



Social Care and Health Overview & Scrutiny Committee

Meeting to be held on: **28th January 2021 AT 6.00 P.M.**

Meeting to be held via: **Microsoft Teams**

Public access to meeting via: <https://youtu.be/aki4jwrqgks>

MEMBERSHIP:

Councillor Hussain	(Chair)
Councillor Allen	(Vice-Chair)
Councillor Ali	
Councillor Clarke	
Councillor Coughlan	
Councillor Ditta	
Councillor Neville	
Councillor Rasab	
Councillor Robertson	
Councillor Sarohi	
Councillor Waters	

PORTFOLIO HOLDERS:

Health and Wellbeing	-	Councillor S. Craddock
Adult Social Care	-	Councillor R. Martin

Note: Walsall Council encourages the public to exercise their right to attend meetings of Council, Cabinet and Committees. Agendas and reports are available for inspection from the Council's Democratic Services Team at the Council House, Walsall (Telephone 01922 654767) or on our website www.walsall.gov.uk.

AGENDA

1.	Apologies To receive apologies for absence from Members of the Committee.	
2.	Substitutions To receive notice of any substitutions for a Member of the Committee for the duration of the meeting.	
3.	Declarations of interest and party whip To receive declarations of interest or the party whip from Members in respect of items on the agenda.	
4.	Local Government (Access to Information) Act 1985 (as amended) To agree that the public be excluded from the private session during consideration of the agenda items indicated for the reasons shown on the agenda (if applicable).	
5.	Minutes of the previous meeting To approve and sign the minutes of the meeting that took place on 26 th November 2020.	<u>Enclosed</u>
<u>Scrutiny</u>		
6.	Walsall Covid-19 Update To give an overview of the Covid-19 management response in Walsall.	<u>Enclosed</u>
7	Outpatient Service Redesign Provide an overview of the work undertaken to date in respect of outpatient service redesign in response to COVID 19.	<u>Enclosed</u>
8.	Stroke Pathway To review the outcomes of the service remodel.	<u>To Follow</u>
9.	Walsall Together Update To receive an update on the Walsall Together Programme.	<u>To Follow</u>
10.	Draft Revenue Budget Feedback and Draft Capital Programme 2021/22 to 2023/24 To consider the draft capital programme as reported to Cabinet on 9 December 2020, specifically in relation to capital schemes, and for feedback to be taken into account in the finalisation of the budget by Cabinet on 10 February 2021 for recommendation to Council on 25 February 2021.	<u>Enclosed</u>
<u>Overview</u>		
10.	Areas of Focus For the Committee to agree its areas of focus for the municipal year 2020/21.	<u>Enclosed</u>

11.	Forward plans To receive the Forward Plan of Key Decisions from Cabinet and the Black Country Executive Joint Committee, to identify any further matters, which Members feel, may benefit from scrutiny.	<u>Enclosed</u>
12.	Date of next meeting 8 th April 2021, 6pm. via Microsoft Teams.	

The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012

Specified pecuniary interests

The pecuniary interests which are specified for the purposes of Chapter 7 of Part 1 of the Localism Act 2011 are the interests specified in the second column of the following:

Subject	Prescribed description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain.
Sponsorship	<p>Any payment or provision of any other financial benefit (other than from the relevant authority) made or provided within the relevant period in respect of any expenses incurred by a member in carrying out duties as a member, or towards the election expenses of a member.</p> <p>This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Regulations (Consolidation) Act 1992.</p>
Contracts	<p>Any contract which is made between the relevant person (or a body in which the relevant person has a beneficial interest) and the relevant authority:</p> <p>(a) under which goods or services are to be provided or works are to be executed; and</p> <p>(b) which has not been fully discharged.</p>
Land	Any beneficial interest in land which is within the area of the relevant authority.
Licences	Any licence (alone or jointly with others) to occupy land in the area of the relevant authority for a month or longer.
Corporate tenancies	<p>Any tenancy where (to a member's knowledge):</p> <p>(a) the landlord is the relevant authority;</p> <p>(b) the tenant is a body in which the relevant person has a beneficial interest.</p>
Securities	<p>Any beneficial interest in securities of a body where:</p> <p>(a) that body (to a member's knowledge) has a place of business or land in the area of the relevant authority; and</p> <p>(b) either:</p> <p>(i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or</p> <p>(ii) if the share capital of that body is more than one class, the total nominal value of the shares of any one class in which the relevant person has a beneficial interest exceeds one hundredth of the total issued share capital of that class.</p>

Schedule 12A to the Local Government Act 1972 (as amended)

Access to information: Exempt information

Part 1

Descriptions of exempt information: England

1. Information relating to any individual.
2. Information which is likely to reveal the identity of an individual.
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information).
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under, the authority.
5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings.
6. Information which reveals that the authority proposes:
 - (a) to give any enactment a notice under or by virtue of which requirements are imposed on a person; or
 - (b) to make an order or direction under any enactment.
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.
8. Information being disclosed during a meeting of a Scrutiny and Performance Panel when considering flood risk management functions which:
 - (a) Constitutes a trades secret;
 - (b) Its disclosure would, or would be likely to, prejudice the commercial interests of any person (including the risk management authority);
 - (c) It was obtained by a risk management authority from any other person and its disclosure to the public by the risk management authority would constitute a breach of confidence actionable by that other person.

Social Care and Health Overview and Scrutiny Committee

Thursday 26th November 2020 at. 6.00 p.m.

Virtual meeting via Microsoft Teams

Held in accordance with the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020; and conducted according to the Councils Standing Orders for Remote Meetings and those set out in the Council's Constitution.

Present:

Councillor Hussain (Chair)
Councillor Allen (Vice-Chair)
Councillor Ali
Councillor Coughlan
Councillor Rasab
Councillor Robertson
Councillor Sarohi
Councillor Waters

Portfolio Holders Present

Councillor S. Craddock – Health and Well Being
Councillor R. Martin – Adult Social Care

Officers

Kerrie Allward	Executive Director, Adult Social Care
Karen Jackson	Director Social Care for Adults
Jennie Pugh	Group Manager, Adult Social Care
Tracy Simcox	Lead Commissioner, Adult Social Care
Suzanne Letts	Lead Accountant, Adult Social Care
Nikki Gough	Democratic Services Officer, Walsall Council

Matthew Dodds	Director of Operations for Community Services, Walsall Healthcare Trust
Aileen Farrer	Healthwatch Walsall representative

Welcome

At this point in the meeting, the Chair opened the meeting by welcoming everyone, and explaining the rules of procedure and legal context in which the meeting was being held. He also directed members of the public viewing the meeting to the papers, which could be found on the Council's Committee Management Information system (CMIS)

webpage. Members confirmed that they could both see and hear the proceedings.

09 /20 **Apologies**

Apologies for attendance were received on behalf of Councillor S. Ditta.

10/20 **Substitutions**

There were no substitutions for the duration of the meeting.

11/20 **Declarations of Interest and party whip**

A declaration of interest was received on behalf of Councillor B. Allen as an employee of Walsall Healthcare Trust.

12/20 **Minutes of the previous meeting**

The minutes of the meeting that took place on were discussed.

Resolved (by roll call)

That the minutes of the meeting held on, were agreed as a true and accurate record of the meeting.

13/20 **Adult Social Care COVID 19 Action Plan and Combined Winter Plan**

The Head of Service spoke to the report and highlighted the salient points (annexed). The Committee were informed that a single Covid-19 Winter Plan for Adult Social Care and Health had been created.

Those highest risk areas, within the winter plan, were described. As part of Walsall Together, regular meetings of the partnership were held. There was an escalation process to support care homes with additional focused support provided from the 'Quality in Care Team' to care homes.

A Member clarified the number of vacancies within care homes in Walsall, the committee were informed that there was significant capacity within the market however not all care homes were able to meet the requirements to be 'designated settings'.

Officers were asked why care teams were only able to operate at 50% staffing capacity over the Christmas period. Members were reassured that this was a planned position to ensure that capacity met the trend of demand, which was often reduced during the Christmas week. Members were also assured that there were back up arrangements if there were increased pressures to ensure adequate staffing to meet demand.

A winter pressures grant to establish a mechanism to support residents who were discharged from hospital (without family support) was discussed and Members asked for detail of the support that would be provided to volunteers. The Committee were advised that this was in the very early stages of planning and stated that comments would be fed back to those planning the service. A Member noted that consideration should be given to those Walsall residents who had been discharged from New Cross Hospital.

Resolved that

The Adult Social Care COVID 19 Action Plan and Combined Winter Plan be noted.

14/20

Corporate financial performance – Quarter 2 (Period 5 - August 2020) Financial monitoring position for 2020/21

The Lead Accountant introduced the report and highlighted the salient points. This report provided the budget monitoring position for Period 5, 2020/21.

The current net revenue forecast position at Period 5 (August 2020), after the net use of reserves was an under spend of £0.407m. This was made up of Adult Social Care (£0.407m) and Public Health (on budget).

The financial support from national Government for Covid related costs was discussed. Officers stated that assumptions on future costs were continually being updated. The Executive Director stated that the Authority was not assuming or planning for the continuation of Covid related funds. In the future, this would create a pressure, and currently Covid funds were masking additional demand.

Resolved that

The Corporate financial performance – Quarter 2 (Period 5 - August 2020) Financial monitoring position for 2020/21 be noted.

15/20

Draft Revenue Budget 2020/21 to 2023/24

The Executive Director spoke to the report and highlighted the salient points contained within (see annexed). Members were made aware that there were significant pressures on the directorate; however, significant efficiencies had been identified without affecting service delivery. This had been achieved through the Walsall Proud Programme and efficiencies in third party spend. People would be supported to be more independent and technology would be used to further support them. Income streams would also be maximised to ensure robust approaches to secure additional income.

The Committee were provided with further detail on the key proposals within the Adult Social Care budget. Members acknowledged that, the announcement in relation to the Better Care Fund, was historically late and this made planning difficult. It was also noted that the proposal '*P10 Charge self funders to arrange care via adult social care*' would now be progressed in the financial year 2022/23.

Following challenge in relation to – '*OP91 Reduction of day care funded by direct payments*' - the Committee were informed that the pandemic had provided opportunities for individuals to explore alternative options to traditional day care centres. In response to concern that, whilst individuals had adapted to alternative options during the pandemic, people may be keen to return to their normal activities. The Committee were provided with reassurance that individual needs and preferences would be assessed through their support plans.

Members also sought clarification on '*OP97 Review of all resources including Goscote and shared lives*'. The Committee were provided with clarification that resources would be reviewed to ensure a focus on re-ablement activity; however, it was acknowledged that more traditional support would be needed by some individuals.

Resolved that (by roll call)

1. The Committee considered the draft revenue budget proposals relating to the remit of the Committee in order to formally report to the Cabinet on the policy proposals.
2. The Committee noted that consultation would be undertaken on all new 2021/22 policy proposals and that feedback would be presented to the Cabinet on 9 December 2020.
3. The Committee noted that further savings proposals would be presented to the Cabinet on 9 December 2020 in order for a balanced budget to be delivered by February 2021, and that these would be reported to a future meeting of the Committee for consultation.

16/20

Areas of Focus

It was noted that the 'outpatient review' would be added to the work programme. An update on the vaccination programme was provided and it was suggested that this was provided as an update to the Committee.

Resolved

That the areas of focus be noted.

17/20 Forward Plans

The Forward Plan of Key Decisions from Cabinet and the Black Country Executive Joint Committee were considered.

18/20 Date of the next meeting

The date of the next meeting was agreed as 28th January 2021.

Termination of Meeting

The meeting terminated at 7.08 p.m.

Name
Overview and Scrutiny Committee

Agenda
Item No.

26 January 2021

6

Walsall Covid-19 Update

Ward(s):

Portfolios: Cllr Craddock

1. Aim

To give an overview of the Covid-19 management response in Walsall.

2. Recommendations

That colleagues play their part in the Local Authority and Partner management response to Covid-19 in Walsall and support the government messages.

3. Report detail

There are a number of components in relation to the response to the Covid-19 pandemic in Walsall to date. This report will cover several of these including:

- Barometer (7 key performance indicator overview)
- Outbreaks
- Testing / access to
- Vaccinations
- Schools / care homes
- Hospital situation

The **barometer** offers an overview of the current situation based on five key performance indicators and their RAG ratings (the defined parameters agreed regionally).

All KPIs are rated as RED due to the surge in positive cases, trends and exceedance; the increase in positivity (the proportion of those tested who are positive) and the situation awareness of positive cases across the borough.

There are also two supplementary indicators offering an acute perspective in terms of inpatient numbers and critical beds occupied, both of which have increased.

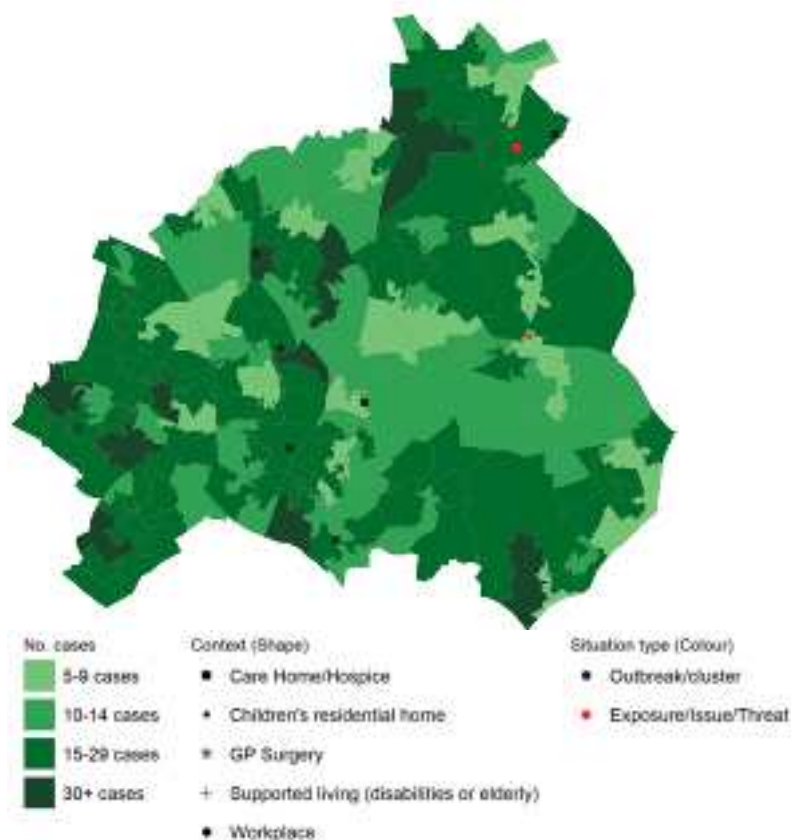
	KPI	Latest Data	Comments	Source
1	7 day incidence	2,220 Cases (29 th Dec to 4 th Jan)	Walsall's cases are INCREASING	PHE Line List (last refreshed 6 Jan) <i>Note the net 14 days are subject to reporting delays</i>
2	7 day rate trends		The rate is currently at 578 per 100,000 population (a significant 85% increase compared to the previous week) (Each bar represents a rate for positive cases over 7 days; the date range for the rate is always earlier than for the case count in KPI 1 due to reporting delays)	PHE Daily Report (last refreshed 6 Jan)
3	Exceedance RAG rating	RED 80/12/20 81/12/20 01/01/21 02/01/21 03/01/21 04/01/21 05/01/21	Walsall is flagged RED in 7 out of the last 7 exceedance reports. NOTE: Daily exceedance should be considered alongside other available indicators.	PHE Daily Exceedance Report (last refreshed 6 Jan)
4	PCR Positivity rate in last 14 days (pillars 1 & 2)	Pillar 1 = 13.1% Pillar 2 = 21% Pillar 1 & 2 = 19.8%	Pillar 2 for Walsall is 21%; compared with WMids (17%) and England (17.4%). NOTE: As of 18/12/2020; tests and positivity are based only on PCR testing	PHE LA Report (last refreshed 6 Jan)
5	Situation Awareness	RED	There continues to be community transmission and a range of exposures / outbreaks across the borough	Daily PHE line list mapping / PHE outbreaks & issues / PHE LA Report (last refreshed on 6 Jan)
6	Walsall Hospital NHS Trust inpatients		Total of 137 confirmed COVID-19 inpatients	Daily Trust Sitrep (last refreshed on 5 Jan)
7	HCU/ITU Occupancy		12 HCU/ITU beds being occupied due to COVID-19	Daily Trust Sitrep (last refreshed on 5 Jan)

The **outbreaks** / exposures currently occurring in Walsall continue to suggest a large proportion of residential dwelling transmission which the local Test & Trace team act upon as soon as data is received.

Mapped positive case data is monitored daily, with recent LSOA level map demonstrating the impact across the borough.

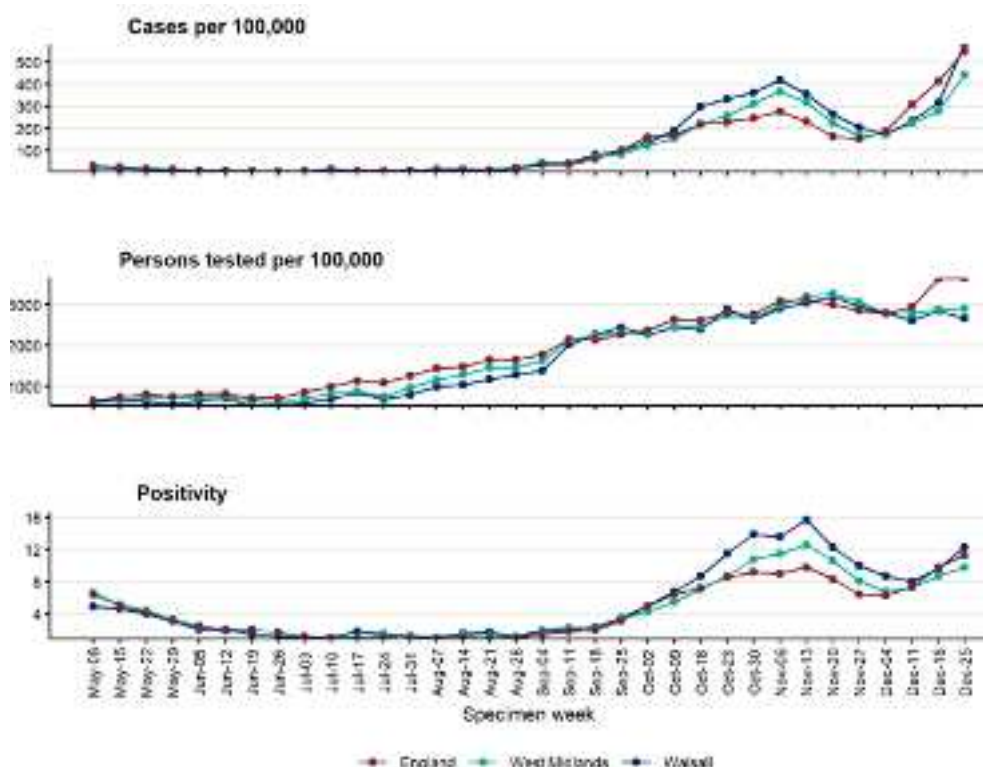
Pockets of high cases exists sporadically across the borough – for example parts of Willenhall South, Darlaston South, Pleck, paddock, Blakenall and Aldridge North & Walsall Wood. What is clear, is that no area is untouched.

Map of new Covid-19 cases from Pillar 1 and 2 testing by LSOA overlayed with new outbreaks / clusters in Walsall (past 14 days 22 December 2020 to 04 January 2021).



Source – PHE Daily LA report

In relation to **testing** in Walsall, data currently available is from PCT testing only which illustrates a slight reduction of Walsall residents taking up a test (compared to national and regional rates). The increase of positivity rates is also a concern.



There are currently three 'local testing sites' within the borough, located at Walsall Town Hall, Darlaston Community Centre and University of Wolverhampton campus. In addition, there is a 'mobile testing unit' currently located at Wakes Ground Car & Lorry Park in Willenhall.

With the release and availability now of the Covid-19 **vaccination**, 'Walsall Healthcare NHS Trust Vaccination Centre' has been operational since Tuesday 8th December 2020. Since then it has been:

- Working as part of Walsall Together Partnership which includes many of the PCNs
- 0800-2000 and expanding to 0700-2200 in January 2021
- Flow 500-600/Day stepping up to 1000-1200/Day as second doses required in early Jan 2021
- Updated national guidance issued 30 Dec 20 highlights updated scientific and political advice (strategic review on implications for Walsall underway)
- Capturing high risk/BAME NHS staff at Walsall, Wolverhampton, Sandwell, WMAS and key WBC Care Home and hospice staff. Looking to increase Over 80 in/out patients and then all other Hospital/WMAS staff
- Manor site remains as a frontrunner nationally with flow and numbers

Working within Walsall Together Partnership has seen:

- Walsall Local Authority support, including assessing community sites for vaccination centres
- Working with Oak Park Leisure centre to set up and go live as combined PCN/Walsall Together hub for East on Friday 8th January 2021

- Saddler Centre planning being prepared for mid Jan (TJ Hughes site) - awaiting date
- PCNs in East and South working with Walsall Together and Walsall Healthcare Community Division, going out to vaccinate in care home residents and some staff.

Focus on:

- Reviewing updated national guidance
- Sustaining operational model at Hospital Hub and Planning/Co-ordination Cell
- Rapidly operationalising Over 80 and Over 75 cohort pathways in hospital (in and outpatients)

As part of the response / management of Covid-19, schools and care homes have been a particular focus. The Public Health On Call Cell has been operational since the summer 2020, 7 days a week, 12 hours a day and has supported / advised / guided over 3,000 contacts, with the majority being from care homes and schools. Additional resource has been taken on to continue this dedicated service.

Contact details for this service – walsall.healthprotection@nhs.net (01922) 658065.

Finally, the impact of Covid-19 has / is having from an acute (**hospital**) perspective. The KPIs on inpatients and critical care bed occupancy have increased and although managing at present, the need for the national lockdown was precedent in order to help protect the NHS.

As a Local Authority, collaborative joint working will continue to ensure the best possible outcomes for Walsall residents.

4. *Financial information*

Funding for response to the Covid-19 pandemic is supported by a grant of £1.3m. Further funding is also provided by government for those residents who are Clinically Extremely Vulnerable (CEVs).

5. *Reducing Inequalities*

The impact on Walsall residents as well as staff Covid-19 has had continues, however there will come a time where it will diminish and the learning from this pandemic can be put into perspective. Some of this work, such as the recent resident survey and the enablement of remote working is already taking place.

In addition to responding to this pandemic, the organisation continues to work hard on reducing inequalities in Walsall be that through the refresh of the Joint Strategic Needs Assessment (JSNA) to identify focussed priorities; through other corporate strategies such as the Corporate Plan and through the transformation work.

6. Decide

Response to the pandemic continues with a Partnership approach. The pace of increased cases at present (locally within Walsall, but across the country as a whole) has led to a management approach as opposed to a containment approach. Those key organisations and Partners continue to meet weekly as part of IMT to work collaboratively and will continue to do so at present.

There are also weekly Outbreak Plan meetings involving a broad range of colleagues across the Local Authority and Walsall Healthcare NHS Trust. These meetings have a core agenda and cover - Business insight, risks, schools, local businesses, care homes, regulatory services, local test and trace and communications.

Regular meetings across the region also assist with future decision-making.

7. Respond

As individuals, we all have a responsibility and can do our part, however small. The message of “hands, face, space” is imperative.

The Local Outbreak Engagement Board (LOEB) (a sub group of the Health and Wellbeing Board) meets regularly to discuss core Covid-19 related matters and questions are encouraged from members of the public. The meeting can also be watched live through YouTube. The next one is 19 January 2021.

8. Review

Covid-19 is reviewed regularly through a vast number of avenues and throughout the hierarchy of the organisation.

Key general information is available on the Walsall Council website - [HERE](#) with subsections covering FAQs as well as weekly refreshed data.

Background papers

Key links to Covid-19 related intelligence include:

- [Walsall Council](#)
- [gov.uk website](#)

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Outpatient Service Redesign

Presented by:

Mr Geraint Griffiths-Dale, Walsall Managing Director, Black Country STP Elective Care Lead, Black Country & West Birmingham CCGs
Mr Daren Fradgley, Executive Director of Integration, Walsall Healthcare NHS Trust.

Ward(s): All

1. Aim

The aim of redesigning outpatient services is to ensure that the people of Walsall have access to specialist health services that are delivered through a sustainable operating model, closer to home, that improves patient outcomes and experience whilst ensuring the most effective use of system resource.

2. Recommendations

For information and feedback.

Members are asked to:

- Discuss the contents of the report particularly in respect of patient and public engagement.

3. Report detail

Introduction

3.1 The purpose of this report is to:

- Provide an overview of the work undertaken to date in respect of outpatient service redesign in response to COVID 19 (phase one);
- Inform members of the proposal for future outpatient service transformation (phase two) and next steps to enable full and robust patient and public engagement and co-design.

Outpatient Service Redesign – Phase One

3.2 The first wave of the COVID 19 pandemic created an urgent need for elective and outpatient activity to be dramatically reduced or postponed to reduce foot fall within the hospital, reduce transmission of the virus and so that

resource could be re-directed to deal with the expected surge in emergency in patient demand associated with COVID 19.

3.3 Walsall Healthcare NHS Trust identified that many of the actions it would seek to implement to redesign outpatient services in response to COVID 19, were broadly aligned to the required future state for outpatient transformation as set out in the Walsall Together business case. This subsequently led to development of a new operating model for delivery of outpatient services which significantly reduced face to face outpatient demand by utilising virtual and telephone consultation methods and initial roll out of Advice and Guidance (A&G) and Referral Assessment Services (RAS) to support referral optimisation.

3.4 At the beginning of April 2020, Walsall Healthcare NHS Trust led a programme of work to rapidly redesign the delivery of outpatient services. A project team was established to implement a safe and consistent approach to managing existing and new referrals for two week waits, urgent and routine, through a process of clinical triage to determine the best course of action for the patient e.g. face to face appointment / virtual consultation / or appropriate discharge with advice and guidance to the GP.

3.5 The Outpatients Redesign Clinical Task and Finish Group was also established to provide primary and secondary care clinical oversight of the redesign work. It also provided a forum to enhance the interface between primary and secondary care. This was phase one of outpatient redesign.

Outpatient Service Redesign – Phase Two

3.6 From the 1st April 2021, outpatient services will transfer to Walsall Healthcare NHS Trust's community contract and will therefore formally come within the scope and governance of the Walsall Together Integrated Care Partnership (ICP).

3.7 A programme of outpatient transformation will be planned, developed and implemented to align with the Walsall Together ICP strategic objectives, the NHS Long Term Plan, Black Country STP Elective Care Transformation Plan and priority population health needs identified for the borough of Walsall. This is phase two of outpatient redesign.

3.8 The planning, development and implementation of phase two will be a collaborative approach with all partners across the system. Most importantly, this will include engaging with, and working with the people and communities of Walsall to redesign outpatient services to meet their needs, provide better care and outcomes, whilst improving patient experience and reducing inequalities. This will include working with vulnerable and seldom heard groups, working closely with the voluntary sector, local community groups and existing patient forums.

3.9 To date, discussions are underway across the Trust's specialty divisions to begin to scope priority specialties and services for piloting new models of delivery.

3.10 One such example is the community Nephrology service pilot, to deliver Chronic Kidney Disease (CKD) services differently across Walsall through development of a cohesive, integrated primary and secondary care pathway for patients with CKD.

This aims to achieve early intervention and prevention, detection and management of CKD through a mixed model of remote and direct clinics, Multi-Disciplinary Team working with the Consultant, the patient's GP and other specialists, remote monitoring and proactive self-care.

3.11 Within the wider context, the CKD pilot is an example of outpatient transformation which aligns with Walsall Together ICP strategic objectives and with Primary Care Network population health need priorities. The CKD pilot will be developed and implemented through a programme management approach supported by Walsall Together Programme Management Office. The approach to implementing this model of care could be utilised as a homogenous approach/model for implementing wider outpatient transformation across other specialties.

Patient Engagement and Participation - Where we are now

3.12 It is acknowledged that phase one of outpatient redesign was rapidly introduced in response to the pandemic, where patient safety in managing existing and new referrals was paramount. Consequently, very limited patient engagement was undertaken during this phase. Mechanisms were put in place by Walsall Healthcare NHS Trust to obtain patient feedback in relation to virtual and telephone consultations, however the feedback response rate from patients was low.

3.13 Appendix one provides a high level summary of feedback and patient experience of virtual outpatient consultations during the period of August to October 2020. The summary shows that whilst some positive feedback was received there is evidence that patient experience of virtual consultations could be significantly improved. This will provide valuable feedback to inform further outpatient redesign.

Patient Engagement and Participation - Next Steps

3.14 A core patient engagement oversight group has been established that will support and oversee patient engagement across outpatient transformation as a generic piece of engagement. The group will also inform and signpost to relevant community groups to enable condition, cohort and service specific engagement. Membership includes key stakeholders across the system such as Walsall Healthcare NHS Trust, Healthwatch, CCG, One Walsall and Walsall Together.

3.15 More broadly, there is significant opportunity to enhance the potential reach of our engagement partners. Healthwatch are commissioned by Walsall Together to provide dedicated resource to outpatient's engagement. There is also work currently underway by CCG engagement leads to create a single engagement model for Walsall through which outpatient's engagement can be strengthened.

3.16 An Equality Impact Assessment will be completed, led by the Trust, to inform which service users/communities/protected characteristics outpatient transformation may impact upon and this will be used to inform the engagement plan and outpatient transformation more widely. A Quality Impact Assessment was undertaken by the Trust during phase one which highlights the fact that the outpatient changes made during this phase were made rapidly in response to COVID 19, where the priority was to ensure patient safety and quality of care. However, we need to ensure the impact of virtual consultations (and other planned outpatient changes) is assessed in terms of reducing inequalities. This assessment will be Trust led with support from the core oversight group with the aim to complete the first draft by February 2021.

3.17 Due to the ongoing challenges of COVID 19 and diversion of resource to prioritise supporting mass vaccination, it is proving very challenging to progress this work. The group will meet again in February to begin drafting a framework for outpatient engagement (including governance requirements) from which a more detailed plan can be developed. However, the impact of COVID 19 cannot be underestimated, and as such, there is a risk that the detailed planning work will not be sufficiently developed to enable meaningful reporting back to the Committee much before April.

4. Financial information

4.1 Financial implications and risks will be further analysed and assessed as part of developing and commissioning outpatients as part of the ICP contract.

5. Reducing Inequalities

5.1 The planning, development and implementation of outpatient redesign will promote equality and reduce inequalities in health through:

- Full and robust patient and public engagement and participation in the programme of redesign to understand the needs of the population and of those who experience the greatest inequalities and proactively incorporate these needs into the redesign process.
- Improved access to specialist services by new ways of working, for example, delivering outpatient clinics in community settings that are closer to people's homes; improving pathways of care between primary and specialist care.
- Redesign of outpatient services that are person/patient centred that proactively enables a personalised care approach, such as patient choice, supported self-management and shared decision making.

6. Decide

Discuss the contents of the report in respect of:

- Current position relating to outpatient patient and public engagement (phase one) and;
- Proposed next steps for patient and public engagement (phase two).

7. Respond

Feedback from members is requested to inform future outpatient patient engagement work.

8. Review

Propose to update the committee on further developments and progress against plans at a future date for Overview and Scrutiny Committee.

Background papers

N/A

Author

Louise Jones

Senior Commissioning Manager, Walsall Clinical Commissioning Group

louise.jones24@nhs.net

WHT Improvement Programme Core Team Meeting – Care at Home		AGENDA ITEM: Dec 2020	
Report Author and Job Title:	Improvement Programme Manager	Responsible Director:	Daren Fradgley
Action Required	Approve <input type="checkbox"/> Discuss <input type="checkbox"/> Inform <input checked="" type="checkbox"/> Assure <input checked="" type="checkbox"/>		
Executive Summary	<p>The Friends and Family Test (FFT) is an important feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience. Listening to the views of patients and staff helps identify what is working well, what can be improved and how.</p> <p>Friends and Family (FFT) Feedback for Out Patient appointments has been collated and a high level analysis has been undertaken of the data to assess the patient experience of virtual appointments conducted over a three month period.</p> <p>Analysis shows that patients are increasingly more likely to recommend our services (rating of 1 -3) in October than in previous months in relation to their virtual consultation.If we are to continue to embed virtual consultations as part of our normal consultation medium post the COVID pandemic, we need to ensure that we understand what our patients expect and ensure our processes meet these expectations.</p>		
Recommendation	Trust Board members are asked to note the contents of this paper.		
Does this report mitigate risk included in the BAF or Trust Risk Registers? please outline	None applicable		
Resource implications	There are no resource implications associated with this report.		
Legal and Equality and Diversity implications			
Strategic Objectives	Safe, high quality care <input type="checkbox"/>	Care at home <input checked="" type="checkbox"/>	
	Partners <input type="checkbox"/>	Value colleagues <input type="checkbox"/>	
	Resources <input type="checkbox"/>		

Outpatient Virtual Consultation – High Level Summary

Background

The Friends and Family Test (FFT) is an important feedback tool that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience. Listening to the views of patients and staff helps identify what is working well, what can be improved and how.

Friends and Family (FFT) Feedback for Out Patient appointments has been collated and a high level analysis has been undertaken of the data to assess the patient experience of virtual appointments conducted over a three month period. This is presented below.

Analysis

Data is available from January 2020, however the response rate has been variable given the COVID pandemic and change in services. The responses cover all outpatient services and all Specialities, including AHP services. The table below shows the number of responses to FFT from January to July 2020.

Table 1:

Month	Number of total outpatient responses
January	1442
February	1210
March	1096
April	403
May	1016
June	512
July	383

For the purposes of this update a high level analysis of August, September and October has been undertaken as this is where the 'new normal' started to be embedded. It is expected any learnings from the introduction of the virtual consultation in March at the beginning of the pandemic would have been introduced.

The table below shows the total number of responses in August, September and October 2020, and the number of these which relate to virtual consultations.

Table 2:

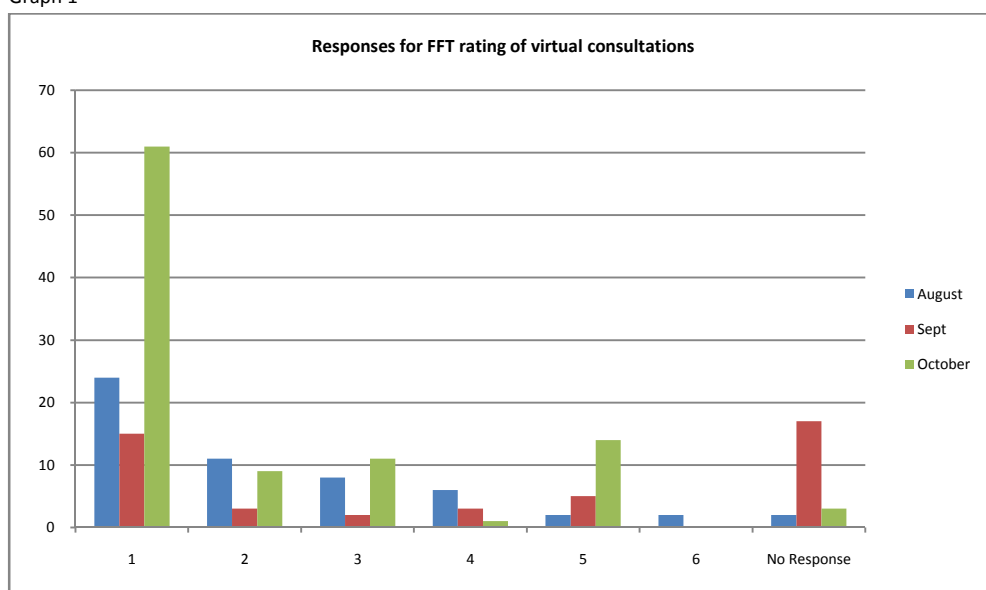
Month	Number of responses	Response related to virtual consultations	Percentage related to virtual consultation
August	546	55	10.1%
September	869	45	5.2%
October	1235	99	8.0%

The FFTasks respondents to rate the service / experience they had on a scale of 1 to 6, as to how likely they would be, based on their experience, of recommending our organisation as a place to be treated. The response fall into the following categories:

1. Very Likely
2. Likely
3. Neither Likely nor Unlikely
4. Unlikely
5. Very Unlikely
6. Don't Know

The following graph shows how patients rated their virtual consultation in each month.

Graph 1



The next 3 charts show the ratings as a percentage of the whole per month.

Chart 1

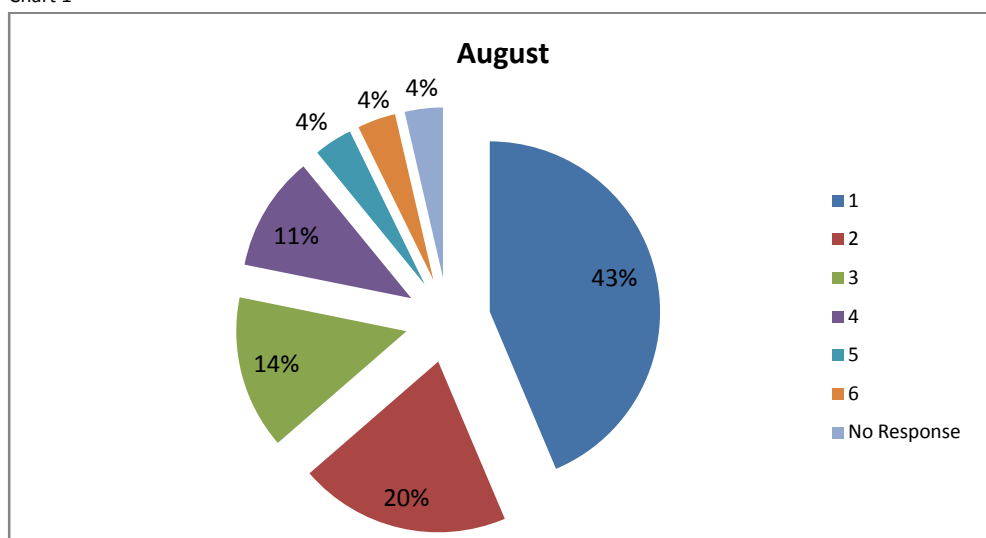


Chart 2

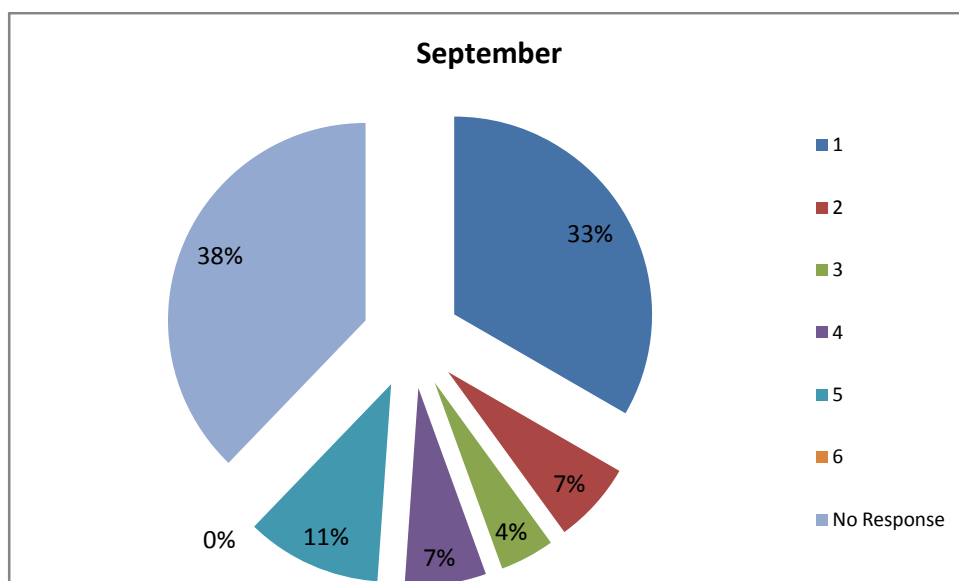
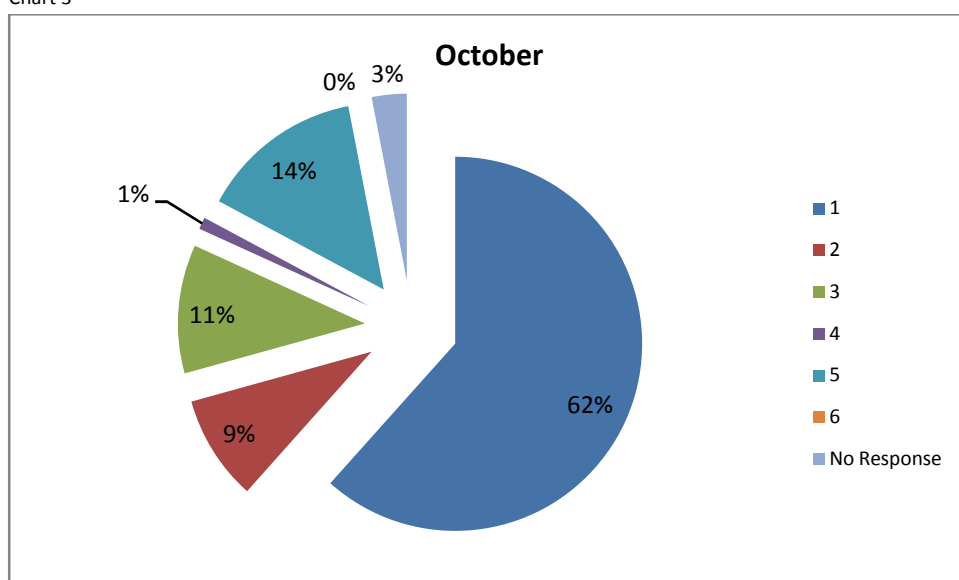


Chart 3



Findings

It should be noted that the data is from a limited period. Analysis shows that patients are increasingly more likely to recommend our services (rating of 1 -3) in October than in previous months in relation to their virtual consultation. However the percentage of patients rating the service as 5 or 6 has also increased from 8% in August, 11% in September to 14% in October.

There have been a number of comments in the free text responses submitted by FFT, some positive feedback is detailed below:

"Consultation by phone is always better in my opinion. Consultant had all of my info at hand and was precise and professional with the information."

"I thought my consultation was prompt and in depth it felt easier and more relaxed than a face to face. I was allowed opportunity to ask questions I was given plenty of time. It is good but shouldn't replace face to face completely as a good physician can pick up clues to help the diagnosis from the patients physical appearance"

"The call came on time. The Doctor is not the usual consultant but had obviously read all the notes and was aware of everything and knowledgeable on the condition. He told us that we were doing everything right and to carry on until hopefully when the pandemic is over we will be able to go to an appointment that has been postponed at QE. If we have any problems in the meantime to speak to the secretary to make a further appointment with him. A very acceptable consultation."

There were instances however, when we failed to get the pathway and process right for the patient.

"Well on the 3rd October we should have had a telephone appointment but no one rang from the hospital. On the 5th October the doctor rang but I was at work (after losing a day's pay on the 3rd) Then it was rearranged for the 29th October at 9:45. Again I waited in all day and no one called."

"They didn't call me. I gave you this very poor 5 because no one called me. I don't appreciate you asking me to be available for an hour and for nobody to call. Very disappointing"

"I was called while at work and on a call. I was more than happy to return the call but received a message to say my appointment would be re-arranged. They did not try to call again and I felt that as such my case did not matter to the doctors at all"

Conclusion

Overall, 123 patients rated their virtual consultation as either very likely or likely to recommend our service, which is 61.8% of the virtual responses we received through FFT. This means that 38.2% of our patients experience could be significantly improved. If we are to continue to embed virtual consultations as part of our normal consultation medium post the COVID pandemic, we need to ensure that we understand what our patients expect and ensure our processes meet these expectations.

Social Care and Health Overview and Scrutiny Committee

28 JANUARY 2021

Draft Revenue Budget Feedback and Draft Capital Programme 2021/22 to 2023/24

Ward(s) All

Portfolios: Cllr R Martin – Adult Social Care
Cllr S Craddock – Health and Wellbeing

Executive Summary:

The second budget report to Cabinet on 9 December 2020 includes feedback from this Committee on the draft budget plan as reported to Cabinet on 28 October 2020, along with a draft Capital Programme for the period 2021/22 to 2023/24.

The draft capital programme for 2021/22 totals £65.99m. It sets out new capital investment funded from the council's own resources of £28.17m (funded by capital receipts and borrowing) and externally funded schemes of £37.82m (funded by capital grants) and represents a balanced programme for 2021/22. In addition, the report sets out a further two years of indicative proposals to 2023/24.

Capital programme resources are limited. The financing for capital investment is heavily reliant on grants and funding received from the Government. The remaining flexibility is currently through capital receipts and borrowing. Capital receipts projections however are limited, and fully dependent on when council assets are sold.

This report provides an extract of the draft capital programme that relates to the services within the remit of the Social Care and Health Overview and Scrutiny Committee, split into 2 areas –

1. Council funded schemes – those schemes funded from the councils own resources (borrowing and capital receipts) – see **Appendix 1**. These include a refresh of the draft programme reported to Council in February 2020, along with additional schemes deemed as being high priority based on three categories (health & safety, council priority and unavoidable infrastructure). For 2022/23 onwards, the full impact of these projects will be reviewed, and funding revisited as part of the rolling annual budget process. There may be a number of schemes that will require match funding in year to secure external resources, which will be reviewed in year and funds drawn down as projects are confirmed.

2. Externally funded schemes – those schemes funded from grant or other external contributions – see **Appendix 2**.

Any additional receipts received in year (excluding those earmarked for specific schemes) will be considered to fund those projects on the reserve list. These are summarised at **Appendix 3**.

Walsall Proud Programme work streams will identify one off revenue and capital investment required to ensure the required savings are delivered. Regular Proud programme updates will be provided to Cabinet and Scrutiny, and the S151 Officer will report throughout the budget process on the robustness of budget estimates to ensure that a legally balanced 2021/22 budget is set in February 2021.

Feedback from this Committee on the content of this report will be reported back to Cabinet on 10 February 2021 prior to the recommendation of the final revenue and capital budget plan to Council on 25 February 2021.

Reason for scrutiny:

For Social Care and Health Overview and Scrutiny Committee to consider the draft Capital Programme as reported to Cabinet on 9 December 2020, specifically in relation to capital schemes that fall with services under the remit of this Committee, and for feedback to be taken into account in the finalisation of the budget by Cabinet on 10 February 2021 for recommendation to Council on 25 February 2021.

Recommendations:

That:

1. The Committee are recommended to consider the draft capital budget proposals attached that relate to the remit of this committee.
2. The Committee are asked to note that consultation continues on all revenue policy proposals previously reported, and that feedback will be presented to Cabinet on 10 February 2021, along with further revenue options to close the gap to ensure we set a balanced budget for 2021/22.

Resource and legal considerations:

Cabinet, on 9 December 2020, were presented with the draft capital programme for 2021/22 to 2023/24. The full Cabinet report can be accessed at the following link:

[Draft Revenue Budget Feedback and Draft Capital Programme 2021/22 to 2023/24](#)

Background papers:

Draft Revenue Budget Feedback and Draft Capital Programme 2021/22 to 2023/24 as approved by Cabinet on 9 December 2020.

Contact Officers:

Kerrie Allward – Executive Director, Adult Social Care, ☎ 07810 351657,

✉ Kerrie.Allward@walsall.gov.uk

Stephen Gunther – Director of Public Health, ☎ 07818 538715,

✉ Stephen.Gunther@walsall.gov.uk

Vicky Buckley – Interim Director of Finance, Corporate Performance Management and Corporate Landlord, ☎ 07983 604698, ✉

Vicky.Buckley@walsall.gov.uk

Appendix 1: Draft Capital Programme 2021/22 to 2023/24 – Council Funded Schemes

Capital Scheme	Detail of Capital investment	2021/22 £	2022/23 £	2023/24 £
Rolling Programme Schemes				
Aids and Adaptations / Preventative Adaptations/ Supporting Independence <i>(Resources)</i>	This project directly supports the council's: 1. Statutory requirement to provide disabled facility grants (DFGs) this includes enabling the council to provide a continuous service rather than as some councils do in terms of stock-piling enquiries till new grant allocations are made to them. 2. Provision of maintenance of lifts and hoists. 3. Minor adaptation works. <i>Included for information as this scheme is managed by Housing Standards, and therefore comes under the remit of the Scrutiny Overview Committee.</i>	400,000	400,000	400,000
Health Through Warmth - Tackling Fuel Poverty <i>(Resources)</i>	To help provide a safety net for those who cannot access other funding sources and is available as a loan charged on the individuals' property that is repaid upon sale or relevant transfer of their home. For this sum per year, it could offer 28 new boiler systems and 25 boiler repairs. The fund also helps secure continued investment from external agencies in tackling fuel poverty and excess winter deaths in the borough. <i>Included for information as this scheme is managed by Housing Standards, and therefore comes under the remit of the Scrutiny Overview Committee.</i>	75,000	75,000	75,000
Total Draft Capital Programme – Council Funded Schemes		475,000	475,000	475,000

Appendix 2: Draft Capital Programme 2021/22 to 2023/24 – Externally Funded Schemes

Capital Scheme	Detail of Capital investment	2021/22 £	2022/23 £	2023/24 £
Disabled Facilities Grant <i>(Resources)</i>	This project directly supports the council's statutory requirement to provide disabled facility grants (DFGs). It is based on the delivery of the ring fenced award of grant money from government. The project has a direct positive impact on the number and subsequent varied costs to the council from the increasing level of demand for home adaptations. <i>Included for information as this scheme is managed by Housing Standards, and therefore comes under the remit of the Scrutiny Overview Committee.</i>	2,894,013	2,894,013	2,894,013
Integrated Community Equipment Store (ICES)	Supplies equipment to people with both a social care and a health need on an assessed needs basis. This is a pooled budget between the CCG and the Council, this capital funding will be used to purchase this equipment which will enable people to return home or continue to remain at home. This now forms part of the Better Care Fund (BCF) for which the Council is host. (Department of Health).	810,000	810,000	810,000
Total Draft Capital Programme - Externally Funded Schemes		3,704,013	3,704,013	3,704,013

Appendix 3: Draft Capital Programme 2021/22 to 2023/24 – Council Funded Schemes - Reserve List Allocations

Capital Scheme	Detail of Capital investment	2021/22 £	2022/23 £	2023/24 £
Aids and Adaptations / Preventative Adaptations and Supporting Independence (<i>Resources</i>)	Additional to the funds contained in the rolling programme section (£400k per annum) and external funding section (DFG - £2.9m) totalling £3.3m. This project directly supports the council's: 1. Statutory requirement to provide disabled facility grants (DFGs) this includes enabling the council to provide a continuous service rather than as some councils do in terms of stock-piling enquiries till new grant allocations are made to them. 2. Provision of maintenance of lifts and hoists. 3. Minor adaptation works. <i>Included for information as this scheme is managed by Housing Standards, and therefore comes under the remit of the Scrutiny Overview Committee.</i>	250,000	250,000	250,000
Health Through Warmth - Tackling Fuel Poverty (<i>Resources</i>)	Additional to the funds contained in the rolling programme section (£75k per annum). To help provide a safety net for those who can't access other funding sources and is available as a loan charged on the individuals' property that is repaid upon sale or relevant transfer of their home. For this sum per year, it could offer 28 new boiler systems and 25 boiler repairs. The fund also helps secure continued investment from external agencies in tackling fuel poverty and excess winter deaths in the borough. <i>Included for information as this scheme is managed by Housing Standards, and therefore comes under the remit of the Scrutiny Overview Committee.</i>	75,000	75,000	75,000
Total Draft Capital Programme – Council Funded Schemes Reserve List		325,000	325,000	325,000

Social Care and Health Overview and Scrutiny Committee Work Programme 2020/21

Committee date	1st October	26th November	28th January	8th April
Agenda setting date	-	21st October	8th December	tbc
Report Deadline	-	17th November	19th January	30th March
Covid-19 pandemic	Health and Care Covid Response	Adult Social Care Winter Plan, Provider Sustainability Self-Assessment and Designated Settings approach		
Finance		ASC Draft Capital and Revenue budget item 2020/21		
Primary Care / CCG	Merger of 4 CCGs			
Partnerships / integration			Walsall Together	
Hospital Services and Community Care			Stroke pathway	
NHS Consultation				
Older Adult Mental Health In-patient bed provision				
Health Inequalities				

BLACK COUNTRY EXECUTIVE JOINT COMMITTEE

FORWARD PLAN OF KEY DECISIONS

Published up to May 2021 (for publication 04/01/2021)

Date first entered into the plan	Project Name	Key Decision to be considered (to provide adequate details for those both in and outside of the Council)	Background papers (if any) and Contact Officer	Main consultees	Date Item to be considered
05/10/2020	Accessing Growth – Springfield Interchange Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with Wolverhampton City Council, to deliver the Local Growth Fund (LGF) funded elements of the Accessing Growth Springfield Interchange project with delivery to continue in the 2020/21 financial year.	Papers TBC – Richard Lawrence Richard.Lawrence@wolverhampton.gov.uk	Wolverhampton City Council	17/02/2021
07/09/2020	School of Architecture and Built Environment – Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with the University of Wolverhampton, to deliver the Local Growth Fund (LGF) funded elements of the School of Architecture and Built Environment project with delivery to continue in the 2020/21 financial year.	Papers TBC – Richard Lawrence Richard.Lawrence@wolverhampton.gov.uk	Wolverhampton City Council	17/02/2021
06/07/2020	Fab Kit PTP Ltd – Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with Performance Through People (PTP) Ltd, to deliver the Local Growth Fund (LGF) funded elements of the Fab Kit PTP Ltd project with delivery to continue in the 2020/21 financial year.	Papers TBC – Simon Neilson simon.neilson@walsall.gov.uk	Walsall Council	17/02/2021
05/10/2020	Dudley Canal Trust (Trips) Limited – Change Request PRIVATE SESSION - Not for publication by virtue of paragraph 3 of Schedule 12(A)	Approval for Sandwell Council to proceed to amending the funding repayment schedule with the Dudley Canal Trust (Trips) Limited, funded from within the Growing Places Fund (GPF), with delivery to continue in the 2020/21 financial year.	Papers TBC – Alison Knight alison.knight@sandwell.gov.uk	Sandwell Council	17/02/2021

BLACK COUNTRY EXECUTIVE JOINT COMMITTEE

FORWARD PLAN OF KEY DECISIONS

Published up to May 2021 (for publication 04/01/2021)

Date first entered into the plan	Project Name	Key Decision to be considered (to provide adequate details for those both in and outside of the Council)	Background papers (if any) and Contact Officer	Main consultees	Date Item to be considered
	of the Local Government Act1972 (as amended)				
07/12/2020	Sandwell Housing Gap Funding - Phase 1 – Change Request	Approval for the Accountable Body for the Land and Property Investment Fund (Walsall Council) to proceed to amending the Grant Agreement with Sandwell Council to deliver the Land and Property Investment Fund (LPIF) funded elements of the Sandwell Housing Gap Funding - Phase 1 project with delivery to commence in the 2020/21 financial year.	Papers TBC – Alison Knight alison.knight@sandwell.gov.uk	Sandwell Council	17/02/2021
04/01/2021	Review of the Black Country Executive Joint Committee Governance and Black Country LEP Assurance Framework	Approval of the revised Black Country Executive Joint Committee Governance process. Approval of the Black Country LEP Assurance Framework, following the implementation requirements of the new arrangements, and the programme of continuous improvement to further enhance the BC LEP governance and transparency above and beyond published government standards, included as Attachment 1 to this report.	Dr Helen Paterson chiefExecutive@walsall.gov.uk Simon Neilson simon.neilson@walsall.gov.uk	Dudley MBC Sandwell MBC Walsall MBC Wolverhampton CC	17/02/2020

BLACK COUNTRY EXECUTIVE JOINT COMMITTEE

FORWARD PLAN OF KEY DECISIONS

Published up to May 2021 (for publication 04/01/2021)

Date first entered into the plan	Project Name	Key Decision to be considered (to provide adequate details for those both in and outside of the Council)	Background papers (if any) and Contact Officer	Main consultees	Date Item to be considered
04/01/2021	Growth Hub - EU Transition Business Readiness Funding	Approval for the Accountable Body (Walsall Council) to enter into a Grant Agreement with the Black Country Consortium Ltd for the additional award of EU Transition Business Readiness Growth Hub Grant Funding with delivery to commence in the 2020/21 financial year.	Papers TBC – Simon Neilson simon.neilson@walsall.gov.uk	Walsall Council	17/02/2021
04/01/2021	Hub to Home Transport Innovation Centre and Test Track Project: Very Light Rail and Autonomous Technologies – National Innovation Centre	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to enter into a Grant Agreement with Dudley Council to deliver the Local Growth Deal Fund (LGF) funded elements of the Hub to Home Transport Innovation Centre and Test Track Project: Very Light Rail and Autonomous Technologies – National Innovation Centre project with delivery to commence in the 2020/21 financial year.	Papers TBC – Helen Martin helen.martin@dudley.gov.uk	Dudley Council	31/03/2021
04/07/2021	Getting Building Fund –Capital and Revenue Funding Approval	Approval for the Accountable Body (Walsall Council) to use the revenue funding and capital contingency funding for: <ul style="list-style-type: none"> • Walsall Council to carry out its role as Accountable Body to the Getting Building Fund programme; •the Black Country Consortium for the Management and Administration functions of the Getting Building Fund, and; •Walsall Council to cover the costs of the external legal and technical fees in support of managing the programme. 	Papers TBC – Simon Neilson simon.neilson@walsall.gov.uk	Walsall Council	31/03/2021

BLACK COUNTRY EXECUTIVE JOINT COMMITTEE

FORWARD PLAN OF KEY DECISIONS

Published up to May 2021 (for publication 04/01/2021)

Date first entered into the plan	Project Name	Key Decision to be considered (to provide adequate details for those both in and outside of the Council)	Background papers (if any) and Contact Officer	Main consultees	Date Item to be considered
07/01/2021	Land & Property Investment Fund – Programme Extension	<p>Approval for the Black Country Land and Property Investment Fund programme (LPIF), be re-profiled to allow expenditure and outputs to be claimed up to March 2025.</p> <p>Approval for the programme management costs, within this fund be reprofiled for an additional year to March 2026, to ensure that the expenditure and outputs are audited in line with the Black Country Assurance Framework.</p>	Papers TBC – Simon Neilson simon.neilson@walsall.gov.uk	Walsall Council	31/03/2021
05/10/2020	Dudley Advanced Construction Centre – Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with Dudley College, to deliver the Local Growth Fund (LGF) funded elements of the Dudley Advanced Construction Centre project with delivery to continue in the 2020/21 financial year.	Papers TBC – Helen Martin helen.martin@dudley.gov.uk	Dudley Council	31/03/2021
05/10/2020	Advanced Science Engineering and Technology – Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with Halesowen College, to deliver the Local Growth Fund (LGF) funded elements of the Advanced Science Engineering and Technology project with delivery to continue in the 2020/21 financial year.	Papers TBC – Helen Martin helen.martin@dudley.gov.uk	Dudley Council	31/03/2021
07/09/2020	Elite Centre for Manufacturing Skills – Change Request	Approval for the Accountable Body for the Growth Deal (Walsall Council) to proceed to amending the Grant Agreement with the University of Wolverhampton, to deliver the Local Growth Fund (LGF) funded elements of the Elite Centre for Manufacturing Skills project with delivery to continue in the 2020/21 financial year.	Papers TBC – Richard Lawrence Richard.Lawrence@wolverhampton.gov.uk	Wolverhampton City Council	31/03/2021



FORWARD PLAN OF KEY DECISIONS

**Council House,
Lichfield Street,
Walsall, WS1 1TW**
www.walsall.gov.uk

4 January 2020

FORWARD PLAN

The forward plan sets out decisions that are termed as “key decisions” at least 28 calendar days before they are due to be taken by the Executive (Cabinet). Also included on the plan are other decisions to be taken by the Cabinet (“non-key decisions”). Preparation of the forward plan helps the Council to programme its work. The purpose of the forward plan is to give plenty of notice and an opportunity for consultation on the issues to be discussed. The plan is updated each month with the period of the plan being rolled forward by one month and republished. Copies of the plan can be obtained from Democratic Services, Walsall MBC, Council House, Walsall, WS1 1TW helen.owen@walsall.gov.uk and can also be accessed from the Council’s website at www.walsall.gov.uk. The Cabinet is allowed to make urgent decisions which do not appear in the forward plan, however, a notice will be included on the agenda for the relevant Cabinet meeting which explains the reasons why.

Please note that the decision dates are indicative and are subject to change. Please contact the above addressee if you wish to check the date for a particular item.

Cabinet responsibilities are as follows

- Leader of the Council – Councillor Bird
- Deputy Leader, Regeneration – Councillor Andrew
- Deputy Leader, Resilient Communities – Councillor Perry
- Adult social care – Councillor Martin
- Children’s– Councillor Wilson
- Clean and green – Councillor Butler
- Education and skills – Councillor Towe
- Health and wellbeing – Councillor Craddock
- Personnel and business support – Councillor Chattha

The Cabinet agenda and reports are available for inspection by the public 7 days prior to the meeting of the Cabinet on the Council’s website. Background papers are listed on each report submitted to the Cabinet and members of the public are entitled to see these documents unless they are confidential. The report also contains the name and telephone number of a contact officer. These details can also be found in the forward plan.

Meetings of the Cabinet are open to the public. Occasionally there are items included on the agenda which are confidential and for those items the public will be asked to leave the meeting. The forward plan will show where this is intended and the reason why the reports are confidential. Enquiries regarding these reasons should be directed to Democratic Services (helen.owen@walsall.gov.uk).

“Key decisions” are those decisions which have a significant effect within the community or which involve considerable expenditure or savings. With regard to key decisions the Council’s Constitution states:

(1) A key decision is:

is, or the

- (i) any decision in relation to an executive function which results in the Council incurring expenditure which making of savings which are, significant, having regard to the Council’s budget for the service or function to which the decision relates or
- (ii) any decision that is likely to have significant impact on two or more wards within the borough.

(2) The threshold for “significant” expenditure/savings is £250,000.

(3) A decision taker may only make a key decision in accordance with the requirements of the Executive Procedure Rules set out in Part 4 of this Constitution.

Dates of meetings

2020 28 October
9 December

2021 10 February
17 March
21 April

FORWARD PLAN OF KEY DECISIONS

FEBRUARY TO MAY2021(4.1.21)

1 7	2	3	4	5	6	
Reference No./ Date first entered in Plan	Decision to be considered (to provide adequate details for those both in and outside the Council)	Decision maker	Background papers (if any) and Contact Officer	Main consultees	Contact Member (All Members can be written to at Civic Centre, Walsall)	Date item to be considered
8/20 (3.2.20)	Black Country Transport Team Collaboration Agreement: To approve the agreement to facilitate the delivery of a strategic transportation function across the four Black Country local authorities	Cabinet (Nonkey decision)	Matt Crowton 01922 654358 matt.crowton@walsall.gov.uk	Internal	Councillor Andrew	10 February2021
27/19 (8.7.19)	A34 Walsall to Birmingham SPRINT (Bus Rapid Transit) scheme – Phase 1: To approve the sprint scheme	Cabinet (Key decision)	Matt Crowton 01922 654358 matt.crowton@walsall.gov.uk	Internal	Councillor Andrew	10 February2021
68/19 (2.12.19)	West Midlands Enhanced Partnership Scheme: To approve a plan to improve bus travel in the A34 Walsall to Birmingham corridor through delivery of a new SPRINT service.	Cabinet (Key decision)	Matt Crowton 01922 654358 matt.crowton@walsall.gov.uk	Internal	Councillor Andrew	10 February2021
43/18 (8.10.18)	Lighting Invest to Save: To consider proposals for a major investment in the highway lighting infrastructure by	Cabinet (Key	Paul Leighton 07831 120871 paul.leighton@walsall.gov.uk	Public, Walsall Public Lighting Ltd., industry	Councillor Andrew	10 February2021

	replacing all existing lighting with energy efficient LED lighting	decision)	gov.uk	companies, internal		
1/21 (4.1.21)	Domestic Abuse Refuge Contract: to approve a six month extension to the contract which provides a refuge service for victims of domestic abuse.	Cabinet (Key decision)	Neil Hollyhead Neil.hollyhead@walsall.gov.uk	Internal	Councillor Andrew	10 February 2021
2/21 (4.1.21)	Willenhall Masterplan: To approve matters relating to Strategic Land Acquisitions. <i>Private Session: Contains information relating to the financial or business affairs of a particular person.</i>	Cabinet (Key Decision)	Willenhall Economic & Development Programme; and Walsall Regeneration & Development Pipeline: procurement of a strategic advisor. Joel Maybury Joel.maybury@walsall.gov.uk	Internal External Legal Representative.	Councillor Andrew	10 February 2021
58/20 (2.11.20)	Citizens advice Walsall: To approve variation of grant agreement	Cabinet (Key decision)	Elise Hopkins elise.hopkins@walsall.gov.uk Michelle Dudson michelle.dudson@walsall.gov.uk	Internal	Councillor Andrew/ Councillor Perry	10 February 2021
35/20 (7.9.20)	Preparing for Adulthood policy: To approve a new policy to deliver timely and robust plans for young people preparing for adulthood	Cabinet (Key decision)	Jeanette Knapper jeanette.knapper@walsall.gov.uk	Internal, SEND Improvement Board, Health operational partners & CCG	Councillor Martin	10 February 2021

3/21 (4.1.21)	Supplier Relief Payments to contracted and non-contracted Adult Social Care providers: To agree additional budget to support delivery of service to ensure continuity of care and support	Cabinet (Key decision)	Tracy Simcox Tracy.simcox@walsall.gov.uk	Internal	Councillor Martin	10 February 2021
48/20 (5.10.20)	Access and Inclusion: Response to report and recommendations of Education Overview and Scrutiny Committee	Cabinet (Non key decision)	Sharon Kelly 01922 652895 sharon.kelly@walsall.gov.uk	Internal	Councillor Towe	10 February 2021
62/20 (2.11.20)	Appointment of Major works technical advisor: To provide services such as architects, quantity surveyors, engineers, etc. for a period of 2 + 1 + 1 years for corporate landlord	Cabinet (Key decision)	Derwyn Owen 01922 650747 derwyn.owen@walsall.gov.uk	Internal	Councillor Chattha	10 February 2021
45/20 (7.9.20)	Corporate Financial Performance and Covid-19 update – To report the financial position based on 9 months to December 2020 and impact on Covid-19	Cabinet (Non key decision)	Vicky Buckley 01922 652326 vicky.buckley@walsall.gov.uk	Internal	Councillor Bird	10 February 2021
4/21 (4.1.21)	Corporate Plan Refresh: To consider a refresh of the Council's Corporate Plan for 2021/22 and forward to Council for approval.	Cabinet Council	Christine Williams Christine.Williams2@walsall.gov.uk	Internal	Councillor Bird	Cabinet - 10 February 2021 Council - 25 February 2021
46/20 (7.9.20)	Corporate Budget Plan 2020/21 – 2023/24, and Treasury Management	Cabinet	Vicky Buckley 01922 652326	Council tax payers, Business rate	Councillor Bird	Cabinet - 10 February 2021

	and investment Strategy 2021/2022: To approve the final budget and Council tax for approval by Council	(Key decision)	vicky.buckley@walsall.gov.uk	payers, voluntary and community organisations		Council - 25 February 2021
47/20 (7.9.20)	Corporate Plan delivery – Quarter 3 monitoring: To report performance monitoring information relating to the priorities and outcomes included in the Corporate Plan	Cabinet (Non key decision)	Helen Dudson helen.dudson@walsall.gov.uk	Internal	Councillor Bird	10 February 2021
3/20 (6.1.20)	Strategic development at Moxley Road, Darlaston <i>Private session: Report contains information relating to the financial or business affairs of a particular person</i>	Cabinet (Key decision)	Joel Maybury Joel.Maybury@walsall.gov.uk	Internal	Councillor Andrew	10 February 2021
51/20 (5.10.20)	High Needs Funding Formula: To approve changes to the formula to be used for the allocation of High Needs Dedicated Schools Grant funding for the 2021/22 academic year	Cabinet (Key decision)	Andy Crabtree Mohammed Irfan 01922 652330	Schools Forum	Councillor Towe	10 February 2021
5/21 (4.1.21)	Regional Supported Accommodation: To agree to be part of a 4 year regional framework contract for supported accommodation for the West Midlands region, covering 14 local authorities and Trusts if appropriate.	Cabinet	David DeMay David.demay@walsall.gov.uk Andrea Cooke Andrea.cooke@walsall.gov.uk	Internal	Councillor Wilson	10 February 2021
6/21	Black Country Tenancy Strategy: To	Cabinet	Neil Hollyhead	Internal	Councillor	17 March 2021

(4.1.21)	approve the strategy to enable a uniform approach across the Black Country for Fixed Term Tenancies and Affordable Rents by registered providers of social housing	(Key decision)	Neil.hollyhead@walsall.gov.uk		Andrew	
7/21 (4.1.21)	Community Sponsorship: To approve a process to enable the community to house and support refugees	Cabinet (Key decision)	Neil Hollyhead Neil.hollyhead@walsall.gov.uk	Internal	Councillor Andrew	17 March 2021