing agenda for more information on TWIPP.
- 3.3 The BCF programme for 2022/23 is a one year plan with the aim to further transform the health and social care system, support person-centred care in a sustainable way and provide better outcomes for people and carers. The BCF funded resources will contribute to and support key programmes across:
- Place based programmes (TWIPP)
  - Local Care Transformation programmes
  - Urgent and Emergency Care Priority Transformation Programme
- 3.4 The Narrative Plan sets out evidence to demonstrate meeting Four National Conditions:
- Agreed plan between local health and social care commissioners
  - NHS contribution to adult social care at HWB level to be maintained
  - invest in NHS commissioned out-of-hospital services
  - implementing the new Policy objectives for 2022/23
    - enable people to stay well, safe and independent at home for longer
    - provide the right care in the right place at the right time
- 3.5 The Narrative Plan also sets out how meets seven Planning Requirements incorporating 26 Key Lines of Enquiry (KLoEs):
- Clear narrative for integration across health and social care
    - Joined up approach across integrated, person-centred services
    - Collaborative Commissioning
    - Plan to reduce inequalities and disparities including protected characteristics within local population and priorities under the Equalities Act and NHS actions in line with Core20PLUS
  - Strategic, joined up plan for DFG
    - Housing support including DFG to support independence at home
  - NHS to non-acute commissioned care matches or exceeds minimum contribution
  - NHS contribution to social care matches or exceeds minimum
  - Agreed approach to implementing Policy Guidance (PR5)
    - Enable people to stay well, safe and independent at home for longer
    - Provider the right care in the right place at the right time
    - Self assessment and Plan for HICM for managing transfers of care
    - Demand and Capacity Plan
  - Components that monies are earmarked for purpose and used for that purpose
    - How used to support unpaid carers
    - NHS contribution for Implementation of Care Act duties, carer-specific support, Enablement
  - Stretching metrics with clear ambitions

## **4.0 Summary of main proposals**

- 4.1 The programmes for 2022/23 are integrated with and contributes to Place based, Local Care and Urgent Care programmes:
- Maximise potential for admission avoidance including Virtual Ward
  - Enhance integrated working of Community Teams
  - Maximise Proactive Prevention approaches to reduce/ delay use of statutory services
  - Develop the Ageing Well Strategy
  - Integrate HICMs to urgent care delivery ie hospital improvement/ flow
  - Develop options for delivery of sustainable Intermediate Care functions (including beds, Enablement beds, key outcomes)
  - Re-commission domiciliary care provision to maximise resources and meet increased demand
- 4.2 Key performance metrics are highlighted within the dashboard:
- Avoidable admissions
  - Discharge to the usual place of residence
  - Reducing permanent admissions to residential and nursing care.
  - Improving reablement outcomes.
- 4.3 The BCF performance Narrative Plan, Planning Template and Demand and Capacity Template will be presented when completed for the Submission position.
- 4.4 The submission has to be submitted to NHSEngland/Improvement by 26 September for approval.

## **5.0 Alternative Options**

- 5.1 Please refer to the Narrative Plan.

## **6.0 Key Risks**

- 6.1 Risks to the overall programme delivery are considered within the BCF Board. Current risks identified include:
- Impact on Covid19 on service delivery;
  - Bed and domiciliary care market capacity; and
  - Increased demand creating financial pressures.

## **7.0 Council Priorities**

- 7.1 The BCF programme supports the council to achieve the following priorities specifically:
- Priority 1 – every child, young person and adult lived well in their community
  - Priority 5 – a community-focussed, innovative council providing efficient, effective and quality services

## **8.0 Financial Implications**

- 8.1 The BCF pooled budget in 2022/23 is £25.3m, the detail of which is shown in the table below against the relevant elements of the BCF programme.
- 8.2 The financial monitoring of this fund and consideration of any issues arising is undertaken by the BCF Board as per the required Section 75 agreement and is reported to the Council and the Integrated Care Board via their own financial management governance arrangements.

Summary Statement	Annual Budget 2022/23 (£)
Intermediate Care	7,972,182
Community Resilience	1,033,160
Telford Neighbourhood Care	4,774,121
Other Care	11,532,262
<b>Grand Total:</b>	<b>25,311,725</b>

## 9.0 Legal and HR Implications

- 9.1 The Better Care Fund was established by the Government in June 2013 [in preparation for the Care Act 2014 coming into force] to provide funding to support the integration of health and social care to achieve National Conditions and Local Objectives. A requirement of the Better Care Fund is for pooled funds to be established for this purpose
- 9.2 The Section 75 of the National Health Services Act 2006 [as amended] enables local authorities and NHS Bodies to enter into partnership arrangements to provide more streamlined services and to pool funds, subject to meeting the requirements of the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000 [as amended]
- 9.3 There have been a signed Section 75 Agreements in place between the Borough of Telford & Wrekin and NHS Telford & Wrekin Clinical Commissioning Group, now Shropshire, Telford and Wrekin Integrated Care System in respect of the Better Care Fund annually (updated and amended each year) which set out the accountability arrangements and flow of funding. Health and Wellbeing Boards are expected to oversee the strategic direction of the Better Care Fund and the delivery of better integrated care, as part of their statutory duty to encourage integrated working between commissioners [Section 195 Health and Social Care Act 2012]
- 9.4 The 2022/23 Better Care Fund policy framework has been amended in reference to the policy objectives detailed in the “2022 to 2023 Better Care Fund Policy Framework” document (19 July 2022) and referenced in this report.

## 10.0 Ward Implications

10.1 All wards will be impacted on by these proposals.

### 11.0 Health, Social and Economic Implications

11.1 It is intended that this programme of work will contribute to improve health & wellbeing outcomes within the borough.

### 12.0 Equality and Diversity Implications

12.1 Joint Strategic Needs Assessment intelligence informs intentions to ensure resources are targeted appropriately to improve health and wellbeing and reduce inequalities.

12.2 The Plan has a specific requirement to demonstrate its focus on reducing inequalities and disparities including protected characteristics within the local population and priorities under the Equalities Act.

### 13.0 Climate Change and Environmental Implications

13.1 This report has no direct climate change or environmental impact.

### 14.0 Background Papers

- 1 Better Care Fund (presented to Health and Wellbeing Board on 24 March 2022)
- 2 Better Care Fund (presented to Health and Wellbeing Board on 11 February 2020)

### 15.0 Appendices

- A The Better Care Fund Narrative Report 2022/2023 – to follow

### 16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal	21/09/2022	21/09/2022	ON
Finance	21/09/2022	21/09/2022	TS
SMT	21/09/2022	21/09/2022	SD

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## Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 29<sup>th</sup> September 2022

JSNA and Census Update

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<b>Cabinet Member:</b>	<b>Cllr Kelly Middleton - Cabinet Member: Leisure, Public Health and Wellbeing, Equalities and Partnerships</b>
<b>Lead Director:</b>	<b>Liz Noakes - Director: Health &amp; Wellbeing</b>
<b>Service Area:</b>	<b>Policy &amp; Governance</b>
<b>Report Author:</b>	<b>Helen Potter – Insight Manager, Telford &amp; Wrekin Council</b>
<b>Officer Contact Details:</b>	<b>Tel: 01952 381118 Email: <a href="mailto:helen.potter@telford.gov.uk">helen.potter@telford.gov.uk</a></b>
<b>Wards Affected:</b>	<b>All Wards</b>
<b>Key Decision:</b>	<b>Not Key Decision</b>
<b>Forward Plan:</b>	<b>Not on Forward Plan</b>
<b>Report considered by:</b>	<b>SMT - 20 September 2022</b>

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### 1 Recommendations for decision/noting:

- 1.1 That the Health & Wellbeing Board note the launch of new JSNA products and website;
- 1.2 That HWB members access the new JSNA website (via email link sent to members after the meeting) and provide comments and feedback;
- 1.3 That the HWB note the headlines from the Census 2021 and the proposal for updating on future headlines; and
- 1.4 That the HWB agree to receive regular JSNA updates.

## **2 Purpose of Report**

- 2.1 This paper is an update for the board on:
- The statutory requirements for a Joint Strategic Needs Assessment (JSNA)
  - JSNA update – launch of new JSNA products
  - Headlines from the Census 2021 data
  - Headline population and wider determinants data for Telford & Wrekin (Appendix 1)

## **3 Background**

- 3.1 Statutory Requirements of the Joint Strategic Needs Assessment (JSNA)  
The Health & Social Care Act 2012 (amending the Local Government and Public Involvement in Health Act 2007) introduced statutory responsibility for Health & Wellbeing Boards to develop Joint Health & Wellbeing Strategies based on an assessment of need outlined in a Joint Strategic Needs Assessment (JSNA).

The JSNA process provides intelligence of current and future health and wellbeing needs of the local population that are unique to each local area, to inform service planning, commissioning and delivery.

JSNA intelligence has informed the development of the Health & Wellbeing Strategy Proposals being considered by the Board as part of this meeting agenda. In addition, the JSNA tools are being used in the development of the Pharmacy Needs Assessment (PNA) which will be presented to the HWB in November 2022.

In Telford and Wrekin the JSNA is led by the Local Authority Insight Team, working closely with NHS colleagues and on behalf of the HWB, and JSNA population intelligence documents are hosted on the Telford & Wrekin Council website.

## **4 Summary of main proposals**

- 4.1 The JSNA in 2022 – launch of new JSNA products

4.1.1 The T&W approach to the JSNA

The JSNA update to the Board in March 2022 detailed the proposed change to the approach to publishing JSNA data: in summary this is ceasing production of the 'Understanding Telford & Wrekin' document and commencing the provision of JSNA products consisting of a set of profiles (topic based, with the ability to see data at various different geographies) that are shared online and built in Microsoft Power BI, enabling content to be more accessible, more comprehensive and more up to date than the previous approach to publishing borough intelligence. These products will be supported by 'deep dive' analysis into topics.

4.1.2 JSNA September 2022 – new products launched

A new JSNA website has been developed. The 'soft' launch of this includes the HWB, ahead of making the page available to the public. A link to the site will be sent to HWB members following the meeting, and we would appreciate your comments.



This paper contains some screen prints of key JSNA products, and a demonstration will be given during the Board meeting.

These JSNA profiles, alongside future development of the JSNA, will help ensure there is easy access by partners and the public to clear, consistent messages about our population. These will support evidence based decision making and to ensure we have a detailed understanding of the health and wellbeing needs of our communities.

Below is a summary of 3 key JSNA profiles launched to date:

- Census 2021 Profile
- Population Health JSNA Profile
- Population Projections JSNA Profile

The JSNA will also include PCN level reports of routinely available data available at this geography.

#### 4.1.3 Census 2021 Profile

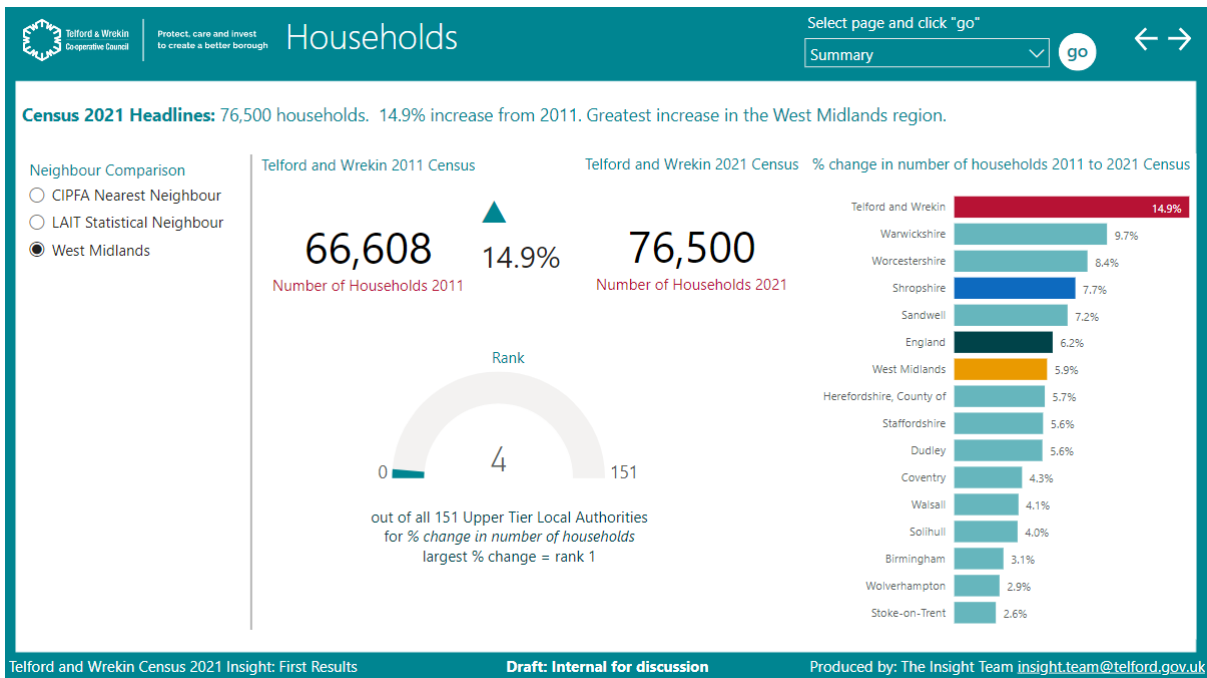
A detailed profile of Census data released to date (see section 4.2 for headlines from the Census 2021). This profile includes detail of all the Census data released to date, with sections on:

- Population of Telford & Wrekin on Census day (21<sup>st</sup> March 2021)
- Population by 5-year age bands and change since 2011
- Population density (number of people per square kilometre)
- Number of households in the borough

This profile will be developed further as more Census data is released.

All sections include interactivity to enable users to see population change since 2011 and compare this to regional and statistical neighbours and to other upper tier local authorities:

*Example screen print below from the JSNA Census profile of households in the borough, including change since 2011 Census and comparison to West Midlands and England upper tier local authorities:*



#### 4.1.4 Population Health JSNA Profile

A detailed JSNA profile of the health of the population. This profile includes a wealth of data known about the health of our population, and is currently based on the Public Health Outcomes Framework (PHOF) data. The profile contains sections on:

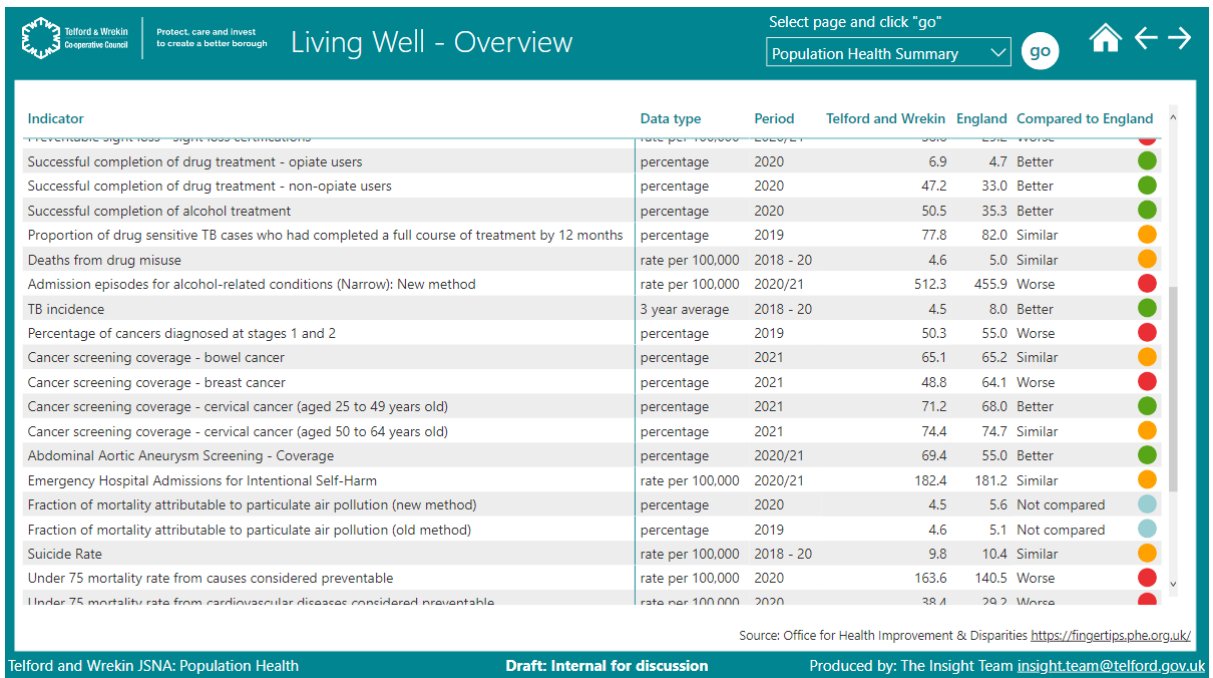
- Overarching: indicators include life expectancy and mortality
- Starting Well: indicators covering maternity, conception, maternity, child development, school readiness, overweight, physical activity, free school meals, vaccinations, NEET, A&E attendances, hospital admissions, sexual health
- Living Well: indicators covering physical activity, healthy eating, overweight, diabetes, smoking, HIV, sight loss, drug treatment, cancer, hospital admissions, suicide, mortality
- Ageing Well: indicators covering life expectancy, emergency hospital admissions, hip fractures, dementia, admissions to residential and nursing, adult social care reablement
- Wider Determinants: indicators covering low income, fuel poverty, employment, sickness absence, homelessness, loneliness, violent crime, re-offending

This profile will be developed further to include more data from partners, particularly in the first instance NHS local data.

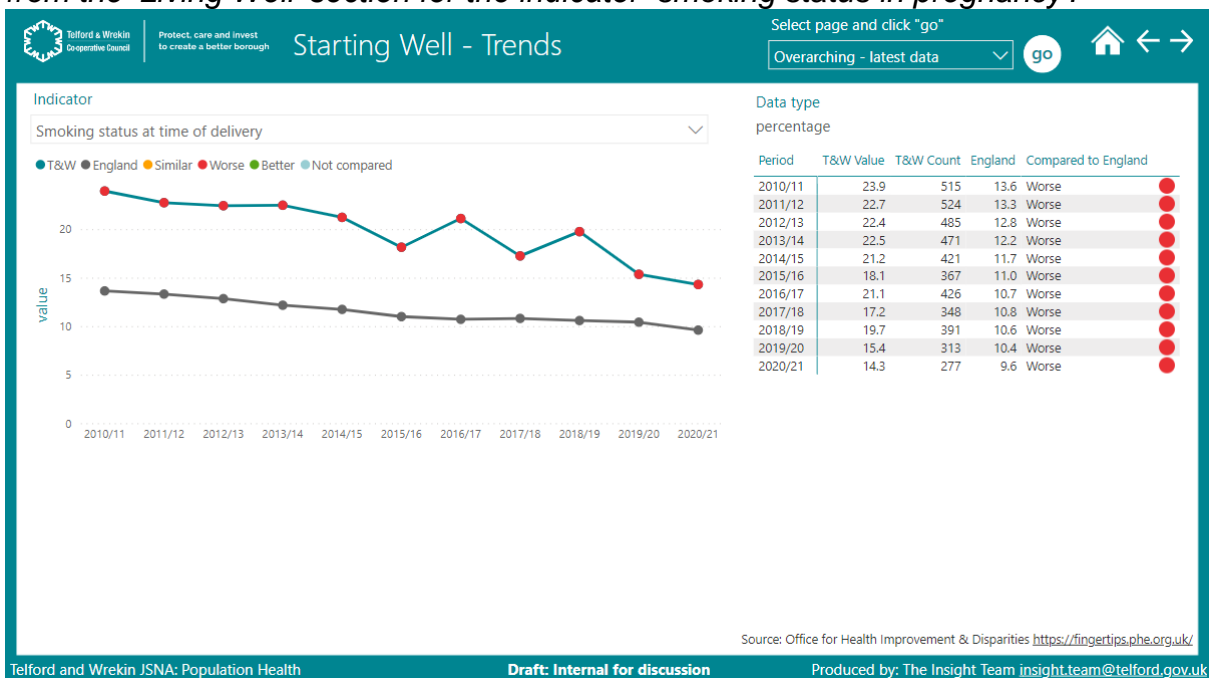
The Population Health profile includes functionality and interactivity that enables users to see data in various ways:

- By theme: profiles of borough performance compared to national for each theme

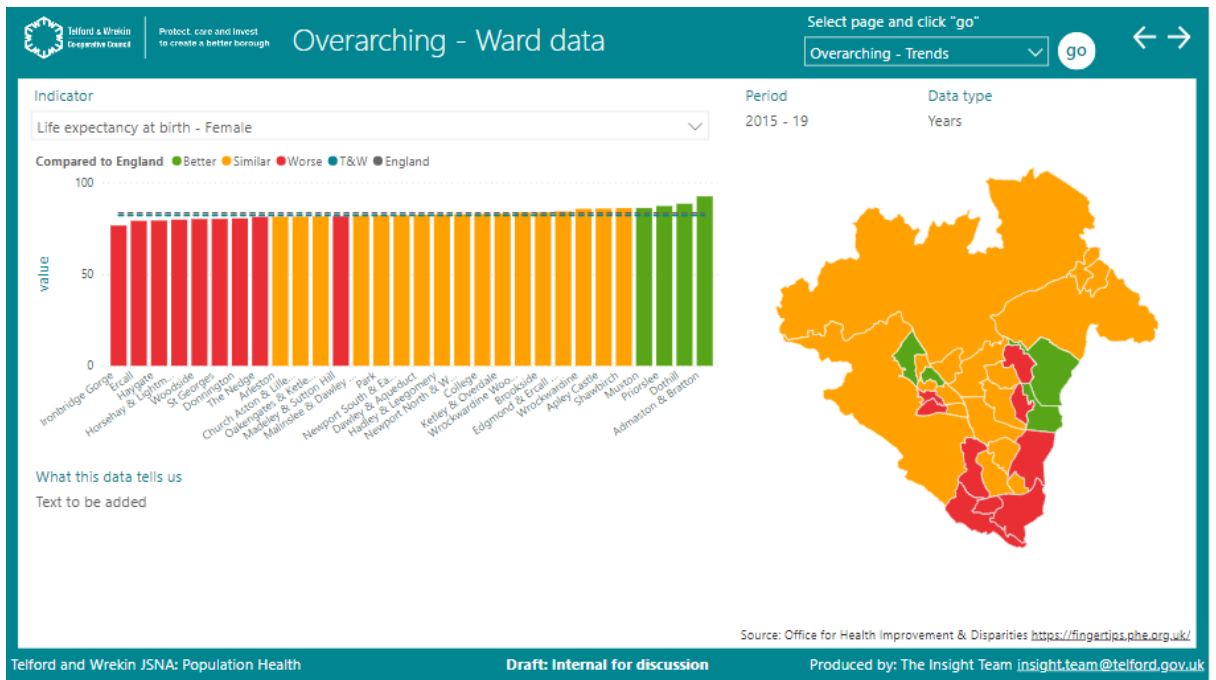
*Example screen print below from the JSNA Health profile of borough data from the 'Living Well' section:*



- Over time: individual indicator detail of performance over time  
*Example screen print below from the JSNA Health profile of data over time from the 'Living Well' section for the indicator 'smoking status in pregnancy':*



- By ward: where available, data is profiled by ward  
*Example screen print below from the JSNA Health profile of ward data from the 'Overarching' section indicator: Life Expectancy at Birth – Female:*

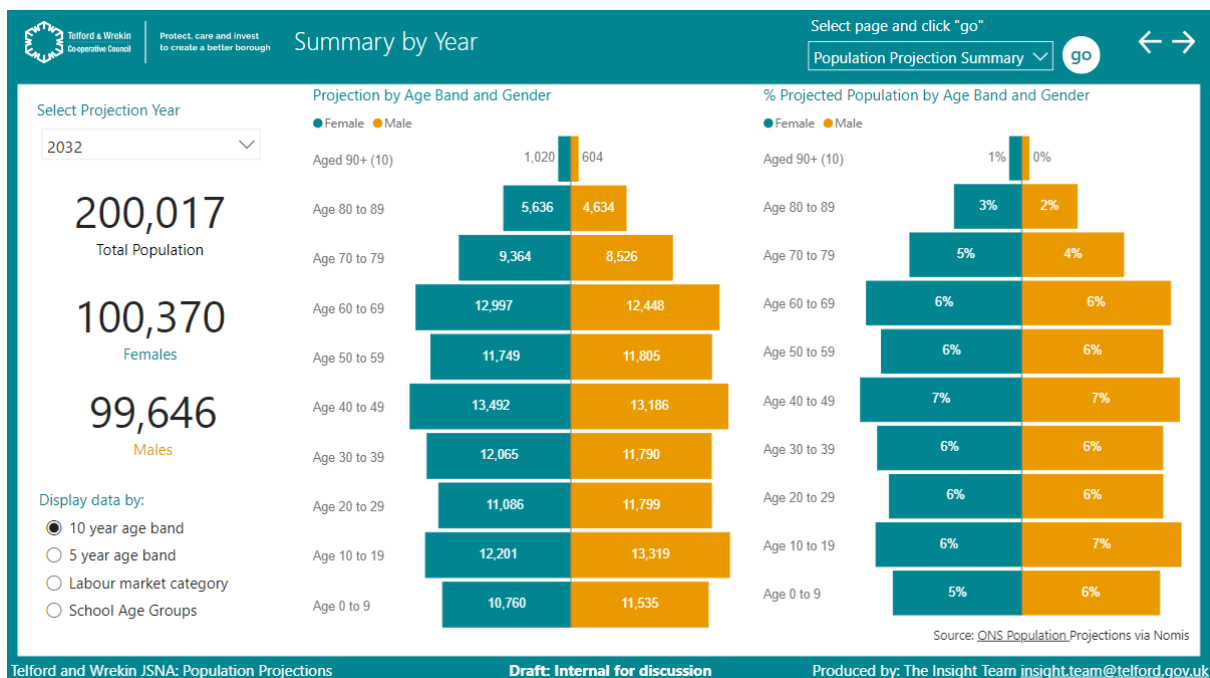


#### 4.1.5 Population Projections JSNA Profile

A JSNA profile of the population projection data from ONS (see Appendix 1 for JSNA population headlines). The profile contains sections on:

- Population projections for the borough to 2032
- Projections by age bands
- Projections for age ranges and change over time
- Regional and national comparisons of projected population growth

*Example screen print below from the JSNA Population Projections showing projected population in 2032 by age band and gender:*



## 4.2 Headlines from the Census 2021

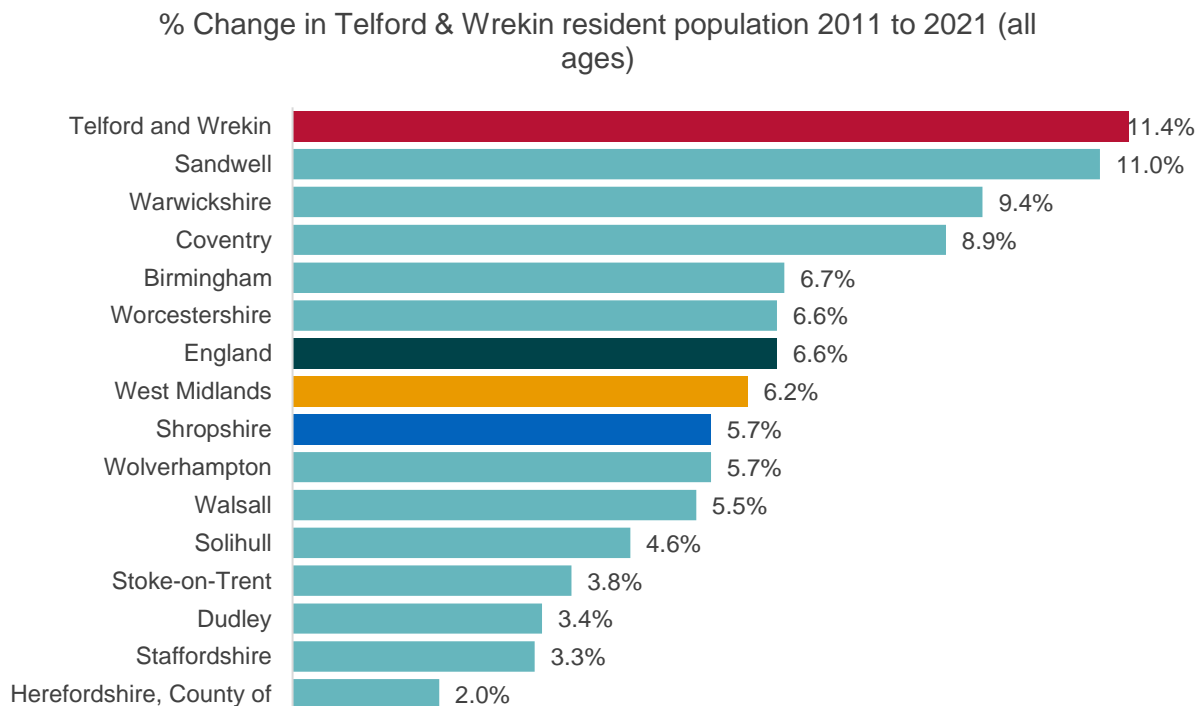
The latest Census took place on 21<sup>st</sup> March 2021. This section summarises the key messages for Telford & Wrekin from the data released to date.

The Census provides us with a rich picture of our population and how it has changed over time. It is hugely important for informing strategies and decisions about public services, both locally and nationally, as well as giving us a detailed insight into the characteristics of our changing communities.

Census data is published by the Office for National Statistics (ONS). Headline results were released in June 2022 and detailed the overall resident population, population age bands, population density and households in the borough. Further data will be released from October onwards.

### 4.2.1 Census 2021: Population Change – total resident population:

The usual resident population of the borough increased from 166,641 (Census 2011) to 185,600 (Census 2021), an increase of 11.4%, the highest increase in resident population of all West Midlands upper tier local authorities:



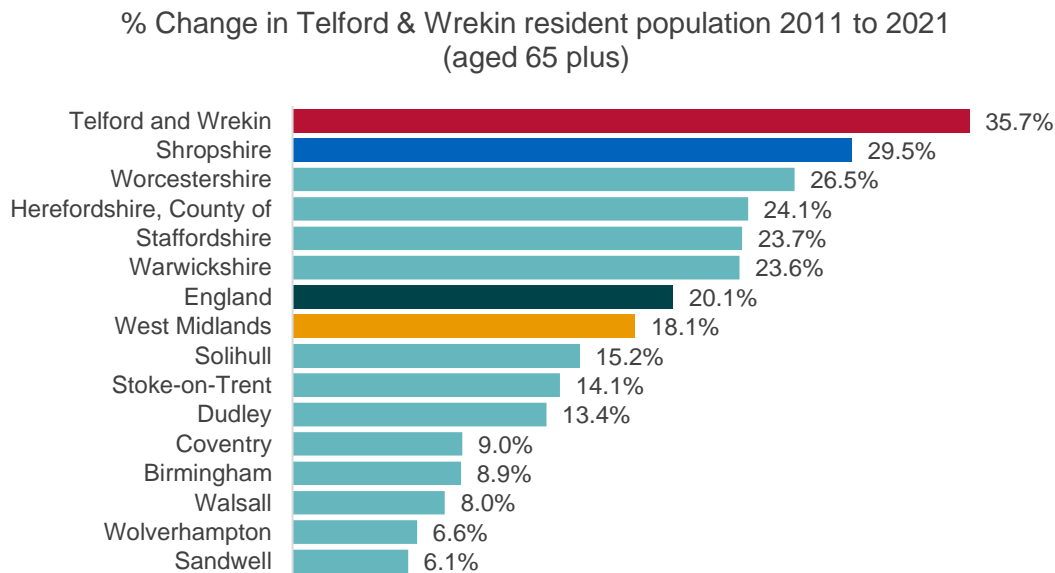
The increase in resident population of 11.4% was the 21<sup>st</sup> highest increase out of all 151 upper tier local authorities in England.

#### 4.2.2 Census 2021: Population Change – Residents aged 65 and over:

The most notable change in the resident population between the 2011 and 2021 Census was the number of residents in the borough aged 65 and over.

The increase in the population aged 65 plus in Telford & Wrekin was 35.7%, increasing to 32,700 residents in 2021 from 24,090 in 2011. This increase was the second highest increase in resident population aged 65 plus of all 151 upper tier local authorities in England.

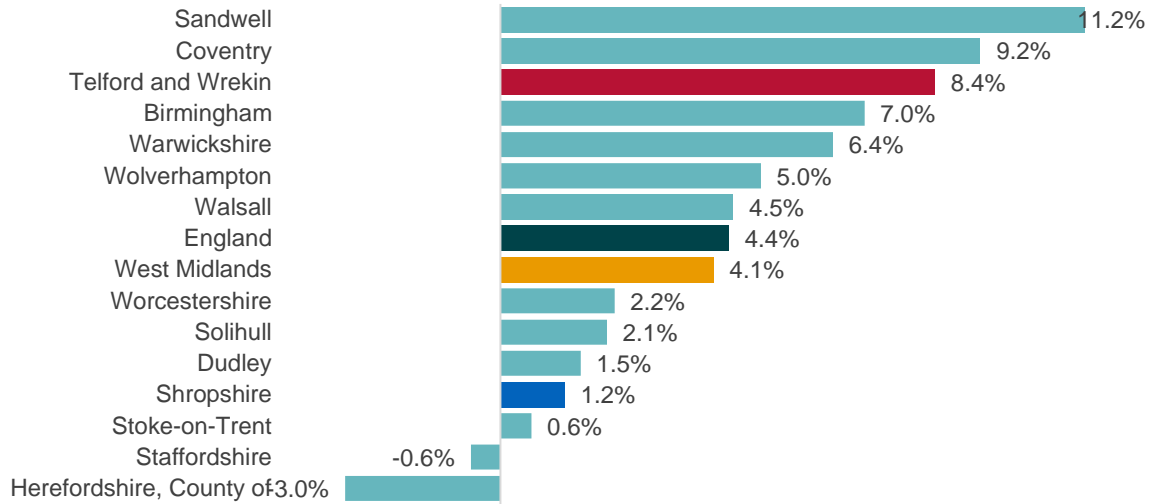
Regionally, the increase in resident population aged 65 plus was the highest of all upper tier West Midlands local authorities, with Telford & Wrekin's increase being higher than that seen in all the neighbouring rural shire counties (who also saw above average increases):



#### 4.2.3 Census 2021: Population Change – Residents aged 20 to 64:

The number residents of a broadly working age (aged 20-64) living in the borough increased by 6.5%, higher than the rate for the West Midlands (2.1%) and England (2.0%). Of the 151 upper tier local authorities in England, the increase was the 34<sup>th</sup> highest.

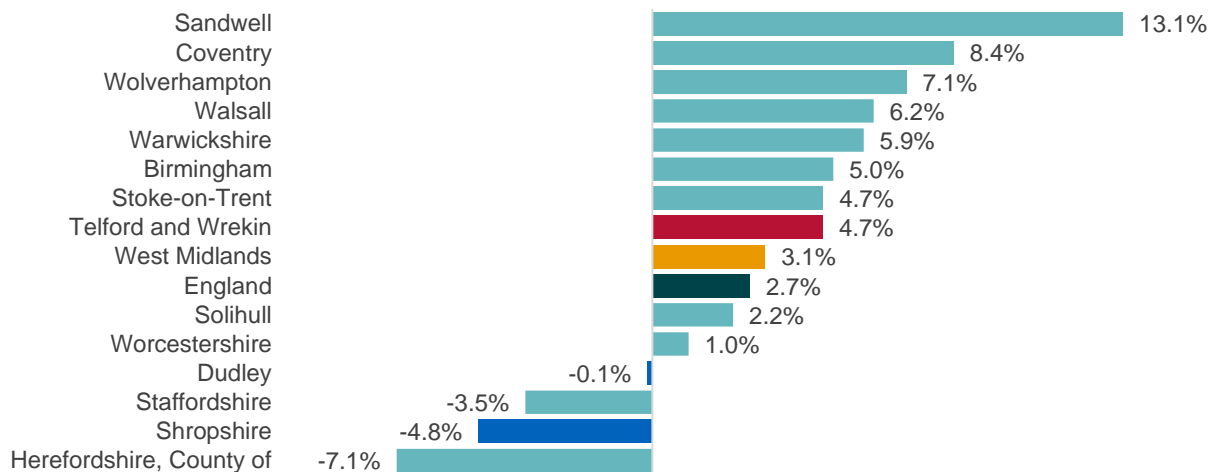
**% Change in Telford & Wrekin resident population 2011 to 2021  
(aged 20-64)**



**4.2.4 Census 2021: Population Change – Residents aged 0-19:**

The population aged 0-19 increased by 4.7%, higher than the rate for the West Midlands (3.1%) and England (2.7%). Broadly, urban areas of the West Midlands region generally saw higher increases in this age band and rural shires lower increases.

**% Change in Telford & Wrekin resident population 2011 to 2021 (aged 0-19)**



When looking at this age range by 5-year bands there were notable differences, with the population aged 0-4 and 15-18 both decreasing (-6.6% and -5.2% respectively)

whereas the populations aged 5-9 and 10-14 both increasing (18.9% and 14.2% respectively). These changes broadly follow the regional and national patterns.

### **4.3 Future JSNA Publications**

The Insight Team will also continue to develop JSNA products. Currently the profiles released are based on the PHOF data. We will be working with NHS colleagues to develop the profiles to incorporate a wider range of data and build the products available on the website.

There is still a significant amount of data to be released from the 2021 Census, and the ONS will begin releasing this from October 2022 (dates still to be confirmed). These will include data on ethnicity, religion, the labour market, education and housing. For the first time, it will also include information on armed forces veterans, sexual orientation and gender identity.

The suite of Power BI Census Profiles will also be developed following each release. These will be available internally for staff and members, and will also be published on the Telford & Wrekin website as part of our JSNA.

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## **5 Alternative Options**

Section 4.1 of this report is related to the Council and the HWB meeting its statutory duties to produce and publish a JSNA. If the JSNA was not undertaken the Council and HWB may be in breach of those duties.

## **6 Key Risks**

There are no risks identified in this report.

## **7 Council Priorities**

The JSNA provides insight into needs of communities across the borough, informing all council priorities

## **8 Financial Implications**

There are no direct financial implications foreseen from accepting the recommendations of this report.

Information and intelligence about the demand likely to accrue to health and social care services is already in use by the Council to create financial modelling and forecasting. Data identified and developed as part of this work will be helpful in refining the future financial models necessary to identify the impacts of demand and



a changing health picture on Care services. It may also help to identify the impact on the Council of changes and demands elsewhere in the public services. This information will be valuable in producing information to support future budget strategy decisions.

## **9 Legal and HR Implications**

Section 116 of the Local Government and Public Involvement in Health Act 2007 (as amended) places a duty upon the Council and each of its partner health bodies to produce and publish a joint strategic needs assessment (JSNA) through the Health and Wellbeing Board.

The JSNA must be produced in co-operation; with regard to any statutory guidance issued by the Secretary of State; involve the Local Healthwatch organisation for the area and involve people who live or work in the area. The aim is to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities.

The details set out in this report are key factors which must be considered when the JSNA is produced and policies developed.

## **10 Ward Implications**

The JSNA highlights variations in levels of need in different communities and contains ward level information

## **11 Health, Social and Economic Implications**

The JSNA provides insight into health, social and economic needs of our population to inform evidence based decision making.

## **12 Equality and Diversity Implications**

The JSNA demonstrates inequalities in Telford & Wrekin, including variations in need due to characteristics or geographical factors.

## **13 Climate Change and Environmental Implications**

## **14 Background Papers**

- 1 JSNA Update – March 2022: Health & Wellbeing Board Paper

## 15 Appendices

Appendix 1 details the JSNA headlines for Telford & Wrekin from the current JSNA products.

## 16 Report Sign Off

<b>Signed off by</b>	<b>Date sent</b>	<b>Date signed off</b>	<b>Initials</b>
Legal	05/09/2022	08/09/2022	RP
Finance	05/09/2022	07/08/2022	MB
SMT	13/09/2022	14/10/2022	LN



## **JSNA Headlines – Telford & Wrekin Insight** **September 2022**

### ***Appendix to JSNA Update for the Health & Wellbeing Board, September 2022***

Below is a summary of the main JSNA population headlines for Telford and Wrekin. This is provided for information and context for the HWB and data is sourced from JSNA profiles. These headlines are included and updated in every JSNA HWB report

#### **Population**

Telford and Wrekin is a place of contrasts, a distinctive blend of urban and rural areas, with green open spaces alongside contemporary housing developments and traditional market towns. On the face of it, the Borough is a prosperous place but there are clear differences across the Borough. Some neighbourhoods and communities in the Borough are among the most deprived areas nationally, whereas equally some communities are amongst the more affluent in England.

The population of the Borough continues to grow at above national rates – driven by the expansion of the local economy and record levels of housing growth. As the population grows, it has continued to change, with the population becoming more diverse and ageing:

- The 2021 Census estimated the population of Telford & Wrekin to be 185,600, an increase of 11.4% since the 2011 Census (166,641) (*source: ONS Census data*)
- The borough's population growth between 2011 and 2021 was the highest of all West Midlands upper tier local authorities and the 21<sup>st</sup> highest of all 151 upper tier local authorities in England (*source: ONS Census data*).
- The number of births has been decreasing in recent years. Between mid-2019 and mid-2020 the borough saw the lowest annual number of births (1,989) and the highest number of deaths (1,717) in the ten-year period 2011-2020 (*source: ONS Population Estimates 2020*).
- Natural change (the difference between the number of births and the number of deaths) has decreased since 2011 and internal migration has become the key driver of population change in the borough (*source: ONS Population Estimates 2020*).
- Telford & Wrekin no longer has a population that is younger than the average in the region. The median age of residents in the borough has increased by 3.5 years since 2001 and as of mid-2020 the average age of residents, at 39.6, is the same as West Midlands (39.6) and slightly lower than England (40.2) (*source: ONS Population Estimates 2020*).
- The borough saw one of the largest increases in population aged 65 plus in England between the 2011 and 2021 Census, with an increase of 35.7% (England 20.1%) – the highest increase of all West Midlands upper tier local authorities and the second highest of all 151 upper tier authorities in England (*source: ONS Census data*).
- The population is also becoming more diverse, and it is expected that the forthcoming release of 2021 Census data will provide a detailed insight into the changing population of the borough.

#### **Wider Determinants of Health**

Telford and Wrekin is a place of socio-economic contrasts. Parts of the borough are amongst the most deprived in England, with deprivation rates comparable to inner cities, whilst other areas are amongst the least deprived in England

- Around 24.9% of the population of Telford & Wrekin live in areas in the 20% most deprived nationally, around 45,100 people (*source: 2019 Index of Multiple Deprivation*).
- Around 17.3% of children live in relative low income families, higher than the England rate (15.6%) (*source: PHE Fingertips 2019/20*)
- The borough has lower rates of people claiming unemployment benefits than regionally or nationally (T&W 3.6%, W Mids 4.8%, England 3.8%) (*source: NOMIS claimant count July 2022*)
- The largest employment sectors in the borough are manufacturing and retail (each representing 17.2% of jobs) (*source: NOMIS employees by industry 2020*)

### Population Health Overview

- Life expectancy for both males and females in the borough remains worse than England. Male life expectancy at birth is 78.2 (England 79.4) and female life expectancy at birth is 81.9 (England 83.1) (*source: PHE Fingertips life expectancy 2018-20*)
- There is an inequality in life expectancy in the borough, with men and women living in the most deprived areas of the borough expected to live on average 7.3 years and 4.1 years respectively than those living in more affluent areas (*source: PHE 2018-20*).
- Infant mortality rates in the borough are similar to rates nationally (*source: PHE Fingertips 2018-20*)

### Starting Well

- Rates of access to maternity care and the proportion of pregnant women who smoke at the time of delivery are worse than national rates (48.6% have early access to maternity care, England 57.8%, and 14.3% of mothers smoke at the time of delivery, England 9.6%) (*source PHE Fingertips*)
- The number of under 18s who conceive continues to decline and is now a similar rate to England (T&W 16.8, England 13.0) (*source: PHE Fingertips 2020*)
- Rates of overweight and obesity for children in Reception and Year 6 are higher than England rates, with T&W rates of 26.1% in reception and 40% in Year 6 (England 23.0% and 35.2%) (*source: PHE Fingertips 2019/20*)
- Around 30.1% of secondary school pupils have been eligible for free school meals at any time during the past 6 years, higher than the England rate of 28.5% (*source: DfE LAIT tool*).
- Educational attainment data has been disrupted for the past 2 years due to the pandemic. The JSNA will be updated with attainment data once attainment of our pupils is published.
- The borough has higher rates of pupils with special educational needs than national, with 14.2% of primary pupils (England 12.6) and 14.4% of secondary pupils (England 11.5%) having SEN support (*source: DfE LAIT Tool 2021*).
- A lower proportion of the population at age 19 have Level 3 attainment or above, at 50.9% (England 61.5%) (*source: NOMIS 2021*).
- Around 423 Children are in care in Telford & Wrekin and around 210 are on a child protection plan (*source: local data, as at 31<sup>st</sup> March 2022*)

## Living Well

- The standardised mortality ratio for people aged under 75 is worse than the national ratio for causes considered preventable including cardiovascular disease and cancer, and is similar to the national rate for respiratory disease and liver disease (*source: PHE Fingertips mortality rates 2020*).
- Diagnosed depression in those aged 18 and over is reported as 15.9% of the population in 2020/21, higher than the prevalence for England. This equates to around 24,300 people (*source: PHE Fingertips depression prevalence 2020/21*).
- Obesity rates in the borough for adults are higher than England rates. Levels of excess weight in adults have increased to 70.9% in 2019/20 compared with 65.6% in 2016-17. This is significantly higher than the England average (62.8%) (*source: PHE Fingertips*).
- Around 21,300 adults in the borough smoke, 15.4%, similar to the national rate (13.9%) (*source: PHE Fingertips*).
- Around 61.0% of adults are estimated to be physically active, worse than the national rate (65.9) (*source: PHE Fingertips 2020/21*).
- Admission episodes for alcohol related conditions (512.3 per 100,000) is worse than the national rate (455.9) (*source: PHE Fingertips 2020/21*).

## Ageing Well

- Healthy life expectancy in the borough is worse than national for both men and women. On average, men in the borough have a healthy life expectancy of 57.6 years (England 63.1) and women 60.3 years (England 63.9) (*source: PHE Fingertips 2018-20*).
- The mortality rate from causes considered preventable in people aged under 75 is worse than England for males (*source: PHE Fingertips mortality rate 2018-20*).
- Cancer diagnosis rates in the borough are worse than national, with 50.3% of cancers diagnosed at stage 1 or 2, compared to 55% in England (*source: PHE Fingertips 2019*).
- The estimated dementia diagnosis rate for people aged over 65 in the borough is similar to the national rate (T&W 59.9%, England 62%) (*source: PHE Fingertips 2022*).
- The population vaccination coverage for flu for those aged 65+ is better than national, at 82.1% compared to 82.3% England (*source: PHE Fingertips 2021/22*).
- Emergency hospital admissions due to falls is better than the national rate for older people aged 65 and over and 80+, and similar to the national rate for people aged 65-79 (*source: PHE Fingertips 2020/21*).
- The percentage of people aged 65+ who are admitted to residential and nursing care, and those who are offered enablement services following discharge from hospital, are both better than the national rates (*source: PHE Fingertips 2020/21*).

JSNA products and deep dives look to understand the differences and inequalities in the borough, examining these headlines across different geographies and population groups, in order to build a detailed picture of our population.

**Report prepared Helen Potter, Insight Manager and Damion Clayton, Insight Partner, Telford & Wrekin Council**

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