

## Minutes of Health and Adult Social Care Scrutiny Board

**Monday, 14 July 2025 at 6.00 pm at Council Chamber, Sandwell Council House, Oldbury, B69 3DB**

**Present:** Councillor E A Giles (Chair)

Councillors: Fitzgerald (Vice-Chair) M Allcock Bhamra E M Giles	Councillors: Kalebe-Nyamongo Muflihi Maycock Tipper
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**Officers:** Rashpal Bishop (Executive Director of Adult Social Care and Health); Laura Brookes (Black Country Healthcare NHS Foundation Trust); Sarah Hogan (Black Country Healthcare NHS Foundation Trust); Michelle Carolan (Black Country ICB); Alexia Farmer (Healthwatch); Amritpal Randhawa (Healthwatch); Alex Goddard (Scrutiny Lead Officer).

### **23/25 Apologies for Absence**

Apologies were received from Councillors Trumpeter and Uppal.

### **24/25 Declarations of Interest**

Alex Goddard, Scrutiny Lead Officer, declared a personal interest in the matter referred to at Minute No. 27/25 insofar as he was an ordinary member of the Black Country Healthcare NHS Foundation Trust.

### **25/25 Minutes**

**Resolved** that the minutes of the meetings held on 10 March and 28 April 2025 are confirmed as correct records.

### **26/25 Urgent Additional Items of Business**

There were no urgent additional items of business to consider.

### **27/25 Establishment of Joint Health Overview Scrutiny Committee**

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 mandated local authorities to appoint joint

committees where a relevant NHS body or health service provider consulted more than one local authority's health scrutiny function about substantial reconfiguration proposals.

The re-establishment of joint working arrangements with Birmingham City Council enabled both councils to scrutinise health matters that were relevant to both areas.

The establishment of joint working arrangements with Dudley Council, Walsall Council and Wolverhampton City Council would enable the Black Country Councils to scrutinise health matters that were relevant across the sub-region.

**Resolved:-**

- (1) that the Joint Health Scrutiny Committee arrangements for scrutiny of matters affecting the Sandwell and West Birmingham area are re-established with Birmingham City Council;
- (2) that the following members of the Health and Adult Social Care Scrutiny Board be appointed to the Joint Health Overview and Scrutiny Committee with Birmingham City Council - Councillors E A Giles, M Allcock, Bhamra, Kalebe-Nyamongo and Trumpeter;
- (3) that Joint Health Scrutiny Committee arrangements for scrutiny of matters affecting the Black Country area are established with neighbouring Black Country authorities (Dudley Council, Walsall Council and Wolverhampton City Council);
- (4) that the following members of the Health and Adult Social Care Scrutiny Board be appointed to the Joint Health Overview and Scrutiny Committee with neighbouring Black Country authorities - Councillors E A Giles, Maycock, Muflihi and Trumpeter.

**28/25**

**Developments in Mental Health (MH) and Learning Disabilities & Autism**

Representatives of the Black Country Healthcare NHS Foundation Trust (BCHFT) attended the meeting and provided updates on:-

- Developments in the Older Adult Mental Health Services and the opening of new wards at Edward Street Hospital;
- The review of the Adult Attention Deficit Hyperactivity Disorder (ADHD) and Autism diagnostic service and the need to temporarily change the criteria for referral to the service.

**Older Adult Mental Health Services**

It was reported that significant progress has been made in the transformation of Older Adult Mental Health (MH) services across the Black Country, aligned with national programmes including Community Transformation and the Eradicating Dormitories initiative.

Members noted that older adult community MH services now offered extended hours to support urgent cases and reduce hospital admissions. The In-Reach

to Care Home Service had been launched to assist care homes in managing residents' mental health needs. Admiral Nurses, in partnership with Dementia UK, continued to support individuals with dementia and their carers. The Older Adult Therapeutic Service (OATS) provided time-limited, recovery-focused group and 1:1 support to promote community connection and independence.

The Board was informed that a new state-of-the-art inpatient facility at Edward Street Hospital is scheduled to open in late Summer 2025, offering modern care environments for those requiring admission.

### **Adult ADHD and Autism Diagnostic Service**

It was reported that there has been a significant and sustained increase in demand for ADHD assessments across the Black Country, reflecting a national trend. ADHD was a lifelong neurodevelopmental condition that could be managed effectively, though recent years have seen medication shortages, potentially linked to rising referral rates.

NHS England had established a national ADHD taskforce. Early findings highlighted that ADHD support should be needs-led rather than diagnosis-dependent, and that a solely specialist model was unsustainable. The taskforce also called for urgent action from national departments to address growing backlogs and recommended risk-based prioritisation of waiting lists.

In response to the taskforce's findings and in light of increasing demand and associated clinical safety concerns, BCHFT was implementing an interim risk stratification model for new ADHD referrals. This interim measure will be in place for six months and reviewed following the full taskforce report.

The proposed criteria for new referrals was:-

- Adults who were currently engaged with the Criminal Justice System with a high risk of re-offending, or with identified current high safeguarding risks;
- children whose illness had commenced in childhood and required additional shared care prescribing;
- Veterans;
- Anyone with a comorbid condition and open to secondary mental health care services.

These criteria would ensure that those for whom undiagnosed ADHD posed the greatest risk would be seen more quickly.

Any complex and urgent cases outside of these criteria would be referred to the ADHD Multi-Disciplinary Team for review and consideration.

Members noted that a communication pack for Primary Care was planned so that those who did not meet the new criteria could be referred to Right to Choose and other local needs-led support such as the Recovery College, Talking Therapies and Social Prescribing.

From the comments and questions by members of the Board, the following responses were made and issues highlighted:-

- Members welcomed that the Edward Street plans included outdoor space, which was important to help with mental health.
- In Sandwell the Talking Therapies Plus programme was delivered by Communities in Sync and included a number of other voluntary sector organisations. This programme was aimed primarily at underserved communities including Black, Asian and minority ethnic groups.
- It was anticipated that the national Taskforce would issue further guidance and that this would include expectations around the adoption of risk stratified approaches.
- Demand nationally outstripped capacity for ADHD and autism diagnoses. It was felt that the risk stratified approach would help ensure those most in need of diagnosis would be able to receive it.
- Conservative estimates indicated that demand resulting from the risk stratified approach could be met within current capacity levels.
- Neurodivergent pathways were not crisis support, but were an assessment service. Anybody on the pathway who experienced a mental health crisis would be able to access support in the same way as currently including the Crisis Team and the Sanctuary Hub.
- If a patient did not meet the criteria set out in the risk stratified approach they could access other services such as talking therapies, the Recovery College or they could exercise the Right to Choose which allowed them to access services from any provider that held an NHS contract in England.
- A range of methods would be used to ensure GPs understood the new risk stratified model; these included informational videos, lunchtime training sessions and a toolkit.
- Whilst treatment pathways were personalised, diagnostic pathways were not as flexible with standardised assessments. For the new diagnostic pathway for the Black Country, a health equity assessment tool was being used to avoid any built-in inequalities.
- It was reiterated that no one would be turned away without signposting to other support services.

The Board was minded to support the initial pilot running for nine months, with the assessment brought back to a future meeting of the Board after six months. This would allow the tool to remain in use while being evaluated.

**Resolved:-**

- (1) that the pilot risk stratified model for Adult ADHD and Autism be supported for nine months;
- (2) that a further report on the evaluation of the risk stratified model be brought to a future meeting of the Health and Adult Social Care Scrutiny Board after six months of operation of the model.

**Work Programme**

It was reported that an annual work programming event had been held in June 2025 where councillors and officers considered the consultation responses from members of the public, suggestions from chief officers and councillors and formed a draft work programme for the 2025/26 municipal year.

Additionally, the Board agreed to re-establish the Scrutiny Review of Poor Birthing Experiences and Inequalities in Sandwell, and established a working group to undertake this work.

**Resolved:-**

- (1) that the Health and Adult Social Care Scrutiny Board Work Programme 2025/26 is approved;
- (2) that the following members of the Health and Adult Social Care Scrutiny Board establish a working group to continue and conclude the scrutiny review into Poor Birthing Experiences and Inequalities in Sandwell:- Councillors E A Giles, M Allcock, Bhamra, Fitzgerald, E M Giles, Kalebe-Nyamongo, Maycock, Muflihi and Tipper.

Meeting ended at 6.42 pm