



Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 22 June 2023

2.00 pm

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

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Committee Members: Cllr A J Burford (Chair), Cllr P Watling, Cllr F Doran, Cllr K Middleton, Cllr K T Tomlinson, Cllr S P Burrell, S Whitehouse, S Fogell, M Vivian, J Britton, J Rowe, L Noakes, S Froud, J Dunn, C Parker, A Olver, N Carr and P Davies

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HEALTH & WELLBEING BOARD

Minutes of a meeting of the Health & Wellbeing Board held on Thursday 23 March 2023 at 2.00 pm in The Telford Room, Addenbrooke House, Ironmasters Way, Telford, TF3 4NT

Present: Councillor A D McClements (Chair), Councillor A J Burford, Councillor K Middleton, L Noakes, A Olver, J Rowe, Councillor K T Tomlinson and S Whitehouse

Apologies: J Britton, J Dunn, N Dymond, Councillor I T W Fletcher, B Parnaby, Councillor S A W Reynolds and M Vivian

HWB79 Declarations of Interest

None.

HWB80 Minutes of the Previous Meeting

RESOLVED – that the minutes of the meeting held on 24 November 2022 be confirmed and signed by the Chair.

HWB81 Public Speaking

None.

HWB82 Best Start in Life

The Board received a presentation on the Best Start in Life Programme. The programme had begun the previous summer and included some universal offerings as well as more targeted approaches for children and families who needed additional support.

The Best Start in Life (BSIL) Board was established in July 2022 and agreed the approach would be around the following principles of:

- Intelligence-led
- Community-centred co-production
- Place-based and system wide
- Equitable targeting

The Board has agreed a number of priorities including Start for Life & Family Hubs, Healthy Weight, Social Emotional & Mental Health. The report also covered the SEND and Alternative Provision Strategy.

The national Start for Life and Family Hubs programme was being delivered through the Department of Education Grant. The scheme included the implementation of various programmes, such as establishing a breastfeeding network, expansion of parenting programmes and community baby groups.

A key part of the programme was focused around healthy weight. The Board were shown a video showing staff and pupils at a primary school in the Borough who had received targeted support. A new approach had been trialled, which offered targeted support to certain schools in the Borough; the support was tailored for each school to meet their needs.

The Eatwell Project had supported over 6000 children and offered advice around healthy eating, cooking on a budget and offered cooking sessions to support parents.

Members of the Board discussed the support the programme had given residents of the Borough and the impact this had on many lives. A Member asked a question about the uptake of the cooking programmes, and it was agreed that there had been a good uptake in these.

A Member asked that the ICB bring a specific report about demand and waiting times in the Children & Young People's BeeU service to the next meeting of the Board.

RESOLVED that the significant work programmes under way on the best start in life priority which aim to improve a broad range of outcomes and narrow inequalities for all children and young people in Telford & Wrekin be acknowledged.

HWB83 Integrated Care Strategy and Development of the Five Year Forward Plan

The Board received an update from the Director of Partnerships and Place (NHS Shropshire, Telford and Wrekin). The first draft of the Strategy had been written and had been a collaboration from all agencies. The timeframes to produce the first draft had been tight and it was acknowledged that there would be gaps and placeholders.

The Chief Executive Officer (NHS Shropshire, Telford and Wrekin) advised the Board that the strategy pulled together work that was already taking place. The Plan would build on the work taking place and identify gaps.

HWB84 ICB Update

The Chief Executive Officer (NHS Shropshire, Telford and Wrekin) advised that partnership and collaboration was key to the success of the partnership. He thanked health and care staff for all of the hard work they had done but acknowledged that the system could always do more for residents and staff.

HWB85 Pharmaceutical Needs Assessment (PNA)

The Board received the Pharmaceutical Needs Assessment (PNA) for 2022/23-2025/26. It was a responsibility of the Health and Wellbeing Board to produce a PNA to consider the needs of the population, service provision and any gaps within that provision.

The Board considered that pharmacies were often a forgotten section of primary care. The Board agreed that the services offered by pharmacies should be more widely known. Responsibilities for local pharmacies was moving from NHS England to the ICP, which was considered to be positive.

The Board noted the vital role that pharmacies had taken during the coronavirus pandemic. Members of the Board discussed the role of prescribing pharmacists and how they could be utilised more effectively.

RESOLVED that the Telford & Wrekin Pharmaceutical Needs Assessment for 2022/23 – 2025/26 be approved for publication and the recommendations of the PNA in terms of ICS strategic planning, commissioning and service improvement be agreed. This included referencing and responding to the PNA in the ICS Joint Forward Plan and the HWB Strategy and ICB and local authority commissioning arrangements.

HWB86 Domestic Abuse Strategy

The Board received the Domestic Abuse Strategy which had recently be approved by Cabinet. There had recently been new duties placed upon Local Authorities and partners around Domestic Abuse. The requirements within the Act were fairly narrow, so the Council had taken the decision to consider a much broader approach. The strategy had been developed with partners.

Members of the Board asked if an 'easy-read' version of the strategy would be produced, to support people to understand the strategy. It was confirmed that this would happen and that a communications strategy was in place to support with the delivery of this.

A discussion took place regarding violence within certain communities and the importance of working with all communities. A discussion took place regarding links with education and training within schools.

RESOLVED that the report be noted.

HWB87 Ageing Well

The Board received the report on the Ageing Well Strategy. The report heard from a representative of the Over 50s Forum as a representative of the partnership. The quality of later life was not just determined by the health service or the Local Authority, but by many other factors such as supermarkets, banks, the post office and energy prices. The strategy looked at a range of services which affected older people.

The demographics of the Borough had changed; the population was ageing. A discussion took place regarding dementia provision. One of the partnerships next topics to consider would be digital exclusion and how the Council and other partners could support people to be more digitally aware.

A discussion took place regarding primary care and other models used in different areas. Members discussed the support that pharmacies were able to offer. Members discussed the attendance allowance and noted how many residents found it difficult to apply for this.

RESOLVED – that:

- a) **The Ageing Well Strategy consultation in the community and with all partners be supported and championed;**
- b) **The content of the report which was presented to Cabinet on 17 February 2023 be noted;**
- c) **The final strategy alongside any update on implementation be received in Autumn 2023.**

HWB88 Healthwatch Annual Report

The Board received the Healthwatch Telford and Wrekin Annual Report. The report noted that the Chair of Healthwatch had sent his apologies to the meeting and thanked him for his contribution to the Board over the years.

Members were requested to send any comments or queries on the report directly to Healthwatch.

The meeting ended at 3.26 pm

Chairman:

Date: Thursday 22 June 2023



Protect, care and invest
to create a better borough

Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 22 June 2023

JSNA and Census Update

Cabinet Member:	Cllr Kelly Middleton: Cabinet Member: Healthy, Safer and Stronger Communities and Partnerships
Lead Director:	Liz Noakes: Director: Health & Wellbeing
Service Area:	Health & Wellbeing
Report Author:	Helen Potter – Insight Manager, Telford & Wrekin Council
Officer Contact Details:	Tel: 01952 381118 Email: helen.potter@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	SMT – 12 June 2023 Health & Wellbeing Board – 22 June 2023

1 Recommendations for decision/noting:

That the Health and Wellbeing Board:

- 1.1 Notes updated JSNA headline messages about the health and wellbeing needs of our population and the data available on the Telford and Wrekin Insight website; and
- 1.2 Notes the headlines from the Census 2021 and data available on the Telford and Wrekin Insight website.

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
- Headline from the Census 2021 data
- Headline population and wider determinants data for Telford & Wrekin

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).

3.2 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.

3.3 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 JSNA Update

4.1.1 Summary of previous JSNA update to the Health and Wellbeing Board
The JSNA update to the Board in September 2022 launched the new Telford and Wrekin Insight website www.telford.gov.uk/insight. This website provides staff, members, partners and the public with clear, consistent messages about the population's health and wellbeing needs and is updated regularly.

Telford and Wrekin Insight has sections listed below, with each section containing borough headlines and interactive dashboards, enabling people to search through a wealth of published data about the borough. Titles with a * have been added since the last update to the Health and Wellbeing Board:

- Current population
- Future population
- Health of our population
- Economy in local areas*
- Deprivation*
- Census 2021:
 - Population
 - Demography and migration*
 - Health, disability and unpaid care*

- Education*
- Armed forces*
- Labour market and travel to work*
- Housing*
- Sexual orientation and gender*
- Ethnicity, identity, language and religion*

The previous paper to the HWB also highlighted the headlines from the 2021 Census, particularly around the levels of growth in our population, most notably in our population aged 65+. This paper outlines further information that has been released from the 2021 Census since it was last reported to the HWB.

4.1.2 JSNA Population Headlines

The appendix to this report contains the latest population headlines – these are also available on www.telford.gov.uk/insight and are updated quarterly.

The notable changes to these headlines since these headlines were last reported to the HWB are:

Population Health:

- **Life Expectancy:** Life expectancy at birth measures have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released and comparisons to national averages recalculated:
 - Male life expectancy at birth for 2021 (one year range) was 78.3, similar to national (78.7)
 - Female life expectancy at birth for 2021 (one year range) at 82.2, is now similar to national (82.8)

Starting Well:

- **Teenage Conceptions:** The 2021 rate of under 18s who conceive was worse than the England rate (T&W 19.5, England 13.1). Improvements in this rate had seen our rate become similar to that seen nationally in recent years, however recalculation of rates following the 2021 Census population estimates has resulted in our rate now being worse than national.
- **Obesity:** new data for children in reception and Year 6 who are overweight and obese for 2021/22 shows this rate is worse than England rates and increasing, with T&W rates of 27.3% in reception and 40.8% in Year 6 (England 22.3% and 37.8%)
- **Educational attainment:** attainment data for all Key Stages has been released for assessments undertaken in 2022:

- Early Years Foundation Stage: 63.6% of children achieved the expected standard across all learning goals at the end of Reception, similar to the national average (63.4%)
- Phonics: 77.6% of children in the borough achieved a pass in Phonics, higher than the national rate of 76.0%
- Key Stage 1: the proportion of pupils achieving the expected standard at Key Stage 1 in the borough was the same as the national average for reading (both 67%), and just below the national average for writing (borough 57%, national 58%) and for maths (borough 67%, national 68%)
- Key Stage 2: 57% of pupils at Key Stage 2 achieved the expected standard in reading, writing and maths, lower than the national average of 59%
- Key Stage 4: The proportion of pupils achieving a 9-5 pass in English and Maths, at 43.2%, is lower than the national average of 46.8%. Attainment 8 for pupils was similar to the national average (47.3 in Telford and Wrekin, 47.2 England). Progress 8 performance, at -0.29, was lower than the national rate of -0.06

Living Well

- **Premature Mortality:** Premature mortality measures have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released. Headlines are:
 - The 2021 age-standardised mortality rates for people aged under 75 for all causes, all cancers, lung cancer, breast cancer, colorectal cancer, liver disease, stroke and alcohol specific mortality rates are similar to the national rates for all persons, males and females. Rates for respiratory disease are also similar to national rates for all persons and males.
 - The 2021 age-standardised mortality rates for deaths due to Covid-19 and for deaths involving Covid 19 were similar to the national rates (one-year rate for all persons for deaths due to Covid-19 for Telford and Wrekin 39.3, England 42.2, and for deaths involving Covid-19 T&W 44.3, England 48.0)
 - The 2021 age-standardised mortality rates that are significantly worse than the national rate for cardiovascular diseases (all persons rate), heart disease (male rate), respiratory disease (female), COPD (all person rate and female rate),
 - Premature mortality in adults with severe mental illness (SMI) in the borough is worse than national (2018-20 Telford & Wrekin rate 134.4, England 103.6)
- **Obesity:** Levels of excess weight in adults have increased to 71.4% in 2021/22 compared with 65.6% in 2016-17. This is higher than the England average (63.8%)

Ageing Well

- **Life Expectancy at 65:** as per life expectancy at birth and mortality measures, life expectancy at 65 rates have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released and comparisons to national averages recalculated:
 - Male life expectancy at 65 for 2021 (one year range) was 17.8, worse than the national rate of 18.4
 - Female life expectancy at 65 for 2021 (one year range) was 20.1, worse than the national rate of 21.0.

4.1.3 Census Headlines

Significant amounts of data from the Census 2021 has been released since the last HWB report.

Notable headlines for the HWB at a borough level include:

- **Diversity:** the 2021 Census showed the borough becoming notably more diverse in the ten years since the previous Census, including an increase in residents who were born outside the UK (11.4% in 2021 compared to 7.3% in 2011), a decrease in the proportion of the population whose ethnicity was in the White ethnic group and 'English, Welsh, Scottish, Northern Irish or British' from 89.5% to 73.5%.
- **Language:** The most common main languages in the borough, other than English were: Polish (1.7%, 3,089), Romanian (1.0%, 1,756) and Panjabi (0.6%, 1,075).
- **Religion:** As with England, for the first time in a census, less than half of borough residents (47.6%, 88,275 people) described themselves as "Christian". "Muslim" was the second most common religion in the borough, increasing to 2.7% (5,043) of residents in 2021 from 1.8% (3,019) of residents in 2011.
- **Health:** In the 2021 Census, 44.2% of the age standardised population (85,723 people) reported very good health in 2021. This was lower than the proportion of the population for England as a whole (47.5%)
- **Disability:** 1 in 5 of the borough's age standardised population (20.5%, 36,526 people) were disabled in 2021. This was greater than the proportion of the population for England (17.7%)
- **Carers:** 1 in 10 of the borough's population (10.6%, 18,026 people, age standardised rate) reported that they were providing unpaid care in 2021. This was greater than the proportion for England (8.9%) and the West Midlands (9.6%) and was the 10th highest proportion of all upper tier local authorities England. 3.5% of the borough's age standardised population (5,899 people) were doing so for more than 50 hours per week.
- **Housing:** The 2021 Census showed that there was an increase in the proportion of households who rented their accommodation privately to 21.2% (16,197) in 2021 from 15.0% (9,979) in 2011. This meant that the

proportion of privately rented homes in the borough was greater than England (20.5%).

- **Armed Forces:** In 2021, 8,066 people in Telford and Wrekin reported that they had previously served in the UK armed forces. This was 5.4% of usual residents aged 16 and over and compares to 3.8% for England.

4.1.4 JSNA deep dives and project work

Deep Dive work is undertaken to provide detailed insight to support projects, strategy development and new initiatives. Since the last HWB report, notable deep dive work includes:

Insight Telford and Wrekin Website: following a review of the current embedded reports, an enhanced set of reports with further functionality including additional data will be released.

Safer Stronger: a detailed dashboard has been developed to support the Safer Stronger Communities Board to enable work to be intelligence led and monitor the impact of interventions.

SEND: A Special Educational Needs and Disability JSNA has been completed and was used to support the recent Ofsted SEND inspection.

Best Start In Life: The Insight Team are currently completing a Best Start in Life JSNA to support the implementation of Family Hubs, a project funded by the Department for Education.

Social Care: The Insight Team are completing additional profiles for the website which will focus on Social Care outcomes framework and statutory data.

Social and Emotional Mental Health in Children & Young People: detailed work, led by the Population Health Management Analyst, will be developed to support the Best Start in Life Board and Annual Public Health Report.

Please contact Helen Potter if you would like more information about these pieces of work or would like to request other JSNA deep dive work.

5 Alternative Options

5.1 There are no alternative options identified.

6 Key Risks

6.1 There are no key risks identified.

7 Council Priorities

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

8 Financial Implications

- 8.1 There are no direct financial implications foreseen from accepting the recommendations of this report.
- 8.2 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

- 9.1 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 Integrated Care Systems to produce and publish a joint strategic needs assessment (JSNA) through the Health and Wellbeing Board.
- 9.2 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.

10 Ward Implications

- 10.1 The JSNA highlights variations in levels of need in different communities across the borough.

11 Health, Social and Economic Implications

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

12 Equality and Diversity Implications

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

13 Climate Change and Environmental Implications

13.1 There are no direct climate change or environmental implications identified within this report.

14 Background Papers

JSNA Update – September 2022: Health & Wellbeing Board Paper

JSNA Update – March 2022: Health & Wellbeing Board Paper

15 Appendices

Telford and Wrekin Insight: Joint Strategic Needs Assessment (JSNA)
Population Headlines
June 2023

Introduction

This document provides a summary of the main Joint Strategic Needs Assessment (JSNA) population headlines for Telford and Wrekin. This document is updated every six months to provide headlines about the borough's population. All data is correct at the point of publishing, but may have been superseded by further updates. More detail and current data is available on many of these topics - interactive dashboards can be found on the [Telford and Wrekin Insight](https://www.telfordandwrekininsight.gov.uk) website or if you have any questions please contact insight.team@telford.gov.uk

Telford and Wrekin

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.

Population and Growth in Telford and Wrekin

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 estimated the population of Telford & Wrekin is 185,842 (*source: ONS mid year population estimates 2021*)
- The borough's population increased by 19,000 people between the 2011 Census and 2021 Census, an increase of 11.4%. This was the highest of all West Midlands upper tier local authorities and the 21st 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 3.9 years since 2001 and as of mid-2021 the average age of residents, at 40, is just below the West Midlands (40.3) and England (40.5) (*source: ONS Population Estimates 2021*).
- 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*).

Population Characteristics

The 2021 Census showed the borough becoming notably more diverse in the ten years since the previous Census in 2011:

Migration:

- 11.4% of usual residents of Telford and Wrekin in March 2021 (21,110 people) were born outside of the UK compared to 7.3% of usual residents (12,137 people) in 2011. This was an increase of 8,973 people (73.9%) from 2011.
- Poland was the most common country of birth outside of the UK for borough residents in 2021, with 1.9% of borough residents (3,481 people) listing Poland as their country of birth. India was the second most common country of birth (1.1% of residents), followed by Ghana (1.1% of residents)

Ethnicity:

- In 2021, 88.2% (163,638) of usual borough residents identified their ethnic group within the high-level “White” category. This compared to 81.0% for England and was a decrease in from 92.7% (154,415) in the 2011 Census.
- As part of the “White” ethnic group, 83.0% (153,936) of the total population of the borough identified their ethnic group as “English, Welsh, Scottish, Northern Irish or British”. This compares to 73.5% for England and was a decrease from 89.5% (149,096) in 2011.
- The next most common high-level ethnic group was “Asian, Asian British or Asian Welsh” accounting for 5.4% (10,067) of the borough population compared to 9.6% for England.

National Identity

- In 2021, 92.8% (172,114) of usual borough residents identified with at least one UK national identity (English, Welsh, Scottish, Northern Irish, British and

Cornish) compared with 90.0% for England. This was a decrease in Telford and Wrekin from 95.8% (159,698) in the 2011 Census.

- Those selecting a non-UK identity only accounted for 7.3% (13,505) of the borough population in 2021 compared to 10.1% for England. This was an increase locally from 4.2% (6,943) of the population in 2011.
- Among those who described a non-UK national identity, the most common response was those describing “Polish” only as their identity. This accounted for 1.6% (2,972) of borough residents compared to 1.0% for England. Romanian” only was the second most commonly reported non-UK national identity in the borough. This accounted for 0.9% (1,701) of borough residents compared to 0.8% for England.

Language:

- In 2021, 93.4% (167,409) of usual borough residents, aged three years and over, had English as a main language. This compared to 90.8% for England and was a decrease locally from 95.9% (153,163) of residents in 2011.
- In 2021, a further 5.3% (9,452) of borough residents could speak English well or very well but did not speak it as their main language.
- The most common main languages in the borough, other than English were: Polish (1.7%, 3,089), Romanian (1.0%, 1,756) and Panjabi (0.6%, 1,075).

Religion:

- As with England, for the first time in a census, less than half of borough residents (47.6%, 88,275 people) described themselves as “Christian”.
- The main driver for the change was the proportion of residents who indicated that they had “No religion”. In 2021, 40.9% (75,964) of borough residents responded that they had “No religion”. This was greater than for England (36.7%).
- “Muslim” was the second most common religion in the borough, increasing to 2.7% (5,043) of residents in 2021 from 1.8% (3,019) of residents in 2011.

Sexual Orientation

- The census question on sexual orientation was a voluntary question asked for the first time in Census 2021. 92.9% (138,176) of usual borough residents aged 16 and over answered the question.
- 134,069 (90.2% of usual borough residents aged 16 and over) identified as straight or heterosexual; 1,974 (1.3%) described themselves as gay or lesbian; 1,726 (1.2%) described themselves as bisexual; 407 (0.3%) selected “Other sexual orientation”.
- The overall proportion of borough residents who identified with an LGB+ orientation was 2.8% (4,107) which compares with 2.6% for the West Midlands and 3.2% for England.

Gender Identity

- The census question on gender identity was a voluntary question asked for the first time in Census 2021 of those aged 16 years and over. The question asked “Is the gender you identify with the same as your sex registered at birth?”. 94.3% (140,137) of usual borough residents aged 16 and over answered the question.

- A total of 139,411 (93.8% of usual borough residents aged 16 and over) indicated that their gender identity was the same as their sex registered at birth.
- A total of 726 (0.5%) answered “No” indicating that their gender identity was different from their sex registered at birth. Within this group: 361 (0.2%) answered “No” but did not provide a write-in response; 149 (0.1%) identified as a trans man; 118 (0.1%) identified as a trans woman; 58 (0.04%) identified as non-binary; 40 (0.03%) wrote in a different gender identity.

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 23.9% of children live in relative low income families, around 8,814 children and a higher proportion than the England rate (19.9%) (*source: PHE Fingertips 2021/22*)
- 1 in 10 of the borough’s age standardised population (10.6%, 18,026 people) reported that they were providing unpaid care in 2021. This was greater than the proportion for England (8.9%) and the West Midlands (9.6%) and was the 10th highest proportion of all upper tier local authorities England. 3.5% of the borough’s age standardised population (5,899 people) were doing so for more than 50 hours per week. (*Source: ONS Census 2021*)
- 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 Feb 2023*)
- The largest employment sectors in the borough are construction (730 businesses) and retail (700 businesses) (*source: NOMIS UK Business Count 2022*)
- The 2021 Census showed that there was an increase in the proportion of households who rented their accommodation privately to 21.2% (16,197) in 2021 from 15.0% (9,979) in 2011. This meant that the proportion of privately rented homes in the borough was greater than England (20.5%). (*Source: ONS Census 2021*)
- The vast majority of households in the borough reported that they had central heating in 2021 (99.1%, 75,790). However 0.9% (721) of households had no central heating. (*Source: ONS Census 2021*)
- There was a decrease in the proportion of borough households did not have a car or van available to them to 18.7% (14,326) in 2021 from 20.6%, (13,748) in 2011. (*Source: ONS Census 2021*)
- In 2021, 8,066 people in Telford and Wrekin reported that they had previously served in the UK armed forces. This was 5.4% of usual residents aged 16 and over and compares to 3.8% for England. (*Source: ONS Census 2021*)

Population Health Overview

- Life expectancy at birth measures have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released and comparisons to national averages recalculated:
 - Male life expectancy at birth for 2021 (one year range) was 78.3, similar to national (78.7)
 - Female life expectancy at birth for 2021 (one year range) at 82.2, is now similar to national (82.8) (*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*)
- In the 2021 Census, 44.2% of the age standardised population (85,723 people) reported very good health in 2021. This was lower than the proportion of the population for England as a whole (47.5%) (*source: ONS Census 2021*)
- 1 in 5 of the borough's age standardised population (20.5%, 36,526 people) were disabled in 2021. This was greater than the proportion of the population for England (17.7%) (*Source: ONS Census 2021*)

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 12% of mothers smoke at the time of delivery, England 9.8%) (*source PHE Fingertips 2021/22*)
- The 2021 rate of under 18s who conceive was worse than the England rate (T&W 19.5, England 13.1). Improvements in this rate had seen our rate become similar to that seen nationally in recent years, however recalculation of rates following the 2021 Census population estimates has resulted in our rate now being worse than national (*source: PHE Fingertips 2021*)
- Rates of overweight and obesity for children in Reception and Year 6 are worse than England rates and increasing, with T&W rates of 27.3% in reception and 40.8% in Year 6 (England 22.3% and 37.8%) (*source: PHE Fingertips 2021/22*)
- Around 25.8% of primary school and 21.9% of secondary school pupils are eligible for free school meals, higher than the England rates of 23.1% and 20.9% (*source: DfE LAIT tool, 2022*).
- Educational attainment data has been disrupted for the past 2 years due to the pandemic, so 2022 attainment data has not been compared to previous years:

- Early Years Foundation Stage: 63.6% of children achieved the expected standard across all learning goals at the end of Reception, similar to the national average (63.4%) (*Source DfE LAIT Tool 2022*)
- Phonics: 77.6% of children in the borough achieved a pass in Phonics, higher than the national rate of 76.0% (*Source DfE LAIT Tool 2022*)
- Key Stage 1: the proportion of pupils achieving the expected standard at Key Stage 1 in the borough was the same as the national average for reading (both 67%), and just below the national average for writing (borough 57%, national 58%) and for maths (borough 67%, national 68%) (*Source DfE LAIT Tool 2022*)
- Key Stage 2: 57% of pupils at Key Stage 2 achieved the expected standard in reading, writing and maths, lower than the national average of 59% (*Source DfE LAIT Tool 2022*)
- Key Stage 4: The proportion of pupils achieving a 9-5 pass in English and Maths, at 43.2%, is lower than the national average of 46.8%. Attainment 8 for pupils was similar to the national average (47.3 in Telford and Wrekin, 47.2 England). Progress 8 performance, at -0.29, was lower than the national rate of -0.06 (*Source DfE LAIT Tool 2022*)
- 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*).
- The borough has higher rates of children on a child protection plan (rate of 50.4 per 10,000 compared to England rate of 42.1) and of children who are looked after (rate of 102.0 per 10,000 compared to England rate of 70.0) (*source: DfE, as at 31st March 2022*)

Living Well

- Premature mortality measures have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released. Headlines are:
 - The 2021 age-standardised mortality rates for people aged under 75 for all causes, all cancers, lung cancer, breast cancer, colorectal cancer, liver disease, stroke, alcohol specific mortality rates are similar to the national rates for all persons, male and female. Rates for respiratory disease are also similar to national rates for all persons and males.
 - The 2021 age-standardised mortality rates for deaths due to Covid-19 and for deaths involving Covid 19 were similar to the national rates (one-year rate for all persons for deaths due to Covid-19 for Telford and Wrekin 39.3, England 42.2, and for deaths involving Covid-19 T&W 44.3, England 48.0)
 - The 2021 age-standardised mortality rates that are significantly worse than the national rate in the borough for cardiovascular diseases (all persons rate), heart disease (male rate), respiratory disease (female), COPD (all person rate and female rate),

- Premature mortality in adults with severe mental illness (SMI) in the borough is worse than national (2018-20 Telford & Wrekin rate 134.4, England 103.6)
- Diagnosed depression in those aged 18 and over is reported as 15.6% of the population in 2021/22, higher than the prevalence for England (12.7%). This equates to around 24,200 people (*source: PHE Fingertips depression prevalence 2021/22*).
- The suicide rate for the borough is similar to the national rate (2018-20 rate for all persons for Telford and Wrekin is 11.4 compared to England 10.4)
- Obesity rates in the borough for adults are higher than England rates. Levels of excess weight in adults have increased to 71.4% in 2021/22 compared with 65.6% in 2016-17. This is significantly higher than the England average (63.8%) (*source: PHE Fingertips*).
- Around 13.8% of adults in the borough smoke, similar to the national rate (13.6%) (*source: PHE Fingertips 2021/22*)
- Around 26.8% of adults are estimated to be physically inactive, worse than the national rate (22.3) (*source: PHE Fingertips 2021/22*)
- 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

- Life expectancy at 65 rates have been recalculated nationally following the release of the 2021 Census population estimates. Although we are still awaiting the recalculation of 3-year averages, the one-year measures have been released and comparisons to national averages recalculated:
 - Male life expectancy at 65 for 2021 (one year range) was 17.8, worse than the national rate of 18.4
 - Female life expectancy at 65 for 2021 (one year range) was 20.1, worse than the national rate of 21.0.
- 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*)
- Cancer diagnosis rates in the borough are similar to national, with 53.6% of cancers diagnosed at stage 1 or 2, compared to 52.3% in England (*source: PHE Fingertips 2022*)
- The estimated dementia diagnosis rate for people aged over 65 in the borough is worse than the national rate (T&W 59.9%, England 62%) (*source: PHE Fingertips 2022*)
- The population coverage for flu for those aged 65+ is 82.1%, slightly lower than the national rate of 82.3% but well above the national benchmark goal of 75% (*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 2021/22*)

16 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Director	31/05/2023	01/06/2023	LN
Legal	31/05/2023	05/06/2023	RP

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Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Borough of Telford and Wrekin

Health & Wellbeing Board

Thursday 22 June 2023

Health & Wellbeing Strategy Refresh 2023 - 2027

Cabinet Member:	Cllr Kelly Middleton - Cabinet Member: Healthy, Safer & Stronger Communities and Partnerships
Lead Director:	Liz Noakes - Director: Health & Wellbeing
Service Area:	Health & Wellbeing
Report Author:	Helen Onions – Consultant in Public Health
Officer Contact Details:	Tel: 01952 388908 Email: helen.onions@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Key Decision
Forward Plan:	Yes – 26/04/2023
Report considered by:	SMT – 05/06/2023 Health and Wellbeing Board - 22/06/2023 Business Briefing - 22/06/2023 Cabinet - 13/07/2023

1.0 Recommendations for decision/noting:

Health & Wellbeing Board is asked to:

- 1.1 Comment on the draft Health & Wellbeing Strategy for 2023-2027 and approve for publication.

2.0 Purpose of Report

- 2.1 This report introduces the refreshed Health & Wellbeing Strategy for Telford & Wrekin 2023-2027.

3.0 Background

3.1 The Council and health and wellbeing partners have faced unprecedented challenges in the three years since our last Health and Wellbeing Strategy was launched. Despite the impact of the pandemic, there have been many improvements and innovations in the way people are offered support to improve their health and wellbeing, and the collaborative work to deliver health and care services more seamlessly has been strengthened.

3.2 We face clear challenges in the next 5 years, such as the ongoing recovery from the pandemic and the impact of the cost of living crisis. However, refreshing the health and wellbeing strategy provides an opportunity to re-frame the way we work together through HWB partners to improve the lives of everyone in Telford and Wrekin, with a particular focus on people who face the greatest risks of poor health and disadvantage.

4.0 Summary of main proposals

4.1 The priority themes and specific priorities in the refreshed Strategy, agreed by the HWB in September 2022, have been defined and shaped through a wide range of plans, data and intelligence from the Joint Strategic Needs Assessment (JSNA) and crucially through insight and engagement with our residents, communities and partners.

Our vision - happier, healthier, fulfilled lives



Borough Vision 2023 ambition – inclusive, healthy, independent lives

4.2 The refreshed Strategy brings together several other strategies and plans, that contribute to health and wellbeing, and which have recently been approved by the HWB and Cabinet, for example: the cost of living strategy, the homelessness strategy and the domestic abuse strategy. Following agreement of the HWB, the refreshed priorities have been incorporated into the development of the Shropshire Telford & Wrekin's Integrated Care Partnership (ICP) Strategy and the ICS Joint Forward Plan.

4.3 The Strategy includes a summary of key achievements and progress on our 2020 priorities and commitments. For each refreshed priority it describes: why it is important, the local picture, what engagement tells us and how the priority will be delivered. A high level outcomes framework for monitoring impact of the strategy delivery is proposed. Closing the gap and a strong inequalities focus is a major theme throughout the Strategy.

4.4 The Strategy re-commits to use the approaches, agreed in the previous health and wellbeing strategy and the inequalities plan approved in 2021, these approaches are:

- **Population health** – improving health by being community centred and recognising the role wider determinants of health, healthy lifestyles and an integrated health and care system play
- **Closing the gap** - tackling inequalities by being intelligence-led, system-wide and place-based as appropriate, by targeting those most in need and through co-production
- **Strong focus on prevention** - offering advice and support universally, with a more targeted approach for those who need more support
- **Person-centred care and support** - keeping people at the heart of everything, offering tailored and personal support, in the right place and at the right time

4.5 Hearing from and listening to our residents has been a key part of the development of this refreshed HWB Strategy. Engagement and co-production work contributing to the development of the priorities includes the following:

- Telford & Wrekin Council's Residents Insight Interviews
- Telford & Wrekin Council Residents Survey
- Ageing Well Partnership Survey
- Domestic Abuse Strategy Engagement Workshop
- Alcohol & Drug Strategy - Deep Dive Focus Groups & Engagement Workshop
- Autism Strategy Engagement
- Dandelion's Parents Group facilitation

- Telford & Wrekin Integrated Place Partnership (TWIPP) Co-production Conference

In addition, the new Healthwatch Telford & Wrekin team are conducting three focus groups at Meeting Point House, and in Newport and Sutton Hill. At these events, conversations with residents will explore the proposed strategy proposals to sense check the balance of priorities in the context of what is important for people to improve their health and wellbeing.

The ICS are in the process of undertaking an engagement programme called the Big Health & Wellbeing Conversation across Shropshire, Telford & Wrekin. Insight from these events will be used to further shape the delivery of the HWB Strategy. The insight from the ICS engagement programme will be especially important to the following priorities: “integrated neighbourhood health and care”, “protect, prevent and detect” and “mental health and wellbeing”.

5.0 Alternative Options

- 5.1 A refreshed Strategy is required in order for the HWB to fulfil its duties with respect to the responsibility for developing the joint strategic needs assessment and joint local health and wellbeing strategy.

6.0 Key Risks

- 6.1 Not refreshing the Strategy to re-frame the most up-to-date intelligence in the JSNA and insight from our residents following the experience of the pandemic, will risk not improving the health and wellbeing outcomes of our communities and may exacerbate health inequalities further.

7.0 Council Priorities

- 7.1 The Health & Wellbeing Strategy contributes to the delivery of the Council Plan - Protect, Care and Invest, particularly the priority – every child and adult lives well in their communities, but also the other four priorities significantly impact on health and wellbeing as they commit to improve the wider determinants of health.
- 7.2 The Health & Wellbeing Strategy also contributes to the Borough Vision 2032 to build a more inclusive borough, which strongly aligns to the inequalities agenda, and includes the ambition - everyone is able to live a healthy and independent life. The other three Vision ambitions also contribute to improving the health and wellbeing of our residents more broadly.

8.0 Financial Implications

- 8.1 The strategy presents a wide range of findings and initiatives which, for the Council, will be delivered from resources approved either in the existing Medium Term Financial strategy or approved by separate consideration within the Council’s Governance structure. RP 9.6.23

9.0 Legal and HR Implications

- 9.1 The Council has statutory obligations pursuant to the Local Government and Public Involvement in Health Act 2007 (as amended) to produce a Health and Wellbeing Strategy, following receipt of the Integrated Care Strategy setting out how the assessed health needs in relation to the borough are to be met by the Council, the Integrated Care Board and NHS England.
- 9.2 The recommendations in this report and the strategy itself comply with the Council's statutory obligations and the strategy has been produced in consideration of the Integrated Care Partnership strategy and the Integrated Care System forward plan.

10.0 Ward Implications

- 10.1 All our residents and therefore all Wards are affected, however health inequalities are more evident in the most deprived Wards. The NHS is expected to have a particular focus on targeting inequalities the most deprived 20% of areas in England (Lower Level Super Output Areas – LSOAs), these communities are referred to as the core20.

11.0 Health, Social and Economic Implications

- 11.1 The refreshed Strategy includes as priorities: “economic opportunity”, “housing and homelessness” and “inclusive resilient communities” – these are known as the wider or social determinants of health. The priorities compliment the specific priorities which are more directly related to health, which are: “healthy weight”, “alcohol, drug and domestic abuse”, “mental health and wellbeing”, “protect, prevent and detect” and “integrated neighbourhood health and care”.

12.0 Equality and Diversity Implications

- 12.1 Closing the gap is a strong inequalities focus in the Strategy, and groups of residents most likely to face health inequalities are referenced. These so called inclusion groups strongly align to the Equalities Act Protected Characteristics.

13.0 Climate Change and Environmental Implications

- 13.1 “Green and sustainable borough” is one of the specific priorities in the Strategy, and a number of plans and initiatives are referred to including: the Green Guarantee, Carbon Neutral Plan, the Electric Vehicle Strategy and Local Cycling & Walking Infrastructure Plan and the Air Quality Strategy.

14.0 Background Papers

- 1 HWB September 2022

15.0 Appendices

A Telford & Wrekin Health & Wellbeing Strategy 2023-2027

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Director	30/05/2023	31/05/2023	LN
Legal	30/05/2023	06/05/2023	RP
Finance	30/05/2023	09/06/2023	RP



Telford & Wrekin
Co-operative Council

Protect, care and invest
to create a better borough

Health and Wellbeing Strategy

2023-2027

Our vision - happier, healthier, fulfilled lives



Borough Vision 2023 ambition – inclusive, healthy, independent lives

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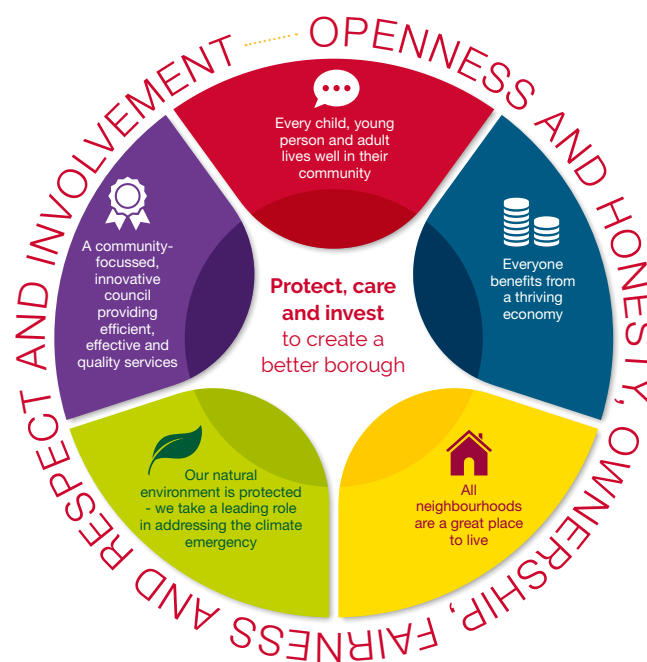
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Foreword

Our lives and communities have changed significantly in the three years since our last Health and Wellbeing Strategy was launched. Despite the unprecedented challenges of the pandemic, there have been many improvements and innovations in the ways people are offered support to improve their health and wellbeing and the ways we have been working together to ensure more seamless health and care. Working in communities and in partnership with community and voluntary organisations has been key to these successes.

Although we face clear challenges going forward, such as the cost of living crisis, this refreshed health and wellbeing strategy gives us a real opportunity to improve the lives of everyone in Telford and Wrekin, with a particular focus on people who face the greatest risks of poor health and disadvantage.

Our Council Plan “protect, care and invest to create a better borough” includes the priority – every child and adult lives well in their community, and the other four priorities also significantly impact on health and wellbeing as they commit to improve the wider determinants of health which is fundamental.



The Borough Vision 2032 to build a more inclusive borough, strongly aligns to the inequalities agenda, and includes the ambition – everyone is able to live a healthy and independent life. The other three ambitions also contribute to improving health and wellbeing more broadly.



This strategy and the priorities have been developed, drawing together a range of insight from residents and partners and aligning with other important plans and strategies which significantly contribute to improving health and wellbeing outcomes and reducing inequalities.

The Health & Wellbeing Board fully recognises the context of change and the uncertainty that we are living through, and we see the legacy of austerity faced by our residents, local businesses and in our communities. This is most evident in the stubborn inequalities gaps in our borough.

The way the council and partners work with the NHS is changing shape. The new Shropshire Telford & Wrekin Integrated Care System encouragingly is committing to a stronger focus on prevention and reducing health inequalities, as well as improving clinical services and moving at greater pace on health and social care integration. The ICS sees the place-based way of working as crucial and the Telford & Wrekin Integrated Place Partnership is responsible for delivering change for our residents.

To evolve and implement this strategy we will remain strongly focussed on using intelligence and best practice to guide our work, as well as ensuring that co-production and engagement with residents, service users and partners meaningfully shapes all our improvements. Like our previous health and wellbeing strategies we commit to putting people at the centre of everything that we do and want to make sure our residents get offered the right help, at the right time.



Cllr Kelly Middleton
Cabinet Member for
Healthy, Safer & Stronger
Communities and
Partnerships



Cllr Andy Burford
Chair of Health and
Wellbeing Board

Looking back

Over the past decade, health and wellbeing outcomes have been improving in Telford and Wrekin. Life expectancy for men and women has shown some improvement, but remains slightly lower than the national average. There are persistent inequalities gaps in life expectancy related to deprivation, 7.3 years gap for men and 4.1 years for women. Life expectancy for older people at age 65 for both males and females in the borough remains significantly lower than the England average.

Overall, improvements in life expectancy have been made in the last decade for men and women in the borough, having improved in the decade before.

However, life expectancy at age 65 for both males and females in the borough in 2021 remained significantly worse than the England average.

Some of the high level improvements in outcomes we have seen include:

- mortality rates in under 75s have improved over the last decade, however early death rates for heart disease are still high;
- smoking rates have fallen consistently during the past five years;
- despite having very high covid infection rates, the borough death rate from covid has been comparatively low.

The Health & Wellbeing Strategy agreed in June 2020 committed to a set of priorities and an overview of achievements and progress against those priorities is shown in the following sections.

Key achievements – progress on our 2020 priorities

Continue to develop, evolve and deliver our Telford & Wrekin Integrated Place Partnership (TWIPP) priority programmes:

Building community capacity and resilience

Our approach has involved and engaged community leaders and organisations that are well connected to our underrepresented communities. Projects have included: delivery of community health and wellbeing projects to 4000 local people living in our highest areas of deprivation and people from our black and asian communities; wellbeing cafes and developing our network of volunteer Health Champions. Training and upskilling local people to lead activities in their community has been a key part of the programme with 170 training places funded and delivered through community based projects. Projects have also aligned

to delivery of commitments in the NHS Long Term Plan including the Cancer Champions project delivered by Lingen Davies. The Cancer Champions are playing a crucial role encouraging others in their communities to take up cancer screening invitations, and help people better understand the signs and symptoms of cancer improving rates of early cancer diagnosis.



Prevention and healthy lifestyles

Over the past 2½ years the Healthy Lifestyles Service has received 4000 referrals with just over 70% going on to access 12 weeks of support with an advisor. Significant progress has been made working closely with our health system partners across clinical pathways to engage underrepresented and higher risk population groups with just over 80% of clients having at least one long term health condition.

Targeted work with education has included a schools health and wellbeing toolkit; physical activity training and active travel initiatives. The council's Eat Well Team has provided food education, family cooking sessions and school meal taster sessions to more than 6300 children. Community based initiatives have included free swimming to all resident children and young people; the 10 by 10 initiative; and the Happy, Healthy, Holiday Programme.



- Launch of the **Independent Living Centre** in April 2021 – a joint venture between the Council and Telford & Wrekin Council for Voluntary Services, it provides free information and guidance to everyone in the borough who wants to know more about care and support as well as the opportunity to trial different gadgets and equipment to enhance their independence at home and in the community.



Early access to advice and information

A series of improvements to further develop an integrated approach to information and advice include:

- **Live Well Telford** – the online all age community directory continues to develop, with over 1,300 groups/services listed. Feedback from residents has been positive and people have found it easy to use and are able to access the information they want at a time to suit them.

- Launch of the **Virtual House** in April 2021 – using innovating technology this online platform enables an interactive tour of a house showing examples of equipment and solutions that may be helpful to residents / family members to do daily activities around the home and live as independently as possible.



Integrated care and support pathways

Developing integrated pathways remains a priority for TWIPP, key areas of progress include:

- Health and Social Care Rapid Response Team – launched in December 2019, this admission avoidance service continued to develop through the pandemic and is now seen as best practice and has been rolled out across the system.
- Pathway Zero – a preventative, community based hospital pathway that supports people to be discharged without formal input from health or social care once home. This was piloted in 2019 and the pathway has been rolled out across the system with xx% of people now being discharged through this route.

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Priority focus to drive progress on tackling health inequalities

Our inequalities plan launched in September 2021, started an ambitious approach to systematically close the gap across a wide range of themes important to people's lives: best start in life, economic opportunity, community and place, public health and prevention, health and social care integration and covid impact. A total of 35 innovative projects were funded across the plan themes and the majority were successful in offering more targeted support where it was needed, with many improving outcomes and narrowing the gaps identified.

Priority call to action to improve emotional and mental wellbeing

The series of improvements to support people's mental health include:

- **For children and young people** – the introduction of family hubs with a focus on emotional wellbeing and mental health?, implementation of Family Safeguarding model, Mental Health practitioners in embedded in schools and children's services.
- **For adults** – strong partnership working with the voluntary sector to improve access to support and outcomes for residents, including Wellbeing Café's, Calm Café (for those in crisis), formation of the Mental Health Alliance partnership, expansion of peer support, proactive joint work on suicide prevention, including training, suicide bereavement offer, assist and engage and Z-card, work with NHS colleagues to improve mental health services. The Year of Wellbeing Campaign led to 3600 residents making a wellbeing pledge.



Priority plan to ensure people's health is protected as much as possible from infectious diseases and other threats

Building on the strong response to the pandemic led through the public health team's Health Protection Hub, the health protection function has been strengthened and covers a wider range of infections with ongoing support to residents, education and businesses. Our first Health Protection Strategy has been agreed as part of the Integrated Care System and this is a joint plan with the NHS and Shropshire Council.

The system wide response to delivering the covid vaccination programme has successfully achieved high uptake rates with Betty our vaccination bus delivering 4,500 vaccination to residents in those areas with low uptake and narrowing the inequalities gap.



Our local picture

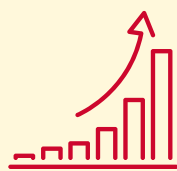
185,842

Population 2021



11.4%

Population



increase 2011 -2021

The population continues to grow above national rates.

35.7%

Population increase aged 65+ 2011-2021



The highest increase in population of all West Midlands upper tier local authorities and second highest of all 151 upper tier local authorities in England.

83%

Borough population with an ethnicity of white British, decreased from 89.5% in 2011



As the population grows, it is also becoming more diverse.

24.9%

Population living in 20% most deprived nationally, around 45,100 people



The borough is a place of socio-economic contrasts, with areas amongst the most deprived in England, with deprivation rates comparable to inner cities.

81.9

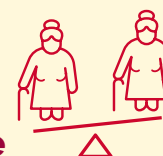
Life expectancy for women



Life expectancy for women remains worse than England.

4.1

Inequality in life expectancy for women



A woman living in the most deprived areas of the borough can expect to live 4.1 years less than a woman living in more affluent areas.

1 in 5

Disabled



20.5% of the population are disabled, higher than the England rate.

78.2

Life expectancy for men



Life expectancy for men remains worse than England.

7.3

Inequality in life expectancy for men



A man living in the most deprived areas of the borough can expect to live 7.3 years less than a man living in more affluent areas.

18,000

People providing unpaid care



The borough has the 10th highest rate of unpaid carers of all 151 upper tier local authorities.

Introduction

Developing our strategy priorities

This strategy aims to deliver the health and wellbeing priorities and commitments in both the Council Plan and the Borough Vision 2032 and contribute to the ICP strategy.

Our strategy priorities have been defined and shaped by a wide range of plans, data and intelligence from the Joint Strategic Needs Assessment (JSNA) and crucially through insight and engagement with our residents, communities and partners. This strategy outlines the rationale, local picture and what we have heard from residents and partners. It provides an overview of how we will deliver improvements in outcomes across a range of delivery plans.

The JSNA process has developed significantly since the publication of the last strategy in 2020, supporting our ambition to be intelligence-led. This includes the launch of a fully revised '**Telford and Wrekin Insight**' website, containing both headlines and detailed, interactive reports about the health, care and wellbeing of our population.

Listening to our residents and understanding what is important to them is being undertaken in a wide variety of ways with a range of groups and people. A summary of engagement insight and co-production work contributing to the

strategy is shown on the following page. Each priority in this strategy includes an overview of what we are hearing from our residents.

Working in partnership is critical to improving health and wellbeing, and collaborative work is going on across many different organisations through a variety of partnerships. The key strategic partnerships supporting the Health & Wellbeing Board and the implementation of this strategy are the Telford & Wrekin Integrated Place Partnership (TWIPP) and the Community Safety Partnership. The Health & Wellbeing Board also work as partners in the new the Integrated Care Partnership that is part of the Shropshire, Telford & Wrekin Integrated Care System. There is also other partnership work supporting the wider determinants of health.

Listening to our residents and partners

Engagement work contributing to the development of the priorities

- **Telford & Wrekin Council's Residents Insight Interviews** February-April 2022, circa 3,000 telephone interviews to explore resident's views and priorities.
- **Telford & Wrekin Council Residents Survey**, 2020 received over 5,470 responses, covering multiple aspects of health and wellbeing.
- **Shropshire, Telford & Wrekin Integrated Care System Big Health & Wellbeing Events**, Spring 2023.
- **Ageing Well Partnership Survey** July-September 2022 received over 2,800 responses.
- **Domestic Abuse Strategy Engagement Workshop**, May 2022, 50 attendees, including local victims and survivors sharing their views and experiences.
- **Alcohol & Drug Strategy - Deep Dive Focus Groups and Engagement Workshop**, March and April 2023 – 50+ participants across four focus groups in our peer-led organisations and a stakeholder workshop with 45 attendees.

- **Autism Strategy engagement.**
- **Dandelion's Parents Group** Supported to become expert parent advisors for the Family Hubs Programme.
- **Telford & Wrekin Integrated Place Partnership (TWIPP) Co-production Conference** in November 2022 attended by 40+ people from statutory organisations, voluntary, community and social enterprise sector (VCSE) organisations and representatives from seven lived experience groups.
- **Best Start in Life Family Hub** launch engagement
- **Leisure Facilities Strategy** consultation
- **Make Your Mark Youth Parliament** ballot and focus groups

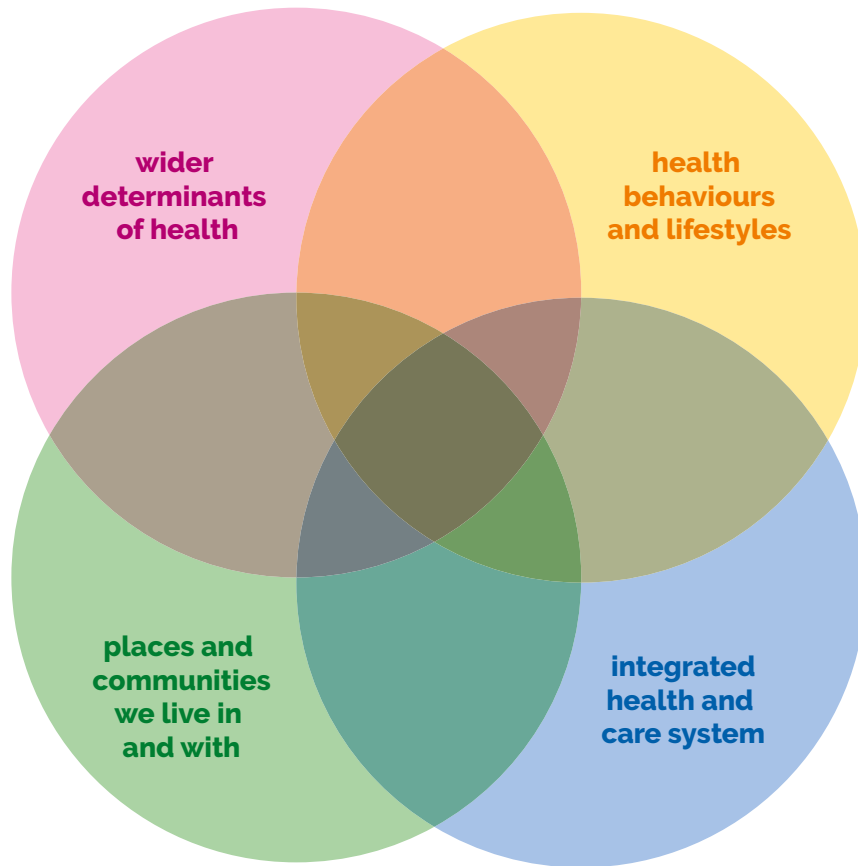
[This is a place holder for the Health Watch focus groups insight]

Our approaches

Population health

We can improve health and wellbeing at a population level by impacting on the way people live in their communities, the wider determinants of health – jobs, income and education, healthy lifestyles and through an integrated health and care system.

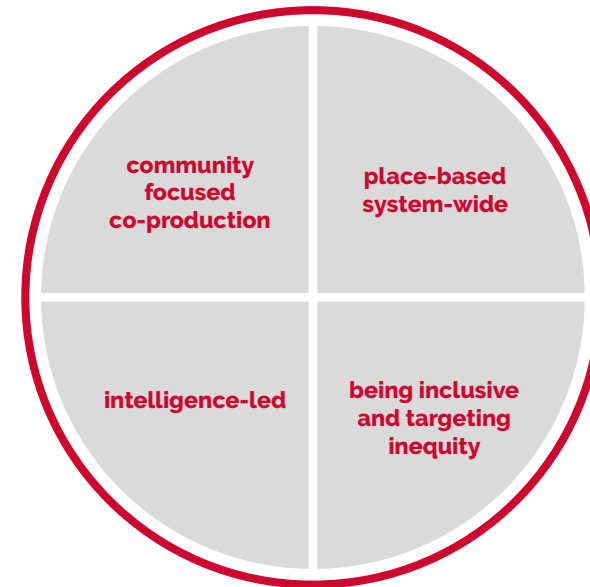
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Closing the gap - tackling inequalities

We can reduce inequalities by using an approach that is co-produced with communities and is underpinned by intelligence such as equity profiles for the uptake of services and outcomes, so services and support can be targeted toward those most in need and delivered in the most effective way.

- Community insight
- Engagement with service users, parents and carers
- TWIPP co-production charter
- Telford & Wrekin Integrated Place Partnership
- Strategic Commissioning
- Shropshire, Telford & Wrekin Integrated Care Partnership STW ICP



- Joint Strategic Needs Assessment
- Population Health Management
- Equitable targeting
- Equality, diversity & inclusion

Our approaches

Strong focus on prevention

Advice and support on prevention is essential at all levels, universally for everybody to stay healthy and support self care, but with a more targeted and proactive preventative approach for those who need more support.

Person centred care and support

Keeps people and their individual needs at the heart of everything, offering tailored and personal support, in the right place and at the right time, so people feel empowered and in control of their health.

<https://makingitreal.org.uk>

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Closing the gap

Closing the gap is a key part of the Borough Vision 2032 ambitions to build a more inclusive borough.

Our ambitious approach to reducing inequalities started in 2021 with a stocktake of the existing gaps in key local population health outcomes, alongside investigation into how these gaps were being exacerbated by the challenges of the pandemic.

The Marmot national reviews of inequalities strongly influences our approach to closing the gap and the priorities included in this strategy. The eight Marmot policy areas include: early years development, employment, living standards, communities, ill-health prevention, discrimination, and environmental sustainability.

The **wider determinants of health** are critical to the way we live and our health and wellbeing outcomes, and often referred to as “the causes of the causes”. As such we have included as priorities:

- housing and homelessness;
- economic opportunity - with a clear focus on the cost of living crisis;
- inclusive resilient communities;
- green and sustainable borough.

Getting the best start in life and the key focus on children and young people and families is a strong local priority. Working together to support parents and carers to maximise our children’s potential will have lifelong impacts on their emotional and physical wellbeing for the next generation.

Alongside the wider determinants of health and the best start in life, closing the gap requires a strong emphasis on **people living in the most deprived communities**. A targeted approach is needed for people who are socially disadvantaged who do not have the same opportunities as residents who are more well off.

On the face of it, Telford and Wrekin is a prosperous place but there are clear gaps, 21.4% of children under 16 live in relative low income families and this is higher than the England average of 18.5%. Nearly a quarter, 24.9% of our population live in areas which are in the 20% most deprived nationally, which is around 45,100 residents. The NHS refer to the people in the most deprived 20% as the “core20” population and ICSs are expected to see these people as a defined target population for action to reduce healthcare inequalities.

Throughout the strategy and across the priorities inequalities are highlighted, and these gaps are repeatedly related to the gaps between health and wellbeing experience in the most deprived communities compared to the most affluent

communities. Particular and specific inequalities are also faced by different groups of people, often referred to as **inclusion groups** and these can be related to characteristics which are protected in the Equalities Act. These people can often feel socially excluded, and can experience multiple overlapping risk factors for poor health and wellbeing such as poverty, violence and complex trauma. We see those who need an extra inequalities focus as people who are:

- from black and minority ethnic groups;
- gypsies and travellers;
- living with physical, learning disabilities and autism;
- within Equality Act protected characteristic groups;
- at risk of exploitation and abuse;
- LGBTQ+;
- service personnel and veterans;
- looked after children and care leavers;
- special educational needs and disabilities;
- asylum seekers and refugees;
- affected by alcohol, drugs and domestic abuse;
- carers.

The closing the gap inequalities priority strongly links to the Council’s Equality, Diversity and Inclusion Strategy 2022-2026.

Starting well

Why it's important

- Healthy pregnancies for all mothers, families and babies is key to starting well, however some women face disadvantage which impacts on maternal and pregnancy outcomes, for example teenage mothers, women from black and minority ethnic groups, those suffering from the impacts of drugs and alcohol and domestic abuse.
- Support for families in the early years to nurture and develop their children well is seen as fundamental to outcomes throughout life. The new Start for Life Family Hubs are designed to offer community-based care and support for all families with a particular focus on communities living in deprived areas who have access to less resources and opportunities.
- Education outcomes, with foundations at the very early development stages, significantly shapes future lives. While social inequalities impact on these outcomes, the legacy of the pandemic is affecting development and education outcomes in a new way.
- Children and young people with special educational needs and disabilities (SEND) face disadvantage which affects their outcomes and therefore focussed attention is required on this group to ensure they reach their full potential.

- Children and young people who are in care and those who are leaving care are a group who need dedicated, coordinated support to ensure they thrive well, feel connected and can access opportunities as they move into adulthood.
- Emotional and mental health is considered as fundamentally important as physical health and building resilience in children and young people and improving support offered is a key priority.

Local picture

- 12% of mothers smoke at the time of delivery, which is significantly worse than the national average.
- The proportion of children achieving a good level of development at age 2-2½ years (66%) is significantly lower than the national average. At the end of reception 63.6% of children achieved the expected standard which is similar to the national average, but levels in children who are eligible for Free School Meals are lower.
- 61% of Early Help Service assessments identify adult mental and emotional health as a need and 50% identify parenting as a need.
- Hospital admissions for mental health conditions (under 18s) is lower than national

but admissions as a result of self-harm in those aged 10-24) is higher than national.

- Secondary school rates of suspensions are higher than national, but levels of 16-17 year olds not in education, employment or training are improving.

What engagement tell us

- Parents of babies and young children want to hear about the support of offer to them, especially the free activities.
- Parents feel youth activities and clubs are a priority and these should be affordable and in a safe environment.
- Young people say that exercising and eating well makes them feel healthy.

Delivering the priority

- Shropshire, Telford & Wrekin Local Maternity and Neonatal System plan aims to improve pregnancy and maternity outcomes through high quality maternity services, with a special focus on equity and equality – this links strongly to our Start for Life Family Hubs programme.

Starting well *continued*

- The Best Start in Life Early Help Board has the following key priorities:
 - Start for Life Family Hubs programme and transformation of early help support;
 - social, emotional, mental health;
 - excess weight;
 - Special Educational Needs and Disabilities (SEND).
- Healthcare inequalities affecting young people are being tackled through the NHS core20plus 5 programme for children and young people, led by the ICB and covering: oral health, asthma, epilepsy, diabetes and mental health.
- Building on the successful Ofsted and CQC Inspection for children and young people with Special Educational Needs and Disabilities, the SEND strategy is evolving our approach to supporting these more vulnerable children and their families. There is strong focus on wider engagement and coproduction with parents, carers and families and children and young people themselves.
- The Belonging Strategy and Alternative Provision Strategies also contribute to the agenda, particularly the inequalities focus as these plans target children and young people who need alternative options and more support than mainstream education settings can offer.

"We know that the first 1,001 days of a child's life are crucial for their development and wellbeing and can have a significant impact on their future."

"We want to provide every child in Telford and Wrekin with the best possible start in life"

CLlr Shirley Reynolds, cabinet member for early years, children and young people



Right help at the right time



Living well

Why it's important

Across the health and social care system we are seeing unprecedented demand for mental health and wellbeing services. This requires a place-based approach working with service users, carers and partners placing a greater emphasis on preventing illness, self-care and staying well and enabling people to access non-clinical approaches to improve their health and wellbeing in their own community close to where they live.

Care for people with long term conditions accounts for £7 in every £10 of health and social care expenditure. Much is preventable and linked to lifestyle risk factors including smoking, poor diet, obesity, physical inactivity and alcohol consumption. There is a strong correlation between good mental health, physical health, social participation and resilient communities.

What engagement tell us

- People like to have choice about how they access support at a time and place that suits them.
- Supporting residents to undertake training can help build community capacity

- Coproducing more projects with teams across the NHS, council and the voluntary sector can support the effective targeting of resources to ensure we impact on health inequalities – maximising the use of all skills, knowledge and connections.
- The voluntary sector can mobilise people and resources in a way councils and the health sector cannot.
- Public health campaigns can have a positive impact on residents health and wellbeing.

Local picture

In 2018-20 healthy life expectancy was 57.8 years for males and 60.3 years for females both are significantly worse than the England average Preventable mortality is highest in our more deprived communities.

The proportion of people who smoke has fallen from 24.7% in 2011 to 13.7% in 2021 but smoking rates continue to be high in routine & manual groups (28.2%).



●●●●●●●●
YOUR TIME TO FEEL
HAPPIER AND HEALTHIER



Delivering the priority

- Delivery of 'Live Well' programmes aimed at encouraging healthy lifestyles and improving mental wellbeing .
- Delivery of Making Every Contact Count (MECC) training to our frontline practitioners.
- Delivery of public health campaigns that align to our priorities.
- Embed health improvement advice and lifestyle interventions within the clinical pathways for cancer, heart disease, diabetes, musculoskeletal and mental health.
- Embed preventative approaches and signposting to health improvement interventions across adult social care practice including further development of community-based support.
- Develop our approach bringing together multi-disciplinary teams of staff from across public health, primary care, community care, social care and the voluntary and community sector to work together to deliver joined up, person centred and proactive care.

Ageing well

Why it's important

- Living longer brings opportunities, not only for older people and their families, but also for society as a whole, with mature years offering the chance for people to pursue new activities, careers or pursuing long neglected passions.
- People are living longer and the number of older people is growing, so demand for services and support will increase, planning should ensure we use our limited resources to achieve the best possible outcomes for people in the coming decades.

By co-producing services and support with our maturing residents and partners we can celebrate the advances that should enable more of us to live longer healthier lives, while maximising independence for as long as possible so that people can live well for longer.

Local picture

- In 2021 life expectancy at 65 years was 17.8 years for males – 0.6 years lower than England, and 20.1 years for females – 0.9 years both are significantly worse than the England average

What engagement tell us

Over 2,800 residents gave their views in the Telford and Wrekin Ageing Well survey in 2021, the eight key themes people feel are important are shown below:

Where we live

People feel safe, feel part of the community and supported through social connections.

Health and wellbeing

People stay healthy; people do not feel socially isolated; people will live longer in better quality health.

Carers

Carers are supported in their caring role; carers have the information they need to support them financially; carers will have access to a range of support options, including respite; people with dementia will receive support tailored to their specific needs.

Financial security

Good information to help people plan for the future; information on benefits or additional income people are entitled to; the whole workforce, including volunteers and the community are advocates for older people providing information and guidance.



The impact of the pandemic

Public transport to be available and affordable; transport links with places people need to travel to, i.e. GP surgeries, hospital appointments and leisure activities.

Digital inclusion

Support people to embrace technology; digital workshops for people to learn about technology.

Delivering the priority

- The Ageing Well Partnership have developed the strategy, Celebrating Later Life in Telford and Wrekin – a proactive, preventative approach to active ageing and action plans are being developed based on the eight key themes to deliver the aspirations.
- The NHS has a key role to play in helping older people manage long-term conditions, giving greater control over the care they receive, with more care and support being offered in or close to people's homes, rather than in hospital.

Inclusive resilient communities

Why it's important

- Communities which are connected, safe and clean support our physical and mental health and wellbeing, and the Council Plan and Vision 2023 commit to making all our neighbourhoods a great place to live for our residents.
- Communities and neighbourhoods can feel unsafe due to the fear of crime or crime levels and also the risks of abuse and exploitation. People particularly at risk can be vulnerable children, young people and adults and those in inclusion groups and this can be a key inequalities issue.

What engagement tell us

- Our 2020 and 2022 residents surveys highlighted crime and antisocial behaviour as one of the top priorities for the council and the police.
- The 2022 focus group insight used to develop the Borough Vision 2032 showed that our residents feel that Telford and Wrekin will be a place people want to live with their families now and in the future if there are affordable things for children and young people to do in a safe environment.

Local picture

- There was significant variation in rates of recorded crime across the borough's communities in 2022/23 highlighting the disproportionate levels of crime in our most disadvantaged communities. All of the wards with a worse than the borough average rates include areas ranked in the 20% most deprived in England.
- Between April 2021 and January 2023 there was a reduction in the number of theft and shoplifting offences, but more recorded violence against the person and an increase in stalking and harassment.

Delivering the priority

The Safer & Stronger Communities programme is working to seek to address the root cause of crime, providing the foundations for social regeneration. The council, along with the police and other partners has created multi-functional neighbourhood teams who are working together to tackle issues of crime, disorder and quality of life in our towns and communities. The delivery plan has a strong public health approach to violence reduction.



**Safer & Stronger
Communities**



Building Safer Stronger Communities Plan Priorities

- Three areas of highest harm and anti-social behaviour.
- Child exploitation.
- Domestic abuse.
- Serious violence duty.
- Health inequalities.

In delivering our objectives we will focus action on:

- education and skills;
- housing standards;
- crime reduction;
- environmental crime and anti-social behaviour;
- community resilience;
- health inequalities.

Healthy weight

Why it's important

Unhealthy weight is associated with reduced life expectancy and is a risk factor for a range of chronic diseases including cardiovascular disease, type 2 diabetes, some cancers, liver and respiratory disease. Unhealthy weight can also have a significant impact on mental health. Without action the health of individuals will continue to suffer, health inequalities associated with obesity will remain and the economic and social costs will increase to unsustainable levels.

Helping people to achieve and maintain a healthy weight is one of the most important things we can do to improve the health and wellbeing of our residents.

Tackling unhealthy weight is not just about an individual's effort, it is also about the environment we live in, the information we are given to make choices; the choices that we are offered; and the influences that shape those choices.

Providing enhanced opportunities for physical activity through leisure facilities and other activities and can support residents to live well in their communities and help address health inequalities, in particular amongst those who are currently inactive. Community based sports and physical activity initiatives can significantly contribute towards achieving public health priorities, and tackling inequalities.

What engagement tell us

Taking the healthier option is not always the easier option (due to cost, availability and knowledge).

Healthy Lifestyle Advisors co-located in GP surgeries and as part of multi-disciplinary teams has the potential to reduce the demand on health appointments and ensures weight management is part of the care pathway with many patients going on to access community support close to where they live.

Schools have the knowledge and relationships with the families most in need and are able to identify families that would benefit from the support of the healthy lifestyle service. Families like the convenience of accessing support at school.

Local picture

The proportion of residents with unhealthy weight locally is higher than the national average and is:

1 in 4 children (27.3%) aged 4-5 years

2 in 5 children (40.8%) aged 10-11 years

7 in 10 adults (70.6%) (98,600 adults)

Levels of unhealthy weight are highest in our more deprived areas.



Delivering the priority

- Development of a Healthy Weight Strategy.
- For children: healthy pregnancy support and breastfeeding; whole school programmes; weight management programmes in school and community settings; support in Family Hubs.
- For adults: community learning for food and cooking skills; weight management programmes; targeted support for adults with a learning disability.
- Initiatives and campaigns to increase levels of physical activity including active travel initiatives and 'Green Spaces are Go' including promoting cycling through the Bike Hub
- Healthy Places that support people to maintain a healthy weight: Community Centres, workplaces, schools, Care Homes.
- Training for our workforce – raising the issue of obesity and having the conversation & providing support.
- Implementing the Indoor Leisure Facilities Strategy 2022-2032.

Alcohol and drugs

Why it's important

- Excessive alcohol and drug use can lead to chronic diseases and other serious problems including increased risk of cancer, cardiovascular diseases, such as heart disease and stroke, liver disease and digestive problems.
- Addiction also causes or exacerbates mental health problems and can cause debt and homelessness, can result in unemployment, criminal behaviour and imprisonment and is known to significantly impact the lives of loved ones, especially children and young people.

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What engagement tell us

A series of focus groups with service users and people with lived experience from our specialist service and peer-led community organisations - STaRs, TACT, A Better Tomorrow, Recharge, highlighted key themes for improvement.

Adult service user focus group themes:



Earlier interventions



Fear



Visibility



Cultural



Stigma

Young person service user focus group themes (12-21 year olds):



Safety



Fear



Education



Access



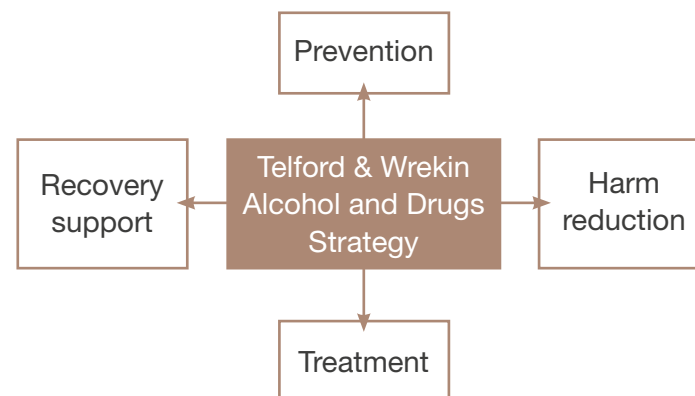
Listening

Local picture

- Hospital admissions for alcohol-related conditions for males 40-64 years and females 65+ years are significantly worse than the England average.
- An estimated 2,030 adults in Telford and Wrekin are alcohol dependent, this represents an unmet treatment need of 85%, which is higher than the national of 80%

Delivering the priority

The refreshed **Telford & Wrekin Alcohol and Drugs Strategy** will be published in 2023, based on improving a range of outcomes across four key areas. Our treatment services and peer-led support teams are a key part of our recovery community and vital to the success of the strategy.



Domestic abuse

“Telford and Wrekin are committed to the survivor voice – supporting the local independent survivor group and instigating and assisting survivors speaking and being present in such an integral way”

Why it's important

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Domestic abuse is unacceptable, yet it continues to be a serious issue for many of our residents wrecking lives and devastating families.

- While domestic abuse disproportionately affects women, it is recognised that there are male victims and female perpetrators and that it can be a serious issue in some sex relationships and can significantly affect people who are lesbian, bisexual, gay and transgender (LGBT+).

What engagement tell us

In May 2022 50 people, including local victims and survivors, shared their views and experiences of domestic abuse and this insight was used to shape the new domestic abuse strategy and the commissioning of the new service and support offer, which will be in place from June 2023.



Local picture

- It is estimated that circa 23,600 adults have experienced domestic abuse at some point in their lives and approx. 7,200 adults have experienced domestic abuse in the past year.
- Both the number of domestic abuse victims and the number of children affected have been increasing year-on-year.

Delivering the priority

Telford & Wrekin Domestic Abuse Strategy 2023-2026 commitments.



Mental health and wellbeing: children and young people

Why it's important

- Mental health conditions were becoming more common among children and young people, before the pandemic. The underlying causes are complex, but social isolation and school disruptions during the pandemic have likely played a role.
- Half of adult mental health problems start before age 14, so prompt care can prevent problems persisting in adulthood, but nationwide child and adolescent mental health services have been underfunded and have long waiting times.

Children from the poorest 20% of households are 4 times more likely to suffer serious mental health problems than the 20% most wealthy.

What engagement tell us

- The UK Youth Parliament's 'Make Your Mark' ballot included votes from 4,855 children and young people aged 11-18 from nine secondary schools and three youth groups in Telford and Wrekin. The top issue concerning young people was identified as health and wellbeing. Following this local focus groups, carried out by members of the Telford & Wrekin Youth Parliament Forum identified mental health as the main issue raised by

young people. The effects of the pandemic, access to mental health support and services and how schools support mental health were key challenges flagged.

- The YPF have been working with Elected Members and council officers to discuss access to mental health services and the Forum have suggested that a Youth Mental Health Summit is held to explore challenges and solutions. The YPF are also co-producing the Year of Wellbeing campaign for Young People.

Local picture

- An estimated 4,350 (18%) of 7-16 year olds and 3,680 (22%) of young people aged 17 to 24 years have a probable mental disorder, females are at great risk.
- Hospital admissions for young people aged 10-24 years as a result of self-harm is worse than the national average.
- 80% of Children's Services Early Help Assessments record emotional and mental health needs in children.

Delivering the priority

The Best Start in Life Early Help Board is overseeing the implementation of the following prevention and community-based initiatives: Children & Young People Year of Wellbeing Campaign and Mental Health Summit Development of Youth Social Prescribing Youth Offer development – community activities Youth Health Champions programme Wellbeing Charter Mark for Schools and education settings

Shropshire, Telford & Wrekin Integrated Care System is overseeing the Children & Young People Local Transformation Plan aimed at meeting the emotional and wellbeing needs to 0-25 year olds, this includes service improvements in the Midlands Partnership Foundation Trust BeeU service.



Mental health and wellbeing: adults

Why it's important

- Referrals for mental health services and support are increasing and mental health needs are becoming more complex due to the impacts of the pandemic. For many people, covid left them socially isolated and lonely.
- The mental health and emotional wellbeing of parents has considerable impact on children and in families and it is important that support is easily accessible and available when it is needed.

Leisure facilities and other activities which increase physical activity levels can improve people's emotional wellbeing and also provide valuable social spaces enabling residents to come together and help address social isolation.

What engagement tell us

We have heard through engagement for the draft mental health strategy that people want:

- Greater awareness of mental health, and where to get support.
- Easy access to support.
- For services to work together better.

- Support for the most vulnerable residents needs to be prioritised including care leavers, those who are homeless or also have substance misuse issues.

Local picture

- It is estimated that at least 25,000 adult residents are likely to have a common mental health problem.
- Early deaths in adults with severe mental illness (SMI) remains significantly worse than the England average – this equates to 25 excess deaths above expected numbers per year.
- Suicide rates are similar to the national average.

Delivering the priority

The Telford & Wrekin Mental Health Strategy is in development and will outline local priorities. This will be recommended to the Health & Wellbeing Board in due course.

The strategy will be overseen, with an action plan developed, by the Telford & Wrekin Mental Health Partnership Board. A place based group which involves people with lived experience.



We are currently looking to increase the number of people who are experts by their experience and are exploring the potential for a reference group for those who would find this environment more comfortable to be part of.

Community mental health transformation continues to be implemented and will bring care closer to the person and aims to improve access to support.



Prevent, protect and detect early

Why it's important

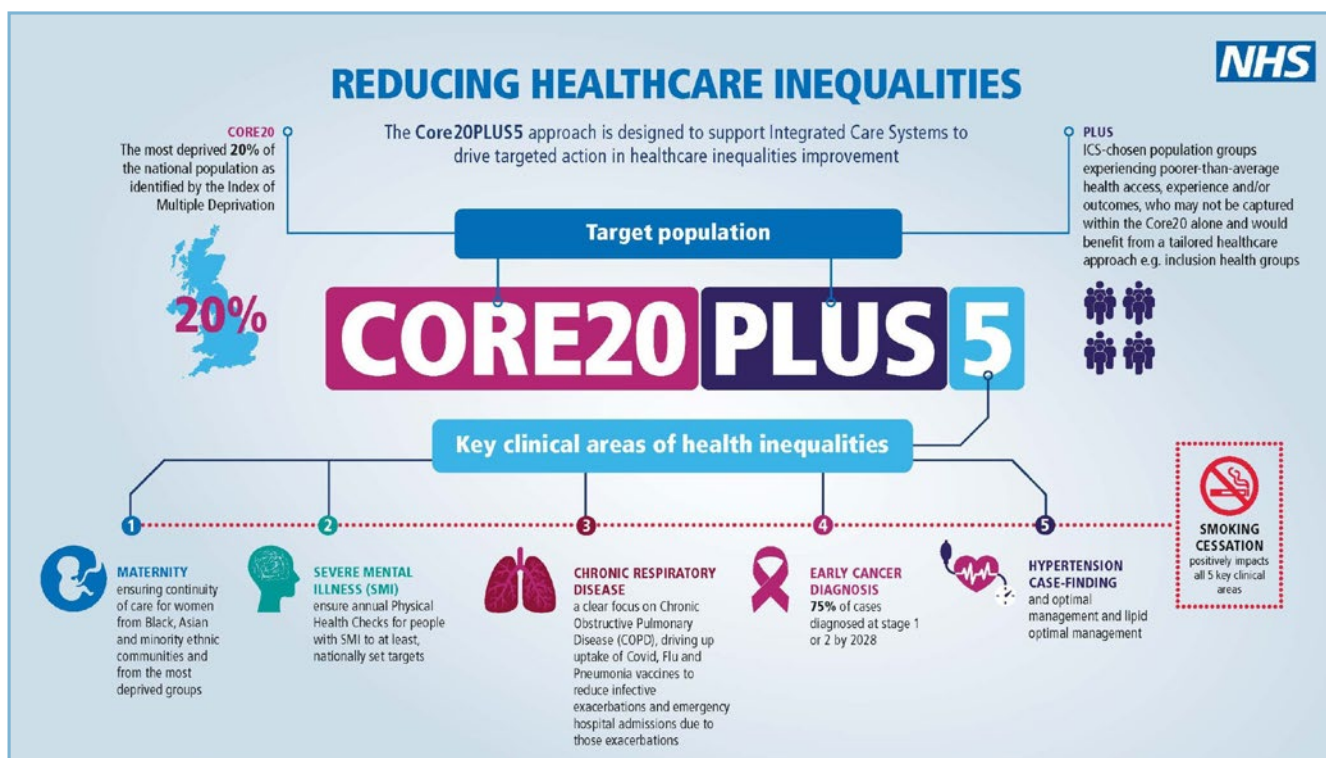
- Many conditions which are important causes of reduced life expectancy and the inequalities gap in life expectancy in our more deprived communities, can be prevented and treated earlier – for example certain cancers and heart disease.

- Healthy Lifestyles services offered by the council in the community focus on prevention support for people with excess weight and those who smoke, this offer is particularly targeted at those who need it most to reduce inequalities.

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NHS prevention programmes are varied and offered universally to everybody depending on age, such as cancer screening and cardiovascular risk checks and are also targeted at those people at risk, such as stop smoking support for people with serious mental illness and pregnant women.

- Reducing inequalities in those taking up prevention programmes and an extra focus on people living in the most deprived communities is the NHS priority inequalities programme known as the core20plus5.



Local picture

- The top three causes of the gap in life expectancy between the least deprived and most deprived communities are:
 - circulatory diseases (27% of the gap for males and 24% of the female gap).
 - cancers (16% of the gap for males and 15% of the female gap).

- respiratory diseases (9% of the gap for males and 12% of the female gap).
- Bowel cancer screening coverage in 60-74 year olds is lower than the national average at 69%, with an inequalities gap between GP practices of 18%.
- Just over half 53.6% of people in Telford and Wrekin have their cancers diagnosed early and the national commitment is to increase this to 75% by 2028.

Prevent, protect and detect early *continued*

- Uptake of NHS Health Checks is low compared nationally.
- 15.6% of patients in STW have been diagnosed with hypertension – there is a significant number with undiagnosed hypertension.
- 78% of patients aged 12+ in TW received the first covid vaccine dose – with a inequalities gap of 17% between areas.
- **The Shropshire, Telford & Wrekin Health Protection Strategy** aims to protect our residents from harm from infectious and preventable diseases and infections and hazards. This includes screening and immunisation programmes.



Delivering the priority

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- **The ICP Strategy and Joint Forward Plan** commits to more strongly prevent ill health and tackle healthcare inequalities.
- **The ICS Clinical Strategy** priorities include improving diagnosis and treatment for important preventable conditions including: cancer, cardiac conditions, diabetes and musculoskeletal conditions.
- **The Shropshire Telford & Wrekin ICS Cancer Strategy** aims to improve cancer outcomes through a comprehensive set of actions across the following areas prevention, early diagnosis, treatment and recovery support.

Integrated neighbourhood health and care:

Overview

Why it's important

- The Shropshire Telford & Wrekin Integrated Care System and new Partnership (ICP) are overseeing the development of new ways of working with the NHS, local councils and other partners.
- The ICS ambitions include ensuring a person-centred approach to care so people are at the heart of everything and joined up services are delivered in both the acute and community health and care settings to give everyone the best start in life, creating healthier communities and helping people to age well.

Delivering the priority

The ICS strategy and Joint Forward Plan set out the delivery commitments, the ICS will be working in different ways to deliver health and care integration.

People First

- People are at the heart of everything we do.
- Ensure community-centred co-production (with staff, partners, patients, carers, VCS and residents) underpins the development of services.

Prevention and inequalities

- Act sooner to help people with preventable conditions.
- Enable people to stay well and independent for longer by providing a greater emphasis on proactive prevention and self-care.
- Tackle the wider determinants of health - homes, jobs, education.
- Offer accessible, high quality health and care services, which are equitably targeted towards people in the greatest need.

Subsidiarity

- Things should be done, services and decisions made at the level that is most relevant, effective and efficient.
- These actions at every level work together to contribute to the overall ambition of the ICS.

Joint working

- Both in the way we commission and the way we deliver services, from shared funding, and collaboration to health and care teams designed around people and their lives.

Empowerment

- Enabling people to navigate our system when they need help. We will need every organisation to think harder about access, inclusion, cultural safety and health literacy in the services they provide.

Innovation, evidence and research

- Should be at the heart of our approach to the challenges we face and the opportunities to deliver.
- Maximise innovation and digital opportunities.

Integrated neighbourhood health and care:

Overview *continued*

What engagement tells us

The top 10 statements on health and care which are most important to Shropshire, Telford & Wrekin residents are:

- 1 “Professionals that listen to me when I speak to them about my concerns”.
- 2 “Access to the help and treatment I need when I want it”.
- 3 “I want to be able to stay in my own home for as long as is it is safe to do so”.
- 4 “I want my family and me to feel supported at the end of life”.
- 5 “Choosing the right treatment is a joint decision between me and the relevant health and care professional”.
- 6 “I want there to be convenient ways for me to travel to health and care services when I need to”.
- 7 “Easy access to the information I need to help me make decisions about my health and care”.
- 8 “Having the knowledge to help me to do what I can to prevent ill health”.
- 9 “Communications are timely”.
- 10 “I have to consider my options and make choices that are right for me”.

Integrated neighbourhood health and care:

Start for Life Family Hubs focus

Why it's important

- The Start for Life Family Hubs programme, now being delivered in Telford and Wrekin, aims to improve health and education outcomes for all babies and children, and at the same time reduce inequalities in outcomes for families most in need.
- Family Hubs should ensure that parents and carers have access to welcoming, seamless information and support, at the right time when they need it. Integrated partnership working across services delivered in neighbourhoods should also empower staff and lead to continuous improvement in the offer.

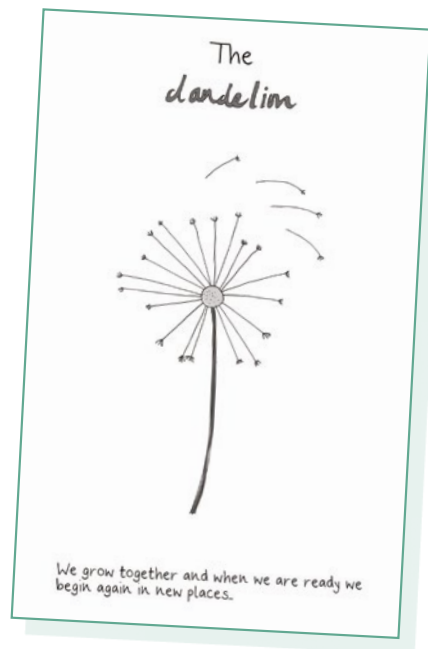
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Right help at the right time

What engagement tell us

Our inspirational Dandelion Parents have been supported to come together and share insight on their experiences to shape the evolution and ongoing development of the Start for Life offer.



Local picture

- Breastfeeding at birth, 66% of infants is significantly worse than the England average, and the inequalities gap between babies living in the most deprived compared to the most affluent communities is 8%.
- Child development remains significantly worse than the England average, 66.2% of 2 to 2½ year olds achieving a good level of development.

Delivering the priority

Family Hub Programme Delivery

Breastfeeding

Peer support, community groups, equipment scheme

Parenting

Antenatal education, Triple P, NHS Healthy Child Programme, Families and Telford & Homestart community groups, CAB Finance Health Checks

Home learning environment

Tots Talking, Talk Boost, Talking Early Years and Childcare

Parent-infant relationships and perinatal mental health

Midlands Partnership NHS Foundation Trust clinics and Seachange community wellbeing events

Parent Carer Panels

Dandelion Parents consultation

Integrated neighbourhood health and care:

Primary care focus

Why it's important

- The national Fuller report, 'Next steps for integrating primary care' recommends the development and integration of primary care into local neighbourhood communities, to help address the current challenges and improve the care and experiences received by patients.

expansion of Telford and development of housing exacerbating an already difficult position with primary care as more people move into the borough.

- The residents responses to the consultation for the ageing well strategy revealed that access to GPs is one of the top health and wellbeing issues for older people.



- Additional roles such as social prescribers, community pharmacists, paramedics and care-co-ordinators have been recruited by the PCNs to increase the breadth of the multi-disciplinary team available to meet patient needs.

Delivering the priority

The ICS Joint Forward Plan is committing to develop actions to implement improvements to primary care across the following areas:

- The NHS expect primary care to evolve with its core strengths protected, placing it at the heart of ICS, offering people streamlined access to care and advice, more proactive, personalised care and support from a multidisciplinary team based around neighbourhoods.
- Primary care cannot achieve the ambition alone and the ICS needs to take a system-led approach to drive improvements and to develop Integrated Neighbourhood Teams connected with Primary Care Networks (PCNs).

Local picture

- GPs are providing more appointments now than they did before the pandemic with seven out of 10 patients being seen face to face. Despite this demand continues to outstrip supply.
- Latest data suggest that 55% of Telford and Wrekin patients have an appointment same day/next day with 90% seen within two weeks.
- It is clear from direct patient feedback and the latest GP Patient Survey that some patients continue to experience difficulties in both getting through to their practice on the telephone and accessing a timely appointment.

- enabling PCNs to develop integrated neighbourhood teams;
- co-design and put in place infrastructure and support for integrated neighbourhood teams;
- supporting a primary care forum and representation;
- supporting the development of Primary Care Networks and leadership;
- primary care workforce planning embedded in system workforce plans;
- developing a system-wide estates plan for primary care;
- a development plan to support the sustainability of primary care.

What engagement tell us

- The lack of access to GPs was a particularly strong theme we heard from our communities through both the 2020 residents survey and 2022 residents insight survey and focus groups. There is concern regarding the

Integrated neighbourhood health and care:

Local care transformation programme focus

Why it's important

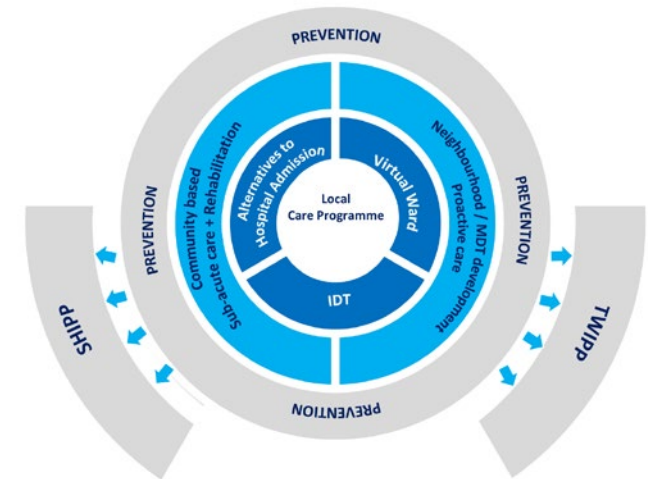
- A person-centered proactive approach to care, delivered in a more integrated way in the community, should improve outcomes and experiences for people, helping them live well and stay well, and in turn maximise independence and fulfilment in life.
- Transformed models of community care can add years to life and life to years and relieve pressure on hospital services. Wrapped around new models of care, being delivered through the Local Care Transformation Programme (LCTP), will be community-based support for people who are vulnerable, frail or have a range of complex needs.
- Proactive Care offering people with multiple long-term conditions integrated support to manage their conditions should reduce unplanned hospital care, address health inequalities and improve patient experience.

Delivering the priority

The LCTP will deliver the ambition to offer more joined up and proactive care closer to home through six critical programmes of work

- 1 Avoiding hospital admissions through provision of wider services including rapid response.
- 2 Implementing a 'discharge to assess' model to support patients to safely return home where any ongoing care needs can be assessed.
- 3 Opening 250 'Virtual Ward' beds to enable more patients to return to the place they call home to receive medical care that would otherwise be delivered in an acute hospital.
- 4 Employing a person centred and proactive care approach focused on keeping people well and preventing avoidable health issues for those at high-risk of a non-elective hospital admission.
- 5 Developing our approach to neighbourhoods to bring together multi-disciplinary teams of staff from across primary care, community care, social care and the voluntary and community sector to work together to deliver joined up, person centered and proactive care.

- 6 Reviewing community-based services for sub-acute care and reablement & rehabilitation to make best use of our available resources, including our staff and our physical assets including community care settings.



Green sustainable borough

Why it's important

- History shows that reductions in environmental pollution and advancements in hygiene contributed significantly to improvements in health and life expectancy. Access to green space and the natural environment has significant benefits to health, in terms of opportunities for physical activity and the impact on emotional health.
- Health is central to all our sustainability efforts, given the importance of access to food, housing, power, and health care to both physical and mental health and wellbeing.

Protecting and enhancing our natural environment and taking a leading role in addressing the climate emergency is a key priority for Telford & Wrekin Council, including ambitions for becoming carbon neutral and plastic free.

What engagement tell us

The Council's 2022 resident insight survey of 3,000+ people revealed important views on the green sustainable agenda:

- Many respondents indicated the importance of greenery in their community, highlighting the levels of urban green space, access to parks, pleasant walks, and proximity to the countryside as being favourite parts of their local area.
- Almost half of respondents indicated that improved open green spaces is the most important priority to them for improving cultural, leisure and sports facilities and service.
- In focus groups residents developed the statement "Telford and Wrekin in future should be a place where green and open spaces are respected and easily accessible."

Delivering the priority

- "Green Spaces are Go" Council campaign and grant scheme for not-for-profit organisations aims to help residents be more active in our parks, nature reserves and green spaces.
- Green Guarantee – council commitment to protecting over 300 green spaces in the



borough, including Local Nature Reserves and Sites of Special Scientific Interest, Fields in Trust sites and Village Greens and extensive expansion of new Local Nature Reserves.

- Telford & Wrekin Carbon Neutral Plan monitors reductions in emissions from corporate buildings, street lighting and transport and travel. The ICS green plan also focusses on reducing emissions.
- The Council's Sustainable Transport commitments are being delivered through the Electric Vehicle Strategy and Local Cycling & Walking Infrastructure Plan.
- Supplementary Planning documents support climate change initiatives, highlighting the health and wellbeing benefits.
- Telford & Wrekin Air Quality Strategy is drafted and due to be approved in 2023.
- Active Travel England grant being used to create: new off-road cycle and walking routes, improved highways crossing points, enhanced wayfinding, and maintenance of the existing walking and cycling routes to improve user experience and safety.



Economic opportunity

Why it's important

- Levels of wealth and income significantly affects people's health and wellbeing and the current cost of living crisis is having an impact
- Cold homes are linked to a range of health conditions and there is good evidence that cost of living concerns are causing a decline in people's mental health
- As long as your work conditions are fair and the nature of your job isn't risky or life-threatening, you will enjoy the various health benefits of working. Employment is good for your mental health as it allows you to meet people, boosts your self-esteem, and gives you a sense of purpose and identity.

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What engagement tell us

We have been hearing positive feedback from residents on the cost of living support offered

- Mrs G received emergency gas, electric and supermarket vouchers to buy food for her and she said: *"Thank you so so much, I truly appreciate your help. I couldn't see a way out and was starting to panic, I have had a few nights of no sleep so this means more to me than you know"*.

- Mrs D, a pensioner, received a supermarket voucher and said: *"In times like this when I have felt forgotten and when we are all struggling, I cannot thank you enough. This will go a long way to help ends meet as I have a food allergy and my food is dearer than the norm"*.
- J, received discretionary support and she said: *"I just need to write to say thank you for your amazing support team. Today I received a call from you, and I was so taken aback I haven't stopped crying, the kindness is overwhelming. The young lady who called me has given me a food voucher. I am so overcome. I have worked hard all my life and now at 74 years old I am in poor health. So today when this act of kindness came it made me very, very grateful"*.

- Current financial challenges are hitting local employers, particularly small and medium enterprises which account for 98% of employment in Telford and Wrekin (compared to 60% nationally).

Delivering the priority

Our approach

- a Directly providing targeted support to help residents and organisations most affected by the cost of living crisis;
- b Working in partnership to coordinate support locally and maximise the impact;
- c Raising awareness of the support that is available across Telford and Wrekin;
- d With partners and other local authorities, making the case to Government for increased and sustained investment into long-term solutions to the cost of living crisis.

Local picture

- Two thirds of households have an estimated annual income under £40,000 and 35.7% of household's income is below £20,000, almost double the national percentage.
- There are stark variations in the cost of living crisis impact, linked to the wide variation in low income households, Woodside has the highest levels of child poverty (44%), whereas poverty in people aged 60+, is highest in Malinslee & Dawley Bank (31%).

Our support - action to provide help with:

- 1 Energy and utility costs
- 2 Food, clothing, other essentials
- 3 Council Tax, money & benefits
- 4 Health, care and wellbeing
- 5 Housing
- 6 Transport
- 7 Business support



Housing and homelessness

Why its important

- Poor housing conditions, particularly damp and cold homes, directly harm physical and mental health and widen health inequalities related to poverty.
- The affordability of housing and increasing costs of housing cause stress and anxiety negatively impacting our mental wellbeing which is significant given the cost of living crisis.
- Living in housing which is appropriate and suits our needs impacts positively on our health and wellbeing, as well as promoting and enabling greater independence for longer for older people and those with physical or learning disabilities.
- People who experience homelessness commonly suffer from poor physical and mental health and they often face chronic and multiple health needs which go untreated. This is a key issue for people who have serious mental health problems or who suffer addiction and those who are refugees or asylum seekers.

Local picture

The Council's Housing Solutions Team offered advice and support in 2022-23 to the following:

- **148 people** who had been rough sleeping;

- **173 people** with a history of mental health issues;
- **113 people** with a physical health or disability;
- **92 people** who were experiencing domestic abuse.

What engagement tell us

"If you've got a good quality home, then health, employment, educational achievement and a happy family life are often much easier to obtain."

"We wish we had moved much sooner."

Mr and Mrs S both have a learning disability and prior to their move to extra care housing they had struggled to cope with their stairs and had little independence or contact with the other residents. Now successfully re-settled, they feel part of a real community and much happier, their care package is reduced and they are embracing the new social opportunities.

Delivering the priority

Telford & Wrekin Housing Strategy 2020-2025 aims to:

- create sustainable, accessible, affordable and integrated communities;

- make the best use of our existing homes;
- provide homes to support and empower our most vulnerable people.

The Telford & Wrekin's Specialist and Supported Accommodation Strategy 2020-2025 aims to:

- make the best use of existing accommodation;
- develop a range of new build specialist and supported accommodation over the next 10 years;
- ensure that support and care services, are delivered by registered providers as well as the community.

This the strategy will focus on: older people, those people with learning disabilities and autism, mental health needs, physical disabilities or complex needs, at risk of homelessness and young vulnerable people, including care leavers..

Telford & Wrekin's strategy to address homelessness and rough sleeping 2022 includes four objectives:

- prevention through early intervention;
- accommodation to support and empower;
- addressing rough sleeping;
- collaboration delivering services that are responsive, targeted and maximise impact.

Improving outcomes

The Health & Wellbeing Board will continue to have an outcomes focus and an outcomes framework will be developed to track progress of the strategy. Each Delivery Partnership will also have a performance framework to monitor progress.

We will monitor progress across the different domains of Population Health – wider determinants, healthy lifestyle behaviours and integrated health and care system. A clear focus of the Board is to reduce inequalities so wherever possible we will monitor progress using this lens.

- Improve life expectancy and healthy life expectancy – at birth and 65+ years.
- Narrow the gaps in life expectancy and healthy life expectancy.

- Narrow the gap in employment rates and improve the uptake of benefits.
- Narrow the gap in education outcomes focussing on those receiving free school meals.
- Reduce homelessness within the borough.
- Increase the number of residents using active travel and public transport.
- Reduce the impact of domestic abuse.
- Improve infant and maternal health outcomes.
- Reduce preventable mortality.

- Improve self-reported wellbeing.
- Narrow the gap in health outcomes for those with serious mental illness.
- Reduce smoking prevalence in routine & manual groups.
- Reduce unhealthy weight in adults and children.
- Improve reach and outcomes of alcohol and drug treatment.
- Increase the proportion of residents who report their health and care needs are supported through joined up services as close to home as possible.

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Report Title	Health and Wellbeing Board – BeeU service update
Author	Brett Toro-Pearce Associate Director Transformation and Commissioning
Director Sponsor	Tracey Jones Director of Mental Health, Learning Disabilities and Children and Young People
Date	12/06/2023

Purpose of Report

This report provides details of the commissioning and monitoring of the Bee U service by NHS STW ICB and plans for future service provision. It provides details of current demand and waiting times and associated arrangements in place to mitigate impact on children and young people.

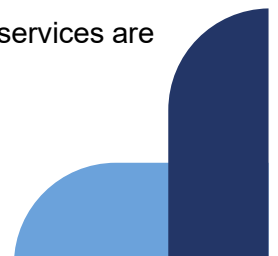
Background

BeeU is the service name for the Child and Adolescent Mental Health Service (CAMHS) commissioned from the Midlands Partnership University NHS Foundation Trust (MPUFT). BeeU provides emotional, wellbeing and mental health services to those aged 0-25 across Shropshire, Telford and Wrekin. They also provide neurodevelopmental assessment for those aged 5 to 18 years old. BeeU as the lead provider also work in partnership with Healios, Kooth and The Children’s Society in a collaborative approach to service delivery.

In 2016/17, following a formal procurement the then Clinical Commissioning Groups awarded a 5 year contract (with the option to extend by up to a further 2 years). Local Authority partners remain stakeholders within the contract. The contract is currently in its final extension year and NHS Shropshire, Telford and Wrekin (NHS STW) is currently appraising options with regards to contract and commissioning options for service delivery beyond the term of the current contract.

The following services and needs are currently provided for by BeeU:

- Access
- Attention Deficit Hyperactivity Disorder (ADHD) Assessment
- Autism Spectrum Disorder (ASD) Assessment
- Core Mental Health
- Mental Health Crisis and Home Treatment
- Eating Disorders
- Learning Disabilities
- Look After Children
- Wellbeing Practitioners
- Lead for Mental Health Support Teams (MHST)
- In addition to physical services a range of online information and remotes services are available through Kooth, Beam, the ‘Healthier Together’ website.



Local Performance

A wide variety of information is collated as part of contract and performance monitoring, this includes demand and capacity information. This information is not only used to monitor contract performance but to also inform clinical risk and to ensure that ‘waiting well initiatives’ are actively referred to and information made available. Waiting well is discussed later in the paper.

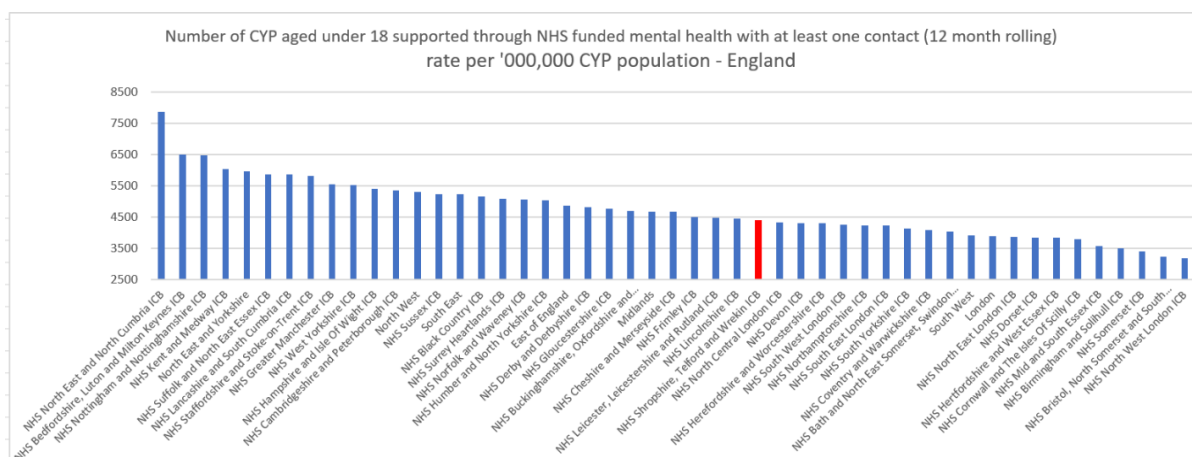
A data dashboard is also used to monitor performance and outcomes. The dashboard has been revised for the 2023/24 financial year and includes additional metrics, as well as further breakdown by Local Authority area. Systems, processes and data quality is also being reviewed and monitored to ensure that every contact is recorded and a data cleanse is currently being reviewed to ensure the data is as accurate as possible.

National data is used to monitor performance and comparison to the national position. The most recent full [data](#) is for the 2021/22 financial year (2022/23 data is expected in coming weeks). The below table shows the NHS STW position compared to the position across England for referrals for CYP and the waiting times between referral and their second contact for mental health services.

Table 1: Waiting times 2021/22

Shropshire, Telford & Wrekin	NHS STW	England Average
Average waiting time for two contacts, in days	30	41
Number of referrals waiting between 0 and 4 weeks	1938	3788
Number of referrals waiting between 4 and 6 weeks	245	650
Number of referrals waiting between 6 and 8 weeks	160	478
Number of referrals waiting between 8 and 10 weeks	110	350
Number of referrals waiting between 10 and 12 weeks	90	268
Number of referrals waiting between over 12 weeks	330	1094
Number of referrals closed before treatment	5155	9221
Number of referrals waiting, no contact	14	17
Number of referrals waiting, one contact	690	1597

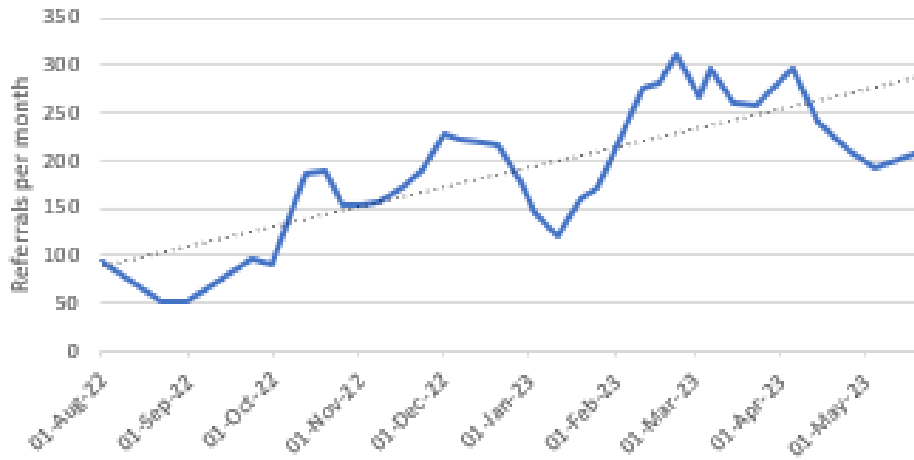
Graph 1: Number of CYP (<18) supported through Mental Health teams with at least one contact (12 month rolling period to April 2023)



The above graph shows the number of CYP under 18 supported through mental health teams across England, by ICB footprint. NHS STW is marked in red for ease of identification.

Analysis of referrals over recent months has demonstrated an increasing trend. An example of this is referrals to the Core Mental Health team and requests for ASD assessment.

Graph 2: Core Mental Health Team referrals – August 2022 to May 2023



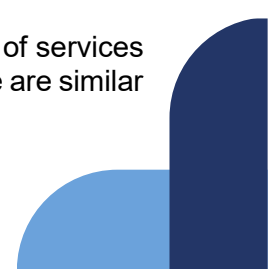
Graph 3: ASD assessment referrals – August 2022 to May 2023



Waiting list impact and current management

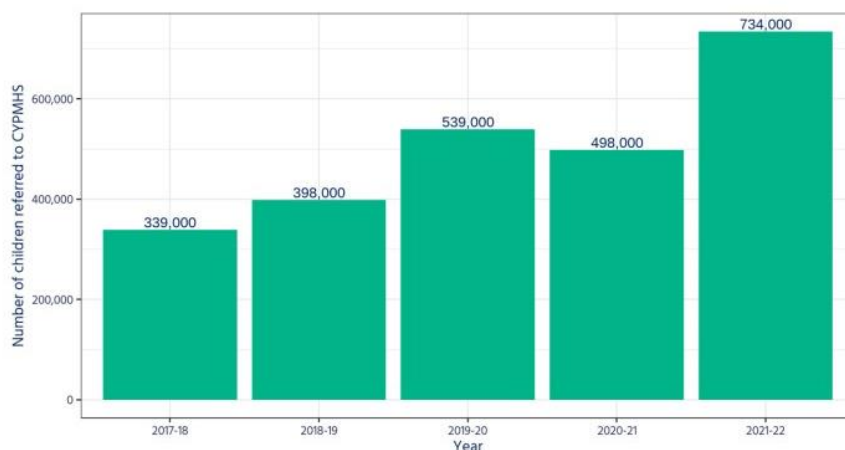
This paper will not discuss the potential impact of the Covid-19 pandemic on CYP mental health, however, the upward trend with regards to referrals and the need to access commissioned services has, in part, been exacerbated by the Covid-19 pandemic. This should not, however, be seen as the sole cause as for many services the upward trend had already commenced prior to the pandemic; but the pandemic may have contributed to the pace and scale of the increase. Due to the restrictions imposed during the pandemic alternative methods of access had to be explored and implemented at pace. This included the ability to offer remote or video consultations, wider telephone and internet accessible self-help information etc. Whilst these methods are not appropriate for all service-users, they do provide the ability to have a wider reach and to meet the needs of those with a lower level of need. This in turn increases the capacity to provide physical in-person support for those who require that level of support to meet their needs.

As has been previously reported, whilst locally there are waiting lists for a variety of services provided by BeeU this should not be viewed as a solely local issue. Nationally there are similar



challenges, particularly with regards to access to core mental health services, and ASD and ADHD diagnosis. A March 2023 report by the Children's Commissioner ([Children's Mental Health Services 2021-22](#)) states that between 2018/19 (year before Covid-19 pandemic) and 2021/22 referrals to Children and Young People Mental Health Services (CYPMHS) increased by 84%.

Graph 4: Number of CYP referred to CYPMHS 2017/18 to 2021/22

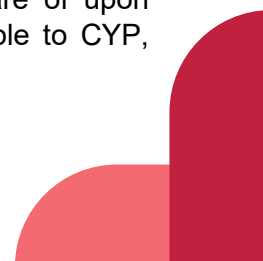


Source and credit: [Children's Mental Health Services 2021-22](#) – A report by the Children's Commissioner (page 12)

It is recognised that the waiting lists require close management and oversight and that every effort should be taken to reduce them. A number of recovery plans and waiting lists initiatives are currently in place. An example of this is a specific action to improve the ASD diagnostic assessment waiting times (as set out in the 'ASD & ADHD Recovery Plan Overview'). The most recent waiting list initiative is being implemented in conjunction with MPFT through a 3rd party provider, Healios.

Whilst diagnosis is important, receiving a diagnosis is only part of the process. It is important to have needs led services not just diagnostically led. This approach ensures that needs are met as soon as they are identified and not delayed pending a formal diagnosis. In order to ensure that individual needs are met whilst awaiting formal commissioned services or diagnosis a number of other services are accessible. This is locally referred to as 'waiting well'. Examples of waiting well initiatives include:

- [Autism West Midlands](#),
- Mental Health Services including [BEAM](#) and [Kooth](#),
- [Young Minds](#)
- Mental Health Support Teams in School
- Autism in Schools Project
- Sleep support from PODS and support from Emotional Health and Wellbeing Public Health Nurse (Shropshire Community Health NHS Trust).
- Crisis Team which is available for the 0 – 25 age range
- Crisis Resolution Home Treatment service is available 8:00 – 22:00 daily
- 24/7 MPFT Access Helpline (which CYP and families are made aware of upon acceptance of referral to the service). This Access Helpline is accessible to CYP, parents, carers and professionals.



In addition, there is clinical oversight and stratification of waiting lists. This ensures that those with the highest level of clinical need are prioritised, this is regularly reviewed to ensure that current or changes in need are identified and used to inform decision making. In 2022/23 an average of 98% of CYP received initial contact within the required timeframe (72 hours) from the Community Resolution Home Treatment team when presenting as requiring an urgent response. An average of 80% received either telephone or face to face to contact within 4 hours when presenting in crisis.

An example of effective risk stratification is the BeeU 5 – 18 ASC diagnostic assessment service. The service, upon acceptance of the referral complete a multidisciplinary team review to consider which services will best meet the persons needs and determine what early access to services may be appropriate. The team includes staff from core mental health services, ASD and ADHD pathways to allow for a rounded and holistic approach. Whilst this cannot give foresight into the persons needs (or changes in presentation) during the period they are waiting it does allow for an informed decision and risk stratification. As part of the process information is given to the person and their family, this includes how to contact the relevant service, what to do if support is required and how to access the waiting well initiatives. BeeU have committed to endeavouring to make this offer of additional support more accessible and clear to families, including working with PODS Parent Care Forum to ensure that the communications are appropriate.

There are protocols in place to expedite diagnostic assessments where the following criteria is met:

- Young person is at risk of significant self-harm and or harm to others
- Young person is at significant risk of accidental death / suicide attempts
- Young person is at risk of hospitalisation
- If clients are open to the Crisis team, the young person must remain open to the crisis team for the duration of the assessment unless there is a named worker in the CORE team
- The YP must be mentally well enough and have capacity to partake in the assessment process
- Where consideration is being given to placing the young person on the Dynamic Support Register
- Risk assessment must have been completed and a safety plan needs to be in place
- Care plan for ongoing support in place following completion of an assessment.

The NHS STW Quality Team are working closely with providers in relation to processes of oversight of those on waiting lists for prolonged periods to reduce the risk of harm. Assurance about the processes for harm investigation and review was received by the Shropshire, Telford and Wrekin System Quality group in November 2022.

Additionally the Director for Quality and Safety/ Deputy Chief Nurse has taken an action to explore the assurance data around early exit from BeeU after long waits. This will enable the quality team to assure themselves of any emerging trends and necessary further actions. A 'deep dive' report in relation to the all risks and mitigations is due to be presented to the NHS STW Quality and Performance Committee in June 2023.

Next steps

As reported to the Health and Wellbeing Board in March 2023 (via the [Best Start in Life](#) report) there are a number of extended offers being explored and implemented, this includes the ability to offer increased group work, digital and remote offerings, including investment in the [Healthier Together website](#). Also the mental health support teams in schools (MHST) continues with the local area included within the Wave 10 roll out.

As explained at the start of this paper, the current BeeU contract is in the final year of extension and will expire at the end of March 2024. NHS STW is currently considering options and at this stage it is inappropriate to comment on intentions. Proposals and options are due to be considered by Commissioning Working Group in June 2023 with a decision on next steps being made. These intentions will then be communicated to the current provider and wider system. Whilst comment cannot be made on the contract, assurance should be taken that as part of considering the future options current demand and capacity will be considered as will the anticipated future trajectory to ensure that future commissioned services will meet the future needs of the system. As part of the design of commissioning intentions and service specification a full system co-produced approach to design will be taken. It will be a fully open book approach which will consider the benefits and positive impact of current services but also the challenges and what can be done to overcome them so that the future offer meets demand and capacity and allows for timely and streamlined services that meets the needs of our communities.

Recommendation

The Board is asked to:

- Receive the report and note the information and comments.





Telford & Wrekin Indoor Sports & Leisure Strategy

For The Future?

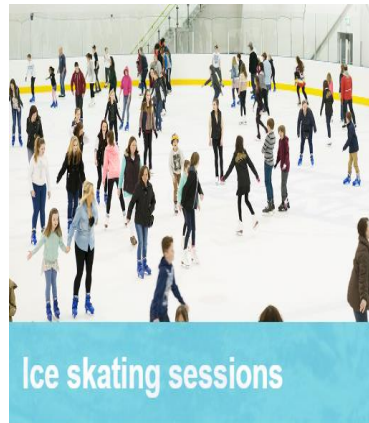


Contents

- Telford & Wrekin Leisure Services
- Why we do what we do
- Our Strategy 2022-2032
- Leisure Investment

Telford & Wrekin Leisure Services

- 11 sites
- 5 pools
- 7 Fitness Facilities
- Golf Course
- Ice Rink
- Ski Slope
- Tennis Centre
- Athletics Stadium
- P. Health relationship (inc Active Lifestyle Advisors)
- Over 1.1m community admissions
- School curricula & extra curricula provision



Telford & Wrekin Leisure Services – Targeted Interventions

- Concessions policy – inc lessons and H&F
- Extended free swim to U25's
- £1 swim for concessions and over 50's
- Free swim lessons (10 by 10)
- Kids 4 £1 (Ricoh Sponsorship)
- HHAH inc hot meal provision (X'mas and Summer)
- Free holiday scheme places for FSM kids other holidays
- Free LTS crash courses for FSM kids
- Targeted free LTS for schools with higher levels of obesity
- Physical Activity referral scheme
- Teen & Youth fitness membership options
- Expectant Mums (Excess Weight)
- Inclusive Leisure Plan

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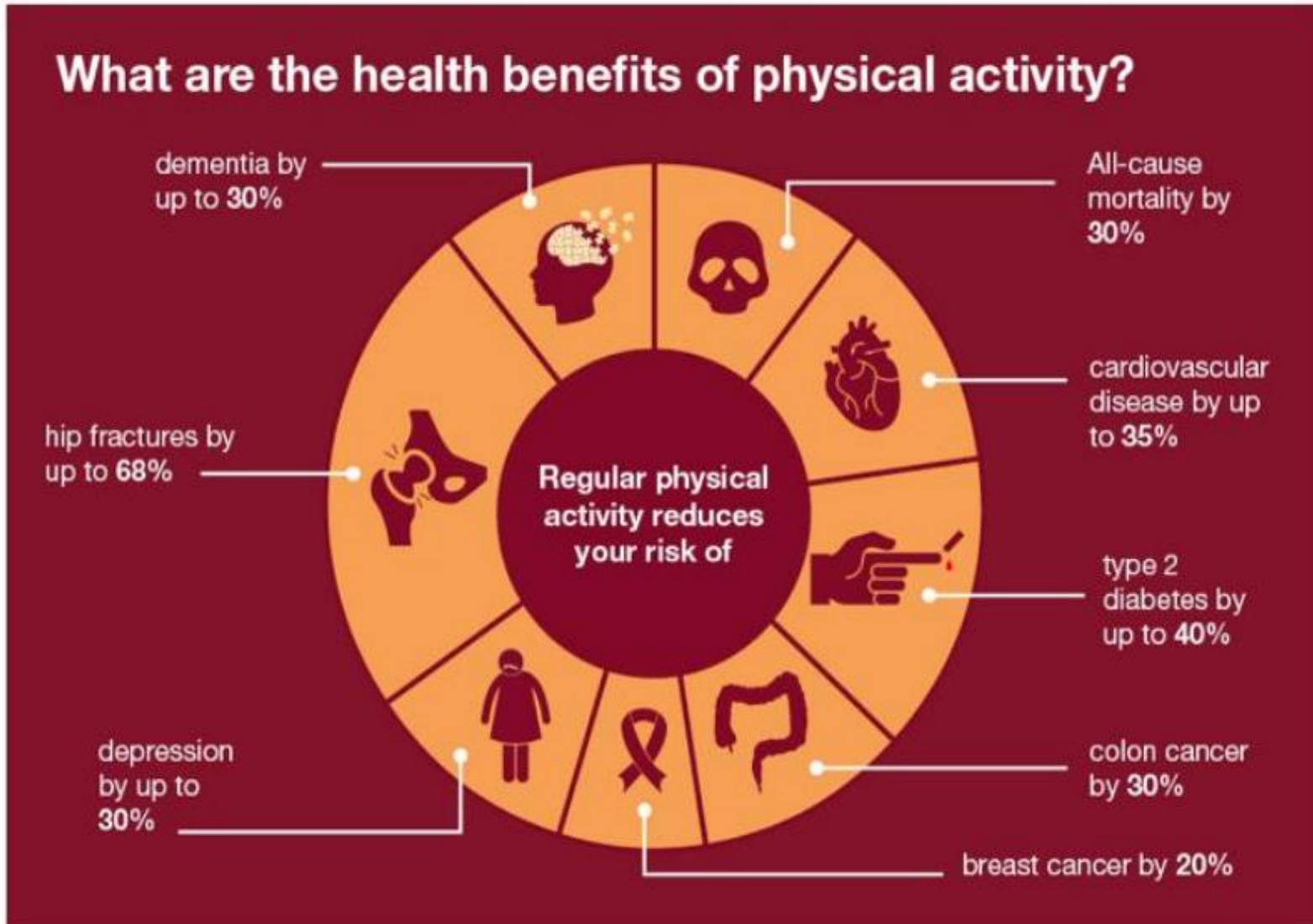


10BY10

Ten by Ten, is a national initiative recognises that children from deprived backgrounds are less likely to take part in extracurricular activities. Telford & Wrekin is the first council in the country to support Ten by Ten and we will be working with schools, community providers, parish and town councils, local charities and other third sector organisations, to support the every ten year old to have the opportunity to:

- Join in competitive team sports
- Play an instrument
- Learn to swim
- Take part in drama and performing arts
- Visit the seaside and the countryside
- Experience museums, galleries & heritage sites
- Take part in camping trips and overnight residentials
- Learn to ride a bike
- Take part in debating
- Use a library

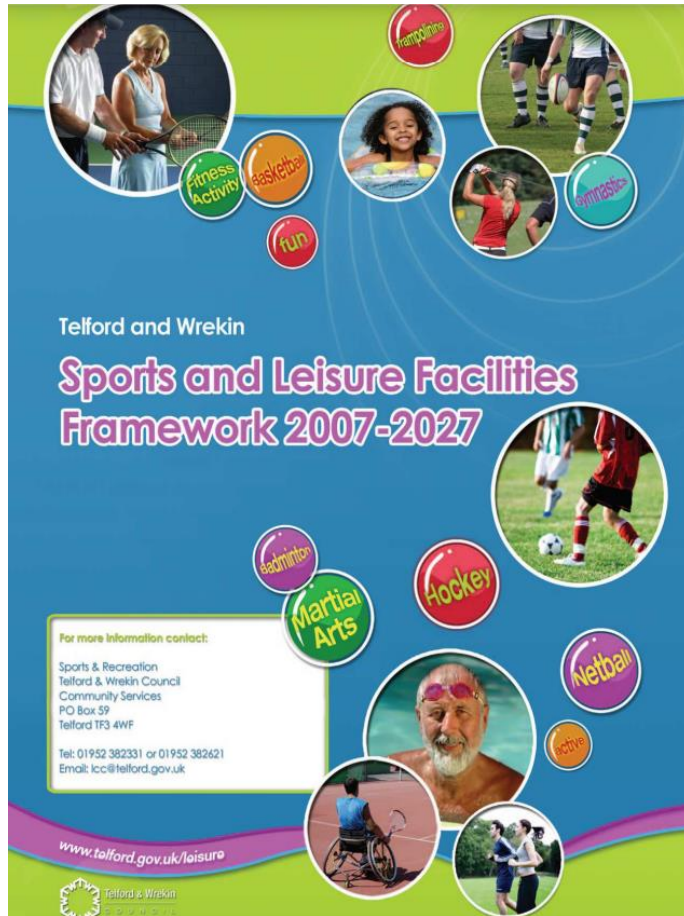
Figure 12 – Benefits of Physical Activity



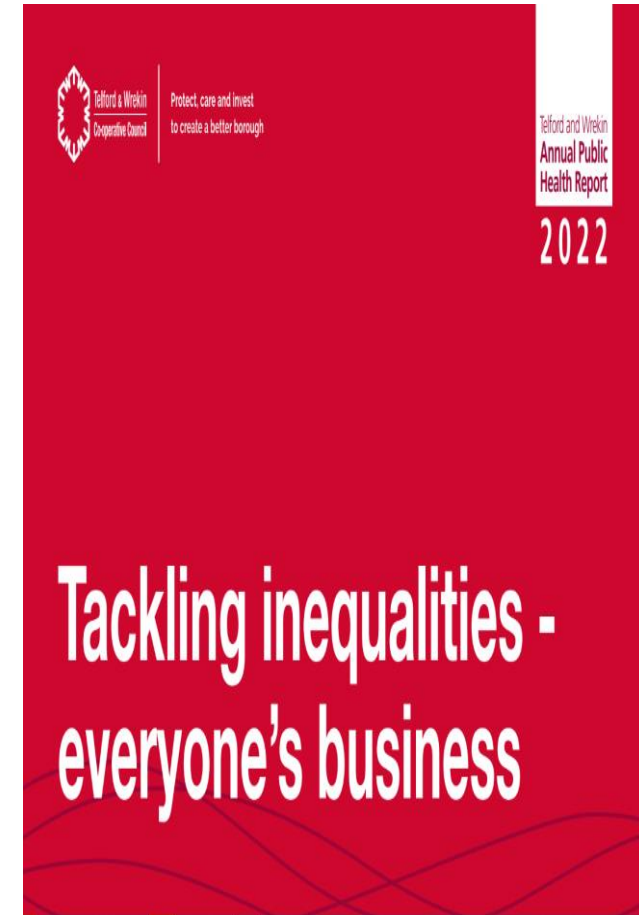
National & Local Strategies - What does this mean for leisure provision in Telford & Wrekin?

- Leisure facilities have a role to play in connecting communities and providing opportunity for everyone to be active.
- Facility development should take a place-based approach to ensure they are providing for local need and demand and to be supportive of local health issues.
- Leisure facilities are a key element in increasing levels of physical activity, however there are other elements such as active travel and active environments that have a role to play in making communities more physically active.
- Leisure centres contribute to the local economy in a variety of ways, including tourism and employment and there is an opportunity to maximise the impact they have to ensure local communities benefit from their success.
- The leisure centres need to offer activities for every stage of life, supporting both physical and mental health.

Our Strategy....



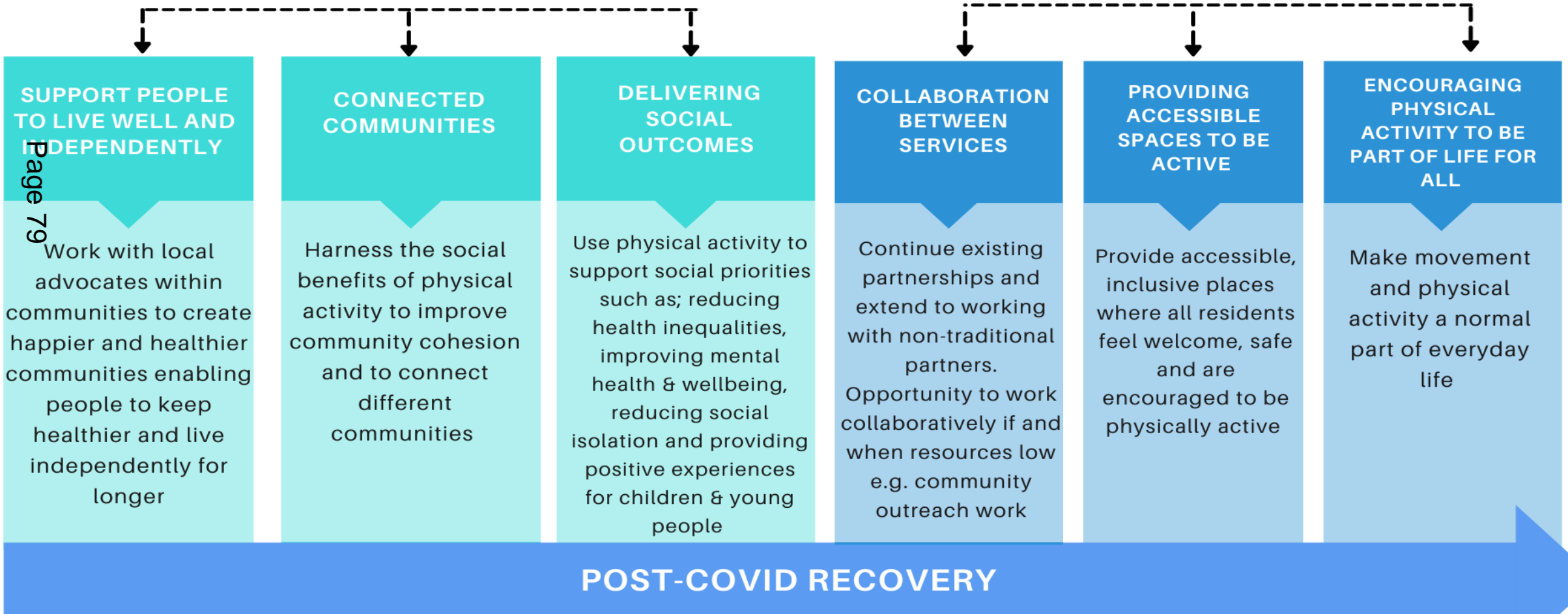
- New Indoor Sports Facilities Strategy
- Jointly commissioned
- Contribution to wider Council priorities
- Range of consultation inc residents survey and targeted focus groups
- Benchmarking quality, quantity, quality and accessibility
- Mapping and gapping
- Recommendations



Our Contribution....

How increasing physical activity among target groups would achieve outcomes

How?



TELFORD & WREKIN ONLINE SURVEY SUMMARY

Barriers to Participation

20% said not enough time
(work, school or college)

9% not enough time
(childcare/care responsibilities)

17% costs involved

9% lack of confidence

10% other (lack of convenient
programming times)

8% lack of convenient / accessible
facilities

Encouragement Factors

To being more physically active

Cleanliness, and better range of facilities,
were two main factors that would
encourage participating in more physical
activity or exercise at 90%

Improved facilities 89%

Lower costs (prices) 87%

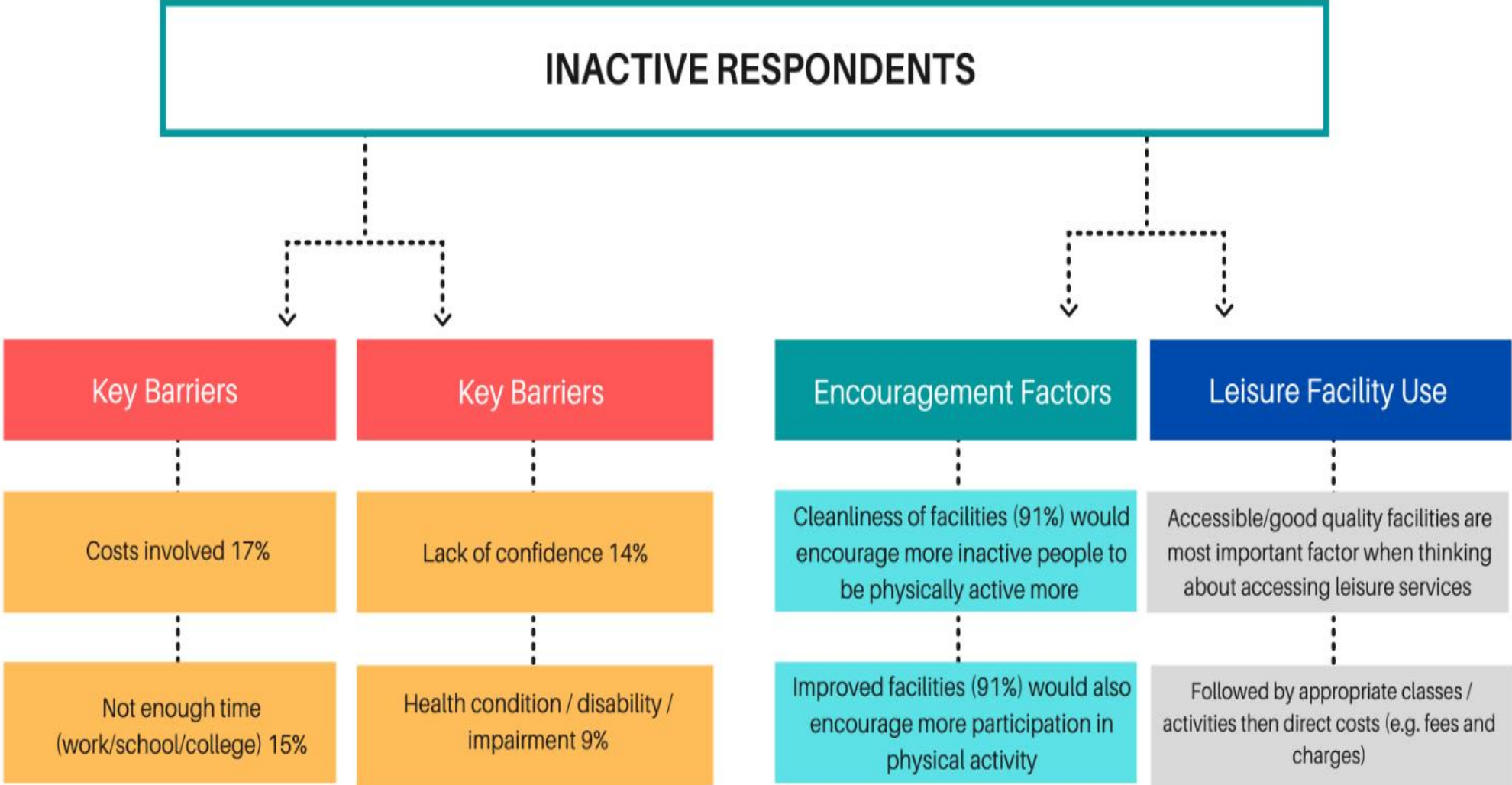
To using leisure services more

Accessible/good quality facilities, was
most important factor when thinking
about accessing leisure services at 90%

Appropriate classes / activities 81%
Availability of time 81%

Personal motivation / goals 80%
Direct costs (fees /charges) 76%

Public Consultation – Online Survey



Key Strategy Findings & Recommendations

- Facilities are of a good quality and well located.
- Leisure facilities provide a key element in increasing levels of physical activity.
- There are some local health issues that increased participation in physical activity could positively contribute towards.
- Physical activity initiatives and policies should be developed to further support public health initiatives, tackle inequalities.
- The leisure centres need to offer activities for every stage of life, supporting both physical and mental health.
- Lower levels of participation amongst older people, people with long term health issues, people with disabilities, people from ethnic minority groups.
- Progress the provision of additional swimming pool space within the Dawley area.
- Consider providing additional flexible studio space to provide for a range of wellbeing and community building activities.
- Explore the potential for the development of an assisted exercise suite at Horsehay (specifically benefitting the over 55's and those who are inactive).
- Explore the development of Padel court provision at Telford Tennis Centre.
- Continued support of community based initiatives to promote physical activity and help tackle health inequalities.

Borough of Telford and Wrekin

Cabinet

15 December 2022

Indoor Sports & Leisure Strategy



Cabinet Member:	Cllr Kelly Middleton - Cabinet Member: Leisure, Public Health and Well-Being, Equalities and Partnerships
Lead Director:	Felicity Mercer – Director: Communities, Customer & Commercial Services
Service Area:	Commercial Services (Operations)
Report Author:	Stuart Davidson – Service Delivery Manager: Operations
Officer Contact Details:	Tel: 01952 382601 Email: stuart.davidson@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Key Decision
Forward Plan:	Yes - 27 September 2022

- £14m capital investment
- £8.75m additional pool provision
- £5.28m investment into facilities
- Facility improvements
- Essential R&M works
- Padel courts
- Investigate Assisted Exercise Studio
- Learn to swim revenue funding

Opportunities & Support

- Explore opportunities for co-delivery and co-location of services to enhance partnership working.
- Help to identify and signpost target groups such as those with long term health issues or at greatest risk.
- Increased engagement with NHS partners to develop a preventative approach to health & wellbeing as well as offering rehabilitation services.

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**Telford and Wrekin Safeguarding
Partnership
Annual Report
2021/22**

PART ONE: INTRODUCTION FROM THE CHAIR

Throughout 2021/22, the impact of the Coronavirus pandemic has continued to be felt in our communities and in the way our partner organisations work.

This has seen continued changes in working practices in 2020/21 and the partnership has proactively sought assurance that necessary safeguarding activity was being fulfilled.

I am pleased that despite the challenges of the pandemic, partners have engaged effectively with the work of the partnership. Many of our meetings have continued virtually, but I am optimistic that we will move to face-to-face meetings soon. Similarly, as a partnership we have continued to play a full role in the region and contribute to the development of regional strategies and policies.

Throughout the year, we have challenged each other to seek assurance that our practice is sound and that vulnerable children and adults are protected and safeguarded from harm. One of the most significant ways we have done this is to create separate children and adult safeguarding boards to ensure that we have adequate capacity to engage and drive forward the work of the partnership. We have also created a new Domestic Abuse Local Partnership Board that brings a sharper focus on our efforts to protect and support victims, but to also prosecute offenders.

A central focus of this year's work has been on making sure we drive the statutory learning reviews we are required to undertake. These provide a real opportunity to ensure that we learn the lessons when there have been serious incidents of harm to vulnerable children and adults. To enhance this work, we have introduced a new independent quality audit to ensure that these reviews are as effective as they can be.

It has been another busy year and has seen once again a year-on-year increase in the number of contacts that Family Connect receive. We will continue to monitor the impact of this to ensure that the right contacts are being made to Family Connect and that the partnership 'threshold policy' enables effective decision making to safeguard the borough's most vulnerable children and adults.

In writing this year's annual report, we have taken a new approach and developed what we hope is a more purposeful report that is better focused on the impact of the work of the Telford and Wrekin Safeguarding Partnership. I hope this new format is interesting and engaging.



Andrew Mason

Independent Chair of Telford and Wrekin Safeguarding Partnership

PART TWO: TELFORD AND WREKIN THE PLACE

The borough is a place of contrasts. The New Town of Telford has grown around existing, historic communities such as Wellington, Oakengates, Dawley and Madeley. Along the banks of the River Severn is Ironbridge, the birthplace of the industrial revolution and now a World Heritage site. Surrounding Telford is a rural hinterland – accounting for two thirds of the borough’s area.

Telford & Wrekin has a thriving economy. With a GVA¹ per capita rate higher than the West Midlands. The borough has retained its historic links to manufacturing and industry with 17.2% of local jobs in manufacturing.

The 2021 Census gave a population estimate of 185,600 - an increase of 11.4% from 2011 making it the fastest growing area in the West Midlands. This growth is supported by 1000+ net new builds each year which has seen the borough ranked by the annual Centre for Cities report in the top five for housing growth for the past 5 years.

As the population growth it is becoming more diverse and ageing:

- In 2011, 13% of the school children were from an ethnic minority and by 2021, the rate was 26%
- Between 2011 and 2021, the number of people aged 65+ grew by 36%. Twice the regional rate of 18%.

The population of the Borough is forecast to continue to grow to 200,000 by 2034.

The borough is a place of contrasts. Some of the most deprived neighbourhoods in England are a stone’s throw from some England’s least deprived. Across Telford, there are 18 neighbourhoods (from 108) ranked amongst the 10% most deprived in England. More than a quarter of the borough’s population are living in neighbourhoods ranked amongst the 20% most deprived in England – some 53,800 people.

The impact of deprivation can be seen in health inequalities that exist in the borough. The difference in life expectancy between the most and least deprived neighbourhoods of the borough is 8.8 years for men and 6.4 years for women. Factors that drive such a difference include, for example, childhood and adult obesity.

¹ An alternative measure of Gross Domestic Product or the value of the local economy.

PART THREE: SAFEGUARDING IN VIEW

The year 2021/22 again saw increased demand into the Partnership's multi-agency safeguarding hub Family Connect, with 12,300 contacts, up from 11,000 in the previous year.

For children:

- 1,500 Early Help Assessments completed – 300 more than 2020/21
- An increase in the number of children subject to a Child Protection Plan, up to 210 from 169 in 2020/21.
- At the end of 2021/22, there were 423 looked after children and at a rate of 102 per 10,000 children. This was slightly lower than the position for the previous year at 104.

For adults:

- 447 safeguarding concerns were raised in 2021/22, with 97 progressing to a Section 42 Enquiry. This was a decrease in Safeguarding concerns compared to 2020/21, which saw 743 with 92 progressing to a Section 42 Enquiry. Across these two years, the conversion rate from Safeguarding Concern to Section 42 Enquiry increased from 13% to 215. The most common cause for a referral were neglect and acts of omission.
- Of the completed Section 42 Enquiries, of those individuals that responded, 100% felt that their desired outcome was either fully or partially met.

PART FOUR: PARTNERSHIP ARRANGEMENTS

Background

Telford & Wrekin Safeguarding Partnership is responsible for the implementation of multi-agency safeguarding arrangements that protect vulnerable children and adults. This involves the development of necessary policies and strategies that define practice, and associated processes to share information where required to safeguard individuals. A core role of the partnership is to ensure that when things go wrong lessons are learnt and action taken to implement this learning. Much of the work of the Partnership is shaped by statutory requirements as prescribed by Government.

The core members of the partnership with specific statutory duties are Telford & Wrekin Council, West Mercia Police and the Shropshire, Telford & Wrekin Clinical Commissioning Group. Other key partners include:

- Shropshire Community Health NHS Trust
- Shrewsbury and Telford Hospitals NHS Trust
- Midlands Partnership Foundation NHS Trust
- Private Early Years representative
- Primary School representative
- National Probation Service
- West Mercia Youth Justice Service
- Child and Family Court Advisory and Support Service

- Wrekin Housing Group
- Shropshire Partners in Care
- Healthwatch Telford and Wrekin

The Partnership is funded by contributions of £60,300 each from Telford & Wrekin Council, West Mercia Police and Shropshire, Telford & Wrekin Clinical Commissioning Group. In addition, funding of £500 was received from West Mercia Youth Justice Service. In 2021/22 this meant that the Partnership had a total budget of £181,400.

The work of the Partnership is directly supported by a small team who are based in Telford & Wrekin Council. This team is partially funded by the Partnership.

Developing the Partnership

The year saw significant changes to the structure of the Partnership with the creation of a Safeguarding Children Board, a Safeguarding Adults Board and a Safeguarding Partnership Executive. These new arrangements replaced a single quarterly meeting that considered both adult and children safeguarding matters. A review found that this single meeting did not provide adequate time to drive forward these two most important areas of work and that the Partnership arrangements needed to evolve to create the necessary capacity.

Another important change in governance this year was the decision that the two safeguarding boards and the Executive should be independently chaired to enhance independent challenge and scrutiny of the work of the Partnership and the actions of the organisations making up the partnership.

Beneath each of these two new boards, the partnership structure was revised to ensure that there was adequate capacity to drive:

- Statutory case reviews to learn lessons and improve practice in response to serious incidents of harm relating to vulnerable children and adults.
- Quality assurance of the effectiveness of the Partnership's policies and practices.
- Training and communication
- Thematic sub-groups that drive priority areas of work.

The new arrangements are illustrated in Diagram One.

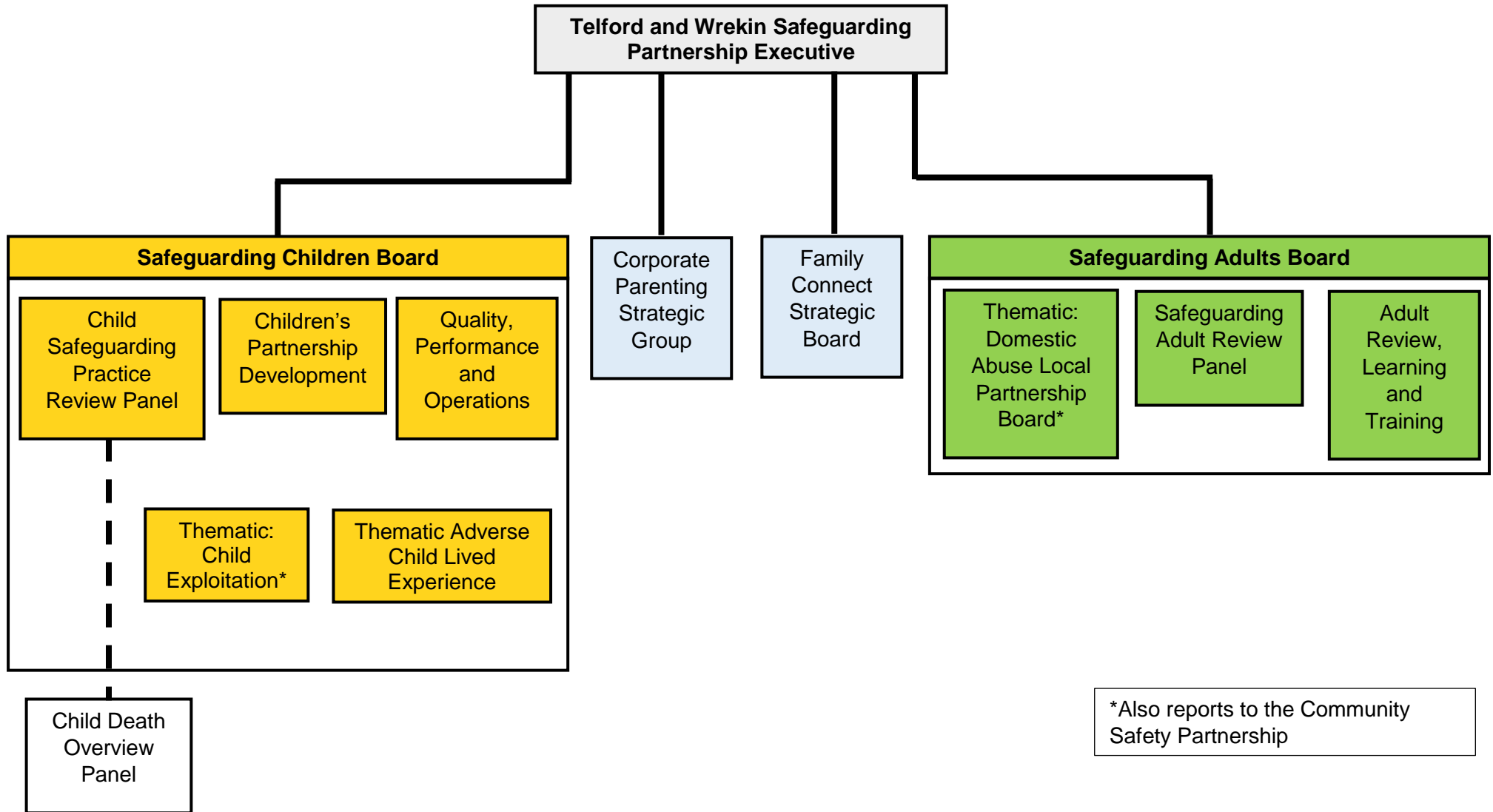
Following the creation of these new arrangements a new overarching strategic plan for the Partnership was created with four priorities:

- 1. Sharing and engaging with the Telford and Wrekin Community**
- 2. Implementing learning from reviews**
- 3. Further developing policies and procedures**
- 4. Ensuring appropriate single agency and multi-agency quality assurance processes are in place**

During the year the Safeguarding Children Board and the Safeguarding Adults Board each met four times and the Executive twice to drive forward these priorities.

Part five of this report sets out what has been achieved against these priorities.

Diagram One: Telford & Wrekin Safeguarding Arrangements



PART FIVE: DRIVING DELIVERY OF OUR STRATEGIC PRIORITIES

1. Sharing and Engaging with the Telford and Wrekin Community

The Partnership has a robust programme of communication and engagement with the community and practitioners which includes:

- A partnership website which hosts all key policies and strategies for practitioners, a broad range of information for residents and signposting to support where a person has concerns about a vulnerable child or adult.
- Professional newsletters to practitioners and partners which include, for example, practice updates and briefing notes following learning events.
- Specific promotional campaigns, for example Safeguarding Adults Week.
- Awareness raising by supporting specific events that deliver on our priorities, including:
 - CSE Awareness Day Thursday 18th March
 - White Ribbon Day Monday 6th December
- Themed learning events identified through Rapid Reviews and Local Child Safeguarding Practice Reviews, for example, most recently a 'non-accidental injury' learning event for practitioners from across partner organisations.

Children

A key engagement mechanism by which the voice of the child is heard by the Safeguarding Children Board is the Children Safeguarding Board network. These are safeguarding boards in school run by children, with a total of 42 boards currently established within both primary and secondary schools in Telford and Wrekin. This year a key focus has been getting these Board re-established after the impact of Covid. The network has continued its excellent work and has focused on developing ideas to safeguard the wellbeing of children. For example, one school board has developed ten ways to better wellbeing and keeping safe which includes exercise, mindfulness and art. In addition, the network has focused on outdoor safety and online safety. The Board receives funding from the Partnership to achieve its goals and is supported by the Severn Training & Schools Alliance.

Adults

For adults the Telford & Wrekin Making it Real Board plays a key role in informing the work of the Adult Safeguarding Board. Making it Real are 'experts by experience', and so are uniquely placed to ensure that partners are kept in touch with the day-to-day realities for people who use services within the borough, and to ensure that local people are placed at the heart of decisions around the future of adult social care in Telford and Wrekin.

Through participation in the work of the Safer Stronger Board the Adult Safeguarding Team has forged new partnerships with Neighbourhood Officers. This has led to providing joint drop-in sessions at community centres across the Borough to raise awareness of safeguarding and facilitate access to support for hard-to-reach groups.

These drop-in sessions are a new initiative, and positive feedback has been received from both individuals and professionals, with plans to further expand the initiative to focus upon increasing engagement with ethnically diverse communities.

2. Implementing Learning from Reviews

Children:

In line with Working Together 2018, during 2021/22 the CSPR Panel received and undertook seven Rapid Reviews involving multi-agency input, information sharing and learning outcomes. Of these seven Rapid Reviews three progressed to a full Local Child Safeguarding Practice Reviews.

Throughout the year we have evolved our processes to drive this work to ensure that we can meet statutory timescales and to improve the quality of this work. Latterly, we have appointed an expert independent external auditor to quality assess Rapid Reviews before they are submitted to National Panel.

From the review work completed, individual actions plans relating to the learning from these reviews have been created and are monitored by the Panel at its monthly meetings. The key learning themes from this review activity are:

- The need to reinforce the central role that professional curiosity should play in all cases.
- The correct and appropriate action educational settings should apply when a child discloses taking an overdose and that education settings should work together to share information when siblings attend different schools.
- To raise awareness of 'invisible men' and other adults in the family, or, connected to the family.

In addition, reviews have been undertaken on the midwifery assessment and referral process in relation to known substance misuse in pregnancy, the Multi-Agency Child Enquiry (MACE) processes within Family Connect and Safeguarding and Supporting Women with Additional Needs (SWAN)² referral process.

Adults:

The SAR Panel met on a monthly basis and has undertaken and completed two Multi Agency Case File Audits (MACFA) where the criteria for a SAR had not been met however there was still learning to identified and implemented. All learning has been addressed with changes made to improve practice and processes. For example,

² Where vulnerable pregnant women are identified by the maternity service, there is a process for planning and providing additional support for the mother-to-be and her baby. The SWAN group is a midwife-led group that includes attendance from health visitors, identified midwives and the family nurse partnership (FNP) with information contributed by Family Connect.

Commissioned Motivational Interviewing training for practitioners across the partnership following learning identified within one of the MACFAs.

To improve our processes around SARs, we have streamlined and ensured consistency in Review scoping documents to be used across Shropshire and Telford and Wrekin for agencies that cover both areas. Similarly, we have developed and publicised a SAR Practitioner leaflet to provide support and guidance around their role within a SAR

In terms of external challenge, following an ADASS Association of Directors of Adult Social Services, the Adult Social Care team at Telford & Wrekin Council were rated as Exceptional.

3. Further develop policies and procedures

Regional work

The Partnership has continued to play a full role in the West Midlands Regional Editorial Groups for adults and children's safeguarding partnerships, which develops and reviews regional policies and procedures.

Throughout 2021/22, we contributed to a programme of reviews, including Children with Disabilities, Forced Marriage, Children of parents with mental health problems, Information sharing and confidentiality, disguised compliance, coercive control and families who are hostile or resistant to change, honour-based abuse, and fabricated and induced illness. Where appropriate such changes in policy were communicated with relevant practitioners.

We also contributed fully to the development of Regional Section 11 process which will mean that partners who cover more than one Board area will no longer be required to produce multiple submissions.

Children

Through review work we have enhanced our approach to supporting children that have been effected by youth violence, offending and all forms of exploitation through the commissioning of St Giles to work with vulnerable children right across our windscreen of need for Child Exploitation.

Following adoption by the local authority, the Family Safeguarding Model has moved to become to a multi-agency way of working to support children and families in need of support. This has been well received by both families and practitioners and initial evaluations are demonstrating real benefits to working together in this new way.

Professional Curiosity Best Practice Guidance was developed, encouraging partners to 'see past the obvious'; raising questions, challenging and escalating concerns where appropriate, quickly and clearly, to improve how we protect and meet the needs of children in Telford and Wrekin.

We have also contributed to the development of a procedure and pathway for the multi-agency response to young people presenting to a health based placed of safety when in mental health crisis.

Adults

In January 2022, the Council's Adult Safeguarding Team rolled out a new Adult at Risk Service, with additional staff capacity funded by the Council and West Mercia Police & Crime Commissioner. This new service works with adults who are at risk due to a range of different reasons and circumstances, but do not meet the threshold for statutory adult safeguarding, or funded adult social care as defined within Care Act legislation. This was a key area of risk identified by the Partnership.

The service is available to adults from the age of 18 at risk of harm. This can include:

- Difficulties managing on a day-to-day basis
- Risk of eviction and homelessness
- Risk from Criminal exploitation including County Lines/Cuckooing
- Issues with finances and debts

This new service has supported 12 adults with a range of support needs including:

- Domestic abuse - 4 cases
- Criminal exploitation - 3 cases
- Financial abuse - 2 cases
- Sexual abuse - 1 case
- History of childhood sexual exploitation - 2 cases

Key safeguarding adult policies and procedures that have been reviewed and made available through our online policy system "Care Knowledge" include:

- The Threshold of Needs Document
- Person in a Position of Trust Framework and Policy.

4. Ensure appropriate single agency and multi-agency quality assurance processes are in place.

Children

- Our last Section 11 audit was completed in November 2020 and all recommendations have been implemented. This is a bi-annual process, and we have committed to participate in a West Midlands regional Section 11 online tool for future audits.

- The Council's Safeguarding Service has undertaken a range of deep dive audit work to identify where support can be improved for any families where there is chronic neglect to ensure that the right interventions are in place.
- We have conducted Early Years and Childcare Section 11 safeguarding audits across the majority of these settings. For nursery/pre-school provision 91% of settings were audited in 2020/21, an increase of 4% and 74% of childminders were audited, an increase of 8% on last year.
- We have worked in partnership with the Schools Education Safeguarding team to identify action points in Section 157/175 audits. This team also delivered safer supervision training in partnership with this team.
- We undertook and implemented actions identified through a Domestic Abuse Multi Agency Case File Audit.

In addition the Partnership has challenged partners over critical reviews of their individual services including for example:

- The Ockenden Review of Maternity Services in the Shrewsbury and Telford Hospital NHS Health Trust which concluded in March 2022. The findings from the Review have been reported/discussed at the Safeguarding Children Board and the Partnership Executive where assurances were sought over the safety of current services and the implementation of the Review recommendations.
- Shrewsbury and Telford Hospitals NHS Trust (SaTH) were issued with a Section 31 notice in February 2021, and health partners provide regular updates to the partnership, providing assurance that work is being carried out to review arrangements for children and young people presenting in mental health crisis.

In addition the Partnership and individual partners have engaged with the Independent Inquiry into Telford Child Sexual Exploitation, looking at how partners have responded to Child Sexual Exploitation since 1989. The Inquiry is expected to report in 2022.

Adults

- Our last West Midlands Care Act Compliance Audit was completed in May 2021. Significant progress has been made on actions to date, and this will continue into 2022-2023. This is a bi-annual process, and we have committed to participate in a West Midlands regional online tool for future audits.
- We have carried out a Multi-Agency Case File Audit for a referral which did not meet the criteria for a Safeguarding Adult Review, but where learning was identified.

Effective training

As a result of Covid-19 face to face training was postponed and there was a push to deliver training via e-learning. The Partnership has paid for licenses on the Council's online learning platform Ollie, providing access to:

- Adult Safeguarding
- An introduction to ACE's (Adverse Childhood Experiences) and Early Trauma
- Armed Forces Covenant
- Child Protection – An Introduction
- Child Protection Investigation
- Child Sexual Exploitation (CSE) Awareness
- Corporate Parenting
- Deprivation of Liberty Safeguards (DoLS)
- Domestic Abuse Awareness
- Early Help for Children and Families
- Emotional Abuse (Children)
- Female Genital Mutilation (FGM)
- Hoarding – An Introduction
- Legislation and Partnership Working
- Neglect (Children)
- Physical Abuse (Children)
- PREVENT
- Prevent – Raising Awareness of Radicalisation
- Using the Threshold of Needs Matrix

Throughout the year, partners continued to develop their own training to ensure that their practitioners had the right skills and knowledge to safeguard vulnerable children and adults. This included:

- Shropshire Community Health Trust: Bespoke safeguarding children and adults' induction videos created to complement the Trust's Corporate Induction.
- Shrewsbury and Telford Hospital NHS Trust: In September 2021 a new medical staff safeguarding training programme was also introduced to support medical staffing compliance, this remains under ongoing review.

Children

- Delivering training on Raising Awareness of Exploitation & Vulnerability, Child Protection, Private Fostering
- Reviewing the Managing Allegations against staff and volunteers in a position of trust training, to be available to all multi-agency partners, early years and education providers
- Providing training in, and reviewing guidance for Thresholds, Early Help Assessments and Support Plans

Adults

Since April 2021 the Adults Review Learning & Training group has:

- Delivered seminars around Making Safeguarding Personal across the partnership
- Reviewed the Cross Border Safeguarding Arrangement Policy to ensure it is still fit for purpose
- Commissioned a seminar across the partnership to focus on decision making and the importance of clear recording.
- Undertaken the West Midlands Care Act Compliance Regional Audit and started to implement identified improvements
- Reviewed and raised awareness of the Organisational Concerns Policy and Framework to ensure it is still fit for purpose

PART SIX: LOOKING FORWARD

As a partnership we are very clear on our areas of focus moving forward. These include

Children

In 2022/23 we expect to see the publication of the report of the Independent Inquiry into Telford Child Sexual Exploitation. We will fully engage with the recommendations of the report and will respond accordingly and take on board lessons, as a partnership we can learn.

This year much of our collective focus has been on undertaking Rapid Reviews and subsequent CSPRs. Whilst this has provided valuable learning, next year we need to ensure that we undertake a number of Multi-Agency Case File Audits on themes that test our multi-agency safeguarding arrangements where we are aware there are pressures and challenges in the system.

Similarly, we have made progress this year on the development of a partnership dataset that brings together key information from across the partnership on the health of and demand in the system. We want however, to undertake further work to ensure that such a dataset fully underpins the work of the Safeguarding Children Board.

We will also look to undertake a review of our training offer to ensure that the multi-agency offer is fit-for-purpose, intelligence based and compliments existing single agency safeguarding training offers.

Adults

Whilst much progress has been made this year, we will continue to work to fully implement our adult safeguarding quality assurance framework to capture quality assurance activities and measures. Related to this is the implementation of an enhanced performance dashboard with greater focus upon qualitative measures, and ensuring the persons voice is heard throughout the safeguarding process

A key goal of our Domestic Abuse Local Partnership is to develop and implement a new strategy based on changes introduced as a result of the Domestic Abuse Act 2020.

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