

## **Health and Wellbeing Board**

**19 March 2024**

### **Walsall MBC Commissioning Intentions**

#### **For Assurance**

##### **1. Purpose**

- 1.1. Under the Care Act (2014), local authorities are mandated to develop, review, and publish strategies and plans that show how they intend to meet their specific legislative duties and requirements in relation to market shaping and commissioning.
- 1.2. Local authorities (upper tier and unitary) are responsible for improving the health of their local population and reducing health inequalities. The public health grant received by these authorities is ring-fenced for use on public health functions, and must meet grant conditions set out by central government. The grant funds a number of prescribed and recommended services for the local population.
- 1.3. This report is to assure the Health and Wellbeing Board that Walsall MBC's Social Care and Public Health Directorates have a strategic approach to commissioning public health and social care services that will address need, demand, and local challenges. The intentions will drive the allocation of resources and will provide a transparent insight into where the social care and public health budgets will be spent. By publicly documenting Walsall MBC's social care and public health commissioning intentions, we will be evidence based and accountable in our strategic decision making for the benefit of our partners, providers, and communities.

##### **2. Recommendations**

- 2.1 That the board endorses the 2024-2027 Walsall MBC Social Care and Public Health (all age) commissioning intentions.

##### **3. Report detail**

###### **Adult Social Care**

- 3.1. Our commissioning intentions are driven by our commitment to improving quality of life. However, they are formulated by our data, national, regional, and local strategies and policies, (informal) public and stakeholder consultation, known health inequalities and disparities, collective financial constraints and resource availability, evidence-based practice and innovation as well as the need to work more in partnership and work towards a more integrated model of commissioning.

- 3.2. The ASC commissioning intentions are presented via tiers/themes, divided further into sub-themes.
- 3.3. Each of the sub-themes drive a Care Act (2014) duty and a strategic commissioning priority:

Theme	Sub-theme	Care Act (2014) Duty	Commissioning Priority
<b>Market development and management</b>	Market Sustainability	To assess and respond to the sustainability and quality of care services to ensure that the needs and preferences of individuals are being met	To support providers to develop and adapt so they can meet evolving needs and deliver high-quality care and support.
	Universal	Wellbeing of individuals should be at the forefront of decision-making and the provision of care and support services.	To enable people (with vulnerabilities/as they age) to remain happy and healthy (in their own homes) managing their lives in a way they choose.
<b>Prevention and Early Intervention</b>	Targeted	Early intervention is important to prevent or reduce the development of care and support needs	To focus on supporting vulnerable and frail citizens early, so they can live the lives they choose, preventing the need for unnecessary care and support.
	Long-term	To promote the wellbeing of individuals and ensure that they receive the necessary care and support over the long term	To enhance independence and wellbeing for residents in need of person-centred, long-term care and support
<b>Care and Support</b>	Specialist	Individuals with specific needs will receive appropriate and tailored services	To enrich the lives of residents, with the most complex needs

### Market Development & Management

- 3.4. The ASC commissioning intentions will also be implementing several golden threads; to be seen in everything we do and deliver as commissioners. These include, but are not limited to:
- Personalisation – ‘through our commissioning we will demonstrate how we are providing for the uniqueness of each resident.’
  - Digitalisation – ‘through our commissioning we will demonstrate how we are driving the use of technology to enhance the lives of residents.’ *NB: a health and wellbeing board priority*
  - Wellbeing – ‘through our commissioning we will demonstrate a holistic approach to residents’ health, happiness, and overall quality of life.’ *NB: a health and wellbeing board priority*
  - Co-production – ‘through our commissioning we will demonstrate how we actively listen, empower, respond, and innovate as a collective.’

- 3.5. We recognise that developing and managing our market is important for ensuring choice and diversity, improving quality and standards, for efficiency and value for money, for innovation and service improvement, for flexibility and adaptability to meeting need, to foster resilience and sustainability and to promote collaboration and partnership working.
- 3.6. The ASC strategic commissioning intentions for developing and managing the market are:
- To develop and implement a Walsall ASC quality assurance and compliance framework.
  - To undertake a comprehensive review of rates resulting in a three-year pricing strategy aligned to quality.
  - To focus on supporting the sufficiency and capacity of the ASC provider workforce.

### **Early Intervention & Prevention**

- 3.7. Ensuring there is a focus on prevention and early intervention is important to improve outcomes, maintain independence and autonomy, reduce demand on our services, make savings across the system, promote wellbeing for all, address inequalities and increase community resilience.
- 3.8. The ASC commissioning intentions for prevention and early intervention are:
- Ensure the Walsall Wellbeing Offer is promoted, embedded, and maximised.
  - Continue to invest in our ASC funded support, prevention, and advocacy (SPA) services.
  - Ensure there is a holistic reablement offer for people in the community and for hospital discharge (integral to a pathway to independence model)
  - To review commissioning opportunities for the day care offer (currently not commissioned)
- 3.9. We have a commissioning intention to improve our carers support offer. Improving quality of life for carers is important to us because we want to be able to better recognise the contribution they make, ensure their wellbeing is promoted, enhance the quality of care they provide, facilitate social inclusion, enable choice, and control, and ensure they remain independent and financially sustainable.

### **Care and Support**

- 3.10. Ensuring there is high quality care and support to meet need is important to ensure basic needs are being met for vulnerable and/or ageing adults, to promote independence and autonomy, to enhance wellbeing, to support carers, to prevent crisis situations, to ensure equity and access to a good quality of life and to enable rehabilitation and recovery.
- 3.11. The ASC commissioning intentions for meeting care and support needs are:
- To recommission the homecare offer, orientating towards an outcomes-based model.
  - To recommission local residential and nursing provision with a focus on people with dementia and/or complex care needs.
  - To recommission the direct payments, offer so residents are empowered to access community resources.

- To recommission supported living, residential and nursing provision in meeting the needs locally, of people with LD, Autism and Mental Health
  - To implement an individual service funds (ISF's) model for people with learning disability and/or autism.
  - To establish Walsall's enablement offer for people with LDA/MH (inclusive of shared lives provision)
- 3.12. The development of the aforementioned commissioning intentions (for a 3-year period) represents a critical step in our ongoing commitment to transform adult social care in Walsall. We remain mindful of the financial constraints and resource challenges but are committed to prioritising effectively to achieve the outcomes residents both need and deserve. Through ongoing monitoring and evaluation, ASC will ensure that the commissioning intentions remain responsive to the evolving needs of Walsall's community, adaptable to changing circumstances, and are aligned to the Walsall MBC Council Plan and with the Health and Wellbeing Strategy.

### **Children's Social Care**

#### *Special Educational Needs and Disabilities (SEND)*

- 3.13. The Children and Families Act places a legal duty on Local Authorities and ICS to secure services to meet the provision set out in individual EHC Plans. This means that ICS and the Local Authority will work together to ensure the full integration of special educational needs and disabilities (SEND) provision across education, health and care and strengthen the principles of joint planning and commissioning of services as set out in the Children and Families Act 2014.
- 3.14. Ofsted inspection in February 2019 judged our Local Area and SEN services as having 12 significant areas of weakness in the local area's practice. This resulted in a Written Statement of Action for which the LA and CCG hold joint responsibility.
- 3.15. An Area SEND revisit in December 2023 found that the evidence provided, alongside the feedback from partners, demonstrated the range of actions in place to continue and accelerate improvement, clear and sustained progress against the activity in our APP and that there is evidence that work is having a positive impact.
- 3.16. We want to continue to build on these improvements and in terms of commissioning intend to focus on:
- Further strengthening of local offer
  - Further strengthening our joint commissioning plans to ensure we meet local need more effectively and make better use of resources.

#### *Best Start in Life – family Hubs*

- 3.17. On the 1<sup>st</sup> of April the Department for education and the Department for Health and Social Care announced that Walsall was going to be one of 75 LA's eligible to be part of the next wave of Family Hub programmes.
- 3.18. A family hub is a system-wide model of providing high-quality, joined-up, whole-family support services. Hubs deliver these services from conception, through a child's early years until they reach the age of 19 (or 25 for young people with

special educational needs and disabilities). Family hubs aim to make a positive difference to parents, carers, and their children by providing a mix of physical and virtual spaces, as well as outreach, where families can easily access non-judgmental support for the challenges they may be facing. Family Hubs will provide a universal 'front door' to families, offering a 'one-stop shop' of family support services across their social care, education, mental health and physical health needs, with a comprehensive Start for Life offer for parents and babies at its core.

- 3.19. Effective service design and commissioning is crucial for better outcomes for infants, children, and families – particularly in the context of budget pressures. Designing effective family hubs is about responding to what children and families say they need; and building on best practice while addressing the gaps and who is being missed.
- 3.20. We will be developing a joint commissioning plan between the local authority and partners such as health commissioners for the services accessed through the family hub network.

#### *Adolescents with complex needs*

- 3.21. The number of adolescents with complex needs continue to grow year on year. We want to develop a collective response to the challenge of the growing demand for placements and services for Adolescents.
- 3.22. As well as implementing our revised placement sufficiency strategy we will be focussed on joint commissioning plans to develop effective community (integrated) service(s) that are able to assess and meet young people with complex needs safely and effectively in their own home avoiding the need for crisis high-cost placements.

#### *Integrated Locality working - Family Safeguarding*

- 3.23. In Walsall we received an investment through Department of Education 'Strengthening Families, protecting children programme' to develop and evidence-based model in protecting children. The model, originally developed in Hertfordshire, implements multi-disciplinary teams across our 4 localities with children's social workers, probation officers, adult recovery workers and mental health practitioners coming together to resolve the main family problems that cause harm to children's health and development.
- 3.24. We are now working through joint commissioning arrangements to ensure the model is expanded across our locality working.

### **Public Health**

#### *Children and Young People*

- 3.25. The Walsall 0-19 Healthy Child Programme contract provides Universal services for children and young people and encompasses: health visiting, school nursing, health in pregnancy, and teenage pregnancy services. This service is currently provided under Section 75 arrangements with Walsall Health and Care Trust (to end of March 2026).

- 3.26. A new Child and Family healthy eating programme has also been commissioned from April 2024. This will involve working with early years settings, schools, and communities and wider partners to increase awareness of the importance of good food and increase provision, as well as upskilling communities to be able to cook well on a budget, linked to wider work around the Walsall Food Plan and emerging partnership.
- 3.27. The Young People's Health and Wellbeing Service (POP – Positive Outcomes project) will continue to be commissioned with non-recurrent Public Health funding in 2024/25. The service currently operate out of 3 hubs in Blakenall, Walsall town centre and Palfrey, with a fourth coming on stream.
- 3.28. The public health grant is also used to fund public health elements of work undertaken by the Early Help teams in Walsall, and support for the Family Safeguarding model through provision of alcohol and drug support workers (an element of this will be provided through corporate council funding in 2025/26)

*Reducing health and wellbeing risk*

- 3.29. Local authorities are required to commission open access sexual and reproductive health services. Walsall Public Health commission this service under Section 75 arrangements with Walsall Healthcare Trust (to end of March 2026). In addition to the main contract with the trust, we have sexual health services delivered by 26 GP practices and a number of pharmacies in Walsall. A new accessible town centre site was also opened at the end of 2023, at the Hatherton Medical Centre.
- 3.30. There is a requirement for local authorities to commission NHS health checks, which Walsall Public Health team continue to do through GP practices in the borough. NHS Health check activity continues to increase as part of the recovery programme.
- 3.31. Alcohol and drug treatment services are required to be commissioned in order for local authorities to receive the benefit of additional national grant funding linked with delivery of the national drug strategy – From Harm to Hope. Key targets include: increasing the number of adults in treatment, increasing the number of rehabilitation places, increasing the proportion of individuals engaged with alcohol and drug treatment services following release from prison and reducing drug and alcohol related deaths.
- 3.32. The Glebe Centre, who provide support for homeless and vulnerably housed individuals are also commissioned through the Public Health grant. A number of health services are provided from the site, including primary care, alcohol and drug treatment services etc.
- 3.33. The local authority is due to receive additional grant funding for stop smoking services in 2024/25 in line with the Prime Minister's smokefree 2030 ambitions. The plan for this funding is being developed, alongside the roll out of our new Wellbeing Service (Be Well Walsall), which went live in November 2023. The service provides adult weight management services.

## *Mental and Physical Wellbeing*

- 3.34. A range of services are currently commissioned through non-recurrent Public Health grant funding, linked to the 10year Mental Wellbeing Strategy, Together We Can, including counselling, bereavement support, suicide prevention and mental wellbeing training, alongside the mobile mental wellbeing unit – these services will continue in 2024/25. Public Health also contribute to the Black Country Mental Health advice line provided by Rethink Mental Illness, who also run our No Wrong Door network and maintain and Mental Health and Wellbeing Directory.
- 3.35. Our new wellbeing service, Be Well Walsall, will provide social prescribing support and has built in low level mental wellbeing support, with mental wellbeing being one of the outcomes being captured by the service.
- 3.36. Public health grant is also used to commission internal services, including:
- The healthy spaces team who maintain our parks and green spaces, and provide opportunities for physical activity in our communities.
  - The A stars road safety programme in schools, which has a focus on both safety and active travel.
  - Trading Standards work focused on reducing illicit tobacco, working with takeaways re healthier choices etc.

## **4. Health and Wellbeing Priorities:**

- 4.1 The Social Care (Adults and Childrens) commissioning intentions detailed in this report will address the following JSNA and Walsall Health and Wellbeing Strategy priorities:
- Mental health (children, young people, and adults) – Walsall MBC social care directorates will play a vital role in promoting mental health and wellbeing by driving access to community, statutory and commissioned services, promoting social inclusion, addressing housing and employment needs, coordinating care, supporting rehabilitation and recovery, providing assistance to caregivers etc. In short, Walsall MBC social care is making a commitment to address the social determinants of mental health, to improve quality of life.
  - Reduce health inequalities – through the lens of prevention and early intervention social care will be targeting support to those most at risk of experiencing poor outcomes. The directorates will be expecting commissioned services to be able to demonstrate how they are reducing disparities and promoting social justice within communities.
  - Dementia prevalence – through the lens of care and support, ASC is committed to addressing the complex needs of individuals living with dementia and supporting their caregivers. By having a focus on dementia within the long-term commissioning intentions, social care commissioners can work with policymakers and healthcare leaders to improve outcomes and enhance the quality of life for carers and the cared for.
- 4.2 Public Health commissioned services contribute directly to all three of the Health and Wellbeing strategy priorities – Children and Young People, Mental Health and Wellbeing and our Digital approach. They also, alongside the wider work of the Public Health team, support the vision for the borough that we have through the We are Walsall 2040 borough plan.

## Background papers

### Appendix A: Walsall MBC Adult Social Care Data Story



Walsall Adult Social  
Care Data Story 2022-

### Appendix B: Walsall MBC Adult Social Care Commissioning Intentions 2024-2027



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