

# Walsall Better Care Fund

## Narrative Plan 2021-2022

October 2021

## **Cover – Assurance page**

Our local Better Care Fund, a joint national plan and driver for integration across Health and Social Care has been in place in Walsall since 2015. The plan is in place locally and is a partnership agreement managed under an s.75 agreement between Walsall Metropolitan Borough Council under Adult Social Care and Black Country and West Birmingham CCG, Walsall at place.

In line with national team agreement, our local Better Care Fund (BCF) planning template and narrative plan will be submitted in the absence of local Health and Wellbeing Board approval. This is to ensure we are able to adhere to the national submission deadline as it falls outside of our scheduled local Health and Wellbeing Board meetings. On 19 October, Board members were made aware of the national requirement to complete the planning template, the submission deadline of 16 November 2021, and the intention to present the plan in January for sign off. The update received acknowledgement from members, with the request that they receive information of the governance process the plan will undergo in the absence of sign off from board before submission.

To ensure approval, we have established local governance arrangements in place, which has afforded us the opportunity to seek partner approval. This will be achieved by presentation to the finance sub group of Joint Commissioning Committee (our place based commissioning committee made up of members across Adult Social Care (ASC), Black Country and West Birmingham CCG at place, Public Health and Children's Services) for sign off from Finance and commissioning partners, before presentation to Joint Commissioning Committee members for approval.

As partners of the Better Car Fund, ASC and Black Country & West Birmingham CCG Walsall (BC&WB CCG) have contributed to the completion of the template and the narrative. Both are partners of our local alliance agreement and Integrated Care Partnership model of care, Walsall Together. Our Walsall Together Partnership Board are sighted on developments of the BCF programme, as many schemes funded by the programme are discussed at Walsall Together level and are embedded in our pathways as integrated services. We have taken a system approach to agree our stretch metrics, by ensuring agreement from our local Trust Walsall Healthcare Trust Medical Directorate, specifically our Chief Operating Officer.

## Executive Summary

During financial year 2021/22, as partners to the BCF programme, Walsall Metropolitan Borough Council and Black Country & West Birmingham CCG, Walsall continued the approach of monitoring our local Better Care Fund programme through the agreed governance mechanisms.

Locally, partners agreed to roll forward the 2020/21 programme for consistency. This is in recognition of continued system pressure as we navigate the ongoing pandemic, and the need for some areas to return to business as usual through a smooth transition supporting continuity. Commissioning and finance leads have worked closely with the local Better Care Fund Manager to review the programme, specifically the schemes funded by the contributions to ensure all schemes continue to meet the national conditions and support the system to make a positive contribution to developments at place through our agreed alliance model and Integrated Care partnership, Walsall Together. Whilst we are committed as a system to meet needs and ensure positive outcomes, it should be recognised it has been a difficult year for both operational and strategic teams for all partners.

Our local programme has focussed on funding schemes to promote and support integration. As a result, a number of schemes funded by the programme continued to support the system during this financial year, contributing to the local response to the pandemic, COVID-19. This has led to discussions at Walsall Together level, and through commissioning committees, namely the Joint Commissioning Committee where all decisions regarding BCF performance and spend are discussed and approved.

National pressures and the global pandemic meant local challenges and pressures. Locally we faced a number of challenges, keeping operational teams going and adjusting priorities to meet national requirements. Our established BCF programme provided stability to local plans to respond to the pandemic by continuing to fund essential integrated services and apply governance to review services. This financial year, we have focussed on developing our services. This has led to a major review of our Intermediate Care Service with clear commissioning recommendations as a result to take the service forward under our alliance, Walsall Together.

Our local priorities continue to be to promote independence, encouraging older people to remain as independent as possible whilst remaining safe in their own place of residence. We also continue to develop our integrated services across our system. Our BCF programme continues year on year to be utilised to enable integration and adhere to national conditions of supporting timely discharges by funding integrated teams and provision. As an integrated system through Walsall Together, we have established a local outcomes framework linking this to health inequalities. We are also in the process of developing a new Health and Wellbeing Board strategy, which will then underpin priorities for Walsall Together, leading to joint priorities for commissioners.

As a programme and heavily aligned to Walsall Together, BCF will complement the priorities by funding services required to fulfil local obligations to our Health and Wellbeing Board footprint. The introduction of ICS's has meant BCF partners in Walsall working together to understand how the programme will evolve, implications of meeting local outcomes and how the programme will meet those wider system priorities whilst acknowledging that BCF is focussed around the Health and Wellbeing Board footprint.

Our local plan continues to ensure alignment to KLOEs with a focus of ensuring older people remain in their own home after 91 days; this is reflected in our set local percentage target for ASC. Our newly established integrated quality in care team, currently funded by the programme, supports the improvement of quality across our care home sector, which is linked to ensuring long-term care needs are met by admissions to our residential and nursing homes across the borough. It is worth noting further work is required to identify recurrent funding for the service to secure staffing structures and roles.

Alongside this, our alliance agreement focus to reduce health inequalities is linked to the NHS Long Term plan. This aligns to our BCF outcomes of improving independence of older people by ensuring timely discharges from the acute setting coordinated by BCF funded schemes such as the Intermediate Care Service, the use of step down provision, and the use of integrated teams.

## Governance

As a system, the Walsall Health and Care system Partners are developing new integrated ways of working to improve the health and wellbeing outcomes of their population, increase the quality of care provided and provide long-term financial sustainability for the system.

This agreement is an integral part of the vision to promote integrated services that deliver personalised care and it is anticipated this agreement will facilitate the objectives of Walsall Together.

Walsall Together Partners, which consist of Walsall Council, Black Country and West Birmingham CCG, Walsall at place, Walsall Housing Group and Primary care and CVS representatives, will continue to develop an Integrated Care Partnership (ICP) through which to plan, manage and deliver integrated care. This will provide the contractual environment to further develop and strengthen the role and responsibility of the Walsall Together ICP as this matures over the coming years.

Partners have agreed to form an alliance with a primary aim to improve the health and wellbeing outcomes for the population of Walsall. In addition, the alliance will consider ways to improve the financial, governance and contractual framework for the delivery of the services within the Walsall Together scope. The agreed local alliance agreement will provide a formal mechanism in which partners will work together to deliver the agreed governance arrangements and objectives of Walsall Together through a set of agreed behaviours;

- Work towards a shared vision of integrated service provision;
- Commit to delivery of system outcomes derived jointly from the evidence base and citizen voice;
- Commit to common processes, protocols and other system inputs for those in-scope services;
- Take responsibility to make unanimous decisions on a 'Best for Walsall' basis, understanding population needs and predicting demand;
- Always demonstrate that citizens best interests are at the heart of our activities, ensuring the partnership promotes prevention and overall health and wellbeing;
- Adopt an uncompromising commitment to trust, honesty, collaboration, innovation and mutual support.<sup>1</sup>

To support the alliance agreement, a number of sub groups will be formed, reporting achievements and risk management to the Walsall Together Partnership Board. Senior leads make up the board to discuss direction of travel and developments. As part of the agreed governance structure, the board will report updates for information to Walsall Health and Wellbeing Board for accountability.

Walsall recently reviewed governance at Health and Wellbeing Board level in relation to receiving and approving updates presented through reports. At Board level, discussions have taken place to implement forum sub groups, where detailed discussions will take place, ensuring more time is given at Board to discuss themes regarding health and social inequalities as per Health and Wellbeing Board strategies. Board meetings are now formed across three sections to maximise time; Thematic discussion so partners can add value to

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<sup>1</sup> Walsall Together Alliance agreement report – 2021 update

areas of concern and agree ways forward, Assurance reports where chairs of sub forums have agreed and approved reports before they are presented to board and for information where briefings are presented but no discussion or decision is required from board.<sup>2</sup>

As a sub forum of Health and Wellbeing Board, which will report into Walsall Together Partnership Board, the Joint Commissioning Committee is in place and informs commissioning led decisions. The committee is also the agreed governance mechanism to approve all decisions relating to the Better Care Fund programme, including BCF updates for assurance and oversight of risk management across the programme. To ensure discussion, updates regarding progress on BCF funded schemes across the main programme and IBCF, and IBCF funded short-term pilots for winter, sub groups are in place and embedded across both Adult Social Care and Walsall at place.

The joint Commissioning Forum, a commissioning sub forum of the Joint Commissioning Committee, is in place to discuss the funded schemes, which includes use of the budget, performance against agreed key performance indicators and risk management. The finance sub group of Joint Commissioning Forum, discusses spend across the programme, risks of overspends and since April 2020 updates regarding the agreed Hospital Discharge fund. Both sub groups report into Joint Commissioning Committee to escalate, provide assurance and for information. The Better Care Fund is subject to both the sub groups for discussion and sign off, followed by Joint Commissioning Committee for approval of BCF plans, winter short term BCF funded schemes and to receive assurance of mitigation against overspends and issues regarding performance across schemes.

BCF governance mechanisms were reviewed by Joint Commissioning Committee in line with a review of the overall committee to ensure it is fit for purpose under the Walsall Together partnership and ICS arrangements. It is agreed the process is fit for purpose to ensure accountability and a clear governance process for the programme, it has become a governance mechanism for other matters relating to social care and health, which sit outside the remit of BCF. Sub groups and the committee have an integrated approach with members from Children Services, Public Health, Adult Social Care and the Clinical Commissioning Group at place. Further development of the sub groups and committee will take place in line with changes at Walsall Together level.

Whilst our local plan is focussed on older people, it is discussed and shared with Children's services through Joint Commissioning Committee, and is shared with partners at Walsall Together level for transparency. The programme funds a number of services, which support Walsall Together priorities for example the Intermediate Care Service. As a result, the local Healthcare Trust, Walsall Manor and Black Country Mental Health Foundation Trust are sighted on the programme.

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<sup>2</sup> Health and Wellbeing governance report – July 2021

## Integration

- **Joint priorities for 2021-22**

In line with previous years under the BCF, both ASC and the CCG continue to work together under the agreement to ensure funded schemes deliver against conditions. Locally, this year we have worked at reviewing the BCF programme to ensure alignment to our local model of care, Walsall Together, and the development of the Integrated Care System (ICS) during 2021-2022. Whilst there are key health and social care outcomes to adhere to, joint priorities have been agreed through Walsall Together where each partner has agreed to the outcomes framework, which includes the health inequalities and overall improvement for residents across the borough and tackling hospital pressures by improving services.

Our local BCF programme continues to be part of these conversations. The aim remains to align the budget envelope and success of the schemes currently funded as they play a vital part by supporting the system and priorities, which include provision and integrated teams to support hospital discharges. The programme currently remains at place and contributes to conversations regarding Integrated Care Partnerships, however locally we are awaiting further guidance in relation to the future of BCF programmes and the expectation of them under ICS arrangements.

- **Approaches to joint/collaborative commissioning**

Last financial year, ASC included their commissioning intentions as part of the corporate plan and Market position statement update. Intentions detailed priorities across the directorate and included the commissioning of step down provision to support discharges from the acute, Walsall Healthcare Trust. Whilst it is the responsibility of ASC commissioners to complete the procurement of this and manage the contract, the budget is part of the local main BCF programme.

In line with our local governance, joint commissioning intentions and opportunities for joint commissioning have been discussed at length with Children's services, Public Health, ASC and Black Country and West Birmingham the CCG at place. To ensure alignment, a partnership approach to intentions will be considered once we have a signed off 2022-2025 Health and Wellbeing strategy. Joint commissioning opportunities will take place under the alliance of Walsall Together, in line with Walsall Together outcomes. To date, through the BCF programme, commissioning activity is agreed by BCF partners ASC and the CCG at place. This arrangement also complements the s.75 agreement where all activity is to be discussed and agreed including the use of BCF funding.

- **Overarching approach to supporting people to remain independent at home, including strengths-based approaches and person-centred care.**

As we approach the implementation of ICSs, the aim of our BCF programme is to ensure we continue to be a key driver locally for integrated services across care and health. Ambitions for the programme alongside our alliance model Walsall Together, is to also consider how we can integrate housing needs over and above the Disabled Facilities Grant allocation.

Our local outcomes framework has been developed to include health inequalities to ensure a Walsall Together approach in reducing them for residents of the borough. Whilst the approach to the outcomes framework is in line with the NHS mandate, the introduction of strength-based approaches and how they are incorporated into practice are part of the social care mandate to improve care. Our local BCF programme supports the development of both by funding integrated teams across the main programme, the intermediate care service and additional social workers within IBCF funding. As an integrated health and care system, we have an agreed 'strength based' approach to care and support and supporting individuals in a person centred way where there are identified support needs. This will continue to be a key area of development across for the system, driven by Walsall Together and supported by our BCF programme. Personalised care is a thread running through the NHS forward plan where there are key elements outlined; Patient Choice, Shared decision-making, Patient activation and supported self-management, Social Prescribing and Community Based Support, Personalised care and support planning, Personal health budgets.

To date, under our local Walsall Together s.75 agreement, we have an integrated system where MDTs are established across our localities, working together to coordinate and support complex cases. As part of the integrated system approach, data is collated in relation to locality team performance regarding the number of reviews completed and overview of review outcomes. This is reported regularly to members of Walsall Together Partnership Board for transparency and overview of outputs across the pathways.

As a clear driver, Walsall Together continues to hold Resilient Communities at the heart of delivery with a partnership approach to develop support and services to strengthen our early intervention and prevention offer across the borough. Social prescribing is a key element of this and part of our 'Walsall offer', which in Walsall is led by health partners in partnership with our Voluntary Care Service provider One Walsall. The Walsall Together model also looks to admission avoidance, which is heavily driven by BCF funded schemes specifically Rapid Response teams. The introduction of the Hospital Discharge guidance in 2020 and amended versions in 2021 has been a focus locally for our system to ensure the appropriate support is in place to support patients across pathways from 0-3. Locally this has meant discussions at Walsall Together level, and operational drive from BCF funded schemes such as the Intermediate Care Service. This should include development of services for those on pathway 0, and development of provision available for those on pathway 2 and 3. All of this of course has been alongside growing concern for capacity within the care market, which is a national issue.

To support quality and KLOE's this financial year partners agreed to provide non-recurrent funding to the Quality in Care Team. The team is an integrated service, focussed on supporting the provider market to improve quality across care homes. The team provided an integral over during 2020 by supporting providers, supporting the system to ensure improved outcomes for older people once discharged from the acute to either a step down bed or home to a care home setting.



## **Supporting Discharge (national condition four)**

As a system Walsall Healthcare Trust as a key partner within Walsall Together have worked with partners to develop a Winter Plan to support the management of seasonal escalation. The plan outlines demand and performance through the year and the Trust plan for winter. Locally, we accept these are yearly issues rather than specifically winter pressures.

A demand and capacity analytical model is updated each year allowing us to review levels of demand experienced during the previous season, to support our prediction modelling (after taking into account national and local variables), and then mitigate this rising demand with a series of interventions that together make up the seasonal escalation plan. The outcome is a best and worst case scenario for the impact upon hospital bed capacity and system flow.

This process has been followed in preparing a Walsall Together Seasonal Escalation Plan for 2021/22, alongside a Black Country System level plan is being developed to address the government directive for developing a ten-point plan based on the following:

1. Supporting 999 and 111 services
2. Supporting Primary Care and Community Health Services to help manage the demand for UEC services
3. Supporting greater use of UTCs
4. Increasing support for children and young people
5. Using communications to support the public to choose wisely
6. Improving in-hospital flow and discharge
7. Supporting adults and children mental health needs
8. Reviewing IPC measures
9. Reviewing staff COVID isolation rules
10. Ensuring a sustainable workforce

The plan, demand and capacity are in place to support the system over winter, and align to the national condition of ensuring older people are discharged in a timely way from the acute, meeting the outcome of improved independence following a period of re-ablement. Locally, as a system partner, Walsall Council Adult Social Care commissioners have commissioned additional domiciliary care market capacity to mitigate shortages of supply which are being experienced as result of national workforce and funding issues. The Intermediate Care Service as a BCF funded service is operating 7 days a week and maintaining flow of discharge during weekends to prevent a build up at the start of each week, which has been the pattern in previous years. Teams operating within the service are in place to drive discharges from the acute into the community by older people returning home or to a care setting, all working to Home First principles.

To ensure support is in place over critical times of the year such as winter, funding measures have been, and are still being, announced for different sectors including community based ageing well services, mental health services, and primary care services. These are being co-

ordinated to avoid duplication via Walsall Together Senior Management Team. Each of the main local agencies have their own detailed operational plans for a seasonal surge and these form the basis of this high level Seasonal Escalation Plan:

Walsall Healthcare Trust

Walsall Metropolitan Borough Council

Black Country Mental Health Foundation Trust

Black Country and West Birmingham (BCWB) CCG, Walsall

The seasonal plans of West Midlands Ambulance Service, NHS 111, and Malling Health (for Urgent Care Services) have been considered, along with a BCWB System Level Winter Communications Plan. Together these plans outline the services and contingencies that are in place across Walsall. These plans build on work undertaken in previous years. We are clear that we have a whole system problem that requires a whole system solution involving all of our partners, and our aim is to anticipate and prevent periods of high escalation, as well as to respond appropriately when demand is higher than the capacity available to meet it.

Walsall Together provides the collaborative arrangements for planning across the local place Health and Social Care Economy. Meetings which are established throughout the year include:

Walsall Together Partnership Board

Walsall Together Senior Management Team

Walsall Together Tactical Group (for escalation and strategic planning) <sup>3</sup>

Alongside a number of winter plans funding from Improved BCF, there are also schemes funded by the main programme supporting hospital discharges such as the Intermediate Care Service. The Service has continued to respond effectively to increasing demand within the wider context of the COVID pandemic period that has led to an increase in complex needs following hospitalisation and therefore increased acuity of need in the community. We are aware this is not a unique position in comparison to the rest of the Black Country, and at national level; however, we are continuing to monitor the service closely as we see an increase in discharges and complexities resulting in the need for long-term support once discharged. To support monitoring of these increases, the hospital discharge policy is embedded across local pathways to manage discharges as a system through daily discharge updates, namely local medically stable lists monitored and managed by the acute as a system partner.

To continue support over the winter period, we invested 50K from the Improved BCF this financial year to provide additional re-ablement capacity. This is essential to support continuity over the winter pressures period. Associated Key Performance Indicators have been implemented in order to check and validate value for money. Partners also agreed to utilise identified underspend as joint contingency to support areas of increased demand, again ensuring discharges continue in a timely and safe way.

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<sup>3</sup> System escalation report – October 2021

## **Disabled Facilities Grant (DFG) and wider services**

Locally the delivery of Statutory Disabled Facility Grants (DFGs) includes:

- Minor works and Handyperson service.
- Major works up to £30,000 in value per property
- Adaptations for palliative resident.

A key change since previous BCF Plans has been a detailed review of the levels of funding under both of these schemes. This included a review because of the national increases in both labour costs and material costs facing the construction industry. The service also sought to increase the number of residents who could be assisted through this streamlined and faster route. This was via:

- Increase in minor works limit to enable more residents to benefit from adaptations without statutory test of resources.
- Increase in palliative limit prior to test of resources enabling more households to benefit from adaptations without statutory test of resources.

Black Country and West Birmingham CCG Walsall place and Walsall Council jointly consider projects and review progress on the overall programme. Management of the DFG programme is direct through the council and is delivered in line with the councils adapted Housing Renewal Assistance Policy and relevant legislation relating to DFGs. Over a number of years, the council in consultation with the CCG has expanded its streamlining of processes to make it easier for residents to apply and secure assistance with their adaptations. The majority of referrals are direct from Occupational Therapists following contact from residents within the borough with the council enquiring about help with adaptations. Others are referred by other agencies such as the housing service, children's services and the West Midlands Fire and Rescue Service.

Individual schemes are approved under delegated powers provided to relevant officers and new initiatives such as the expansion of the minor works limit are brought in following direct liaison with the relevant council Portfolio Holder. Statutory approvals for DFGs remain valid for 12 months (giving applicants a year to complete the works). This can mean that schemes approved in one financial year are completed in the next. Officers use their discretion to award longer periods for completion of schemes where residents request this.

As with previous years, the council has continued to collaborate with social housing providers to where possible share the cost of schemes including undertaking planned new bathroom installs on blocks of property and specific property types. In this way, many residents are helped with adaptations without needing to complete complex application forms.

Budgets and commitments are reviewed monthly to ensure no overspend of funds. The council supports the BCF contribution by providing its own capital funding towards the programme of works. The services are the delivery of all forms of home adaptation for residents and therefore at their heart they directly support people to remain independent at home. To maximise the use of the funds that are provided the council vet all quotations submitted and compares these with its established (and regularly reviewed) schedule of

rates. The service also secures vastly reduced costs for the installation of hoists and lifts than the majority of all councils in UK through our direct tendering for the same.

Additional ways to maximise benefit of the funding are to:

- consider land charges in cases where grant is over £5,000. During 2020/21 this totalled 34 cases with a value of £121K
- consider joint funding of adaptations to social housing properties – sharing the cost where possible to maximise help to residents of Walsall

A new addition to the service in 2021/22 is a direct referral route started in September 2021 via Walsall Society for the Blind for residents with visual impairment. Whilst in its infancy this scheme has been greatly welcomed by residents who previously felt support was limited.

The DFG and related adaptations process is fundamental to enabling safe, timely and effective discharge from hospital settings. Where a resident is due a planned operation and the outcome is known and where possible adaptations are pre-planned so that it reduces the timescales for recovery and rehabilitation.

Minor works and the Handyman schemes (which have run for many years) for example are a fundamental part of the process providing key safes at low cost (and free to residents) to enable NHS and other care staff to safely visit people discharged from hospital. Statutory DFGs must be delivered in accordance with the Housing Grants, Construction and Regeneration Act 1996. The government has subsequently enabled councils to use discretion to provide assistance under minor works schemes. In some council areas the minor works limit is set as low as £250.

Developments during this financial year for Walsall have seen the minor works limit previously set at £2,000 but increased to £3,000 to maximise the number of people who can receive support, and an increase in the means test limit for palliative care cases from £7,000 to £8,000.

During 2021, the service has continued to operate under the restraints of COVID to ensure safety, however assistance did not stop during the national lockdowns (which affected other councils who were unable to adapt to on-line working). All local services delivered, are directly linked with specialist Occupational Therapists (OTs) including palliative OTs who submit the vast majority of referrals for adaptations and help.

Locally, we continue to provide a comprehensive and integrated adaptations service ranging from statutory DFGs to minor works and handyman services. These are delivered with national best practice, leading the way where as a council, support is often provided to other authorities via the national DFG Charity Foundation.

Continued strong partnerships with social housing providers is helping to keep costs of adaptations as low as possible with major shared funding and block adaptation schemes.

In line with partnership working, the Walsall team also manage the assistance for home heating and insulation (which help reduce impacts of COPD and incidence of slips, trips and falls) and support residents to secure grants and loans and cheaper energy costs. Walsall's fuel poverty rate is 11th highest in all of England.

Successes of the team during 2021 were securing:

- Local authority deliver grant funding of £4.5M

- Warm Homes fund of over £2.2M helping residents move to gas central heating
- ECO-flex of circa £2M to help households in fuel poverty.

Through development, DFG funding and applications are for all ages (children and elderly etc.) and available for all tenures. All beneficiaries of this funding have one or more protected characteristics (i.e. disabled and or age). In 2020/21 a total of 532 adaptations were completed. 296 (56%) were for residents over the age of 65 of which 199 were for residents aged 75 or older and 21 (4%) were for children (below the age of 18).

As part of development, particular new focus is providing a direct referral route for residents with visual impairment via Walsall Society for the Blind to enable them to secure home adaptations so that they can access their homes more easily and bath safer.

## Equality and health inequalities

As an integrated system, partners across Walsall Together are committed to addressing health inequalities across the borough. Partners across Walsall as a place, agree to address the priority health inequalities identified through a series of existing and planned programmes including the 2022-2025 Health and Wellbeing strategy is currently being developed by officers. The strategy will align health inequalities to priorities for Health and Wellbeing Board to own as priorities for the local footprint.

The Walsall Together Partnership Board has already established a Population Health and Inequalities Steering Group (PH&ISG), to provide coordination of health inequalities work programmes, alignment of the health inequalities with the ICP's Outcomes Framework, and provide assurance to the Walsall Together Partnership Board, via the Clinical Professional leadership Group. <sup>4</sup>

The local strategy, also known as the Walsall Plan, aims to cover the period 2022 – 2025, which will be informed by updated strategic assessments including the Joint Strategic Needs (and assets) Assessment, Community Safety, Economic assessments, NHS Integrated Care Provider (ICP) Five-Year Forward Plan. The 2022-25 Strategy will be in alignment with the Joint Strategic Needs (and Assets) Assessment (JSNA) and the Council's Budget Plan and will outline the priority areas and how we intend to work together to improve people's health and reduce health inequalities that exist in the Borough.

Our local Joint Health and Wellbeing Strategy 2022 – 2025 will outline the aim of our partner organisations working together to make Walsall a healthy place by creating the physical and social conditions for all people to thrive, and to complement the provision of holistic health and care services. The successful implementation of the Joint Health & Wellbeing Strategy will have a positive holistic impact on the health and wellbeing of Walsall residents - not only in the reduction of inequalities but by equipping our residents with the foundations to lead wholesome, independent lives. <sup>5</sup>

The successful implementation of the Joint Health & Wellbeing Strategy will have a positive holistic impact on the health and wellbeing of Walsall residents - not only in the reduction of inequalities but by equipping our residents with the foundations to lead wholesome, independent lives. The aim of the Joint Health & Wellbeing Strategy is to outline how the local authority, NHS and the voluntary and community sectors intends to work together to reduce inequalities and maximise potential. The Strategy outlines what success should look like and how progress will be monitored through regular reporting. This format highlights the members of the Health & Wellbeing Board's intention in being accountable and transparent. The strategy will also align to Walsall Together outcomes so we have the 'golden thread' approach at place. A further element is ensuring the BCF plan also compliments local priorities.

Locally we are confident the schemes we currently fund meet the BCF national conditions. Currently, our IBCF programme funds a number of Adult Social Care teams, which includes additional social work capacity for locality teams. This investment support the development of the directorate to meet needs and tackle inequalities for our residents. This aligns to

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<sup>4</sup> Population Health and inequalities implementation plan 2021/2022

<sup>5</sup> Joint Health and Wellbeing strategy (Walsall Plan) structure and format for 2022-2025. October 2021

stretch metric 8.3 where locality teams will support older people maintaining their place of residence following discharge.

Our main programme funds a number of schemes including district nurses and the community equipment store, which both support aims to maximise independence, both a national condition and an aim within health inequalities and linked to our local re-ablement stretch metric under 8.5. This is also an ambition through Walsall Together by ensuring we are enabling residents across the borough to take control of their needs and how they are met. As development of the programme continues, current funded the schemes will be reviewed to ensure we support the delivery of addressing health inequalities. This will mean introducing new schemes to sit as part of the programme, and will be completed once the strategy is in place, commissioning intentions have been amended and developed further with partners at joint commissioning committee level and priorities are clear.