



Walsall Council

Social Care and Health Overview and Scrutiny Committee

Thursday 18 January 2024 at 6.00PM

Meeting Venue: Council Chamber at the Council House, Lichfield Street, Walsall

[Livestream Link](#)

Membership:

Councillor K. Hussain (Chair)
Councillor V. Waters (Vice-Chair)
Councillor P. Gill
Councillor I. Hussain
Councillor S.B. Hussain
Councillor R. Martin
Councillor R.K. Mehmi
Councillor N. Nawaz
Councillor A. Parkes
Councillor W. Rasab
Councillor L. Rattigan

Quorum:

Four Members

Democratic Services, The Council House, Walsall, WS1 1TW

Contact name: Jack Thompson Telephone: 01922 654196

Email: jack.thompson@walsall.gov.uk

[Walsall Council Website](#)

**If you are disabled and require help to and from the meeting room,
please contact the person above**

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</p>

	hundredth of the total issued share capital of that class.
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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.

Part 1 – Public Session

- 1. Apologies**
- 2. Substitutions**
To receive notice of any substitutions for a Member of the Committee for the duration of the meeting.
- 3. Declarations of Interest**
- 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.
- 5. Minutes**
To approve and sign the minutes of the meeting held on 7 December 2023.
(Enclosed – Pages 1-8)
- 6. Mental Health Services Update**
(Enclosed – Page 9-42)
- 7. Adult Social Care – CQC Inspection Readiness**
(To Follow)
- 8. Recommendation Tracker**
To review progress with recommendations from previous meetings.
(Enclosed – Page 43-44)
- 9. Areas of focus for 2023/24**
To review the Committee Work Programme and the Forward Plans for Walsall Council and the Black Country Executive Committee.
(Enclosed - Pages 45-54)
- 10. Date of next meeting**
The date of the next meeting will take place on the 19 February 2024.

Minutes of the Social Care and Health Overview and Scrutiny Committee held in the Council Chamber, Walsall Council House

Thursday, 7 December 2023 at 6PM

Committee Members present:

Councillor K. Hussain (Chair)
Councillor V. Waters (Vice Chair)
Councillor R. Martin
Councillor R.K. Mehmi
Councillor A. Parkes

Portfolio Holder:

Councillor G. Flint – Wellbeing, Leisure and Public Spaces

Officers Present:

Kerrie Allward – Executive Director of Adult Social Care (Walsall Council)
Jennie Pugh – Director of Adult Care
Nadia Inglis – Interim Director of Public Health
Suzanne Letts – Finance Manager – Adult Social Care & Public Health
Jack Thompson – Democratic Services Officer (Walsall Council)
Pip Mayo – Director of Place for Walsall (Black Country Integrated Care Board)
Prof. David Loughton – Chief Executive of Walsall Healthcare NHS Trust
Jo Wright – Director of Midwifery, Gynaecology and Sexual Health

31 **Apologies**

Apologies were received from Councillors S.B. Hussain, L. Rattigan, I. Hussain, P. Gill and W. Rasab.

32 **Substitutions**

No substitutions were received.

33 **Declarations of Interest and Party Whip**

There were no declarations of interest or party whip for the duration of the meeting.

34 **Local Government (Access to Information) Act 1985 (as amended)**

There were no agenda items requiring the exclusion of the public.

35 **Minutes**

A copy of the Minutes of the meeting held on the 26 October 2023 were submitted [annexed].

Resolved

That the minutes of the meeting held on the 26 October 2023, a copy previously having been circulated, be approved and signed by the Chair as a true and accurate record.

36 **Update on the midwifery led unit and maternity services.**

At the invitation of the Chair the Director of Midwifery, Gynaecology and Sexual Health at Walsall Healthcare NHS Trust introduced the report [annexed] and highlighting the following points: that the NHS Trust was in the final stages of moving the midwifery led unit and that they hoped the new unit would be opened in February 2024.

The Chair then invited Members to ask questions on the item, some of the responses included:

- There was a separate team in place which performed Caesarean Section (C-Section) operations and separate environments for planned C-Sections. In addition, two theatres were on standby to carryout emergency C-Sections;

- A risk assessment was carried out by a midwife before a planned home birth took place;
- Home births were seen as a low-risk environment and historically births took place at home. Midwives were trained in obstetric procedures to assist childbirth and mothers were made aware of the potential risks involved in home births;
- The NHS Trust provided additional non-clinical support to expectant mothers experiencing poverty, such as offering bus passes and working with Walsall Warm Homes;
- The Trust did not have any concerns that there would be lack of staff ahead of the opening of the new unit;
- There was a supportive executive support team at the Trust and a strong maternity support partnership which would aid to make the transfer to the new unit successful;
- The Trust ensured that expectant mothers received wrap around care;
- When problems with a pregnancy occurred, expectant mothers were always informed of the options, and it was always the woman's choice to have an abortion.

In closing remarks, the Chief Executive of Walsall Healthcare NHS Trust paid tribute to the midwifery team for turning around the Unit and being successful in attracting high quality staff. In addition, that the new relocated unit would be safer as it would eliminate the need to use ambulances to transfer patients to the consultant led unit.

Resolved

- **That the Committee note the report.**
- **That the Committee received a further update report in the future on the Midwifery Led Unit once it had been moved to the Manor Hospital.**

37 Adult Social Care Contributions Debt

At the invitation of the Chair the Executive Director for Social Care and Health gave an overview of the report [annexed]. Some of the key points included:

- There had been issues around Adult Social Care debt collection for several years and there was no easy fix;
- The Council had created a new joint team to help resolve problems with debt collection;
- It was the joint role of this new team to administer new charges for care delivered and to tackle historic debts;
- The Council currently had two employees working on historic debt and they were working from the largest debts first;
- Previously for clients who did not fill in a financial assessment within fourteen days it was assumed that they would have to pay the full cost of their care. The Council had changed its processes and would not

assume full costs applied but instead called clients and offered to help them fill in the form;

- A new contributions policy was due to be presented to Cabinet in December 2023;
- A very small number of clients had been handed over to the legal team for to pursue debt;
- Over £2 million was debt classed as payment pending.

The Chair invited Members to ask questions on the report, some of the responses included:

- The amount of debt being written off due to being statute barred was small;
- Most of the historical debt had been created due to incorrect charges being placed on clients;
- The focus of the debt collection team was to deal with new clients quickly and to calculate how much they would need to pay accurately as well as tackling historic debt;
- There was a provision within the budget setting process for historic debt write off and the risk was taken into account when drawing up the budget;
- There was a large amount of historic debt within the last three year and after that the amount tapered the more historic it was;
- There had been a fundamental shift in the approach of officers to new clients and calculating their finances to prevent further historical debt being created;
- Most of the historic debt fell within the years 2019 to 2023 and thus was not close to the seven-year statute barred debt collection limitation.

Resolved

- **That the Committee note the activity to investigate customer debt.**
- **That the Committee note the updated business processes to support customers who required financial assessment.**

38 Corporate Financial Performance – P6 September Financial Monitoring position for 2023/24

The Finance Manager introduced the report and highlighted the salient points [see annexed], including that the £14.32 million planned overspend within the Social Care Budget had been reduced to £12 million.

The Executive Director of Adult Social Care added that one of the reasons for the increased pressure upon the Social Care budget was that residents within the Borough were living longer, thus using services for longer. In addition, that

improved access to services had increased costs and so had the increase in statutory reviews.

At the invitation of the Chair Members asked questions to officers, some of the responses included:

- The Council was in active conversation with the Integrated Care Board (ICB) and formal arbitration would start soon which should lead to a settlement;
- The Council would be implementing a more robust system for Section 117 payments (*Mental Health Act 1983*) to prevent a dispute from occurring again in the future;
- The debt dispute was complex and involved the Council, the ICB and the Black Country NHS Foundation Trust. In addition, any settlement would involve the Council paying money back as it owed debt to the ICB and the Foundation Trust;
- Recent changes in the responsibility for commissioning of care had added further complexity to the situation;
- All the organisations involved were committed to reducing the debt they owe to one another and were committed to building a process to make this possible;
- The Director of Place for Walsall (Black Country Integrated Care Board) added that the ICB was positive a partial resolution could be found soon. Additionally, that while the issue of debt had put pressure on both the Council and health partners, none of the parties involved wanted to stop funding which support residents;
- Debt in relation to current Section 117 payments was accruing everyday but the Council and health partners were working to create new tool to manage payments;
- Central government did not cover the cost of public body disputes.

The Portfolio Holder for Wellbeing, Leisure and Public Spaces added that the relationship with NHS partners was good, and the Council was in a good financial position.

Resolved

That the Committee note the revenue and capital forecast for the financial year end 2023/24.

39 Draft Revenue Budget and Draft Capital Programme 2024/25 – 2027/28

The Finance Manager introduced the report [see annexed] and laid out to the Committee the differences between savings linked to investment or improved processes and savings from additional income.

At the invitation of the Chair the Executive Director of Social Care and Health gave an overview of the planned savings proposed in the draft budget and the explained the investments that would be made to achieve the savings.

A discussion on the proposed budget then took place, some of the key points included:

- The Chief Executive of Walsall of Healthcare NHS Trust was complementary of the adult social care services at the Council but did agree that improved mortality rates would put further pressure on the service;
- The Council was looking at ways to increase the amount of shared lives placements within the Borough, however, the model was not widely used;
- There were around fifty shared lives placements within the Borough;
- There was a large increase in Adult Social Care spending for the year 2024/25 to take account of the increase in demand in the year 2023/24;
- The programmed investments would have a positive impact on the services by providing more appropriate care for clients at an earlier stage;
- The Director of Place for Walsall (Black Country Integrated Care Board) added the earlier intervention proposed in the budget would help to make savings;
- The Council was expanding the Be Well Service to include vaping as well as alcohol and smoking;
- The Council was trying to engage with harder to reach communities to help improve health outcomes which would help to save money for both the Council and health partners.

At the end of the discussion several recommendations were made through the Chair. These recommendations were as follows:

- That the Committee express its concern that the proposed savings of £4,544,392 for 2024/25 could potentially be detrimental to those receiving care within the Borough.
- The Committee expresses its concern that the predicted additional income for 2024/25 may not be achieved and this would lead to further budgetary pressures.
- That the planned investments in relation to investment reference 24, 'Community Reablement Service', would be difficult to implement quickly and therefore challenge the deliverability of the planned savings of £1.14 million (OP 24) in the financial year 2024/25.
- That the Committee request that the Cabinet write to the Secretary of State for Health and Social Care to ask for additional funding for social care and a long-term funding model.

These recommendations were not adopted by the Committee when put to the vote.

Resolved

- That the Committee considered the draft revenue budget proposals to date as attached that related to its remit as shown in Appendices 1 and 2, and that feedback would be presented to Cabinet on 13 December 2023.
- That the Committee noted that the revenue budget for 2024/25 was currently not balanced, with a gap of c£18m, and therefore a further report would be required if any changes to draft proposals outlined related to services within the committee's remit.
- That the Committee considered the draft capital schemes included in the draft capital programme attached that related to its remit as shown in Appendices 3 and 4, and that feedback would be presented to Cabinet on 13 December 2023.

40 Primary Care Access and GP Services Working Group – Terms of Reference

The Democratic Services Officer gave a brief overview of the report [see annexed].

There were no questions on the from Members.

Resolved

That the Committee approve the Primary Care Access and GP Services Working Group Terms of reference.

41 Recommendation Tracker

The Democratic Services Officer outlined the outstanding actions of the Recommendation Tracker and informed Members that some of these would be resolved as part of upcoming planned reports.

Resolved

That the Committee note the Recommendation Tracker.

42 Areas of focus for 2023/24

The Democratic Services Officer informed the Committee of the upcoming items for the next meeting of the Committee. Additionally, through the Chair the Democratic Services Officer asked if any Members had additional suggestions for items for the Committee to consider that they contact the officer.

Resolved

That the Committee note the Areas of focus for 2023/24.

43 Date of next meeting

The date of the next meeting would be 18 January 2024.

There being no further business, the meeting terminated at 19:52.

Signed:

Date:

Social Care and Health Overview and Scrutiny Committee

18 January 2024

Mental Health – Overview

Ward(s): All

Portfolio: Councillor G. Flint – Wellbeing, Leisure and Public Spaces

The presentation attached as Appendix 1 has been provided by the Black Country Healthcare Foundation Trust on the mental health services they provide within the Borough.

Recommendation:

That the Committee note the presentation and make requests for any additional information.

Contact Officer:

Jack Thompson

Democratic Services Officer

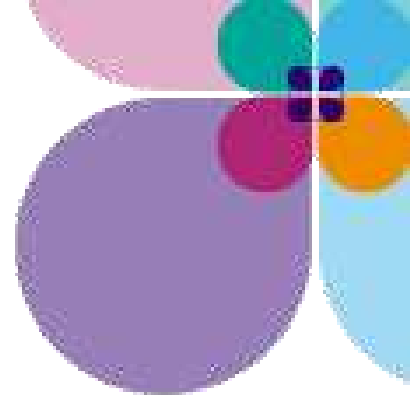
☐ 01922 654196

☐ Jack.Thompson@walsall.gov.uk

Social Care and Health Overview and Scrutiny Committee

Mental Health – Overview

24th January 2024



Introduction

Lead Provider Approach



Black Country MH/LDA Lead Provider – A whole pathway approach

Case for change



Addressing unwarranted variation in access and outcomes driven by legacy of fragmented commissioning and provision



Achieving a more coordinated approach to strategic plans in a complex architecture



Platform to achieve national ambitions e.g. Transforming Care and Long Term Plan – benefitting from scale



Incentivising the front line e.g. elimination of inappropriate out-of-area placements



Breaking down artificial barriers between partners / agencies – making best use of collective strengths



Advancing health equalities through stronger voice/influence and accountability – ensuring needs of under-served communities considered across whole pathway



Workforce development and expansion through collaboration - a one-workforce approach

Benefits



Better experiences and outcomes for the people we support



Opportunity to develop a shared vision and strategy for services, driving more integrated pathways of care



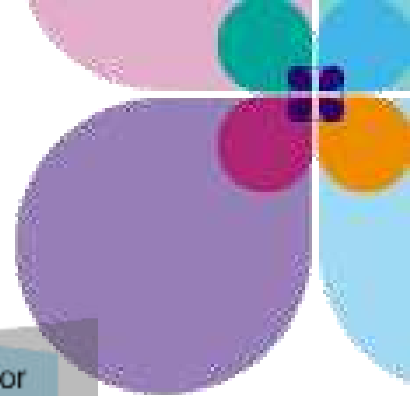
More engagement and co-production with people with lived experience, communities and the voluntary sector



A direct and mutually beneficial working relationship with partners across health and care, including local authorities and the voluntary sector



More involvement for professionals, managers and teams in driving change for the benefit of our communities



Our ambition is to provide outstanding quality specialist mental health, learning disability, and community healthcare services that support people to live their best lives as part of their community.

Our story is not just about services and supporting people when they are unwell. As a lead provider for mental health, learning disabilities and autism, we know we can do much more to help people to stay well.

Our voice and influence, and our approach to **working in partnership** will help improve the social, economic and environmental conditions in our communities, impacting people's health and wellbeing and reducing health inequalities.

Our purpose is to be a force for good for our Black Country communities; to listen, learn, work in partnership, challenge where needed, remove barriers, speak-up for all, and proactively create health equity.

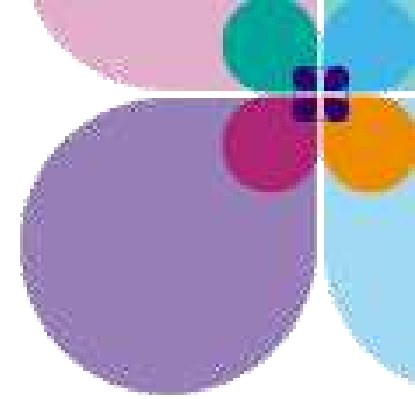
We believe that achieving **health equity** for our communities is critical

Our overall ambition is to be an anchor institution for our Black Country communities.
Anchor institutions are large organisations that have a significant stake in their local area and large assets that can be used to support their local community's health and well-being and tackle health inequalities.



Black Country MH/LDA – A flavour of what we have been doing

New maternal mental health service launched	Older adult in-reach to care homes service launched	First primary care mental health practitioners appointed; co-located in Primary Care Networks	Black Country community rehabilitation model under development	Recovery College expanded across the Black Country	Older adults therapeutic service launched	Ambulance control rooms – mental health nurses within the 999/111 service
Community inclusion worker model introduced as part of journey to advance health equalities	Admiral Nurse service launched	Eating disorders in-reach into primary care model developed and being piloted	Improving support for 18-25 year olds' transition from child and adolescent to adult mental health services	Progressing a physical health model of care for people with severe mental illness	Black Country all-age eating disorder service recognised as one of the highest performers in the country	Alternative ambulance response model under development
Single Black Country Child and Adolescent Mental Health Services (CAMHS) core model implemented	Single CAMHS crisis model across Black Country developed to ensure consistent support in all areas	Further expanded and embedded mental health support teams across educational settings including schools	Early Intervention in Psychosis model that meets NCAP standards developed and being implemented	Expanding employment support across the Black Country and wider region – recognised as an exemplar service	Crisis sanctuaries set up across all four localities	24/7 helpline for urgent mental health support for all ages across the Black Country
Inpatient transformation plan under development across the Black Country in collaboration with a range of agencies	Learning disabilities successful key worker pilot embedded; autism framework developed	Welfare rights project developed to tackle health inequalities	Transforming core CAMHS service and crisis support, including inpatient mental health beds for children and young people	Successful pilot of keyworkers for children and young people to work with service users who are inpatients or at risk of being admitted to hospital	Continuing to strengthen psychiatric liaison support in line with core 24 standards, ongoing development of crisis home treatment model	Agreeing clear pathways between CAMHS and acute services to reduce variation and provide a quicker, improved response for children and young people
Pilot of Barnados keyworkers, working with acute hospital and local authority	Improving support for children in care, care leavers and young people in the justice system	Embedding CAMHS strategy and I-Thrive model				



BCHFT - Services we provide and/or commission

Inpatient and Urgent Care	Specialist/Children and Young People	Community
Crisis and Urgent Care Crisis Resolution/Intensive Treatment Teams	Specialist Adult ADHD and Autism Service Early Intervention in Psychosis (EIP) Services Community Perinatal Services Maternal Mental Health Service Halt and Reclaim, and Criminal Justice Team	Adults Community Mental Health Teams
Mental Health Liaison Service		Older Adults Enhanced Older Adults Community Mental Health Teams
Inpatient - Adult Wards Bushy Fields Hospital (Dudley) Dorothy Paterson Hospital (Walsall) Hallam Street Hospital (Sandwell) Penn Hospital (Wolverhampton)	Children and Young People Community CAMHS/Learning Disability CAMHS Teams CAMHS Crisis Eating Disorders (Community) Children in Care Positive Steps (Dudley and Walsall)	Specialist Community Improving Access to Psychological Therapies Services (Talking Therapies) Primary Care Mental Health Services (Sandwell and Wolverhampton in development) Rehab/Complex Recovery Team Services (Walsall only) Learning Disability and Autism Teams
Inpatient - Older Adults Wards Bloxwich Hospital (Walsall) Bushy Fields Hospital (Dudley) Edwards Street Hospital (Sandwell) Penn Hospital (Wolverhampton)	Community Eating Disorders (all age)	Outpatients Older Adults Therapeutic Services Memory Assessment Services
Psychiatric Intensive Care Unit Health Lane Hospital - male only (Sandwell)		Community Inclusion, Engagement and Advocacy For example: Recovery College, Mental Health First Aid, Employment Services
Learning Disabilities Lino Secure Assessment and Treatment Unit		

Services provided across all localities (Dudley, Sandwell, Walsall and Wolverhampton) unless specified otherwise

Black Country - proud and resourceful communities... ...but not without challenges

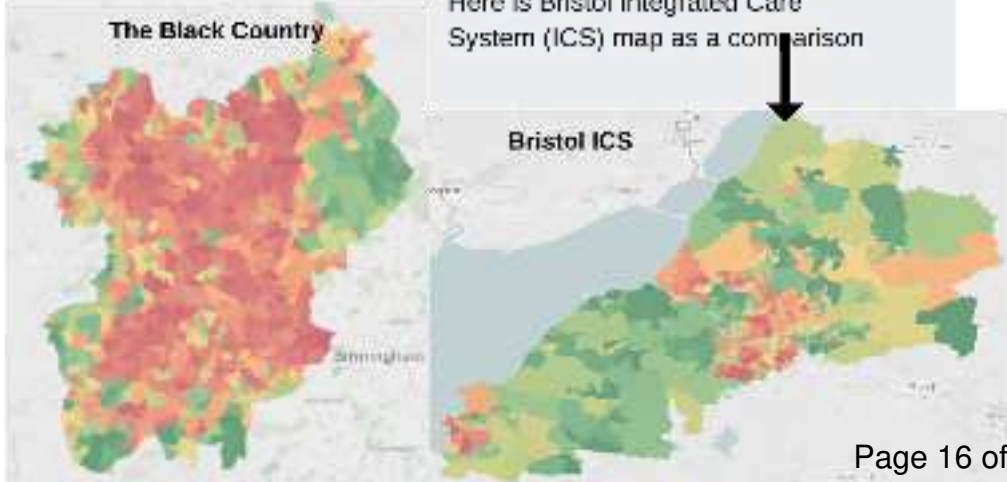


Over 50% of the Black Country population live in the most deprived neighbourhoods in England



These maps show income deprivation. Red represents most deprived and green least deprived.

Here is Bristol Integrated Care System (ICS) map as a comparison



What Goes Into Your Health?



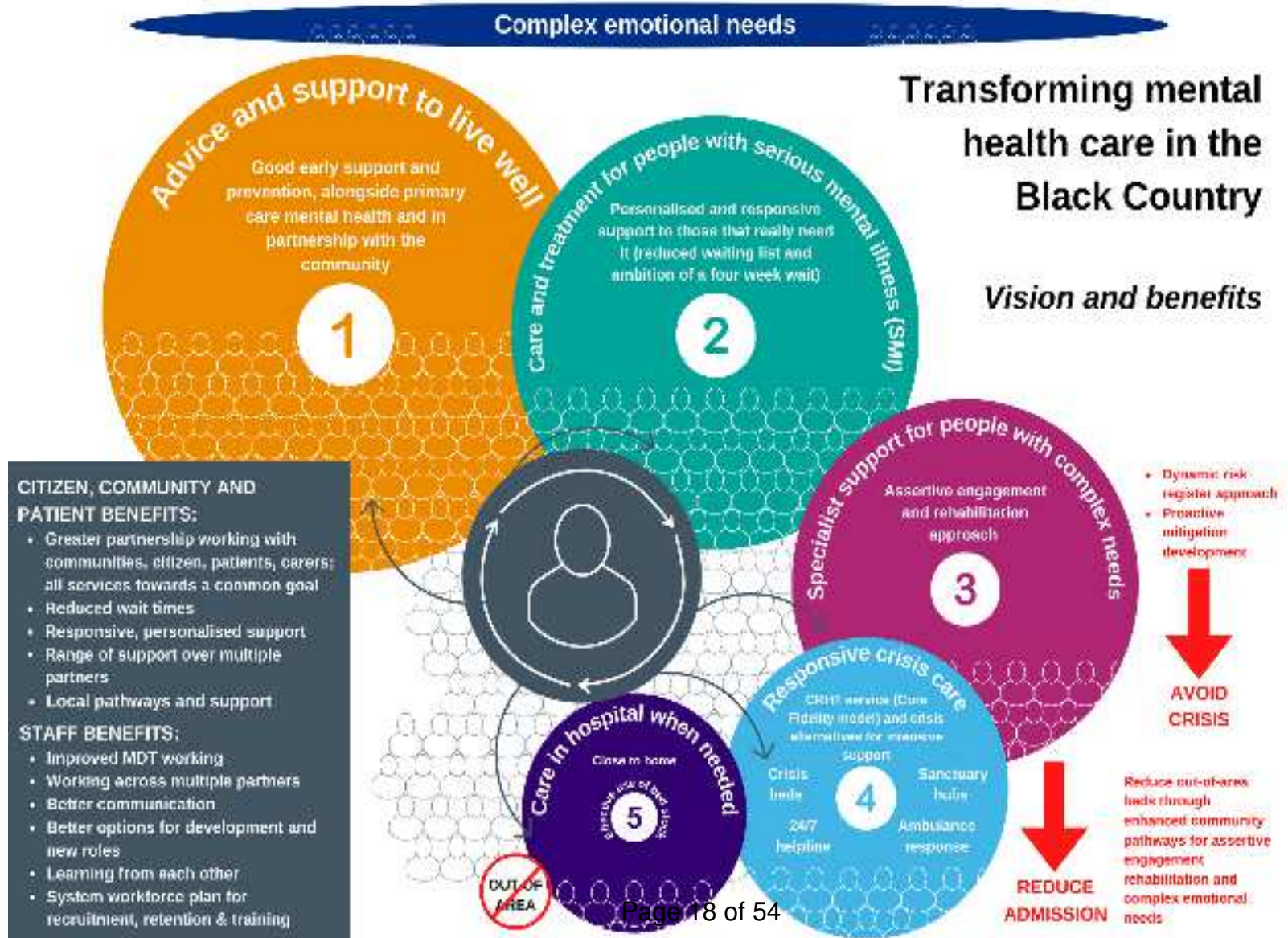
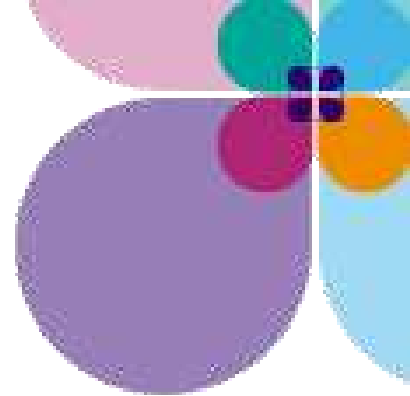
Source: Institute for Health and Wealth, Health and Wealth: Data Report (London: IHW, 2019). Available at: <https://www.healthandwealth.org/>

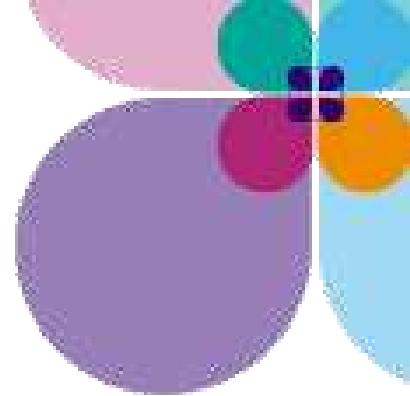
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A new way of working and collaborating



Black Country Mental health model - overview

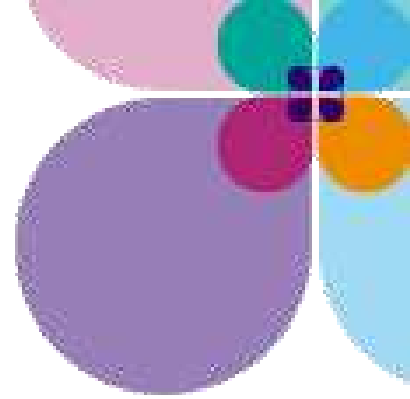








Tier 1 – Health Equity & Recovery Services



Tier 1 – Employment services



	Thrive into Work	Thrive into Work Specialist Service	IPS Employment	IPS Retention	Projects (Bridges, Let's Talk, Wellness at Work)
Support with 	<ul style="list-style-type: none"> • Employment • Retention Support 	<ul style="list-style-type: none"> • Employment • Retention Support • Specialist Support 	<ul style="list-style-type: none"> • Employment 	<ul style="list-style-type: none"> • Retention Support 	<ul style="list-style-type: none"> • Loneliness & isolation • Employment • Wellbeing • Training • Development
Area covered 	GP in Black Country <ul style="list-style-type: none"> • Dudley • Walsall 	GP in West Midlands <ul style="list-style-type: none"> • Black Country • Birmingham • Solihull • Coventry 	Black Country <ul style="list-style-type: none"> • Dudley • Sandwell • Walsall • Wolverhampton 	Black Country <ul style="list-style-type: none"> • Dudley • Sandwell • Walsall • Wolverhampton 	Black Country <ul style="list-style-type: none"> • Dudley • Sandwell • Walsall • Wolverhampton
Eligibility* 	<ul style="list-style-type: none"> • 18+ • Primary Care • Physical or mental health condition 	<ul style="list-style-type: none"> • As per 'Throve' AND • Risk of Homelessness • Neuro-developmental condition or learning disability / difficulty • Contact with Criminal Justice 	<ul style="list-style-type: none"> • 18+ • Secondary Care • Wants to gain paid employment 	<ul style="list-style-type: none"> • 18+ • Secondary Care • At risk of losing employment and/or; • Off sick 	Various
Referral** 	<ul style="list-style-type: none"> • Self referral • Friends & Family • GP • IAPT • Job Centres • Other professionals 	<ul style="list-style-type: none"> • Self referral • Friends & Family • GP • IAPT • Job Centres • Other professionals 	<ul style="list-style-type: none"> • Self referral • Clinicians (secondary care) • Other professionals 	<ul style="list-style-type: none"> • Self referral • Employers • Clinicians (secondary care) • Other professionals 	<ul style="list-style-type: none"> • Self referral • Friends & Family • Clinicians (primary or secondary care) • Job centres • Other professionals

* More eligibility criteria may apply, visit website or see contact details for more info

** Referral pathways are examples only - including, but not limited to the above

The BRIDGE Project

Together with you to achieve  **healthier, happier lives**

NHS
Black Country Healthcare
NHS Foundation Trust

The BRIDGE Project

The Bridge Project is a service that offers one to one, individually tailored employment and vocational support to adults aged 18 and over, who are currently affected by their mental health and are struggling with unemployment, risk of redundancy or are economically inactive.*

How can the service help me?

We can support you in many ways, such as:

- Identify your needs and develop an action plan
- Support you with accessing education, training, volunteering and employment opportunities
- Help develop a CV, job application support and interview preparation
- Confidence building
- Group activity sessions
- Help and support to access other services.




Build Recover Inclusive Diverse Goals Empower

*Not currently employed and not currently job searching

Together with you to achieve  **healthier, happier lives**

NHS
Black Country Healthcare
NHS Foundation Trust

Who is eligible for this service?

The Bridge Project aims to support people experiencing mental health problems who are:

- Aged 18 years or over
- Unemployed or economically inactive*
- Living in Sandwell, Dudley, Walsall, or Wolverhampton



How The Bridge Project Can Support You



Getting in touch

If you would like to find out more about The Bridge Project, or are looking to self-ref, you can contact us by:

-  01922 609500
-  bchft.bridgeproject@nhs.net
-  blackcountryjobsupport.com

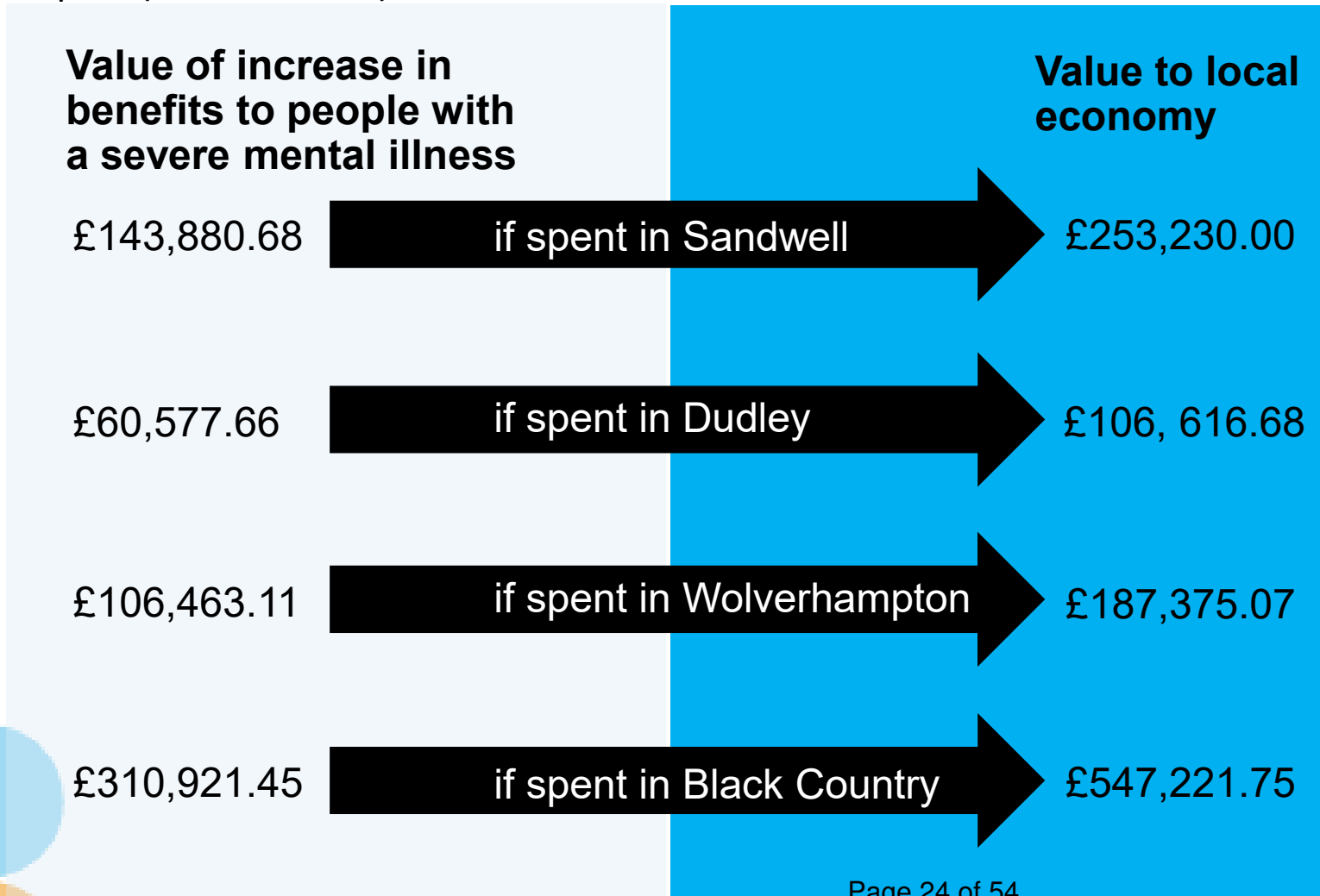
You can also follow our BCHFT Job Support Page on our social media pages:



Search: BCHFT Job Support

Building access to Resources - Welfare Rights

impact (Jan–Jun 2023)



Sandwell project started in Q4 22/23.

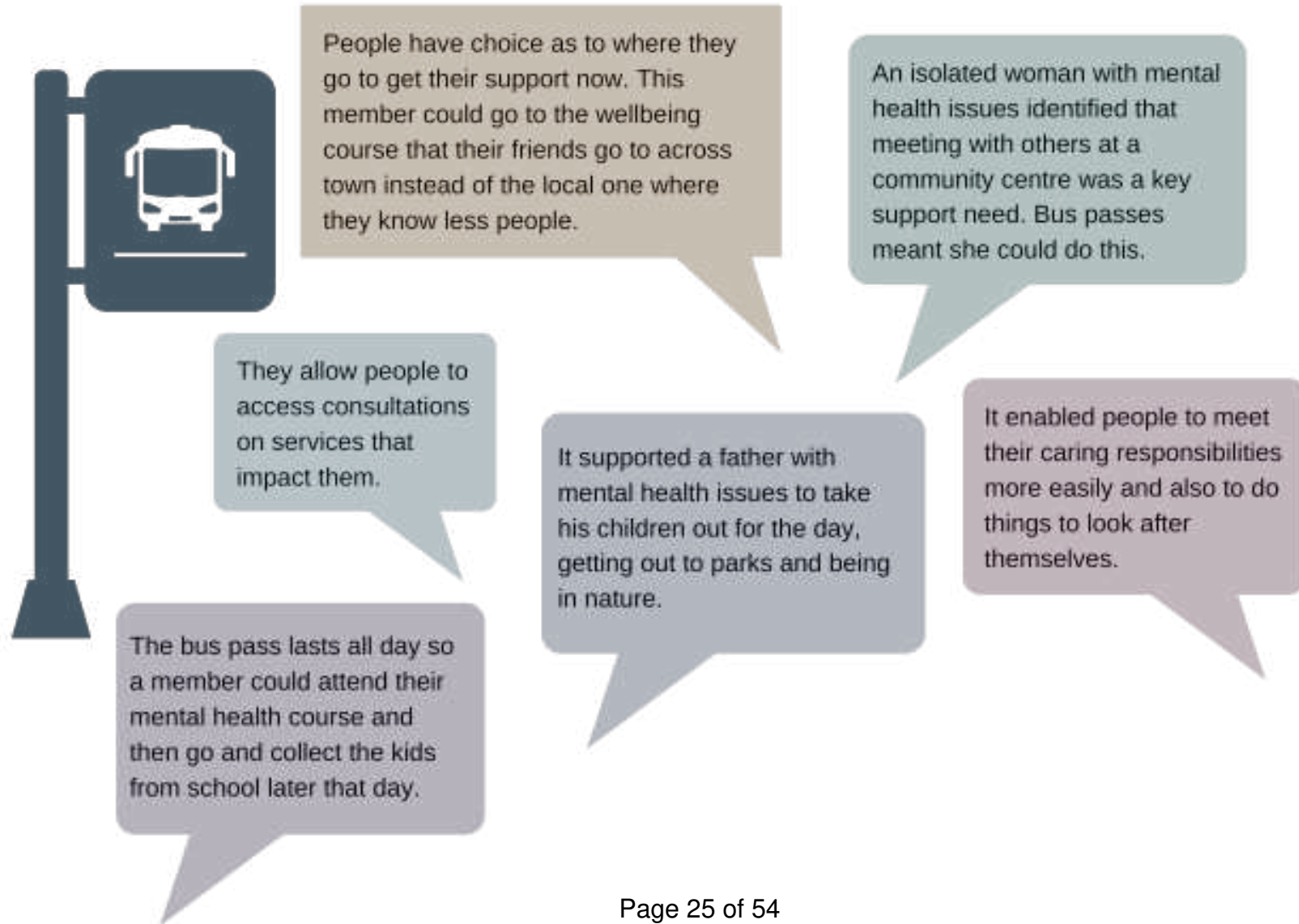
Wolverhampton and Dudley projects started in Q1 23/24

Every £1 spent locally is worth £1.76 to the local economy

Every £1 spent outside the area is worth £0.36 to the local economy

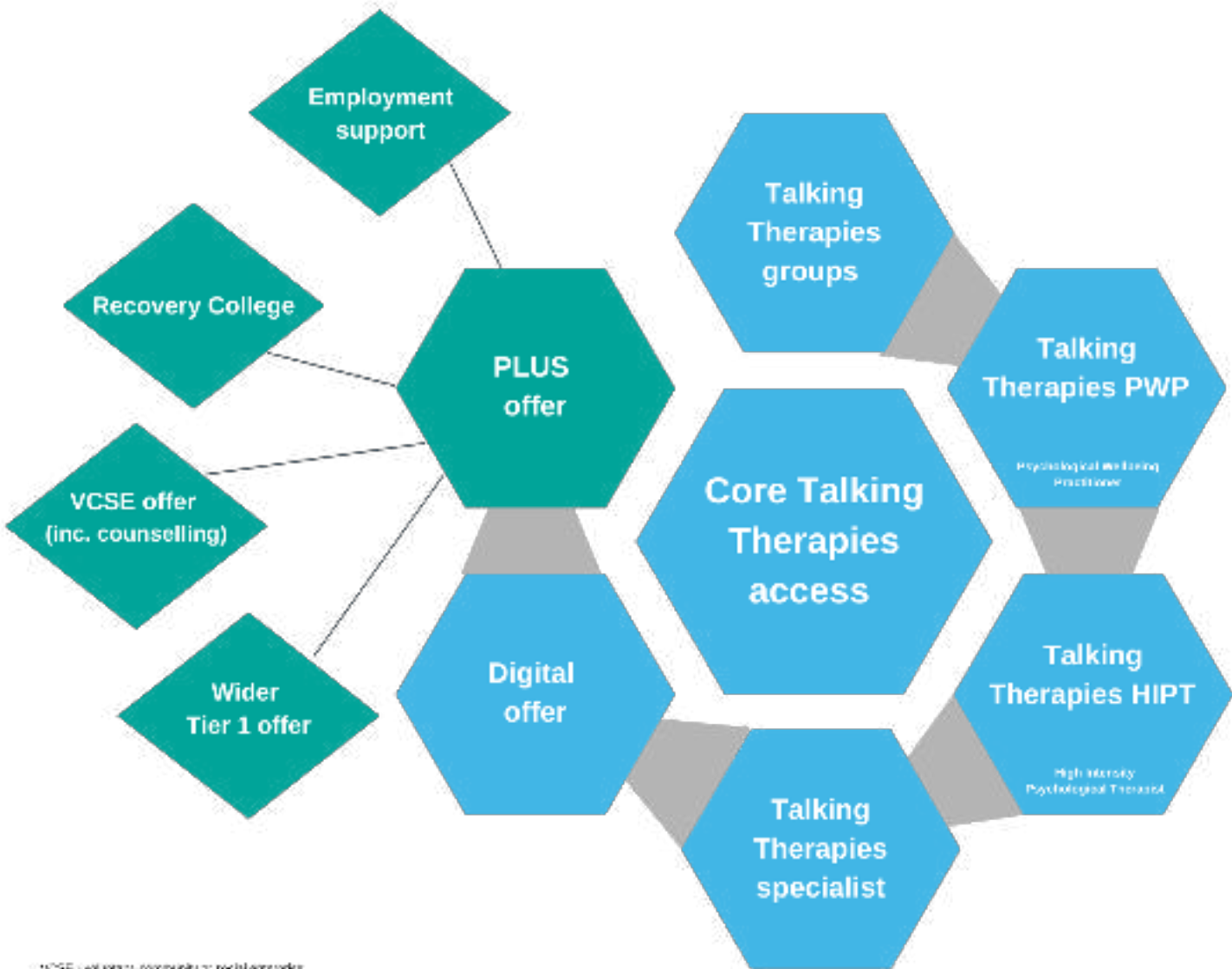
*Impact Measurement Ltd

Building access to Resources - Bus passes



Tier 1 – Talking Therapies Plus & Primary Care Mental Health

Reframing our offer to communities – Developing a Black Country model for Talking Therapies



Provides a more person-centred and needs-led model that includes support for wider determinants and social issues which would aid recovery rate.

Allows for workforce development across VCSE and NHS - improve recruitment of trainees from diverse communities through links with VCSE organisations.

Offers choice for individuals that include potentially more culturally appropriate offer through VCSE. This would support waiting times.

Includes links to 'what next' - so people can be linked into post-Talking Therapies support.

Harmonise the model across the Black Country.

VCSE = voluntary, community or social enterprise

Primary care mental health model for the Black Country

Clinical benefits

- Evidence based practice – EI STEPPS and Structured Clinical Management
- Aligns to complex emotional needs pathway and Improving Access to Psychological Therapies (IAPT)
- Meets unmet need between IAPT and secondary care
- Meets unmet need between traditional secondary care and GP
- MDT – right care, right place, right time by the right person
- Having assessment and intervention at a primary care level has a beneficial impact on primary care access and secondary care intervention.
- Black Country wide interventions delivered locally where needed

The Model

The Hub will have both assessment and intervention functions. Referrals from the 24/7 access or GPs/PCNs will be managed in the Hub and allocated to appropriate clinicians for an assessment and formulation session. Online and Group interventions will also be offered through the Hub, giving people the option to choose intervention outside of their locality.

The locality offer will include multi-disciplinary teams (MDTs) in PCNs and Tier 2 with a shared clinical group. Tier 1 1:1 interventions and tier 2 psychological and medical interventions will also be delivered in localities.

Recovery College, complex emotional needs, 18 – 25 and physical health in severe mental illness interventions will also be delivered on a Black Country footprint with local nuanced offers.

Workforce

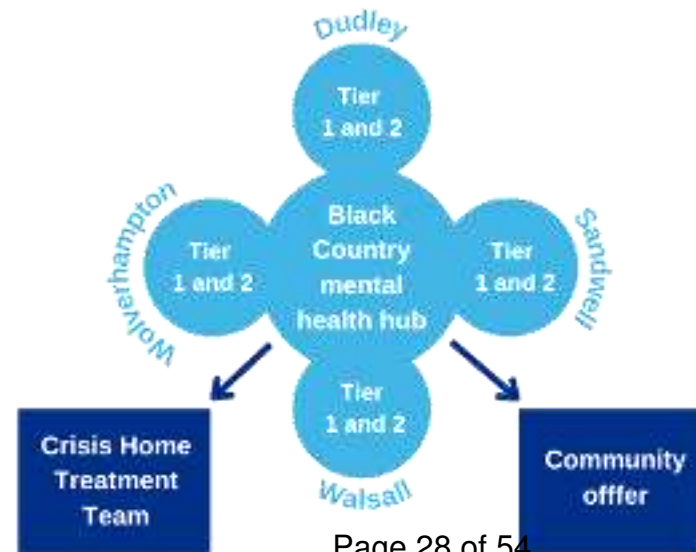
Hub: Specialist elements including dual diagnosis workers, community inclusion workers, older adult support to tier 1, advanced clinical practitioners, complex emotional needs practitioners, 18 – 25 workers.

Locality: Core MDT including responsible clinicians, psychologists, allied health professionals and mental health workers in tier 1 & 2.

Workforce benefits

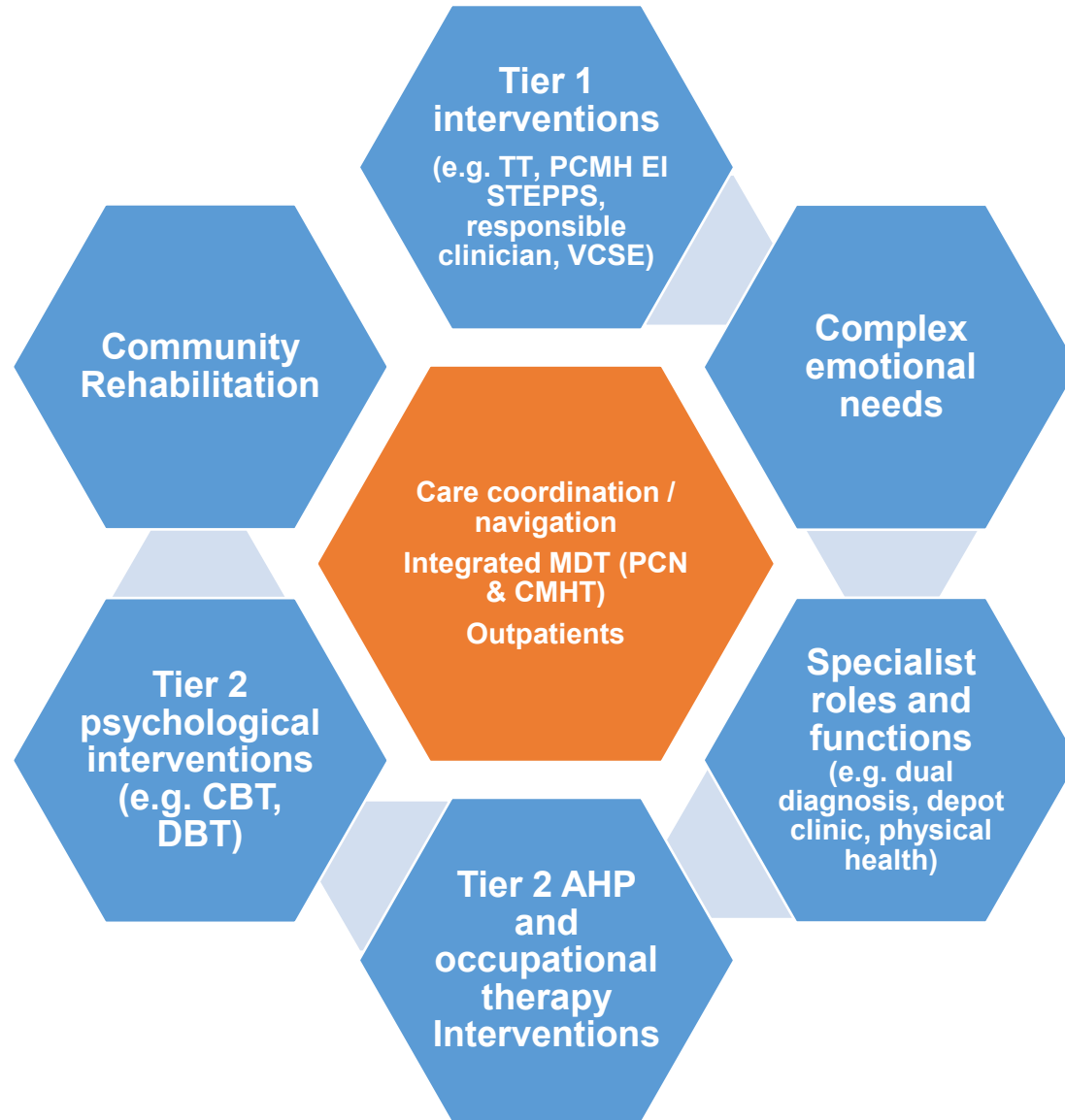
- Options for development
- A workforce that can flex to meet demand
- Clinical training
- Supervision and reflective practice
- Partnership working
- All of which improve wellbeing and retention

Note – Implementation of model in Dudley locality still to be determined, as currently a distinct service commissioned/ provided by DIHC



Tier 2 & 3 – Core Mental Health and Specialist Services

Black Country - Core offer



TT – Talking Therapies
VCSE - voluntary, community and social enterprise
AHP – allied health professional
CBT – cognitive behavioral therapy
DBT - dialectical behavior therapy
EIP – early intervention in psychosis

Specialist Support

Perinatal mental health team

Specialises in assessment, diagnosis and short-term treatment of women affected by a moderate to severe mental health illness in the preconception, antenatal and postnatal period.

Promotes wellbeing during pregnancy, prevention of relapse and assists with birth planning, working with women who have a previous history of serious mental health difficulties and women who are experiencing mental health difficulties for the first time.

The multidisciplinary team support women whose needs cannot be met by primary care professionals.

Maternal mental health service

Provides psychological assessment and intervention for individuals experiencing moderate to severe mental health difficulties as a result of perinatal loss (for example miscarriage, foetal death, stillbirth, neonatal death).

Also provides advice and assistance in the form of consultation and reflective practice to maternity services and other partner agencies where appropriate.

Liaison and diversion, and criminal justice team

Provides a single integrated offer to the whole Black Country population. The team comprises of qualified nursing staff trained in a variety of assessment and treatment options who provide short to mid length engagement for specified individualised plans of care.

The team work with other agencies (police, probation, prison, youth justice) providing advice, guidance and support.

Adult ADHD/autism

Adult ADHD and autism services (AAAS) consisting of diagnostic assessment for autism and ADHD, and offer ongoing management for ADHD if the person has previously been diagnosed by the NHS.

Early intervention in psychosis (EIP) services

A specialist community mental health team which works with young people and adults in the three years following a first episode of psychosis or those who are deemed at risk of developing psychosis (ARMS).

They adopt an assertive outreach approach and provide individualised, comprehensive, evidence based interventions to optimise recovery, prevent relapse and help individuals and their families to cope with their experiences. In doing so, they aim to improve social, physical, psychological and vocational functioning and reduce the short and long term impact of psychosis.

Older adults

- Launched Older Adults Therapeutic Service across the Black Country and working in partnership with The Recovery College
- Launched In-Reach to Care Homes Service across the Black Country
- Launched Admiral Nurse Service across the Black Country
- Developments in Memory Assessment and Enhanced Community Mental Health Team for Older Adults
- Investment in improving hospital facilities for older adults (Edward Street Hospital refurbishment and new purpose-built facility at Dorothy Pattison Hospital in Walsall)
- Training and learning for staff in older adults suicide prevention

Older Adult Inpatient developments

We are building a new older adult mental health hospital within the Dorothy Pattison grounds in Walsall as part of our eradicating dormitory wards project.

The plans will see the two wards currently based at Bloxwich Hospital move over to the new build in Summer 2024.

The new build accommodates two OA MH wards – 10 bedded dementia and 15 bedded functional with a central area providing staff facilities, ADL kitchen, visitors rooms and patient laundry.

Some of the benefits of these plans includes:

- Patient accommodation will all en-suite and on the ground floor
- Patients will have access to other facilities on the site such as a gym, canteen and multi-faith rooms
- Near to Walsall Manor Hospital and Dorothy Pattison Hospital
- Will meet same sex accommodation requirements
- More flexible space for therapeutic care
- Car parking available
- Close to Walsall town centre and transport links



Tier 4 and 5 – Urgent care and inpatients

24/7 helpline

Free 24/7 helpline for people in the Black country (Dudley, Wolverhampton, Sandwell and Walsall) who require urgent mental health support. Trained mental health support staff tailor their response to each caller's situation including:

- Listening and guidance
- Practical support ideas
- De-escalation of crisis
- Encouragement to explore self-help options
- Community based resources
- Onward referrals and a follow-up call if required

The aim is to try to avoid the need for a clinical intervention where possible, however, they work alongside NHS clinical staff who can support or take ownership of calls where needed.

Support is available to people of any age living in the Black Country and experiencing urgent mental health difficulties or concerns.

0800 008 6516 or send a text to 07860 025 281

The service provides a **direct number for WMAS colleagues to call the 24/7 supervisor and discuss any immediate concerns for a patient** and obtain information or advice in order to help avoid ambulance deployment, or conveyance to hospital where possible.

A relatively small percentage of patients are known to generate a disproportionately high percentage of emergency department attendances and hospital admissions, placing immense demand on these services. The **High Intensity User (HIU) Service** helps reduce high intensity user activity by offering around 60 patients per year an individualised outreach support, focused on health coaching to support an individual to improve their quality of life.

They work closely with people in their own homes using an approach focused on emotional wellbeing and recovery, and with the emergency department and clinicians to identify and respond to individuals. They offer training and support to colleagues, and attend forums and meetings for collaborative joint working including physical health specialities, and mental health and addiction services. The approach is person-centred and non-punitive; individuals are treated with care and compassion and are never told to not attend the hospital or call 999. The service has achieved consistent significant reductions and improved **Page 35 of 54** vulnerable group.

Sanctuary Hubs

For those who need to access face-to-face support out of usual mental health service hours they can visit the **Sanctuary Hubs, available within each Black Country borough.**

No referral is required, but people must be aged 18+ and live in or be registered with a GP in Dudley, Sandwell, Walsall or Wolverhampton.

The Sanctuary Hubs can provide emotional support to those in distress, in need of reassurance or at times when people need to be listened to most.

Monday – Friday, 6 – 11pm
Saturday and Sunday, 12noon – 11pm

Dudley - DY1 Community Centre, Stafford Street, Dudley DY1 1SA

Sandwell - Hope Place, 321 High Street, West Bromwich B70 8LU

Walsall - 1 Queen's Parade, Bloxwich, Walsall WS3 2E

Wolverhampton - Base 25, 29-31 Temple Street, Wolverhampton WV2 4AN

Wolverhampton High Intensity User Service (HIUS)

Crisis and step-down beds

We have three services providing community crisis and step down beds. Coopers Court in Tipton, Lonsdale House in Walsall and Victoria Court in Wolverhampton.

These services take MDT referrals in order to avoid a hospital admission for those experiencing a mental health crisis. They are short term and the aim is to return the service user back to their community within a week (although the service is for six weeks if needed).

They provide support for patients who can be discharged from an acute mental health hospital but, require ongoing 24 hour support in a residential support service. This service ensures patients are not unnecessarily occupying acute bed services whilst allowing them a greater opportunity to regain skills in order to live more independently.

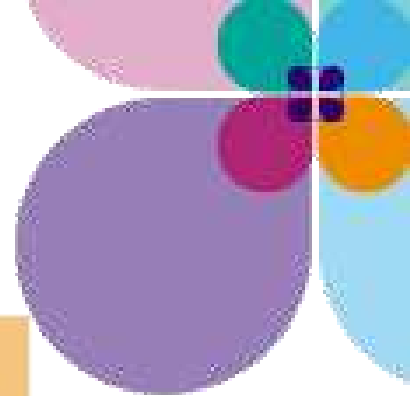
Crisis resolution and home treatment service

The Crisis Resolution and Home Treatment Service offer assessments, care, and treatment for people experiencing severe mental health problems and possibly being considered for hospital admission.

Home treatment offers an alternative to hospital admission in the person's own environment aiming to reduce disruption to the person's life and offering choice in their care.

The service will make a care plan with the person or help refer them to a more appropriate team if this is needed. They only rule out community support, from themselves or another team, when there is a clear need for someone to go into hospital.

Urgent Care transformation



Rationale for the priority

Proposed action required

Expected result

A number of out of area patients find themselves in Black Country acute hospital emergency departments either as a self-presenter or under Section 136 of the Mental Health Act.

Develop a memorandum of understanding (MOU) with partners across the West Midlands to deal with out-of-area patients presenting in emergency departments.

A reduction in out-of-area self-presenting mental health patients and frequent OOA users becoming stuck in Black Country emergency departments for long lengths of time.

Young people can wait a significant amount of time to be placed in a Tier 4 bed. This usually means the young person is waiting in an acute hospital setting until a bed becomes available from the CYP Provider Collaborative responsible for administering the beds on behalf of NHSE.

Work with the CYP Provider Collaborative on access to T4 beds for Black Country patients and develop better pathways for young people whilst they are waiting.

Reduction in the time young people are waiting for T4 beds, more options available to support once a decision to admit has been made.

The Black Country attracts a number of out of area people on placements. However, there is currently no system in place to track the service users or know what level of support they require, should the placement break down.

Develop an MOU with local authority partners to share information regarding people placed in the Black Country on placement and develop an escalation process for providing appropriate support from the originating organisation.

Service user needs would be more appropriately managed and responsibility would be with the placing organisation, to ensure continuity of care for the patient.

A number of patients placed on the mental health pathway on entering emergency departments have substance and alcohol misuse issues which can impact their mental health. There is not a current defined pathway or services across the Black Country for these patients, who may come into emergency departments via Section 136 of the Mental Health Act.

Develop a Black Country-wide strategy around drug and alcohol support including support pathways and integrated ways of working.

A mapped Black Country-wide pathway for mental health substance and alcohol misuse services that can be used by agencies and organisations to support alternatives to discharging Section 136 of the Mental Health Act.

Mental health liaison teams are currently located outside of emergency departments and sometimes outside of the acute trust which can lead to delays in the mental health liaison service accessing mental health patients in crisis in emergency departments.

Work with all four acute trusts on co-location of mental health liaison services to support a more responsive Mental Health Liaison Service.

A more responsive Mental Health Liaison Service that will be better supported to undertake assessments in line with national standards.

Black Country Ambulance resource model

True Single Point of Access (SPA) dedicated for 2 hour crisis response / call before you convey – WMAS / care homes / GPs.
Dedicated line for WMAS.

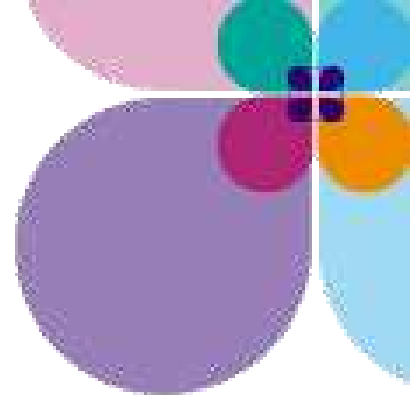
For SPA to have access to the WMAS stack for patients in cat 3, 4 and 5 in order to proactively identify and address need which does not need an ambulance response at all.

Clinical conversation with WMAS colleagues before a vehicle is dispatched in agreed circumstances 'call before you convey'.

Where an urgent response is required, existing mental health crisis services to be bolstered to enable a 2-hour community response, similar to the NHSE SDF funded mandated 2 hour physical health service. As a phase 2, upskilling of community staff within the 2 hour crisis response team for self harm wounds that could be treated without a need to go to A&E. Joint response with physical health where needed.

HISU model replicated and funded across all four locality areas.

Training model and support to be implemented.



Children and Young Peoples Mental Health



Children and young people's mental health

- An increase in referrals for children and young people presenting with severe anxiety, anxiety with school refusal and parental concerns around if their child has a disorder on the autistic spectrum continuum
- Many families have said there have been many positives about spending time together during the pandemic; they feel they have got to know their children better and in some cases family functioning has improved
- Parent's concern has been a loss of richness of information they share with referring professionals, such as GPs - currently exploring how to enable families to share information at point of referral to support triage and signposting
- Remote assessment and treatment has been positive and offers an improvement in access, but there is a need for a balanced approach and individual choice in deciding remote technology or in person or a mix
- Consider how digital poverty impacts on access for some young people who are part of silent groups in Dudley
- CAMHS have continued to meet the urgent needs of families and to deliver routine treatment
- Increasing demand in young people who are having their challenges and difficulties understood through the lens of mental ill health as the first approach
- Availability of other wellbeing/support services and early help
- Children are being referred for mental health support when they don't even have their basic needs met and there appears to be an absence of services addressing the environmental factors impacting on a child's wellbeing or families are failing to access these services

CAMHS transformation



Transforming Children and Young People's mental health across the Black Country





Thank you

General queries re service developments: bchft.pmo@nhs.net

Social Care and Health Overview and Scrutiny Committee – Recommendation Tracker 2023/24

Committee Meeting Date	Agenda Item	Action/Recommendation	Officer responsible	Status	Target Completion Date	Notes
13 July 2023	Areas of Focus	A work programme for the municipal year be produced containing agreed areas of focus.	Jack Thompson	Complete	6 September 2023	Sent with agenda papers.
		Information on Social Worker referrals for Adult Social Care be shared with Members of the Committee.	Jack Thompson/ Kerrie Allward	In progress		
		The Committee be provided with the cumulative impact of the Fair Cost of Care exercise.	Jack Thompson/ Kerrie Allward	In progress		
		That the Committee be provided with the amount and percentage of the Council's Council Tax spent on Adult Social Care.	Jack Thompson/ Kerrie Allward	In progress		
14 September 2023	Access to GP Services – Update on telephone systems	That the Committee be supplied with figures of the money allocated through National General Practice Improvement Programme to Walsall.	Jack Thompson/ Black Country ICB	In progress		
		That information on how to raise complaints to the ICB be shared with Members of the Committee.	Jack Thompson/ Black Country ICB	In progress		
26 October 2023	Update on Opening of Walsall Healthcare NHS Trust's Urgent and Emergency Care Centre	That the Committee request a future update on the Trust's Urgent and Emergency Treatment Centre.	Jack Thompson/ Walsall Healthcare NHS Trust	In progress		This recommendation will be relayed to the Committee when setting its areas of focus for 2024/25.

Social Care and Health Overview and Scrutiny Committee – Recommendation Tracker 2023/24

7 December 2023	Update on the midwifery led unit and maternity services.	That the Committee receive a future update on the Midwifery Led Unit, once it had been moved to the Manor Hospital.	Jack Thompson/ Walsall Healthcare NHS Trust	In progress		This recommendation will be relayed to the Committee when setting its areas of focus for 2024/25.
	Draft Revenue Budget and Draft Capital Programme 2024/25 – 2027/28	That a further report on the Draft Revenue Budget 2024/25 be presented to the Committee if any changes were made to the draft budget outlined in relation to the Committees remit.	Jack Thompson/ Kerrie Allward/ Suzanne Letts	In progress		

Social Care and Health Overview and Scrutiny Committee: Work programme 2023/24¹

Main agenda items	14/09/23	26/10/23	07/12/23	18/01/24	19/02/24	04/04/24
Theme: Primary Care Access						
Access to GP Services - Update on telephone system						
Social Prescribing (Walsall Healthcare Trust – Walsall Together)						
Mental Health Services						
Dentistry						
Theme: Emergency and Hospital Care						
Update on the new Urgent Treatment Centre						
Update on the midwifery led unit & maternity services (neonatal birthweights) ICB/Walsall Healthcare Trust						
Manor Hospital CQC inspection report feedback						
West Midlands Ambulance Services Update						
Theme: Waiting times						
Elective care waiting times (inc. Surgery)						
Adult Social Care						
Adult Social Care Continues Improvement Programme & CQC ratings of service providers						
Adult Social Care – CQC Inspection Readiness						
Adult Social Care Debt						
Reablement Services						
Budget Scrutiny						
Quarter 2 Financial Monitoring						
Budget Setting 2024/25						

¹ Please note that the work plan can be edited, and items can be added and removed at the discretion of the chair.



FORWARD PLAN OF KEY DECISIONS

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

8 JANUARY 2024

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 craig.goodall@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.

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 (craig.goodall@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:
 - (i) any decision in relation to an executive function which results in the Council incurring expenditure which is, or the 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 £500,000.
- (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.

**FORWARD PLAN OF KEY DECISIONS
FEBRUARY 2024 TO MAY 2024 (08.01.2024)**

1	2	3	4	5	6	7
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
50/23 (2.10.23)	Corporate Financial Performance 2023/24: To report the financial position based on 9 months to December 2023.	Cabinet Non-key decision	Vicky Buckley Vicky.Buckley@walsall.gov.uk	Internal Services	Cllr Bird	7 February 2024
51/23 (2.10.23)	Corporate Budget Plan 2024/25 – 2027/28, incorporating the Capital Strategy and the Treasury Management and investment Strategy 2024/25: To recommend the final budget and council tax for approval by Council.	Cabinet Council Key decision	Vicky Buckley Vicky.Buckley@walsall.gov.uk	Council taxpayers, business rate payers, voluntary and community organisations. Internal Services	Cllr Bird	7 February 2024 (Council: 22 February 2024)
52/23 (2.10.23)	Council Plan 2022/25 – Q2 23/24: To note the Quarter 2 2023/24 (outturn) performance against the Markers of Success in the Council Plan 2022/25.	Cabinet Non-key decision	Elizabeth Connolly Elizabeth.Connolly@walsall.gov.uk	Internal Services	Cllr Bird	7 February 2024
1/24 (8.1.24)	Walsall’s Regeneration Pipeline: To award a contract for the strategic partner framework.	Cabinet Key Decision	Joel Maybury Joel.Maybury@walsall.gov.uk	Internal Services	Cllr Andrew	7 February 2024

2/24 (8.1.24)	<p>Acquisition of a Strategic Town Centre Development Site:</p> <p>To approve the acquisition of a strategic town centre development site.</p> <p><i>This will be a private session report containing commercially sensitive information.</i></p>	Cabinet Key Decision	Nick Ford Nick.Ford@walsall.gov.uk	Internal Services	Cllr Andrew	7 February 2024
3/24 (8.1.24)	<p>Investment and Leasing Proposals for Council Owned Community Buildings:</p> <p>To support the continued delivery of services by the voluntary and community sector, through the signing of lease agreements and the underwriting of capital investment gaps for those occupying Council-owned properties. <i>This is an updated item previously included in the forward plan as entry 60/23.</i></p>	Cabinet Key Decision	Nick Ford Nick.Ford@walsall.gov.uk	Internal Services	Cllr Andrew	7 February 2024
65/23 (4.12.23)	<p>Materials Contract Awards:</p> <p>To award off-take and processing contracts for multiple recyclable materials.</p> <p><i>This will be a private session report containing commercially sensitive information.</i></p>	Cabinet Key decision	Katie Moreton Kathryn.Moreton@walsall.gov.uk Alan Bowley Alan.Bowley@walsall.gov.uk	Internal Services	Cllr Murphy	7 February 2024
4/24 (8.1.24)	<p>Walsall Balloon and Lantern Release Policy:</p>	Cabinet Non-key Decision	Jaki Brunton-Douglas Jaki.Brunton-Douglas@walsall.gov.uk	Internal Services	Cllr Murphy	7 February 2024

	Decision to be made on adopting the policy which will treat any 'releases' as litter.					
5/24 (8.1.24)	Fee Uplift Approach for Adult Social Care: To outline a revised approach to fee setting, fee uplifts and the links to quality across Adult Social Care services	Cabinet Key Decision	Andrew Osborn Andrew.Osborn@walsall.gov.uk	Internal Services	Cllr Pedley	7 February 2024
53/23 (2.10.23)	Determination of the Scheme for coordinated admissions, and the Admission Arrangements for Community and Voluntary Controlled Primary Schools for the 2025/26 academic year: To determine the scheme of admissions and admission arrangements for community and voluntary-controlled primary schools for 2025-26.	Cabinet Key Decision	Alex Groom Alex.Groom@walsall.gov.uk	Internal Services, Neighbouring Local Authorities, Schools, Faith Groups	Cllr M. Statham	7 February 2024
14/23 (6.2.23)	Growth Funding for Schools: To enable the Local Authority to fulfil its duty to secure sufficient primary and secondary school places, through the adoption of a policy for the application of revenue funding for school growth.	Cabinet Key Decision	Alex Groom Alex.Groom@walsall.gov.uk	Internal Services, Schools Forum	Cllr M. Statham	7 February 2024
6/24 (8.1.24)	Alternative Provision Contract: To approve the award contracts for the provision of Alternative Education.	Cabinet Key Decision	Laura Wood Laura.Wood@walsall.gov.uk	Internal Services	Cllr M. Statham	20 March 2024

58/23 (6.11.23)	High Needs Funding Formula 2024/25: To approve changes to the High Needs Funding Formula, as agreed by Schools Forum, to be used for the allocation of Dedicated Schools Grant – High Needs Block to schools in Walsall for the 2024/25 financial year.	Cabinet Key Decision	Richard Walley Richard.Walley@walsall.gov.uk	Schools Forum, Internal Services	Cllr M. Statham	20 March 2024
59/23 (6.11.23)	Early Years Funding Formula 2024/25: To Cabinet approve the Early Years Funding Formula, as agreed by Schools Forum, to be used as the allocation of funding to early years providers in Walsall.	Cabinet Key Decision	Richard Walley Richard.Walley@walsall.gov.uk	Schools Forum, Internal Services	Cllr M. Statham	20 March 2024
46/23 (4.9.23)	SEN Place Requirement: To approve finance for additional special educational needs school places.	Cabinet Key Decision	Alex Groom Alex.Groom@walsall.gov.uk	Internal Services	Cllr M. Statham	20 March 2024
66/23 (4.12.23)	Waste Management Strategy Update - Fryers Road Household Waste Recycling Centre redevelopment (HWRC): That Cabinet approve the pre-tender budget for the redevelopment of a larger Fryers Road HWRC and agree to use the Pagabo framework (design and build stages) for the procurement of Fryers Road HWRC.	Cabinet Key Decision	Katie Moreton Kathryn.Moreton@walsall.gov.uk Stephen Johnson Stephen.Johnson@walsall.gov.uk	Internal Services	Cllr Andrew Cllr Murphy	17 April 2024

67/23 (4.12.23)	Council Plan 2022/25 – Q3 23/24: To note the Quarter 3 2023/24 (outturn) performance against the Markers of Success in the Council Plan 2022/25	Cabinet Non-key decision	Elizabeth Connolly Elizabeth.Connolly@walsall.gov.uk	Internal Services	Cllr Bird	17 April 2024
57/23 (6.11.23)	Walsall Net-Zero 2041 Climate Strategy: To approve the Walsall Net-Zero 2041 Strategy.	Cabinet Key Decision	Katie Moreton Kathryn.Moreton@walsall.gov.uk	Internal Services	Cllr Flint	July 2024

Black Country Executive Joint Committee Forward Plan of Key Decisions

Published up to May 2024

Date Created	Key Decision	Contact Officer	Main consultee	Date of meeting
	Black Country Executive Joint Committee Governance			
04/09/2023	<p>Change Control and Delegated Authority</p> <p>Approval of BCJC Delegated Authority to the Single Accountable Body Section 151 Officer (SAB s151 officer) and approval of the revised Black Country Local Enterprise Partnership (BCLEP) Assurance Framework Change Control and Delegated Authority delegations, as detailed in the attachment of the report (BCLEP Assurance Framework Appendix 23).</p>	<p>David Moore David.Moore@walsall.gov.uk</p> <p>Mark Lavender Mark.Lavender@walsall.gov.uk</p>	Walsall Council	24/01/2024
	Land and Property Investment Fund			
04/12/2023	<p>Dudley Brownfield Land Programme</p> <p>Approval of the withdrawal of the Dudley Brownfield Land Programme project (Dudley Council) from within the Land and Property Investment Fund Programme.</p>	<p>Helen Martin Helen.Martin@dudley.gov.uk</p>	Dudley Council	24/01/2024

Date Created	Key Decision	Contact Officer	Main consultee	Date of meeting
04/12/2023	<p>Loxdale Residential Scheme</p> <p>Approval for the Accountable Body for the Land and Property Investment fund (Walsall Council) to proceed to enter into a Grant Agreement with Wolverhampton City Council to deliver the Land and Property Investment fund funded elements of the Loxdale Residential Scheme project with delivery to commence in the 2023/24 financial year.</p>	<p>Richard Lawrence Richard.Lawrence@wolverhampton.gov.uk</p>	<p>Wolverhampton City Council</p>	<p>24/01/2024</p>
04/12/2023	<p>Programme Management Costs</p> <p>Approval of the balance of Land and Property Investment Fund funds to be allocated to Accountable Body (Walsall Council) programme management costs, to cover additional due diligence and contracting costs associated with the replacement of a project.</p>	<p>David Moore David.Moore@walsall.gov.uk</p> <p>Mark Lavender Mark.Lavender@walsall.gov.uk</p>	<p>Walsall Council</p>	<p>24/01/2024</p>