



Borough of Telford and Wrekin

Health Scrutiny Committee

Thursday 9 October 2025

2.00 pm

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

Democratic Services:	Paige Starkey	01952 380110
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Committee Members:	Councillors D R W White (Chair), F Doran (Vice-Chair), M Boylan, C Chikandamina, N A Dugmore, G Luter, R Sahota, P Thomas and J Urey
	Co-optees H Knight, S Fogell and D Saunders

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	To review and reconfirm the Terms of Reference for the Health Scrutiny Committee for the 2025/26 municipal year.	
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	To approve the work programme for the 2025/26 municipal year.	
6.0	Update from the JHOSC	

To receive an update on the work of the Joint Health & Overview Scrutiny Committee.

7.0 Update from the Health & Wellbeing Board

To receive an update on the work of the Health & Wellbeing Board.

8.0 Mental Health Strategy Update 25 - 30

To provide an update on the Mental Health Strategy.

9.0 Crisis Interventions in the Community: Calm Cafes 31 - 38

To provide an update on the Community Calm Café model.

10.0 Telford & Wrekin Veterans Health and Wellbeing Survey To Follow

To receive an update from Healthwatch Telford and Wrekin on the findings of the recent Veterans Health and Wellbeing Survey.

11.0 Chair's Update

If you are reading these papers on an electronic device you have saved the Council £15.22 and saved 6.1kg of CO₂, based on average agenda printing costs for the 2022/23 municipal year.

HEALTH SCRUTINY COMMITTEE

**Minutes of a meeting of the Health Scrutiny Committee held on Thursday
1 May 2025 at 2.00 pm in the Council Chamber, Third Floor, Southwater
One, Telford, TF3 4JG**

Present: Councillors D R W White (Chair), F Doran (Vice-Chair), M Boylan, P Davis, N A Dugmore, S Handley, R Sahota and P Thomas.

Co-optee: D Saunders

Also Present: Councillor K Middleton (Cabinet Member for Public Health & Healthier Communities)

In Attendance: S Fogell (Chief Executive: Healthwatch Telford & Wrekin), S Hardwick (Lead Lawyer: Litigation & Regulatory), H Onions (Director: Health & Wellbeing), F Mercer (Executive Director: Adult Social Care, Customer Services & Commercial), P Starkey (Senior Democracy Officer (Scrutiny)) and E Walker (Head of Primary Care and PCN Development Shropshire, Telford & Wrekin Integrated Care Board)

Apologies for Absence: Councillor J Urey

Co-optee: H Knight

HAC-23 Declarations of Interest

None.

HAC-24 Minutes of the Previous Meeting

RESOLVED – that the minutes of the meeting held on 6 March 2025 be confirmed as a correct record and signed by the Chair.

HAC-25 Update from the JHOSC

Due to the local elections taking place in Shropshire, the Co-Chair advised that the Joint Health & Overview Scrutiny Committee had been unable to meet and meetings would resume following the conclusion of the pre-election period.

HAC-26 Update from the Health & Wellbeing Board

The Director: Health & Wellbeing advised that the meeting due to be held on 20 March 2025 was postponed and had been rescheduled to take place on 21 May 2025.

HAC-27 Primary Care Access - Healthwatch GP Access Report

The Committee received a presentation from the Chief Executive, Healthwatch Telford & Wrekin on the GP Access Report published in September 2024 which outlined the results of a survey conducted between August and December 2023.

The survey aimed to explore patient satisfaction at GP practice-level and received over 9,200 responses. The survey consisted of 21 questions exploring methods for accessing appointments, ease of access, suitability of appointments offered, experiences with, and confidence in clinical and non-clinical staff, general perceptions of general practice and ideas for service improvement. Members heard that the largest group of respondents were those aged between 50 – 64 years old. Just under a quarter of respondents were those identified as having a disability and over half of respondents were identified as having a long-term health condition.

The report highlighted key concerns for residents accessing GP services with over half of respondents rating their experience of making their last appointment as poor. Key barriers included long telephone queues, limited ability to book in advance and the removal of face-to-face booking at GP practice reception areas. Many respondents described the booking process as inflexible, particularly for those working full-time or lacking digital access. While there was some correlation between poor experiences and higher deprivation scores in the Borough, this was not consistent across all practices. Some respondents reported negative experiences with call centre-style systems, citing a lack of access to medical records and poor continuity of care. Some practices only offered same-day appointments, which were not suitable for non-urgent issues. The survey results also highlighted the frustration felt by respondents with a general feeling that services were stretched beyond capacity. Wide appointment windows for telephone consultations caused inconvenience, and patients were often told to call 111 or attend A&E if no GP appointments were available. Despite these challenges, once an appointment had been secured, the majority reported positive experiences with clinical staff.

At the time of the meeting, GP practices had been delivering 15% more appointments than during Covid-19. Practices were being encouraged to review demand patterns and ensure adequate staffing at peak times. As a result of the survey, Healthwatch outlined 15 recommendations to improve access, including upgrading telephone systems, reintroducing advance booking options, providing more face-to-face and online booking opportunities, further training for reception staff to improve empathy and

communication, and increasing the visibility and role of non-GP staff to support access.

Members heard that work was already underway to address these issues. Practices had been encouraged to review demand patterns and ensure adequate staffing during peak times. From October 2025, all practices will be contractually required to offer online appointment systems, regardless of capacity. Practices are also being supported to improve call handling, including callback options and better staffing during peak times. However, implementation varies between practices, and efforts are ongoing to ensure more consistent service delivery across the borough.

The report also outlined two further phases of work to be undertaken by Healthwatch. Phase 2 would look to produce individual reports for each GP practice, including detailed feedback while Phase 3 would involve working directly with practices to understand patient perceptions and support improvements. Where Patient Participation Groups (PPGs) were not currently active Healthwatch would offer support to establish groups.

In response to concerns raised about GP appointment access, the Head of Primary Care and PCN Development Shropshire, Telford & Wrekin Integrated Care Board (STW ICB) acknowledged that while practices had been meeting national targets for appointment availability, patient experience did not always reflect this. The shift to triage-based systems and online bookings had created barriers for some, particularly those without digital access. Practices were being encouraged to improve telephone systems and offer more flexible booking options, including face-to-face and advanced booking where possible. The perception of empty waiting rooms had been noted, and it was explained that many consultations took place via telephone or video, which changed how busy practices appeared.

In response to questions about patient engagement, the Head of Primary Care and PCN Development STW ICB confirmed that practices are expected to have active PPGs and Healthwatch Telford & Wrekin was offering support to establish Groups where they were not currently in place. Feedback from the GP Access survey performed by Healthwatch Telford & Wrekin would help will inform individual practice reports as part of phase 2 and Healthwatch would continue to work with practices to understand and address patient concerns as part of phase 3.

In response to workforce concerns, it was noted that additional GP roles were being funded through Primary Care Networks (PCNs), with recruitment ongoing. Practices were also expanding the use of multidisciplinary teams, including pharmacists and nurse practitioners, to manage demand. Members were informed that whilst this may mean patients are seen by different professionals, all staff were trained and qualified to provide appropriate care. Capacity had remained a challenge and work was ongoing to ensure resources aligned with patient need.

In response to concerns about communication between hospitals and GPs, the Head of Primary Care and PCN Development STW ICB acknowledged that delays in correspondence and referrals had impacted patient care. This was an area which was under review and improvements in digital systems and administrative processes were being explored to ensure timely and accurate information sharing.

In response to questions raised in relation to Pharmacy First, it was confirmed that the scheme was being promoted as a way to manage minor conditions without GP involvement. However, uptake in Telford and Wrekin has been slower than in Shropshire. Members heard that there had been potential to expand the role of prescribing pharmacists and nurses to reduce pressure on A&E and GP services, and this was being explored as part of the wider Primary Care Strategy.

In response to questions about the survey results, the Chief Executive Healthwatch Telford & Wrekin confirmed that the sample size was statistically representative for Telford and Wrekin residents. Practices based in Shropshire, such as Shifnal and Priorslee, were not included within the data. Demographic analysis showed that respondents were largely aged 50–64 years old, with a significant proportion reporting disabilities or long-term conditions, which may have had influence on their experiences and expectations of services. The Chief Executive Healthwatch Telford & Wrekin also acknowledged the importance of public education around how to access primary care appropriately, while emphasising that the system must remain accessible to all, including those without digital access.

HAC-28 Work Programme

The Senior Democracy Officer: Scrutiny presented the updated work programme to the Committee. Members were advised that there were no further meetings scheduled to take place for the 2024/25 municipal year and any remaining items on the work programme would be carried forward into the next year.

HAC-29 Chair's Update

The Chair thanked Members for their contributions over the municipal year.

The meeting ended at 3.27 pm

Chairman:

Date: Thursday 9 October 2025



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Borough of Telford and Wrekin

Health Scrutiny Committee

Thursday 9 October 2025

Terms of Reference 2025/26

Cabinet Member:	Cllr Zona Hannington - Cabinet Member: Finance, Governance and Customer Services.
Lead Director:	Anthea Lowe - Director: Policy & Governance
Service Area:	Policy & Governance
Report Author:	Ashley Hickman – Democracy & Scrutiny Assistant
Officer Contact Details:	Tel: 01952 382589 Email: ashley.hickman1@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	Health Scrutiny Committee – 9 October 2025

1.0 Recommendations for decision/noting:

It is recommended that the Health Scrutiny Committee:

- 1.1 Agree and reconfirm the Terms of Reference set out at Appendix A.

2.0 Purpose of Report

- 2.1 To set out the Terms of Reference for the Health Scrutiny Committee as outlined in Appendix A of the report.

3.0 Background

- 3.1 The Constitution requires that Full Council should at its Annual Meeting the Terms of Reference for each of its Committees to enable the Council to efficiently conduct its business.

- 3.2 At the Annual Meeting of the Council on 15 May 2025, Full Council delegated authority to each Committee to review its own Terms of Reference.

4.0 Summary of main proposals

- 4.1 For the Health Scrutiny Committee to review its Terms of Reference as set out at Appendix A.

5.0 Alternative Options

- 5.1 There are no alternative options arising from this report.

6.0 Key Risks

- 6.1 There are no key risks arising from this report.

7.0 Council Priorities

- 7.1 A community-focused, innovative council providing efficient, effective and quality services.

8.0 Financial Implications

- 8.1 There are no financial implications arising from adopting the recommendations included in this report

9.0 Legal and HR Implications

- 9.1 The Constitution requires that Terms of Reference should be reviewed on an annual basis. The terms of reference should provide clarity on the election of the Chair and Vice-Chair and once confirmed, the Monitoring Officer will update the Constitution. There are no direct legal implications arising from this report. The proposals contained in this report can be delivered using existing resources.

10.0 Ward Implications

- 10.1 There are no ward implications arising from this report.

11.0 Health, Social and Economic Implications

- 11.1 There are no health, social and economic implications arising from this report.

12.0 Equality and Diversity Implications

- 12.1 There are no equality and diversity implications arising from this report.

13.0 Climate Change and Environmental Implications

- 13.1 There are no climate change, Biodiversity and environmental implications arising from this report.

14.0 Background Papers

- 1 Council Constitution

15.0 Appendices

- A Health Scrutiny Committee Terms of Reference 2025/26

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal Services	16/06/2025	20/06/2025	SH
Finance	16/06/2025	17/06/2025	ER

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HEALTH SCRUTINY COMMITTEE TERMS OF REFERENCE

Membership

1. The group will be made up of elected members of the Scrutiny Assembly, appointed at Annual Council in line with the political balance of the Council.
2. The Committee may include Co-opted scrutiny members but they must not exceed 50% of the number of elected members.
3. In addition to standing co-optees, the Committee may appoint additional co-optees for one-off reviews to supplement the skills, knowledge and experience of the Committee on that particular issue (subject to the rule on total number of co-optees above).
4. Vice-Chairs may be appointed by majority decision of the Committee.
5. The quorum required for a meeting is 3 elected members.
6. Three elected Members and 3 co-optees of this Committee will also be expected to take part in the Joint Health Scrutiny Committee set up with elected members and co-optees from Shropshire Council to scrutinise substantial variations or developments in service that cut across both local authority areas. Separate terms of reference apply to the Joint Health Overview and Scrutiny Committee which have been agreed with Shropshire County Council.

Functions

7. The Committee will be the main mechanism by which Scrutiny members will scrutinise and monitor the planning and performance of the Council's adult social care services and health services matters under the Health and Social Care Act 2012. Full Council has delegated the health scrutiny powers to this Committee.
8. The Committees takes the key role in:
 - a) Monitoring the performance of NHS Trusts whose services effect local people;
 - b) Acting as the statutory consultee on NHS proposals for substantial variation in service and responding to these NHS consultations.
 - c) Participating in a Joint Health Overview and Scrutiny Committee with elected members from Shropshire Council to scrutinise and respond to NHS proposals that apply to both areas;
 - d) Responding to referrals from Health Watch regarding health services;
 - e) Monitoring the Council's performance in relation to social care service for adults;
 - f) Responding to referrals from Healthwatch regarding Adult Care Services;
 - g) Scrutinising proposals for the provision of adult care services and the impacts of any proposed changes to services; and
 - h) Scrutinising adult care services that are of concern to local people.

9. The Committee will set its own work programme. The main task of the Committee will be to scrutinise the planning, provision and operation of NHS health services and to scrutinise the performance of the Council's adult social care services that are provided to people in Telford & Wrekin. However, Members can look at any other issues within these service areas. The following points should be taken into consideration when considering the work programme each year:
 - ☐ Areas where significant change is proposed and the potential impacts;
 - ☐ Performance in areas where significant change has been implemented;
 - ☐ Areas of financial overspend;
 - ☐ Areas receiving a high level of budgetary commitment;
 - ☐ Areas where there is a high level of user dissatisfaction;
 - ☐ Reports and action plans produced/agreed with external inspectors;
 - ☐ Areas that are key issues for the public or have become a public interest issue covered in the media.
10. The Committee will consider matters referred by the Scrutiny Management Board, and will exercise discretion as to whether a suggestion falls within the remit of the Committee to scrutinise.
11. Following scrutiny of any proposals which constitute a substantial development or substantial variation in the provision of health services, to make recommendations to Full Council on the exercise of powers of referral to the Secretary of State.

Meeting Administration and Proceedings

12. The Committee procedure rules as set out in the Council's Constitution apply to this Committee.
13. The meetings will follow the principles of scrutiny ie no party whip will be applied and a constructive, evidence based approach will be used.
14. If the Chair and Vice Chair (if appointed) are unable to attend a meeting the Members present will elect a Chair for the meeting.
15. The meetings will be administered by Scrutiny Services and Democratic Services. Frequency of meetings will be agreed by Committee members as deemed necessary to carry out the work programme.
16. Scrutiny Committee meetings will be held in public, unless matters exempt under legislation is being discussed, or the Scrutiny Committee is meeting with vulnerable groups to hear their views and it is not appropriate for these meetings to be open to the public. The Scrutiny Committees may appoint subgroups to carry out investigative work as part of a review, and these may be held as informal meetings, but evidence gathered in this way will be brought back to the overseeing Committee in a public forum. In case of dispute, the Monitoring Officer will advise on the rules of exemption.

17. Relevant Cabinet Members, Executive Directors, Directors and Service Delivery Managers and representatives from NHS commissioners and providers will attend the Committee at the request of the Chair. Representatives from partner organisations may be invited to attend.

Sensitive and Confidential Information

18. From time to time members, as part of the work of the Committee, may become privy to information of a sensitive or confidential nature, if this happens members must maintain this confidence. Members are unable to request personal/confidential information from Officers about an individual or family.

Reporting Arrangements

19. The Chair will provide regular updates to meetings of the Scrutiny Management Board to inform the other Scrutiny Chairs of performance and budget issues relating to the remit of their Committees.
20. The Chair of the Committee, or his/her representative, will provide and present reports and recommendations of the Committee to the Council's Cabinet, Full Council or other partner organisation when necessary.

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Health Scrutiny Committee

Thursday 9 October 2025

Health Scrutiny Work Programme 2025/26

Cabinet Member:	Cllr Zona Hannington – Cabinet Member: Finance, Governance & Customer Services
Lead Director:	Anthea Lowe – Director: Policy & Governance
Service Area:	Policy & Governance
Report Author:	Paige Starkey – Senior Democracy Officer (Scrutiny)
Officer Contact Details:	Tel: 01952 380110 Email: Paige.Starkey@telford.gov.uk
Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	Health Scrutiny Committee – 9 October 2025

1.0 Recommendations for decision/noting:

1.1 It is recommended that the Health Scrutiny Committee:

- a) Review and agree the work programme as outlined at Appendix A.

2.0 Purpose of Report

2.1 To set the work programme for the Health Scrutiny Committee as outlined at Appendix A.

3.0 Background

3.1 Scrutiny now operates a two-year work programme to allow for Committees to undertake in-depth work over a longer period of time.

- 3.2 Work programmes for Scrutiny committees are reviewed annually, with a period of consultation taking place in the months running up to a new municipal year. The public, key stakeholders, and Council officers are asked to put forward scrutiny suggestions for inclusion on the coming year's work programme.
- 3.3 Following the consultation period, a draft work programme is taken to Scrutiny Management Board for comment before being sent onto individual committees for final approval.
- 3.4 The Constitution states that Scrutiny committees are to set and undertake their own programme of work, meeting as required to deliver the work programme.
- 3.5 Work programmes can be amended throughout the year if the Committee or Scrutiny Assembly deem it necessary.

4.0 Summary of main proposals

- 4.1 For the Health Scrutiny Committee to review and approve the draft work programme as outlined at Appendix A.

5.0 Alternative Options

- 5.1 There are no alternative options arising from this report.

6.0 Key Risks

- 6.1 There are no key risks arising from this report.

7.0 Council Priorities

- 7.1 A community-focussed, innovative council providing efficient, effective and quality services.

8.0 Financial Implications

- 8.1 There are no financial implications arising from this report.

9.0 Legal and HR Implications

- 9.1 The Local Government Association state that the role of scrutiny is to achieve positive outcomes for local people by undertaking a thorough, targeted examination of the Council's service provision and procedures. Therefore, it is important to undertake work programming which can be done at the beginning of each year
- 9.2 In accordance with the Committee's Terms of Reference, the Committee will set its own work programme for the municipal year, will consider matters referred to it by

the Scrutiny Management Board, and may make recommendations to Cabinet and Full Council following scrutiny.

9.3 The proposals contained in this report can be delivered using existing resources.

10.0 Ward Implications

10.1 There are no ward implications arising from this report.

11.0 Health, Social and Economic Implications

11.1 There are no health, social and economic implications arising from this report.

12.0 Equality and Diversity Implications

12.1 There are no equality and diversity implications arising from this report.

13.0 Climate Change, Biodiversity and Environmental Implications

13.1 There are no climate change, biodiversity and environmental implications arising from this report.

14.0 Background Papers

1 Council Constitution

15.0 Appendices

A Health Scrutiny Committee Work Programme 2025/26

16.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal Services	19/06/2025	20/06/2025	SH
Finance	19/06/2025	25/06/2025	MLB

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Issue / Topic	Brief Description	Directorate	Council Values/Priorities	Format	Meeting Comments
9 October 2025 – Committee Meeting					
Terms of Reference	For the Committee to agree the Terms of Reference for 2025/26.	Policy & Governance	A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	Constitutional Function.
	Outcomes:				
Work Programme	For the Committee to agree the proposed work programme for 2025/26.	Policy & Governance	A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	Draft work programme delegated to each scrutiny committee by SMB on 19 June 2025.
	Outcomes:				
Mental Health Strategy/Calm Cafes	For the Committee to review the current provisions for mental health support across the Borough for children, young people and adults.	Adult Social Care Public Health External	Every child, young person and adult lives well in their community A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item/Workshop	Continuation of previous years' work. Cross-cutting with members of CYP Scrutiny.
	Outcomes:				



Healthwatch Telford and Wrekin Veterans Health and Wellbeing Survey	For the Committee to receive an update on the findings of the recent Veterans Health and Wellbeing Survey.	Public Health External	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	New suggestion received for work programme.
	Outcomes:				

Issue / Topic	Brief Description	Directorate	Council Values/Priorities	Format	Meeting Comments
11 December 2025 – Committee Meeting					
Review of actions following CQC inspection of Adult Social Care	For the Committee to monitor the programme of the action plan following the CQC assessment into Adult Social Care services.	Adult Social Care	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	Recommendation from Cabinet for Scrutiny to have oversight and monitor progress of the action plan.
	Outcomes:				
Primary Care – GP Access	For the Committee to receive an update on the work that has been undertaken with GP surgeries to improve GP access.	Public Health External	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	Recommendation from Health & Wellbeing Board.
	Outcomes:				

Issue / Topic	Brief Description	Directorate	Council Values/Priorities	Format	Meeting Comments
5 March 2026 – Committee Meeting					
NHS 10 Year Plan	For the Committee to receive an update on the proposals for the NHS 10 year plan and its impact on improving healthcare outcomes for residents.	Public Health External	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	New suggestion received for work programme.
	Outcomes:				



Issue / Topic	Brief Description	Directorate	Council Values/Priorities	Format	Meeting Comments
30 April 2026 – Committee Meeting					
To be determined.					
	Outcomes:				



Issue / Topic	Brief Description	Directorate	Council Values/Priorities	Format	Meeting Comments
To be scheduled					
Dentistry	For the Committee to receive an update on dental services and patient access.	Public Health External	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Committee Agenda Item	Carried forward from 2024/25.
	Outcomes:				
Pharmacy Needs Assessment	For the Committee to review the local Pharmaceutical Needs Assessment (PNA) to assess if it reflects the needs of the local community.	Public Health External	Every child, young person and adult lives well in their community. A community-focussed, innovative council providing efficient, effective and quality services.	Workshop	New suggestion received for work programme.
	Outcomes:				

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Telford & Wrekin Mental Health Strategy

Update for Scrutiny

Steph Wain, Commissioning Specialist, Adult Mental Health
Harpal Bhamra, Commissioning Specialist, Childrens Mental Health

October 2025

Progress so far:

- ASC spoken to c100 people
- CYP spoken to c70 people including young people, care leavers and family / carers & representatives
- Secured feedback from Partnership Board members
- Experts By Experience Sub Group developed to ensure strategy is led by experience
- Utilising previous consultations & local research e.g. Carers Strategy, CAMHS, Energize Survey
- Draft in development
- Communications plan in development for consultation & final publication including:
 - Communications pack drafted
 - local images
 - videos showing personal stories / progress & highlighting local services
 - videos demonstrating importance and outcomes from involving experts by experience
- Mapped out approval process & identified dates for Boards etc

Tentative timetable:

End of the year:	1 st draft prepared
Jan – March:	First draft approval ready for consultation period
April – June:	Consultation Period
July – August:	Amends based on feedback and sign off / launch

Emerging Themes:

- Early help and criteria
- More peer support
- Criteria free support – more safe spaces to be around others who are experiencing similar issues
- Accessible Info - timetable of activities
- Improved advice and guidance – reduce reliance on technology
- Visible services – delivered in communities
- Communication between services – stop making people repeat their story – a MH Passport?
- Access to respite / breaks
- More evening and weekend support
- Place based support – in communities and homes
- Increased community outreach
- Visible services
- Increased family support
- No closure due to lack of engagement – more flexibility around delivery – trauma informed!
- More training on MH to voluntary sector organisations whose main role is not MH
- More intergenerational work
- Better MH offer for over 65's

The Mental Health Bill: Brief Summary

Introduced in the House of Lords on 6 November 2024.

Aims to modernise the Mental Health Act 1983. Focus on ensuring patients are central to decisions about their care and treatment.

The bill includes:

New detention criteria. This will specifically address detentions for people with learning disabilities and autism, who are currently often placed in mental health hospitals without community care. Can only be detained if they have a “co-occurring psychiatric disorder”

Nominated person. To enable people to nominate a person to represent their views rather than next of kin.

Independent Mental Health Advocacy to (IMHA): All formal patients will be automatically referred to IMHA services. Impact on LA as we commission this service.

Significant lobbying (including by T&W Council) about certain proposals have been effective – Act had suggested health and care professionals take on the police powers around s136 removal of people to a place of safety. This has been removed from the Bill.

The Act's full implementation will be staged. Duties likely to start 2026/27. Full implementation possibly taking up to 10 years.

Next Steps:

Session booked with commissioners from childrens MH, adult MH and health to progress the first draft

Understand impact of the Mental Health Bill

Finalise appointments for Boards to secure sign off prior to consultation

Consultation Period (will explore opportunities to align with other consultations to minimise survey fatigue)

Partnership Board will oversee the strategy implementation & develop

Options for Scrutiny Committees' Input:

1. Feedback from today will inform the first draft
2. Consultation Phase: Support the promotion of the consultation. Return to Scrutiny Committee for formal comment as part of this phase?
3. Monitor the impact of the strategy when launched.

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Telford & Wrekin Calm Cafes

Steph Wain, Commissioning Specialist, Adult Mental Health, Telford & Wrekin Council
Gemma Coulman-Smith, Operations Manager, Telford Mind

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Telford & Wrekin
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Agenda Item 9



“Providing non clinical crisis interventions in the community”



A partnership approach – one team
Includes Social work & Telford Mind as constant partners



One set of paperwork!



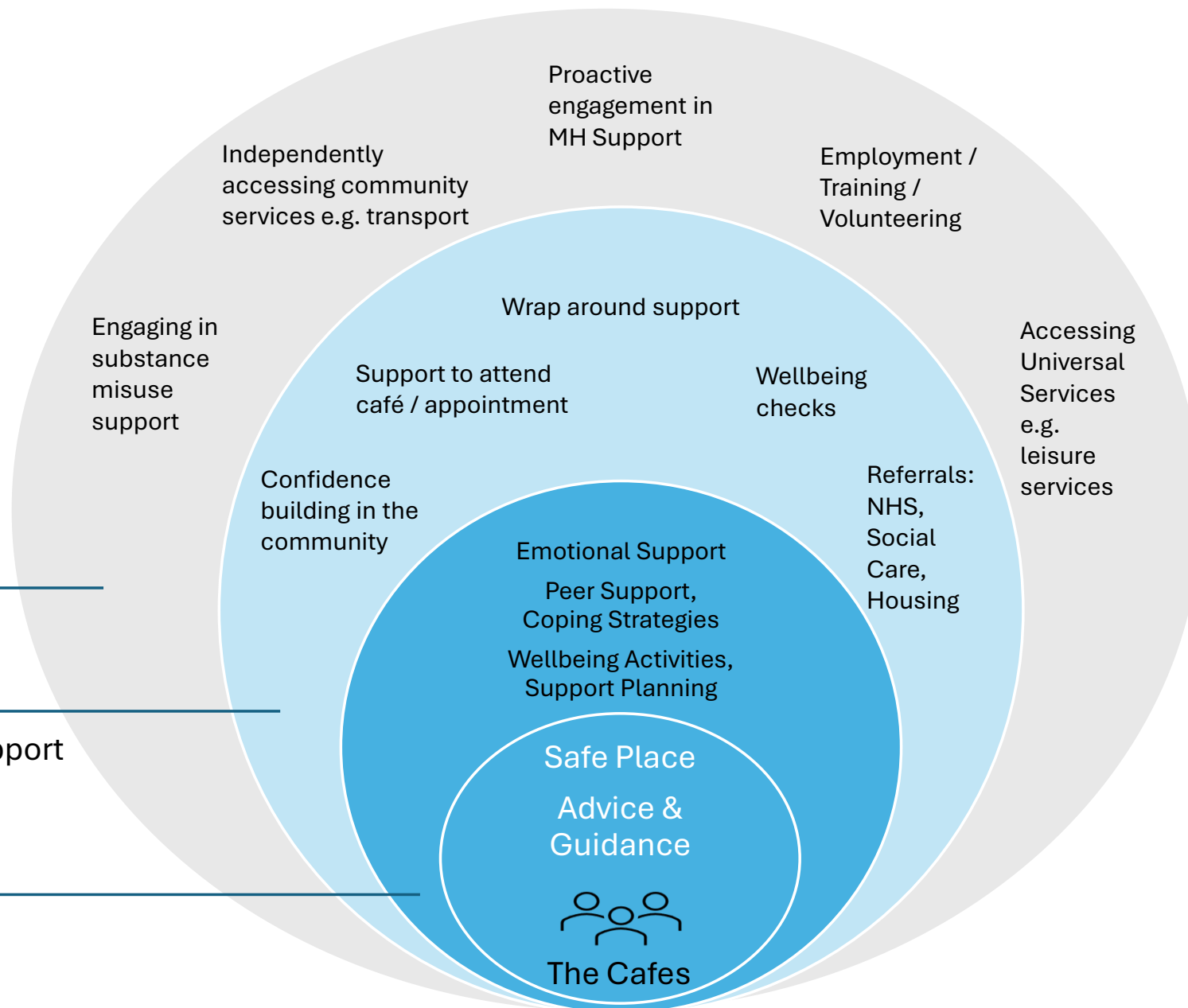
Open access – community locations & with wrap around support



NHS funded



Aim: to reduce demand on statutory services



Mon	Tues	Wed	Thurs	Fri	Sat
Calm Cafe 5-7.45pm Oakengates	Calm Cafe 5-7.45pm Donnington	Calm Cafe 5-7.45pm Sutton Hill	Calm Cafe 5-7.45pm Meeting Point House		
Page 34				Dual Diagnosis (Substance Misuse) Calm Café 5-8pm	Dual Diagnosis (Substance Misuse) Calm Café 1-4pm
		18-25 Calm Café (opening soon!) 1 – 3pm Dawley	18-25 Calm Café (opening soon!) 5-7.45pm Meeting Point House		
Veterans Café 2 nd & 4 th of the month 2-4pm Dawley		Veterans Café 1 st & 3 rd of the month 4-6pm Donnington			

Q1 Calm Café

77 people attended – 685 interactions of support

26% new people

74% returning for further support

40.8% are self referrals

A high proportion report suicidal ideation as a reason for attending, along with anxiety.

Majority who attend are 20 – 29 yrs or 55 – 59 yrs.

25% between 18 & 29 years.

51% are male

Q1 Dual Diagnosis Calm Café

44 people attended - 231 interactions of support

36% new people

64% returning for further support

50% are self referrals

A high proportion report substance misuse and alcohol as a reason for attending.

40% of those who attend are 45 – 54 yrs

75% are male

Majority of attendees are white males.

Onwards referrals are made to support holistic needs: Citizens Advice (money matters), social prescribing, floating support (Trident).

For many who attend – the first step is about gaining trust from which they will then consider a wider range of support.

Informal feedback is that people value the open access nature and community bases.

Mr Z was initially referred to the Calm Café by his Social Worker.

He attends with a family member for support.

Mr Z has previously maintained employment but due to his mental health he is no longer able to work. Mr Z reports that he struggles to socialise with others.

Mr Z engages with the Calm Café Social Worker and has had support to engage with volunteering activities as well as discussing issues related to self-care.

The team observed that Mr Z's personal hygiene and self-care had dipped over a period of time, affecting his self-confidence. The social worker noticed that some of his clothes were becoming old and worn, and he was wearing the same clothing most days.

Peer support workers agreed with the social worker that they would meet with Mr Z and support him to go shopping to get some new clothes. Peer support Workers spent time helping him choose clothing items and keeping to a suitable budget.

Staff have noticed a difference in Mr Z's confidence, and he is now engaging more with other users in the calm café. Mr Z's self-care also seems to have improved since this.

As a result of attending the Calm Café Mr Z has:

- Engaged in volunteering at Blists Hill
- Discussed courses and volunteering with Learn Telford
- Engaged in activities to increase coping mechanisms/techniques, meditation and mindfulness
- Increased confidence and self esteem

Next Steps for the Calm Café:

Formal transfer of commissioning responsibility to the LA (using a Section 256 Agreement)

- protect the funding for the term of the agreement

Launch the new Calm Café for 18-25 years olds

- to support young people transitioning to adulthood
- robust monitoring to ensure we evidence impact on people and system
- 1 year grant via Telford & Wrekin Integrated Place Partnership (TWIPP)

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Take Stock Session & Review

- how can we make sure we continuously improve
- recently secured bus passes for the team to use to support people in the community
- explore the “wish list” to promote recovery and independence e.g. access to leisure & community facilities, explore scope for Learn Telford literacy courses for example to delivered in safe spaces, Food Hygiene training

Members of the Committee would be welcome to attend the Café & gather feedback

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