Sandwell Health & Wellbeing Board

24 September 2025

Subject:	Sandwell's Approach to Neighbourhood Health
Presenting Officer and Organisation	Kat Rose Group Chief Integration Officer Sandwell & West Birmingham Hospital NHS Trust Dudley Group NHS Foundation Trust
Purpose of Report	For Information

1. Recommendations

1.1 That the board are kept informed of the work being undertaken through the Sandwell Health & Care Partnership on the approach and development of Integrated Neighbourhood Health

1.2 The board is asked to note the follow key updates: -

- The outcome of a Neighbourhood Health Maturity Self-Assessment which evaluated system-wide progress across the six core components of neighbourhood health.
- The outcome of Sandwell's application to the National Neighbourhood Health Implementation Programme.
- The initial developed draft Sandwell Integrated Neighbourhood Team Model.
- Work to date to pilot and test delivery of the model.
- Sandwell will need to develop a Neighbourhood Health Plans as stipulated in the Planning Framework for the NHS in England. At the point of writing, we still await further guidance on what is required within the plans but a lot of the work we have been undertaking and outline in this report will form the foundations of the plan.

2. Links to Workstreams Set out in the Health and Wellbeing Strategy

Healthy Communities	As part of the proposed model for Sandwell it encompasses developing co-ordinated approaches to wider health and wellbeing through all partners.
Primary Care	Integrated Neighbourhood approach looks to ensure primary care are central to the leadership of the model.
Integrated Town Teams	Develops further the model on integrated health by town within Sandwell
Intermediate Care	Th Integrated Health model will also support keeping people at home where possible and supporting improved discharge through an integrated approach.
Care Navigation	Remains central to the Integrated Neighbourhood approach

4. Sandwell's Integrated Neighbourhood Health Approach

4.1 The NHS Neighbourhood Health Plan is a strategic initiative designed to improve population health and reduce health inequalities by delivering more integrated, localised care. It focuses on neighbourhoods of around 30,000–50,000 people, enabling Primary Care Networks (PCNs) and partners to work collaboratively with communities to address their specific health and wellbeing needs.

4.2 Delivering integrated neighbourhood health is a key component of the NHS 10-year plan and the key objectives of integrated neighbourhood health are as follows:

- Shift from reactive care to proactive, preventative, and personalised care
    - this supports financial sustainability by reducing demand on acute services.
- Strengthen multi-disciplinary, community-based teams led by primary care
    - this empowers local leadership and communities in co-designing services.
- Tackle wider determinants of health, including housing, employment, and education
    - this builds partnerships across NHS, local authorities, education, local businesses, the voluntary sector, and communities.
- Support health equity by targeting underserved populations
    - this enables better use of local data and insights to target interventions.

4.3 Sandwell's 6 towns each has an established Integrated Neighbourhood Team that has developed over the past 12 months.

Teams include representatives from:

- SWBT Community Matron (Neighbourhood Team Clinical Lead)
- District Nursing Team
- Community Therapies
- Mental Health Services
- Social Care and Social Workers
- Social Prescribers
- Public Health Development Workers (linked to voluntary/community sector)

4.4 As part of the Community Mental Health Transformation Programme, Primary Care Mental Health Teams have been established and will form the foundation of mental health support within the integrated neighbourhood teams.

4.5 Primary Care Integration: Sandwell has eight Primary Care Networks (PCNs), which are not geographically aligned with the towns, however in a dense urban area neither are individual GP registration patterns. As part of those 8 PCNs Sandwell and West Birmingham NHS Trust also have a large vertically integrated super practice covering 50,000 registered patients that also spans the borough.

4.6 Whilst this adds complexity to our INT development, the Sandwell Primary Care Collaborative, comprising of all eight PCN Clinical Directors, supports the development of a town-based neighbourhood model. We have found that building a model around the towns our residents identify with, has helped bring services and partners together in a meaningful way. It has helped us focus on what works on the ground, rather than getting caught up in organisational boundaries. Our town-based INTs are already showing promise in strengthening day-to-day joint working and improving links with the voluntary and community sector.

4.7 Therefore, we have developed a draft Neighbourhood Model which enables primary care to be central to INT working, while not requiring time consuming and complex PCN re-configuration.

4.8 Strategic partners have agreed a draft model structured around four tiers:

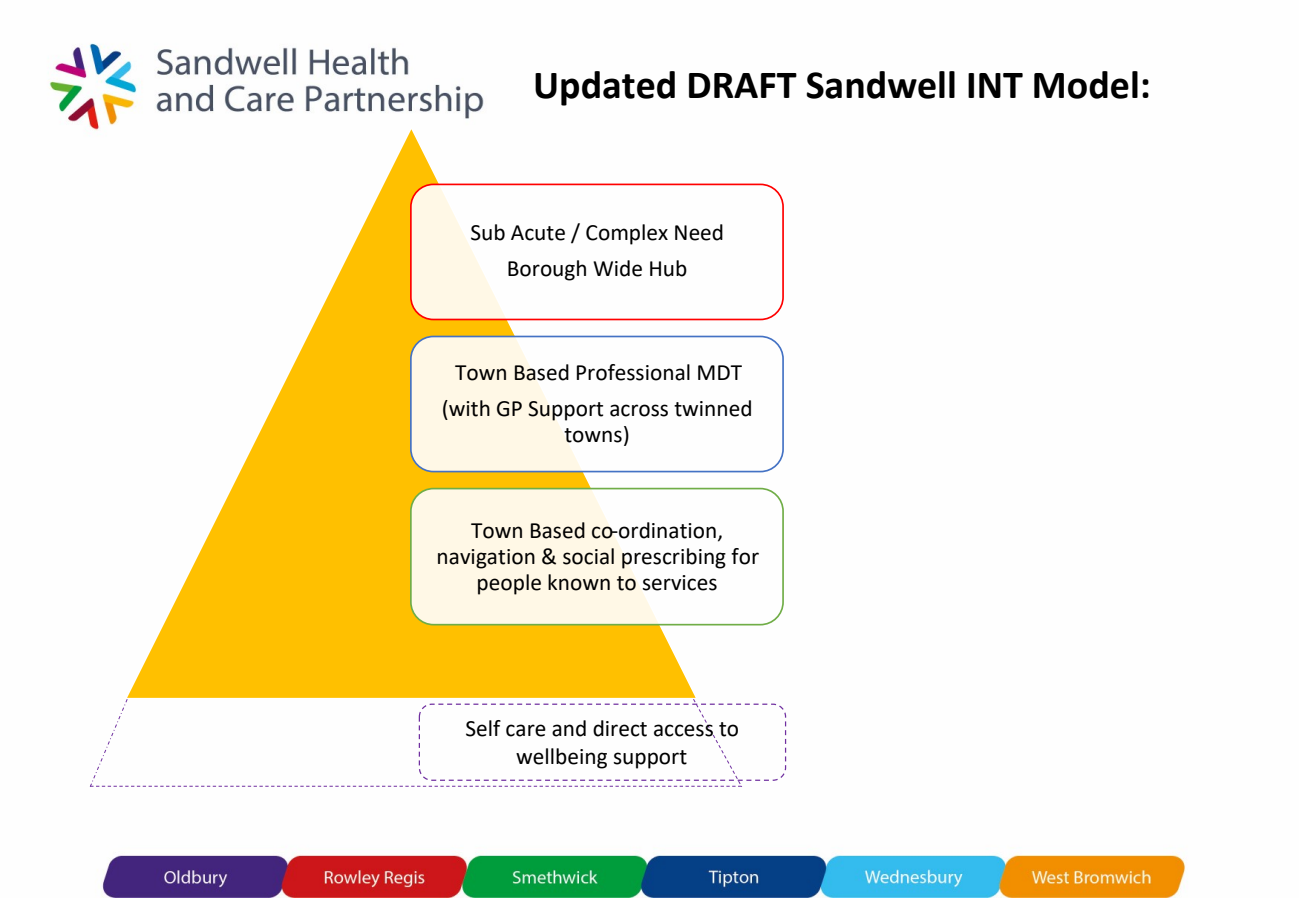
Tier 1: Borough-Wide Hub – Managing complex patients with urgent escalating need

Tier 2: Neighbourhood-Based Professional INTs – Supporting proactive care for complex patients requiring multi-agency input

Tier 3: Neighbourhood-Based Coordination – Locally co-ordinated professionals offer for social prescribing, wellbeing, and non-statutory support

Tier 4: Self-Care and Community Support – Locally co-ordinated public offer for voluntary sector, and digital tools including the support to empower residents' self-care.

4.9 Draft Neighbourhood Model:



4.10 Pilots and Initiatives: Pilots are underway for Tier 1 and Tier 2 to clarify operating models and resource requirements. Using a Population Health Management approach and frailty datasets, patient cohorts (severe, moderate, mild) have been identified to guide intervention planning.

4.11 Tier 1 Initiative:

1) The inclusion of a GP and Geriatric Medicine Consultant co-located within the Care Navigation Centre. These clinicians will support Call Before Convey and the Urgent Community Response (UCR) service, enabling a higher level of positive clinical risk and intervention in the community thereby avoiding unnecessary hospital attendance/admission.

4.12 Tier 2 Initiatives:

1) Sandwell and West Birmingham NHS Trust's vertically integrated practice and PCN is piloting a reactive community frailty hub to coordinate care for patients with severe frailty following an acute attendance or admission. The hub is GP led with MDT participation from the community team, as well as hot access to geriatric and palliative care consultants.

2) A proactive GP-led town-based MDT is using population health data to identify patients from three different cohorts, and provide them with holistic care planning and support:
   - Moderate frailty risk
   - High Intensity Users (HIUs) of GP services
   - HIUs of emergency care

4.14 These pilots will enable us to test whether our INT approach is improving outcomes and through ongoing testing and refinement we will then rapidly deploy our model to other patient cohorts, such as those with long term conditions.

4.15 In July the Sandwell Health & Care Partnership undertook the national Neighbourhood Health Maturity Self-Assessment. Structured to follow the six core components of the Neighbourhood Health Guidance, published in January 25, it sets out the expectation for successful neighbourhood working. The assessment also included four key enablers: system architecture, workforce, digital and leadership.

4.16 While completed at the Place level, several of the components and enablers are system led, and the assessed level is therefore not a reflection of local capability or capacity. Where local leadership is integral Sandwell is particularly mature in two of the core components, integrated intermediate care and urgent neighbourhood services, with more work to do on Neighbourhood Multi-Disciplinary Teams (MDTs). The full detail of the assessment can be found in Annex 1.

Core Component	Local/ICB driven	Self-Assessment			
		Starting	Progressing	Achieving	Excelling
Population Health Management	ICB	X			
Modern General Practice	ICB	X	X		
Standardising Community health services	ICB	X			
Neighbourhood MDTs	Local	X			
Integrated Intermediate Care	Local				X
Urgent Neighbourhood services					X
Enablers					
System Architecture	ICB	X			
Workforce	ICB/Local	X	X		
Clinical & professional leadership	*Not assessed as no criteria released nationally*				
Digital	ICB/Local	X			

4.17 In August the Partnership submitted an application for the National Neighbourhood Health Implementation Programme. Designed to accelerate areas that are already progressing their neighbourhood model through access to tailored support, shared learning opportunities and the ability to influence national neighbourhood policy.

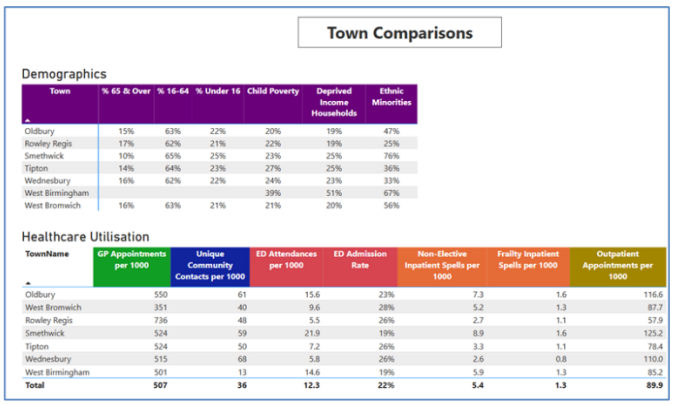
4.18 Sandwell's application was supported by all partners and co-produced across health and care. The full application can be found at Annex 2. Sadly, we found out early September that Sandwell was not selected to be one of the 42 areas for the first wave. In the Black Country Walsall place were successful and they have agreed to share learning across the Black Country.

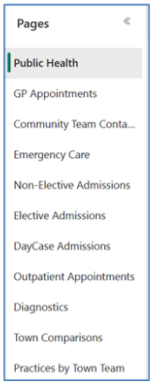
4.19 Regardless of our place on the programme the aspirations and work outlined in the application will continue:

- Our DRAFT neighbourhood model pilots have all commence in September 2025.
- A session with the Strategy Unit on approaches to evaluation has informed how we take forward our planning and impact assessment.
- The last Sandwell Health & Care Partnership board development session focussed on understanding our neighbourhoods; with draft town level dashboards developed including public health profiles, Trust data, family hubs, adult social care and public feedback.
- A successful Home First redesign session with adult social care colleagues on 27 August has given us a clear medium-term plan for how we further advance our integrated intermediate care model.

- A frailty pathway mapping session between acute, community and primary care has also been undertaken in September to identify out of hospital proactive care opportunities.

4.20 To further support all the above significant progress has been made in the analytical and business intelligence available to improve both direct care delivery and inform pathway transformation through the development of an integrated neighbourhood team dashboard: combining public health, primary care and Trust data at town level, enabling us and partners to understand differences in access, use and outcome.





4.21 Sandwell will need to develop a Neighbourhood Health Plan as stipulated in the NHS England Planning Framework. At the point of writing, we still await further guidance on what is required within the plans but a lot of the work we have been undertaking and outline in this report will form the foundation of the plan.

Neighbourhood Health Plans	These will be drawn up by local government, the NHS and its partners at single or upper tier authority level under the leadership of the Health and Wellbeing Board, incorporating public health, social care, and the Better Care Fund. The plan should set out how the NHS, local authority and other organisations, including social care providers and VCSE, will work together to design and deliver neighbourhood health

	services. DHSC will publish separate guidance to support their development (awaiting publication).

5. Engagement

5.1 In 2023/24 Healthwatch Sandwell were commissioned by Sandwell Health and Care Partnership to undertake citizen and public engagement through a series of public workshops across the 6 towns of West Bromwich, Tipton, Oldbury, Smethwick, Rowley Regis and Wednesbury. As these were aimed at capturing local views and ideas for change, we called these events Guided by You. This work supported the development of 'Town Teams' and continues to be used to support and inform our approach going forward.

6. Implications

Resources:	HWB members are vital to shaping and delivering Neighbourhood Health Plans
Legal and Governance:	N/A
Risk:	At the point of writing, we still await further guidance on what is required within the plans but a lot of the work we have been undertaking and outline in this report will form the foundation of the plan.
Equality:	N/A
Health and Wellbeing:	The development of Neighbourhood health should support improvement in the health and wellbeing of Sandwell residents
Social Value:	N/A
Climate Change:	N/A
Corporate Parenting:	N/A

7. Appendices

Appendix 1 – Sandwell Neighbourhood Maturity Assessment
Appendix 2 – Sandwell application to the National Neighbourhood Health Implementation Programme

8. Background Papers

Not applicable