

# Walsall Better Care Fund

Narrative Plan 2022-2023

August 2022

## Cover

As a joint programme, Walsall Better Care Fund has been in place since 2015 as per national requirements. The programme has remained as a driver across Walsall supporting agendas such as the reduction of hospital delays, older people remaining in their own home, timely discharges from the Acute, providing a joint approach to pilots to shape the market and the development of ambitions in relation avoidance.

As partners of the fund, Walsall Council specifically Adult Social Care (ASC) and Black Country Integrated Care Board (ICB) – Walsall Place have agreed an integrated approach by ensuring the programme aligns to joint commissioning priorities to embed its activity, spend, performance and is utilised as a programme to support joint developments. This agreed approach, is supported through key governance, where commissioning committees receive assurance in relation to the programme, and items of escalation to agree mitigation jointly.

Walsall Health & Wellbeing Board receive the programme, where agreement is sought from members, ensuring the programme continues to work effectively to support agreed local agendas and national priorities. In line with agreed governance, The Better Care Fund 2022-2023 Narrative plan, planning and capacity and demand templates will be presented to members before national submission on 26 September 2022. Walsall’s approval and agreement routes are as follows:

Forum	Membership	Decision and Date
ICB Strategic Commissioning Committee	Place Managing Directors ICB Directors	ICB level agreement of place plans and seeking delegated authority to approve plans at Place – 08.09.2022
Joint Commissioning Committee	Executive Directors – Walsall Council Directors – Walsall Council Managing Director – Walsall Place Finance leads – ICB and Walsall Council Commissioning leads – ICB and Walsall Council GP rep – Walsall Place	Seeking approval - 14.09.2022
Local Commissioning Board	Managing Director – Walsall Place PCN leads – Walsall Place Clinical leads – Walsall Place Directors – Walsall Council Executive Directors – Walsall Council	Agreement – 20.09.2022
Walsall Health and Wellbeing Board	Public Health, Adult Social Care and Children’s	Member sign off – 20.09.2022

	<p>Services Directors and Executive Directors Black Country ICB – Walsall Place (responsible for funding and developing Walsall Healthcare NHS Trust; Black Country Healthcare NHS Foundation Trust (Mental Health); West Midlands Police and Fire &amp; Rescue services; Walsall Housing Group Walsall College; Local councillors; Walsall Healthwatch.</p>	
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As partners of the Better Car Fund, Adult Social Care (ASC) and Black Country Integrated Care Board (ICB), Walsall Place have contributed to the completion of the template and narrative plan. Both are partners of our local alliance agreement at Place level, 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 targets and expenditure by ensuring agreement from our local Acute Trust (Walsall Healthcare Trust) Medical Directorate, specifically our Chief Operating Officer and Finance partners across Walsall Council and Black Country ICB. As part of delegated authority, the Executive Director of Adult Social Care has authority to approve plans pertaining to Walsall BCF on behalf of the Chief Executive for Walsall Council. This delegated authority also allows the Executive Director to joint Chair the Joint Commissioning Committee and approve recommendations.

## Executive summary

To ensure consistency and planning to future proof our current funded services and resources, partners agreed through assured governance routes to roll over the 2021-22 programme into financial year 2022-23. As a joint appointment, the Walsall Better Care Fund Programme Manager oversees the day-to-day activity associated with the programme, with the support of finance business partners from each organisation to review and predict programme spend against demand across provision, specifically Intermediate Care following the removal of the Hospital Discharge Fund. The removal of the fund also led to a period of adjustment this financial year, as a number of services supporting intermediate care and funded via BCF, were aligned to Hospital Discharge funding to meet unprecedented demand. At Place, we are still experiencing high demand against capacity in the market, leading to financial planning and analysis to inform of risk to BCF budgets. As part of mitigation, partners identified and agreed BCF contingency, focusing spend across areas of provision and staffing to support traditional Intermediate Care approaches and mitigate any overspends projected against services where demand has increased. The fund will also as per previous years, support commissioning recommendations in relation to innovation and learning in readiness for developments as per national guidance and Place commissioning intentions regarding Intermediate Care. Partnership discussions have taken place this year to establish the programme as part of the total financial envelope for the alliance model, Walsall Together. The intention is to continue financial support towards integration and the development of pathways and services. This is a forward step to embed the BCF at Place as an instrumental programme of activity to support commissioned activity, rather than a funding stream.

Governance remains to ensure BCF leads at Joint Commissioning Committee level are aware of risk with clear mitigation plans, providing assurance regarding performance, spend, with approval sought in relation to the use of funding in line with the s.75 agreement. In way of management of the programme, we have ensured alignment to KLOE's continues to be in line with Place targets set as per key BCF metrics, namely the 91-day indicator by ensuring older people are able to remain at home after 91 days. As per our planning template, our programme funds staffing and provision across Intermediate Care to support this, as well as support services such as the Integrated Equipment Store to support timely responses to discharges, and locality social work teams to support flow. The Quality in care Team receives BCF funding to support review of care homes across Walsall in line with what is considered 'good' quality of care. This financial year, an independent quality review will commence to review the current quality offer in Walsall. All services are person centred to the individual to meet needs appropriately, but also respond to demand.

During 2022-23, attention has turned to the future of the programme and its influence under the newly established Integrated Care Board (ICB) since 01 July 2022. There are now four Place BCF programmes for the Black Country ICB. Whilst there is acknowledgment at national level BCF programme will remain at Health and Wellbeing Board level for footprint, therefore remaining as place programmes, there is a need to understand governance for programmes under ICB arrangements and future developments. Across the ICB, there is now a Black Country BCF Manager working Group to share good practice and discuss future national and ICB developments to understand impacts on the four Place programmes and consideration of

new approaches to the management of all four programmes through examples such as a Black Country dashboard to host BCF related data.

As well as understanding the future of BCF programmes under ICB arrangements, at Place, review across the programme continues to ensure continued performance in line with spend and overview of commissioning recommendations to develop current funded provision across Place systems. This financial year, Partnership agreement approved use of contingency funding to increase capacity across pathways 1 and 2 to meet demand in relation to reablement and bedded services. This will increase capacity, support metrics, national conditions and national aims for Intermediate Care.

Partners have agreed priorities are to:

- Continue recurrent investment into services and resources supporting Intermediate Care
- Consider how the programme can support the reduction of health inequalities at Place
- Align Walsall BCF as a key programme of activity and driver for integration to the financial envelope under Walsall Together

## **Governance**

### **National context**

The Integrated Care Partnership (ICP) and ICB, together with other key elements of the new arrangements including place-based partnerships will bring together all partners within an Integrated Care System (ICS).

With ICBs now in place, established governance arrangements are required to support collective accountability between partner organisations for delivery and performance. These arrangements must facilitate transparent decision-making and foster the culture and behaviours that enable system working.

The Health and Care Act requires providers to have regard of their decisions on the triple aim duty of; (1) better health and wellbeing for everyone, (2) better quality of health services for all, and (3) sustainable use of NHS resources. Effective participation within system, place-based partnerships, and the introduction of provider collaborative will be necessary.

Effective collaboration between providers and with a range of other partners is necessary if the NHS is to transform health and care for patients and the public. Collaboration needs to take place in respect of the three key areas (shared planning and decision-making, collective responsibility with partners for service delivery, delivery of decisions and improvements) and providers must have in place governance arrangements to ensure that they are collaborating effectively.

### **Local update**

#### Governance developments

The Black Country ICB brings together Walsall, Dudley, Wolverhampton and Sandwell at system level. Whilst the ICB operating model is still to be defined, including the direction provider collaborative will take; discussions are taking place to understand arrangements regarding commissioning, finance, performance and workforce to support the local population and outcomes whilst adhering to national priorities.

In line with national recommendations, Place committees will sit as part of ICB structures, reporting into Board committees to develop place primary care and strategic commissioning arrangements. To support this development, leads across Adult Social Care, Public Health and Black Country ICB Walsall place agree a Place model is required to facilitate strategic discussions, with delegated responsibility. Discussions continue to understand the structure and membership of a Place model.

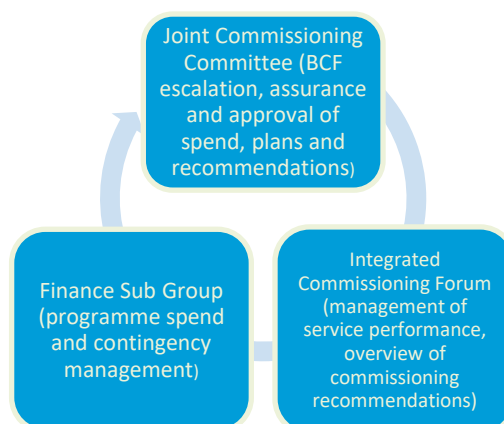
The relationship of the Place model and the alliance model, Walsall Together is to be agreed and forms part of discussions regarding the Place model. As a clear alliance model, Walsall Together promotes integration across place, bringing together partners to agree outcomes as per the outcomes framework and Health and Wellbeing Board priorities. 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, continue to meet

to discuss resource and future developments across the borough to promote independence and support agendas such as health inequalities. Whilst Walsall Together partners have no delegated authority, it is a vehicle to drive collaborative thinking and integration at Place. This supports the BCF as a programme of activity to support priorities such as maintaining independence and timely discharge. Through the exploration of a Place model, consideration of maintaining responsibility of statutory functions is required. This would include any high level discussions regarding continued s.75 agreements such as the Better Care Fund, and clear governance arrangements.

### Current governance

To support current responsibilities, agreed governance arrangements remain at Place level in relation to management, approval and assurance mechanisms, including Walsall BCF. The Joint Commissioning Committee (JCC) a partnership approach and established integrated group hosts commissioning leads across ASC, Public Health, Children’s Services and Walsall place under clear agreed governance, and is the approval route for all BCF programme decisions. As a membership, JCC meets at placed based level for the purposes of providing strategic commissioning leadership in relation to the health and social care responsibilities. This will include, commissioning programmes of work and other collaborative commissioning arrangements that partners may agree to enter into from time to time. Such arrangements may include, but are not limited to, formal pooled budget agreements, and aligned commissioning arrangements To develop integrated commissioning models which are outcomes focussed and aligned to local priorities driven by agreed strategies<sup>1</sup>

Sub groups of the JCC are in place, namely the Commissioning Committee with Senior Commissioning Manager membership across ASC, Walsall place and Children’s Services, and the Finance sub group. The forum reviews performance of BCF funded schemes, receives commissioning recommendations to develop pathways and manages risk. The finance sub group reviews spend and allocation of the fund provides projections against the budget and manages any contingency agreed by partners. Through the sub groups, management of the programme is transparent, and provides assurance to JCC on a monthly basis.



<sup>1</sup> Joint Commissioning Committee Terms of Reference final 2021



As per integration and developments under Walsall Together, the programme is shared with partners, strengthening an understanding to embed the programme across our pathways to contribute towards developments of partnership outcomes for the borough, rather than a stand-alone programme outside of key decision-making. As per previous years, and in line with agreed governance, the 2022/2023 BCF plan will be subject to approval of JCC and agreement from sub groups before sign off is sought from Walsall Health and Wellbeing Board.



## **Overall BCF plan and approach to integration**

### **National context**

At National level, The White paper highlights Integrated Care System (ICS) and NHS powers to allow the implementation of joint committees to support joint decision-making and remove barriers.

National guidance regarding the implementation ICBs have highlighted a number of recommendations for systems to take forward, which include the importance of alignment with the ICP to meet outcomes.

Developments at ICP level are progressing towards a five-year strategy and a broader approach to meet priorities. To support this, consideration of a strategic place model is required to facilitate broader conversations, with agreement of clear governance to feed back into the ICB for agreement.

### **Joint priorities for 2022-23**

During this financial year, integration continues to be the priority for Walsall in relation to the BCF programme. Locally in Walsall, the approach of joint responsibility between Walsall Council, specifically Adult Social Care and Black Country ICB, Walsall Place remains to manage the programme and its Place based developments to understand how we take the programme forward with clear priorities.

A clear joint priority for Walsall BCF this financial year is to work closely with leads from the alliance model, Walsall Together, to integrate the BCF so the programme aligns to developments to meet outcomes through agreement at Partnership Board across areas such as encouraging independence, a recognised outcome from BCF priorities, and the overarching outcomes framework. Alignment to Walsall Together also strengthen links to activity across areas such as the voluntary sector and housing as key partners of Walsall Together.

### **Approaches to joint/collaborative commissioning**

The understanding of system v place is a continued conversation to outline where specific responsibilities will sit for oversight and delivery. BCF at ICB level also requires some consideration to understand any impact on place activity where the programmes will fund services and resources. In line with national guidance, Walsall BCF remains at Place and is part of the governance structure to ensure programme activity, investment across pathways and commissioning opportunities discussed collaboratively with commissioners across Adult Social Care, Walsall Place and more recently Children's Services for oversight. Current joint commissioning arrangements are facilitated through a partnership approach namely the Joint Commissioning Committee (JCC).

The Health and Wellbeing Strategy 2022-25 is to be agreed this financial year by Walsall Health and Wellbeing Board members. The BCF programme will remain as a key driver to activity support continued integration at Place, with funding approved by partners to support pathways. As we move into 2023-24, partners will review the programme again to ensure

integration and delivery, whilst being aware of developments across the ICB through BCF programmes across the Black Country.

## **Implementing the BCF Policy Objectives (national condition four)**

### **Local update**

Across Place, Walsall has invested considerably into Intermediate Care. Our agreed approach to managing pathways and discharges through integrated teams and management, has led to an embedded collaborative model of care where the main provider and commissioners across Adult Social Care and Walsall Place discuss demand, capacity and spend regularly to understand our pathways. Walsall Together and BCF sub groups have played integral roles in the management of our BCF funded service, the Intermediate Care Service (ICS). The Service is a collaborative approach to delivering for people of the Borough bringing together health and social care teams, with strategic leadership across Adult Social Care and Walsall Healthcare Trust (WHT).

As a clear ethos, the intention of Walsall Together is for partners of the alliance to work together to ensure people remain independent for as long as possible with access to services and support. Following a significant investment by WHT facilitated by the Walsall Together plan, there has been an expansion of hospital avoidance capacity and a revised approach to crisis response, with overview of the Place Rapid Response service to operate a model with a revised timetable to offer support. It is intended the new Emergency Department at Walsall Manor Hospital will be operational from November 2022. These changes are in response to fundamental changes to crisis response timescales mandated by the Department of Health and Social Care (DHSC).

As per national guidance, Anticipatory Care is a priority, with plans outlining the responsibility of Integrated Care Systems to design, plan and commission Anticipatory Care for their system, of which Primary Care Networks (PCNs) must contribute. Plans should align to the Anticipatory Care Operating Model following publication, and should include detail regarding the following:

- The population cohort which will benefit most from proactive care in the community;
- How partners will ensure the necessary data sharing agreements are in place to both identify the anticipatory care cohort and to provide coordinated care across organisational and professional boundaries of health and care;
- The minimum number of patients to be offered anticipatory care;
- How assessment of patient need, and care planning will be carried out
- Agreed protocol for engagement of an individual followed by addition and then removal to the cohort list; and
- How the activity, experience and impact of anticipatory care will be tracked, and quality of the service improved

As an integrated system, discussions are underway to develop working groups under Walsall Together to facilitate discussions in relation to the scope and range of services across pathways to support developments, with analysis to identify gaps. In line with aims of ensuring patients live well and independent, Walsall BCF can identify current investment into has re-

ablement services and community support. This investment has a commitment from partners to remain as pathways and plans are developed.

There is a pathway approach in Walsall, with alignment to services and planning. As an integral focal point to care in Walsall, the Intermediate Care Service (ICS) is the single largest integrated service across Place for the health and social care system, and accounts for the highest amount of expenditure from BCF funding staffing and provision. The ICS is fundamental to the timely discharges from hospital of older adults, facilitates the assessment of people during a period of intermediate care and enables people to return to their own home, be that a care home, extra care scheme or private home as part of step down from hospital.

Following a continuation of funding from Walsall BCF into intermediate care, investment supports priorities to support older people and partners at Place agreed to fund the development of Pathway 1-3. Our programme also supports developments of the 100-day challenge, in way of investment into staffing to ensure seven day working across social care as well as health. This will be following a management of change, with current timescales indicating completion by autumn 2022. Our programme funds staffing who are instrumental to multidisciplinary working where ICS support on site at the acute to support early discharge planning. There is alignment across our BCF priorities and outcomes of Walsall Together by ensuring a joint approach to the commissioning of services to support independence and remaining at home for longer without the need for long term care. This in turn also supports the management of population health.

Our data has also identified a number of older adults under 65+ requiring support across these pathways. Monitoring is in place to support financial planning as our BCF programme has traditionally focussed on older people at 65+. At Pathway 1, additional block contract arrangements, funding up to 700 additional hours has received approval. This also supported an outcome focussed approach to care, ensuring older people are able to return home as per the home first approach. Across Pathway 2 and 3, commissioners recommended investment to increase bed capacity to meet demand and reduce spot purchasing which increased cost against budgets, following an increase in the need for older people to be 'stepped down' into bed provision, and the number of complex cases identified at Pathway 3. As a development at Place, commissioners are working with the provider to develop support across Pathway 0 through further collaboration with the voluntary sector to implement support on discharge where there are no identified care needs. Monitoring will take place through BCF sub groups and Walsall Together as per agreement.

Self-assessment of the 100-day challenge is complete. Walsall have a number of interventions in place or established, resulting in a rating of Amber overall 'Intervention happening some but not all the time'. Through the action plan, there is acknowledgement of ongoing work through an integrated approach. In line with a self-assessment against the High impact change model 'managing transfers of care', during 2021, a comprehensive review of the ICS was undertaken over a four month period with the continued support of key stakeholders within the ICS using a business analysis approach which included conversations with post holders across the ICS. The final report considers the ICS in line with associated national guidance and the future requirements of the service particularly in a post pandemic operating environment. The report outlined recommendations and detailed the associated enablers and timescales for

completion. The review also considered the impact of the worldwide pandemic COVID, and focussed on the period to understand the impact upon staff, welfare and in some cases physical health. Acknowledgments is required in relation to the national shortage of therapists. There is impact at Place where a large number of vacancies across specialised areas of the workforce, specifically Occupational therapists and Physiotherapists where support is required to align to the home first approach. At Place, interventions are in discussion to upskill staff to be able to work alongside qualified therapists, which offers opportunities for growth across the current workforce.

The Multidisciplinary approach is evident across Place and embedded into the Intermediate Care Service as a service. This approach adopted by operational leads, led to previous exemplary results recorded against the impact models. The review has identified good working relationships across ICS, enabling joint working to resolve complex situations. Following the review, there has been a focus to strengthen integrated working relationships, which includes Primary Care to deliver against the 'Right care, Right time, Right place' principle. During 2022/2023, collaborative commissioning arrangements will support the development of our pathways as per agreed investment from the BCF, to align continued development in line with High impact Change models, supporting seasonal escalation as a priority. In support of this, the capacity and demand template has enabled partners to identify areas of need in relation to additional capacity to meet increases in demand over the winter period. This approach has influenced amendments to reporting across our pathways.

## Supporting unpaid carers

### Local update

As a continuation, Walsall's Carers agenda benefits from investment through the BCF. There is an integrated approach to the review of the service provided, with discussion across forums to understand Borough wide impact and benefits. In 2022, following a procurement exercise, a contract was awarded to Forward Cares to deliver support across the Borough from July 2022.

Forward Cares have identified a hybrid model of information, guidance, support and communication to provide Carers with the opportunity to have needs met during flexible hours using effective approaches. The intention is to deliver robust, flexible and diverse carer-led support, with the aim of empowering Carers to build their resilience, which will make a positive difference to their caring role and for a fulfilled life outside of their caring role.

Forward Cares have, through their expertise identified a number of interventions to support unpaid carers. An offer of information and guidance including welfare advice, wellbeing checks, providing digital support and other provision to improve wellbeing within the Carers Hub for face-to-face support. Raising awareness of and respect for unpaid Carers is also a priority for the provider to support the reduction of Carer isolation and associated health impacts. A Health Liaison as a key funded role will train healthcare professionals to identify and refer Carers, helping the identification of new Carers, with support to stay well for longer.

In line with the new contract, these interventions will be subject to monitoring through indicators using an integrated approach with commissioners and assessment and care management leads to ensure alignment to Care Act responsibilities and BCF national conditions. A newly implemented Carers database will provide overview and updates for commissioners, and investment from Adult Social Care to fund an Engagement Officer will work alongside the provider across the community. For oversight, reporting will take place through BCF governance and Council internal governance structures as a statutory requirement.

## Disabled Facilities Grant (DFG) and wider services

As a statutory obligation, Disabled Facilities Grants (DFGs) delivery must be 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. The programme is managed directly by Walsall Council, and delivered in line with the Council's adopted Housing Renewal Assistance Policy (June 2022) and relevant legislation relating to DFGs. The updated Policy was developed in line with the BCF ambitions re maintaining independence and returning home following a hospital discharge. Corporate level consultation took place, including Adult Social Care, Public Health and the Hub. The Policy enables a flexible approach to provide support from additional investment for the most vulnerable, specifically residents identified with a disability. The service and the grant element remains subject to BCF governance as a funded BCF scheme. The council supports the BCF contribution by providing its own capital funding towards the programme.

As a Council led service, leads have completed analysis and improvements to reduce the total cost of individual DFGs. This has led to an increase in the number of households across the Borough who have been able to access the grant for support<sup>2</sup>. The integrated adaptations service remains in place, providing statutory DFGs, minor works and established handyperson services delivered in line with national best practice despite periods experiencing the impact of COVID across the Borough. To maintain continuity and integration across the service, partners agree to consistency of resources to support outcomes, specifically through the funding of specialist support from Occupational Therapists (OTs) including palliative OTs who submit the vast majority of referrals for adaptations and support, including Acute based OTs.

Wider integration, in line with good practice is demonstrated where Walsall Council has also provided regular support to neighbouring authorities via the national DFG Charity Foundations on streamlining DFG processes. Throughout the year, the team also provide simple fast referral routes for residents to access:

- a free home safe and well check by West Midlands Fire Service
- lower water charges – for those who are South Staffs water customers

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. The team also manage the assistance for home heating and insulation (which help reduce impacts of COPD and incidence of slips, trips and falls and excess seasonal deaths) and support residents to secure grants and loans to help with cheaper energy costs.

A key demonstration of integration in 2021/22 and 2022/23 is the direction of separate capital funding to help tackle fuel poverty, unfortunate seasonal deaths and the impact of illness caused by damp and or cold homes. Walsall's fuel poverty rate is 10th highest in all of England (as of most recent data 2020). During 2021/22 and 2022/23 Walsall secured and delivered millions of pounds worth of funding to tackle fuel poverty through targeted support to disabled

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<sup>2</sup> Walsall Council Joint Strategic Needs Assessment 2022



residents. The Councils latest position on this work is contained within the approved Home Energy Conservation Act Action Plan.

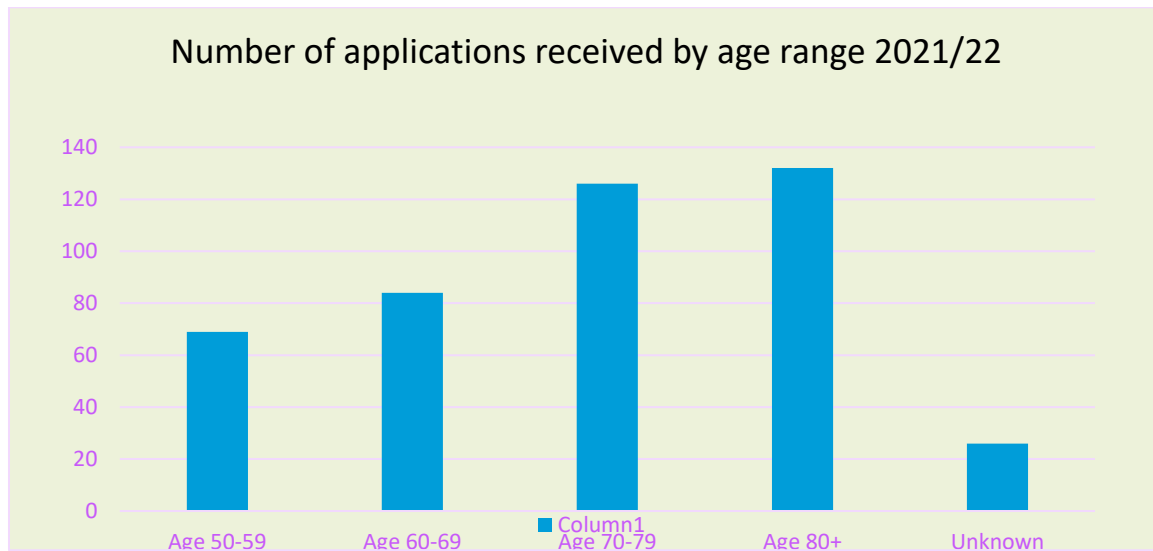
Overall, the services delivered by the team range from all forms of home adaptation for residents, directly supporting people to remain independent at home. In support of reducing inequalities, DFG funding and applications received supported one or more protected characteristics for example an identified disability. To maximise the use of the funds, the Council has agreed a process to review all quotations submitted, comparing these against 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 is via:

- Imposition of land charges in cases where grant is over £5,000. During 2021/22 this totalled 44 cases with a value of £178K
- Joint funding of adaptations to social housing properties – sharing the cost where possible to maximise help to residents of Walsall

Since 1 April 2022, 147 adaptations are complete, at an average value of £5,570. During financial year 2021-2022, 491 adaptations are complete:

- 310 (63%) were for residents over the age of 65 of which 178 were for residents aged 75 or older.
- 23 (5%) were households for children (below the age of 18) where an older person lived.

Below details, by age range support provided across the Borough:



The service has used DFG data to identify older people and families with an identified disability with help towards boiler repairs, replacements and upgrades to their heating systems. By the end of March 2023, it is expected that circa £425,000 additional capital from the Household Support Fund will have been used directly to help in this area.



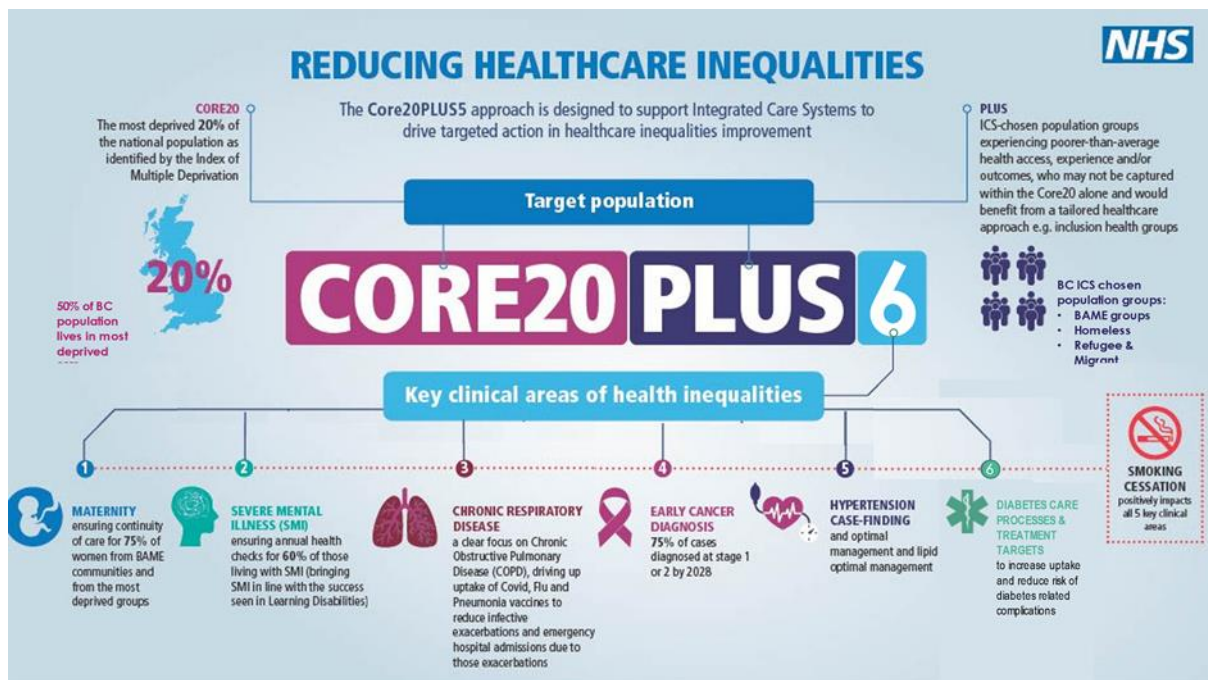
Locally, DFG as an integral funded service for Walsall BCF continues to align to national conditions and overarching local ambitions, supporting discharges where adaptations are identified, aligning and working alongside the Integrated Equipment Store where appropriate.

## Equality and health inequalities

At national level, there is an expectation a reduction in Health Inequalities for populations across England will be delivered by providers working collaboratively as part of system place-based partnerships, the provider collaborative, and the wider health and care system in England.<sup>3</sup> Walsall, through Walsall Together as the alliance model continues to operate as an integrated system, where reducing Health Inequalities is a priority, with a clear aim to ‘Promote equality and reduce inequalities by focusing on the wider determinants of health’. This is rooted in the collective approach to reduce inequalities, known as the wider determinants, ensuring better health and wellbeing across the Borough in line with investment<sup>4</sup>.

At Integrated Care System level, a Health Inequalities and Prevention Board is established with senior leads across the Black Country as part of the membership. The Board has responsibility to note efforts of tackling inequalities, with the relationship with Place Health and Wellbeing Boards discussed to understand priorities and the alignment with NHS priorities.

The approach aligns to the national ambition of The Core20 Plus5 agenda, highlighting the key inequalities for the 20% deprived across the Country are now a priority. As a system, Black Country ICB agreed six areas, rebranding to The Core20 Plus6 from the most deprived 20% of the national population with health outcomes inequalities identification<sup>5</sup>.



In support of this, a Black Country Health Equity Assessment Tool (HEAT) has received agreement. HEAT supports training to raise awareness of the critical importance health equity plays in everything we do, with a focus to ensure the health equity goes hand in hand in

<sup>3</sup> NHS draft guidance on good governance and collaboration - May 2022

<sup>4</sup> Walsall Together Population Health and Health Inequalities Strategy 2022-2024

<sup>5</sup> Walsall Together Population Health and Health Inequalities Strategy 2022-2024

everything we achieve across the Borough for everyone. Through partnership agreement, HEAT will be adopted by Walsall Together to support delivery and development.

In way of strategy, both the Joint Health and Wellbeing Strategy 2022-25 and Joint Strategy Needs Assessment, are in place and discussed at Health and Wellbeing Board level. Both documents consider the needs of the whole community, including those who experience inequalities and may find it difficult to access services. New ways of working have given all members of the Board the opportunity to review their services and with the financial challenges, the pandemic has placed, to ensure that provision is offering value for money<sup>6</sup>. This approach supports integrated working through partners of Walsall Together to meet outcomes as one of the major drivers of the Joint Health & Wellbeing Strategy, along with the West Midlands Fire Service, West Midlands Police Service and Walsall College, as this partnership comprises of the members of the Health & Wellbeing Board. These organisations are working together to:

- Promote equality and reduce inequalities by focusing on the wider determinants of health
- Provide high quality and accessible care for all who need it
- Improve the health and wellbeing outcomes for the population of Walsall
- Develop a skilled, motivated and happy workforce making the best use of partnership resources<sup>7</sup>

Our Place BCF programme continues to ensure investment across a number of services, which include those supporting independence on discharge through wrap around services where the workforce will support those with identified needs. The Improved BCF fund continues to fund a vast amount of Adult Social Care workforce. Locality social workers support the intention to tackle inequalities across the Borough. There is investment across specific services supports BCF metrics targets from baseline data identified for 8.3 (usual place of residence on discharge) 8.4 (number of long-term nursing and residential admissions to meet needs) and 8.5 (the 91 day indicator for those who have been discharged from hospital and remain in their place of residence after 91 days).

Our programme has remained stable as we embed Walsall Together priorities to align outcomes. As a programme of essential activity across our pathways, the approach to ensure we are able to ensure the reduction of inequalities is a key priority for funded services. To strengthen this, we will review monitoring to ensure this is in line with conditions. We will also identify any investment from the programme to support future interventions to continue the alignment of agendas, with key consideration of HEAT and the strategy.

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<sup>6</sup> Walsall Joint Health and Wellbeing Strategy 2022-25

<sup>7</sup> Walsall Joint Health and Wellbeing Strategy 2022-25