



The Old Mining College Centre
Queen Street
BURNTWOOD
WS7 4QH

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Our Ref: SL/JM

31 October 2024

To: All Members of the Community and Partnerships Committee

Councillors Evans (Chair), P Taylor (Vice Chair), Coe MBE, D Ennis, R Ennis, Gittings, Holdsworth, Kirkham, S Taylor, Tranter, Willis-Croft and Wittstock

Dear Committee Member

COMMUNITY AND PARTNERSHIPS COMMITTEE

You are invited to attend a meeting of the Community and Partnerships Committee in **The Meeting Room, The Old Mining College Centre, Queen Street, Burntwood** on **Thursday 07 November 2024 at 6:00 pm** to consider the following business.

Yours sincerely

Steve Lightfoot
Town Clerk

PUBLIC FORUM

As part of the Better Burntwood Concept and to promote community engagement, the public now has the opportunity to attend and speak at all of the Town Council's meetings. Please refer to the end of the agenda for details of how to participate in this meeting.

AGENDA

1. APOLOGIES FOR ABSENCE

2. DECLARATIONS OF INTERESTS AND DISPENSATIONS

To consider any declarations of interests and consider requests for dispensations.

3. MINUTES

To approve as a correct record the Minutes of a meeting of the Community and Partnerships Committee held on 05 September 2024 (Minute Nos. 14-25) (**ENCLOSURE NO. 1**)

4. INFORMATION FROM THE MINUTES

5. COMMUNITY ENGAGEMENT

Councillors and the Community Development and Engagement Officer are invited to report to the meeting any updates or news from community groups within Burntwood.

6. BETTER BURNTWOOD FUND

To consider applications received from:

- i. Active 60's Group (**ENCLOSURE NO. 2A**)
- ii. Members of Burntwood (**ENCLOSURE NO. 2B**)
- iii. Table Tennis Club (**ENCLOSURE NO. 2C**)
- iv. Lichfield & Burntwood Repair and Share Café (part of Transition Lichfield) (**ENCLOSURE NO. 2D**)

7. INFORMAL UPDATE ON THE CHRISTMAS EVENTS FOR 2024

Members to receive an update on the Christmas Events for 2024 (**ENCLOSURE NO. 3**)

8. BURNTWOOD LIONS WHITE GOODS SCHEME UPDATE

This is for information purposes only and no decision is required by the Committee (**ENCLOSURE NO. 4, APPENDIX A AND APPENDIX B**)

9. COMMISSIONING PROGRAMME UPDATE

This is for information purposes only and no decision is required by the Committee (**ENCLOSURE NO. 5, APPENDIX A, APPENDIX B AND APPENDIX C**).

PUBLIC FORUM

30 minutes will be set aside at the beginning of this meeting for you to raise issues relevant to the remit of the meeting but are not already on the agenda. So that the Members of the meeting can be properly briefed in order to enable them to provide considered response to your question, please advise the Town Clerk of the question[s] you wish to ask the Council at least three working days before the meeting. The Chair of the meeting has the right to reject any representations that he/she considers not to be appropriate for the particular meeting.

You will also now have the opportunity to discuss specific items on the agenda as the Chair now has the discretion to allow you to speak where you have a legitimate interest in the item. Again, you will need to give three working days' notice of your wish to speak. Where more than one person wishes to speak on a particular application the Chair may decide to limit the number of speakers or ask for a spokesperson to be appointed.

Generally, in respect of both speaking in the public forum and to specific agenda items you will have up to 3 minutes and can raise more than one issue. However, the Chair has the option to extend the time allowed to you if they think it is appropriate.

While audio and video recordings of this meeting are entirely legal, as a matter of courtesy to Town Council members who work for this town and this Council on a voluntary basis, we would be grateful if you would let the Clerk or the Chair know beforehand.

**MINUTES OF THE MEETING OF THE COMMUNITY AND PARTNERSHIPS COMMITTEE
HELD IN THE MEETING ROOM, THE OLD MINING COLLEGE CENTRE, QUEEN STREET,
BURNTWOOD ON THURSDAY 05 SEPTEMBER 2024 COMMENCING AT 6.00 PM**

PRESENT

Councillor Evans [in the Chair]

Councillors D Ennis, R Ennis [from 6.03pm], Gittings, P Taylor, Tranter, Willis-Croft and Wittstock

In attendance

Ms J Minor, Deputy Clerk

Ms K Horner, Community Development and Engagement Officer

PUBLIC FORUM

No questions were raised by members of the public.

14. APOLOGIES FOR ABSENCE

Councillor Coe MBE [Unwell]

Councillor Holdsworth [Family Commitments]

Councillor Kirkham [Work Commitments]

Councillor S Taylor [Unwell]

The reasons for the apologies were approved.

15. DECLARATIONS OF INTEREST AND DISPENSATIONS

As Chair of the Trust for 2nd Chasetown Scout Group, Councillor D Ennis declared a non-pecuniary interest in Agenda Item No. 6 i. – Better Burntwood Fund and took no part in the discussion.

16. MINUTES

The Chair reminded Members that they were being asked to comment solely on the accuracy of the Minutes and that the Minutes had been approved at Full Council on 16 July 2024.

It was proposed by Councillor D Ennis and seconded by Councillor Tranter and following a unanimous show of hands it was

RESOLVED That the Minutes of the Community and Partnerships Committee held on 03 July 2024 [Minute Nos. 1-13] be approved as a correct record.

17. INFORMATION FROM THE MINUTES

There was no information arising from the minutes.

18. COMMUNITY ENGAGEMENT

Dementia Friendly Walk

The Community Development and Engagement Officer reported that the dementia friendly walk will be going ahead again this year on Sunday 06 October from Chasewater Innovation Centre. The walk aims to raise funds and awareness of dementia, and she encouraged Members to attend and/or promote the walk. The Dementia Friendly Walk is a partnership effort with other local organisations, and Home Instead Cannock and Burntwood have again sponsored the medals for walkers.

Burntwood Dementia Friendly Community Group

The Community Development and Engagement Officer explained that the Burntwood Dementia Friendly Community group continues to work to raise awareness and support people living with dementia locally. The Town Council were instrumental in establishing this group led by Councillor Evans and have supported it's development over the last 4 years by providing administrative support, but she explained that the Town Council would be passing this responsibility over to another member of the group, Home Instead Cannock and Burntwood. Councillors are encouraged to continue to attend as the Town Council will remain an active and supportive member of the group.

Burntwood Town Council Student Award in Memory of Stephen Sutton MBE

Further to Minute No. 10 – Burntwood Town Council Student Award in Memory of Stephen Sutton MBE [03 July 2024 refers] the Student Award will be reopened for applications from Monday 09 September, and the closing date is Sunday 27 October. One award is available this year, and the Community Development and Engagement Officer has undertaken promotion with the local schools.

Chase Terrace Community Centre

The Community Development and Engagement Officer confirmed that contractors were now on site at Chase Terrace Community Centre and while the Centre will be overseen by the Policy and Resources Committee, the Community Development and Engagement Officer highlighted the progress made within the Centre as the Town Council will soon be promoting it to community partners for hire and looking to plan an open day once building works are complete.

Lichfield Garrick Theatre

The Community Development and Engagement Officer explained that the consultation phase of the 3-year partnership with Lichfield Garrick Theatre had now closed and Jonny McClean (Head of Community Engagement, Lichfield Garrick Theatre) and the Community Development and Engagement Officer would be looking through the feedback and putting together a programme of creative activities which would be presented to Councillors. The Burntwood Youth Theatre groups at Erasmus Darwin Academy and Chase Terrace Academy joined together over the summer holiday and have been working on a play which will be performed in October. The date will be shared with Councillors who will be invited to attend. The Town Council and the Lichfield Garrick Theatre have also launched Park Bench Performances, placing QR codes in Burntwood parks in the autumn where residents can access a playlist of locally written poetry, short stories, and scenes from plays. Residents are being asked to produce and share their own work with the Garrick Theatre for inclusion on the playlists.

Councillor Evans confirmed that Lichfield Garrick Theatre had attended the Play in the Parks event held on Wednesday 07 August at Elder Lane Park. The children had really enjoyed interacting with the Garrick Staff.

Lichfield District Council - UK Shared Prosperity Funds

The Community Development and Engagement Officer explained that she, along with Councillor D Ennis had met with Lee Eteo, Town Centres Manager from Lichfield District Council to discuss the challenges Burntwood faces with smaller retail areas and no defined town centre. She confirmed that Lichfield District Council have committed to undertaking works to tidy up and make improvements to some of the retail areas over the coming months funded by UK Shared Prosperity Funds.

Councillor D Ennis confirmed that he had attended a fundraising event held at Burntwood Rugby Club to raise funds for their pitch. He confirmed that he had also attended an event in the Burntwood Breast Care Memorial Area in the grounds of Burntwood Memorial Hall, where two more plaques had been added to their bench. Councillor D Ennis referred to a Board Games Group which had started today and which he had attended at Burntwood Library. The Group runs every Thursday from 1pm to 3pm.

Councillor P Taylor referred to the regular cinema afternoons held at Burntwood Memorial Hall and explained that since an article had appeared in the Lichfield and Burntwood Independent the audience had increased. He explained that following a grant from the Town Council and the Noel Sweeney Foundation new equipment had been purchased and he asked if anyone wanted to forward to him an advert/graphic promoting a local event/organisation as he could promote this before the film is shown.

19. BETTER BURNTWOOD FUND

Councillor Evans referred to Minute No. 6.1 Better Burntwood Fund – Burntwood Swimming Club [03 July 2024 refers] and confirmed that Mr Bates from the Swimming Club had thanked the Town Council for the grant.

19.1 2nd Chasetown Scout Group

Having declared a non-pecuniary interest, Councillor D Ennis took no part in the discussion.

Members were informed that 2nd Chasetown Scout Group were a new scout group in Chasetown who could take up to 156 young people aged between 4 to 18 years from the local community.

It was proposed by Councillor P Taylor and seconded by Councillor Evans and following a unanimous show of hands it was

RESOLVED That a grant of £500 be awarded to 2nd Chasetown Scout Group towards the purchase of tents and cooking equipment.

19.2 Chasetown Youth Disability

Members were informed that Chasetown Youth Disability run weekly football sessions for children with learning disabilities allowing them to access football sessions in a safe and comfortable environment. Currently they had up to 20 participants registered aged from 5-14 years.

It was proposed by Councillor P Taylor and seconded by Councillor D Ennis and following a unanimous show of hands it was

RESOLVED That a grant of £500 be awarded to Chasetown Youth Disability towards the purchase of facilities, equipment, and kit.

20. BURNTWOOD LIONS WHITE GOODS SCHEME UPDATE

The Community Development and Engagement Officer referred to Minute No. 58 [06 March 2024 refers] where the Committee resolved that a quarterly report would be completed by Burntwood Lions which would provide the Committee with further insight into the support received by residents including anecdotal information. She confirmed that Lich. C&F in the report referred to Lichfield Children & Families Department - Social Services.

Councillor Tranter felt that the report which included case studies was an excellent idea.

Councillor D Ennis referred to Minute No. 41 [29 January 2024 refers] where he had confirmed that, after speaking to a representative from Bromford, that Bromford would be looking into the possibility, from April 2024, of contributing towards the White Goods Scheme as they had funds for this type of work. This was still to be confirmed.

Councillor P Taylor felt that the 'whole' of the postcode in the report was not needed as this could potentially identify the recipient and it was **agreed** to only include WS7 in future reports.

21. INFORMAL UPDATE ON THE CHRISTMAS EVENTS FOR 2024

The Deputy Clerk gave an update on the current situation. It was **agreed** that Got 2 Sing Choir would be approached again. Councillor P Taylor suggested that the Town Council may need to source some form of amplification equipment to ensure that the Choir could be heard.

22. REVIEW OF THE BURNTWOOD WAKES FESTIVAL 2024 AND THE PLAY IN THE PARKS 2024

Councillor D Ennis felt that the Wakes held on 20 July had been the best event for a long time due to the dry weather. Councillor Evans felt that the Play in the Parks events had also been extremely successful. Members thanked the sponsors and officers and it was **agreed** that an email would be sent to sponsors.

RESOLVED That the content of the report be noted and the Committee supports, in principle, the continuation of the Burntwood Wakes Festival and Play in the Parks for 2025.

Post Note

The budget and precept for 2025/26 will be discussed and agreed by Full Council on 12 November 2024.

23. FUTURE WAKES ADMINISTRATION

Councillor D Ennis explained that the purpose of the report was to consider possible changes to how the Wakes Festival event is organised. It was hoped that perhaps

more voluntary organisations may be given the opportunity to become more involved by establishing an independent organising committee. He referred to an event organised by Primitas Learning Partnership which was held on 03 July 2024 at Erasmus Darwin Academy titled 'PrimiFest' which included live music [stage], food, games, activities etc and the knowledge that that organisation would have in organising such an event. Councillor D Ennis also referred to the Tara Group and the sponsorship and volunteers they currently provide to help out with giving out the packed lunches. He said that the 'groups' invited to be part of the independent organising committee would be targeted for the 1st year.

Councillor Wittstock queried the sustainability of the event and if the changes proposed did not work would there be an opportunity to bring it back in house. Councillor D Ennis confirmed absolutely and that the Town Council would still be providing funding *[the budget and precept for 2025/26 will be discussed and agreed by Full Council on 12 November 2024]*.

Councillor P Taylor felt that this was a good idea in the short term however in the long term perhaps the Town Council could set up a Community Interest Company [CIC]. Councillor P Taylor expressed that an independent organising committee needed to be established quickly and this needed to be reported back to this Committee on 07 November 2024 and not 22 January 2025.

It was **agreed** that the Deputy Clerk would check that there was no clashes with the proposed date of Saturday 19 July 2025. The Community Development and Engagement Officer confirmed that Pride is being held on 26 and 27 July 2025.

RESOLVED That

- i. The content of the report be noted.
- ii. Members authorise the Town Clerk and Deputy Clerk to establish an independent organising committee as described [of which Burntwood Town Council will remain the lead body, comprised of 3 Councillors (the Chair or Vice Chair to be the Chair of Community and Partnerships Committee), 7 invited members of the community and one Officer to support with the administrative, financial, and booking tasks].
- iii. Saturday 19 July 2025 be agreed as the date for the next Burntwood Wakes Festival.

24. EXCLUSION OF THE PRESS AND PUBLIC

RESOLVED That under the Public Bodies (Admissions of Meeting) Act 1960 (Section 2) (and as expended by Section 100 of the Local Government Act 1972), the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information.

25. CONFIDENTIAL MINUTES

The Chair reminded Members that they were being asked to comment solely on the accuracy of the Confidential Minutes and that the Confidential Minutes had been approved at Full Council on 16 July 2024.

It was proposed by Councillor D Ennis and seconded by Councillor Evans and following a unanimous show of hands it was

RESOLVED That the Confidential Minutes of the Community and Partnerships Committee held on 03 July 2024 [Minute Nos. 11-13] be approved as a correct record.

[The Meeting closed at 6.52 pm]

Signed

Date

Burntwood Town Council

Application for the Better Burntwood Fund (funding of up to £500)

Burntwood Town Council is committed to assisting local organisations and groups that provide activities and support to the local community.

Any amount given will be proportionate to the public benefit and must be relevant to the area.

Please provide as much detail as possible and refer to the Guidance Notes and Conditions of Funding before submitting this form.

Name of Organisation	Active 60s Group
Address	Burntwood Library Sankeys Corner Burntwood.
Email	
Main telephone No.	

Overview of your organisation including objectives, and membership numbers (how many members live in Burntwood Parish):

We have 25 ladies of which 24 live in the Burntwood area.

Type of organisation:

☐ Informal group

☐ Registered Charity. Registered Charity Number _____

☒ Society or Club with Adopted Constitution

☐ Community Interest Company

☐ Company Limited by Guarantee

☐ Local branch of a national organisation

☒ Other (please specify) _____

Have you received any other funding within the last 12 months?:

~~None~~ 23/24 - £250 BTC

Describe your project and the support you require:

Need support. in cost of room hire, transport
craft supply, speakers

Additional sheet attached ☐

Funding breakdown and total amount requested:

Item	Amount
Room Hire	£360
Transport.	
Heath Wellbeing Talks	
Informative speakers	Total: £360

Who are the project beneficiaries? How will this benefit Burntwood residents?:

The elderly ladies of Burntwood, giving them friendship,
problem sharing, encourage to go out with a group, sign posting.
taking ladies shopping. Keeping intouch with past members,
by telephone.

☒ A recent statement of accounts is attached.

☒ A copy of our constitution is attached.

☒ If successful we agree to appearing in publicity about the funding received across platforms such as Burntwood Town Council's social media channels and website, and in the local media.

☒ If successful we agree to acknowledging Burntwood Town Council in any publicity relating to the activity for which the funding has been given.

☒ If successful we agree to providing Burntwood Town Council with an update on the outcome of the activity when requested.

By signing and submitting it is accepted that all the above facts are correct, and the funds will only be used for the stated purpose:

Signature	J. Shirley
Print Name	JENNY SHIRLEY
Date	10-9-24

Please return to: Burntwood Town Council, The Old Mining College, Queen Street, Burntwood WS7 4QH or email jayne.minor@burntwood-tc.gov.uk.



Burntwood Town Council

Application for the Better Burntwood Fund (funding of up to £500)

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Any amount given will be proportionate to the public benefit and must be relevant to the area.

Please provide as much detail as possible and refer to the Guidance Notes and Conditions of Funding before submitting this form.

Name of Organisation	Members of Burntwood
Address	
Email	
Main telephone No.	

Overview of your organisation including objectives, and membership numbers (how many members live in Burntwood Parish):

Members of Burntwood is a voluntary group, that meets monthly for social purposes. We are able to offer our members a variety of interesting speakers, discussion and opportunities to socialise with others, in a safe and secure environment. Members are able to come along and listen to a vast range of interesting speakers, while at the same time offering a space where they can meet together. Some of our members are single and some live alone. Therefore MOB offers everyone the chance to come along and be with others for an evening of socialising.

Our average attendance at our monthly meetings are 25 – 30. All of our members live in the Burntwood area.

Our Meetings take place at St Matthew's Sports and Social Club, with whom we have an excellent relationship.

MOB is established to provide members of the local community with the opportunities for meetings, participate in recreational and other activities as organised by the committee.

Type of organisation:

☒ Informal group

☐ Registered Charity. Registered Charity Number _____

☒ Society or Club with Adopted Constitution

☐ Community Interest Company

☐ Company Limited by Guarantee

☐ Local branch of a national organisation

☐ Other (please specify) _____

Have you received any other funding within the last 12 months?:

No

Describe your project and the support you require:

Some of our members, because of hearing impairment, have difficulty in 'hearing' what some of our Speakers are saying. We have on occasions, borrowed a portable sound system from one of our local churches to identify if this assisted our members. We are delighted to say that there was a positive response to the loan of this system and so we want to obtain one of our own.

Not only will the use of a Portable PA enable our Members to fully engage at our monthly meetings, but when we have the use of the large hall, then the PA system will be of great value and ensure all our members are included.

Additional sheet attached ☐

Funding breakdown and total amount requested:

Item	Amount
Portable PA system with lapel type radio microphone	
	Total: 375.00

Who are the project beneficiaries? How will this benefit Burntwood residents?:

All our members will benefit from the use of a PA system, not just those with a hearing impairment, but will enable everyone to engage with the speaker.

Similarly, during a q/a time, a portable microphone will enable members to ask questions and everyone will be able to hear what is being asked.

☒ A recent statement of accounts is attached, together with our Bank details.

☒ A copy of our constitution is attached.

☒ If successful we agree to appearing in publicity about the funding received across platforms such as Burntwood Town Council's social media channels and website, and in the local media.

☒ If successful we agree to acknowledging Burntwood Town Council in any publicity relating to the activity for which the funding has been given.

☒ If successful we agree to providing Burntwood Town Council with an update on the outcome of the activity when requested.

By signing and submitting it is accepted that all the above facts are correct, and the funds will only be used for the stated purpose:

Signature	
Print Name	Sue Hoddinott - Membership Secretary
Date	24 th September 2024

Please return to: Burntwood Town Council, The Old Mining College, Queen Street, Burntwood WS7 4QH or email jayne.minor@burntwood-tc.gov.uk.



Burntwood Town Council

Application for the Better Burntwood Fund (funding of up to £500)

Burntwood Town Council is committed to assisting local organisations and groups that provide activities and support to the local community.

Any amount given will be proportionate to the public benefit and must be relevant to the area.

Please provide as much detail as possible and refer to the Guidance Notes and Conditions of Funding before submitting this form.

Name of Organisation	Burntwood Community Table Tennis Club
Address	Burntwood Leisure Centre
Email	Burntwoodtabletennis@gmail.com
Main telephone No.	

Overview of your organisation including objectives, and membership numbers (how many members live in Burntwood Parish):

Burntwood Community Table Tennis club offers table tennis at the Burntwood Leisure Centre to people of any age, race, gender or ability. The club has been in operation over 20 years and was founded by a former World Championships Table Tennis Umpire.

The club is accredited by Table Tennis England as an 'Associate' club; the UK's table tennis governing body and provides 10 tables for free play and matches, including free coaching for u 18's on a Wednesday evening from 7pm to 10pm.

The club has a fully qualified coach and safeguarding officer for children's training who is certified for coaching including safeguarding accreditation.

The club by its name, is community based and aims to promote physical activity and improve mental wellbeing for anyone in the Burntwood area. For example, the Club recently funded an outdoor table* for anyone to use at the centre and has previously donated table tennis tables to local high schools. The club has also strongly supported various Stephen Sutton campaigns. Stephen was a member of the club.

Burntwood Community Table Tennis Club is slightly unusual in that most table tennis clubs are members only clubs, whereas Burntwood offers a turn up and play basis, as well as memberships, to people of all ages and abilities (including disabled). The average number of people who attend each week is circa 30 but these may not be the same people each week. Most players are from Burntwood but players do attend from surrounding districts especially Lichfield.

The club has 4 teams in the Tamworth and Lichfield league but we hope to enter a new 5th (junior only) team next year. The teams are of mixed gender and age ie there are no restrictions.

The aim of the club is for friends to enjoy themselves in a social, and where appropriate, competitive environment.

The club also encourages and permits the Leisure Centre to use the club's tables (in lieu of free storage) for pay as you go table tennis at any time for the local Community and for two other groups –Monday and Friday mornings comprising mainly people who are retired or have the available time to play and socialise.

*As new Chairman, I would generally not support outdoor table tennis tables in this country, but this point does illustrate the generous and charitable nature of the club to the Community.

Type of organisation:

☐ Informal group

☐ Community Interest Company

☐ Registered Charity. Registered Charity
Number _____

☐ Company Limited by Guarantee

☐ Local branch of a national organisation

☒ Society or Club with Adopted
Constitution

☐ Other (please specify)

Have you received any other funding within the last 12 months?:

No

Describe your project and the support you require:

Funding, to pay for the hire of the sports centre, is obtained by membership fees and 'pay as you go' ie anyone can turn up and play. The club is open 50 weeks of the year and membership fees for full members approximate to £2.50 week making it one of the cheapest and accessible sports available. Bats and balls are also provided if needed.

The charges for the use of the sports hall have significant increased in recent years. Leisure Centre costs have risen **44% between 2020 and 2024** and the club suffered a net cash loss of c£700 last year.

Since taking over as Chairman for 24/25 I have established a Management Committee to run the Club and we are focusing on activities to restore the club to a better than break even position. For 2024/2025 membership fees have been increased by 25% and promotional activity undertaken to attract more members.

By the application, we kindly request any funding or contributions that may be available to allow us to continue as a going concern and to further promote table tennis in Burntwood.

Additional sheet attached ☐

Funding breakdown and total amount requested:

Item	Amount
Running costs	£500

	Total:

Who are the project beneficiaries? How will this benefit Burntwood residents?:

The beneficiaries are:

- The going concern of the club- to allow members and visitors to continue to play
- Continued free coaching to U18's
- Table tennis promotions are planned for the Erasmus Darwin and Chase Terrace Technology College next year – to boost our U18 membership
- Table tennis tables cost c £1,000 ea but they have a long life and we do not have financial resources to replace any. Nets, however, have a shorter life and some of our nets, which cost £50ea are in need of replacement if we have available funds.

☐ A recent statement of accounts is attached.- **yes**

☐ A copy of our constitution is attached.- **yes**

☐ If successful we agree to appearing in publicity about the funding received across platforms such as Burntwood Town Council's social media channels and website, and in the local media.- **yes please**

☐ If successful we agree to acknowledging Burntwood Town Council in any publicity relating to the activity for which the funding has been given. **Yes please**

☐ If successful we agree to providing Burntwood Town Council with an update on the outcome of the activity when requested.- **yes**

By signing and submitting it is accepted that all the above facts are correct, and the funds will only be used for the stated purpose:

Signature	<i>RW Birch</i>
Print Name	Robert Birch- Chairman BCTTC
Date	1 Oct 2024

Please return to: Burntwood Town Council, The Old Mining College, Queen Street, Burntwood WS7 4QH or email jayne.minor@burntwood-tc.gov.uk.



Burntwood Town Council

Application for the Better Burntwood Fund (funding of up to £500)

Burntwood Town Council is committed to assisting local organisations and groups that provide activities and support to the local community.

Any amount given will be proportionate to the public benefit and must be relevant to the area.

Please provide as much detail as possible and refer to the Guidance Notes and Conditions of Funding before submitting this form.

Name of Organisation	Lichfield & Burntwood Repair and Share Café (part of Transition Lichfield)
Address	
Email	lichfieldshare@gmail.com
Main telephone No.	

Overview of your organisation including objectives, and membership numbers (how many members live in Burntwood Parish):

Been running for almost 3 years. The sessions run on the first Sat of each month, apart from August.
The purpose is to repair items for people so that they can be used rather than thrown away and replaced. All repairers are volunteers and owners of items can give a donation if they like but no obligation.
Many of the people who bring items for repair are local to Burntwood Parish as are some of the repairers/general volunteers (not all).

We get around 20 visitors per session and there are around 8 volunteers each time.

Type of organisation:

☐ Informal group

☐ Registered Charity. Registered Charity Number _____

☐ Society or Club with Adopted Constitution

☐ Community Interest Company

☐ Company Limited by Guarantee

☐ Local branch of a national organisation

☐ Other (please specify) Part of Transition Lichfield, which is an Unincorporated Association_____

Have you received any other funding within the last 12 months?:

No

Describe your project and the support you require:

We are requesting funds to cover some of the room hire costs. 3 hours is £75 and we run 11 sessions per year there.

Additional sheet attached ☐

Funding breakdown and total amount requested:

Item	Amount
Room hire	500
	Total: 500

Who are the project beneficiaries? How will this benefit Burntwood residents?:

The grant would allow us to ensure that the sessions can take place in an accessible and central to Burntwood residents location.

☐ **A recent statement of accounts is attached.**

☐ A copy of our constitution is attached. n/a

☒ **Y** If successful we agree to appearing in publicity about the funding received across platforms such as Burntwood Town Council's social media channels and website, and in the local media.

☐ **Y** If successful we agree to acknowledging Burntwood Town Council in any publicity relating to the activity for which the funding has been given.

☐ **Y** If successful we agree to providing Burntwood Town Council with an update on the outcome of the activity when requested.

By signing and submitting it is accepted that all the above facts are correct, and the funds will only be used for the stated purpose:

Signature	Pam Beale
Print Name	Pam Beale
Date	16.10.24

Please return to: Burntwood Town Council, The Old Mining College, Queen Street, Burntwood WS7 4QH or email jayne.minor@burntwood-tc.gov.uk.

Christmas Events 2024

Dates & Locations:

Monday 25 November – 6pm to 7pm – Corner of Bells Lane/Longfellow Road
Saturday 30 November – 4pm to 7pm – Sankey's Corner

Initial Budget:

£6,360
+ £4,000 Virement agreed by Full Council 16.07.2024
+ £2,000 Virement agreed by Full Council 17.09.2024

Sponsorship:

Items Booked Already:

Organisation	Items
J&B Medical Event Services & Security	First Aid
Burntwood Rotary	Santa for both events
Roadtech Cutting Services Limited	Road Closure
Seventeen43 Limited	Event Management for both events
The Best Fun	Snow Globe
Bert & Gerts Limited	20 Market Stalls & Lighting
Pat Collins Funfairs	Miami & Two Childrens Rides
Festival Glitter	Xmas Glitter for both events
Much Ado About Insurance	Insurance
Music	Boney Hay Event
Music (Holly Grove Primary Academy)	Sankey's Corner Event around the Xmas Tree
Music (Claret Singing Duo)	Sankey's Corner Event
Life Spring Church	Housing Santa

Quotations requested:

Organisation	Items
Four Oaks Flute Choir	Music – Sankey's Corner Event – Awaiting a response

Food Stalls:

1.	Burger Van
2.	Cola's Coffee Van
3.	Balloon Stall

Burntwood Town Council

Community and Partnerships Committee

Thursday 7th November 2024

Burntwood Lions White Goods Scheme update

1. Purpose of Report

The purpose of this report is to update Members on the White Goods Scheme administered by the Burntwood Lions on behalf of Burntwood Town Council.

2. Background

The annual payment of £4,000 to cover the period April 2024 – March 2025 was received by the Lions in April 2024. The first quarterly report (April – June 2024) was reviewed by Community and Partnerships Committee on 5th September, and The Lions have now submitted the second quarterly report (July – September 2024) (Appendix A).

Alongside submitting this report, the Burntwood Lions have provided additional information to explain that some of this years' budget was used to cover costs of £1165 incurred in January – March 2024 (Appendix B) during the last financial year when previous funds ran out, as they were able to place orders with Hathaways and pay retrospectively for them. This was not indicated in the last report, so the figures in this quarterly report have been updated to reflect this.

In addition to the £4,000 received from Burntwood Town Council, the Lions also received a contribution of £300 from Lichfield District Council.

3. Conclusion

The Burntwood Lions have provided white goods for 5 residents between July – September 2024 totalling a spend of £1,487, and in addition reported providing families with signposting information as well.

Due to some of this years' budget covering costs incurred during the previous financial year the following figures cover their current financial position:

- January – March 2024, total costs £1,165
- April – June 2024, total costs £1,592
- July – September 2024, total costs £1,487

Total funding provided - £4,300

Total funding remaining - £56.00

The Burntwood Lions have reported that the cost of white goods has risen along with the demand for this service, so they are finding that the current allocation of £4,000 is not lasting as long as in previous years.

There is no budget remaining from Burntwood Town Council to increase the funding within this financial year.

The Community Development and Engagement Officer will meet with the Burntwood Lions to discuss service criteria and funding options.

4. Recommendation

This is for information purposes only and no decision is required by the committee.

Contact Officer

Kat Horner
Community Development and Engagement Officer
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01543 677166



Burntwood Town Council

White Goods Scheme

Administered by the Burntwood Lions

Quarterly Report: July – September 2024

Date	Client No.	Postcode	Referral Source	Item	Cost
08/07/24	361	WS7 1	Bromford	Cooker	£290
18/08/24	362	WS7 1	BTC Cllr	Cooker	£279
22/08/24	363	WS7 4	Bromford	Carpet	£260
03/09/24	364	WS7 1	Soc. Services	Cooker	£359
17/09/24	367	WS7 4	Bromford	Cooker	£299
Quarterly total:					£1,487
Annual total (from April '24):					£3,079
Funding remaining:					£52.00

Case study (July):

Gentleman in a depressed state of health. His wife is disabled but had insisted he left as she couldn't cope with his needs anymore. He had very little in his flat. Visited with his Bromford worker and we assisted with a cooker as his teenage daughter was to be a regular visitor and she and her dad used to cook together. She was there on our initial visit. We also assisted with pots and pans and linens.

Case study (August):

This disabled lady now lives alone after experiencing domestic violence. She needed a cooker and a fridge to keep her medication cool. We were able to provide her with a cooker and a second-hand fridge. She has since donated items to Lions, Pathway and Spark.

Case study (September):

This single mom has three young children and was referred by social service's children and families. The children's father had arrived for a visit when we arrived. Mom was very anxious. The children were lovely, chatty and keen to please. Mom needed help with a cooker amongst other things. The children and mom will go on our Santa Special Day Out. Food was an issue at that time.



Burntwood Town Council

White Goods Scheme

Administered by the Burntwood Lions

Quarterly Report: January – March 2024

Date	Client No.	Postcode	Referral Source	Item	Cost
10/01/24	341	WS7 4	Lichfield C&F	Tumble Drier	£199
12/01/24	343	WS7 O	CAB	Wardrobe	£137
25/01/24	344	WS7 4	Bromford	Washing Machine	£199
28/02/24	346	WS7 4	Bromford	Refrigerator	£149
14/03/24	347	WS7 3	Bromford	Carpet	£222
14/03/24	348	WS7 O	Bromford	Cooker	£259
Quarterly total:					£1,165
Annual total (from April '23):					
Funding remaining:					N/A

Case study (January):

Case 341. Mom and toddler with special needs. Child has breathing difficulties and other health needs. Special air filter system in use. Laundry being dried on chairs, radiator etc. affects son's lungs. Mom needs a condensing drier. Mom can't afford to use launderette. There is an ongoing, complex situation with the child's father. Lions provided other household goods for this family.

Case study (February):

Case 346. Single elderly, very vulnerable lady, living alone. Needs a fridge as nowhere to keep food cool. Attended with Bromford neighbourhood coach as very nervous with strangers. She told me she had been burgled with items removed from the home and consequently had very little in her flat. Lions provided crockery and linens for her.

Case study (March):

Case 348. This single lady had recently made a huge effort to make her home cleaner and more welcoming according to Bromford. She needed a new cooker. The old one had not been used for some time and was in a poor state. She was so grateful for her new cooker and even went to Hathaways to thank them. It has made a huge difference to her life to know that there are kind people in her community who care about her.

Burntwood Town Council

Community and Partnerships Committee

Thursday 7th November 2024

Commissioning Programme update

1. Purpose of Report

The purpose of this report is to update Members on the progress made by two projects in receipt of funding from Burntwood Town Council's 3-year commissioning programme.

2. Background

In February 2023 it was agreed by Members to change Burntwood Town Council's existing larger grants of one off payments of up to £5,000 to a commissioning model, providing £15,000 over three years for projects delivering outcomes related to specific priorities. Following a public consultation, two priority areas were selected, adult mental health and wellbeing and youth services (11 – 18yrs). Applications were received and Burton and District Mind and Platinum Boxing were selected by Members.

The first years' payment of £5,000 was awarded to both recipients in April 2024, and as the projects have now been running for 6 months, Burntwood Town Council requested the completion of a report based on the objectives both organisations had set themselves to deliver. The reports from Burton and District Mind (Appendix A) and Platinum Boxing (Appendix B) are included.

3. Project Update Summaries

Burton & District Mind: Burntwood Community and Development Anchor

Burton & District Mind's project is new to Burntwood, so much of the first six months has been spent on setting up their new office base at the Old Mining College (OMC), securing staff, volunteers, community representatives and venues.

They have also secured match funding for project development, co-produced and launched a community survey and have established a Music Mindfulness group at OMC.

They are in discussions with Midlands Partnership NHS Foundation Trust for OMC to become approved to add to the iaptus database (a digital care record for community and mental health services) enabling bookings at Unit 5, OMC for counselling clients.

Burton & District Mind have not provided a case study in this report due to the early stage of the project, however they have included a copy of their community development exercise report (Appendix C – copy available at the meeting) which provides a steer on local engagement and current need from a range of audiences.

Burntwood Platinum ABC: Opening futures with consequential thinking

Platinum Boxing have grown their number of participants and as a result have added more classes to accommodate new starters, 10 – 15 year olds and young people aged 16+, and are exploring further expansion to accommodate more groups.

The club offers flexible arrangements with regards to club fees and membership and do not charge those who may find it difficult to cover the cost. As a result, those who would face financial barriers to participation are able to access classes.

Online and face to face workshops covering dietary advice for young people in sport are being planned.

Participants have felt able to and have approached coaches to talk about their mental health, demonstrating a supportive environment.

Platinum Boxing now have 4 qualified coaches who regularly run sessions and two former boxers are interested in joining as coaches.

4. Recommendation

This is for information purposes only and no decision is required by the committee.

Contact Officer

Kat Horner

Community Development and Engagement Officer

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01543 677166

Commissioning Outcomes Feedback, April – September 2024

Organisation name	Burton and District Mind
Project name	Burntwood Community and Development Anchor
Name and position within the organisation	Keri Lawrence, Development and Sustainability Officer
Contact details	keri.lawrence@burtonmind.co.uk 07483 344420
Start date of project and reporting period	01/04/2024, April – September 2024
Have there been any significant changes in your organisation since the grant was agreed?	We have been served notice on our NHS funded Older Adults Outreach Service which concludes 31 October 2024. This project is largely unaffected by this change.

For each of your project outcomes please, briefly, answer the following questions and where relevant please include figures. We understand that the project outcomes relate to the whole 3-year project, so if you expect this outcome to be delivered at a later stage, please note this in your response. Please limit each response to 50 words.

Outcome 1: A community development exercise following previous work, updating evidence and detail based on coproduction within Burntwood and rural surrounds.	
What have you achieved so far?	We have held two community engagement events in Burntwood with representation from Burton and District Mind staff, volunteers, project participants and community representatives. Publish of Community Development Report which contains additional value of national and county wide review as well as Lichfield District Review. This is a living report and will be updated as new information is sourced. As part of this, we have co-produced and launched a community survey with 21 responses so far.
What has been successful and what hasn't gone as planned?	Team has put in considerable effort into fact finding for the report. Community Engagement events had strong attendance and buy-in from delegates and we made good use of the meeting room at Old Mining College for this purpose.

	Key Outcome include SWOT Analysis for the Development and Sustainability Team and an evaluation of the Values of the team which will inform future thinking.
How has this benefitted the community?	Burton and District Mind are in a stronger position to apply for grants and to build partnerships with a better understanding of the needs of the community.

Outcome 2: Minimum of three match-funded activity groups per year, including eco-therapy, sports and mindfulness projects	
What have you achieved so far?	Music Mindfulness launched in September 2024 with 8 people expressing interest and 8 signing on. We are now holding a waiting list to repeat as required. This project is funded by Community Fundraising (Dave Child's Event).
What has been successful and what hasn't gone as planned?	Successful recruitment of Project Support Coordinator. The group has started to write their own song as an additional value to the project and clear indicator of participation and enjoyment. We have been slower than anticipated in setting up group activities due to time onboarding staff and some staff illness in June 2024.
How has this benefitted the community?	A new delivery for 8 participants in Burntwood based on the previous community engagement work. We provided this based on resident's requests. Providing vocational activity for the volunteer facilitator to build skills and confidence towards vocational outcomes. The evaluation so far has been extremely positive with one person noted 'This group is the first time I have had friends'.

Outcome 3: One match-funded programme a year of peer-led psychoeducation which lead to mental health recovery and reduce episodes of distress and crisis.	
What have you achieved so far?	A previous 'beta' test of the coproduced 12-week programme completed in July 2024 and is now in progress in Lichfield city in a 'Pilot' test phase. Attendance and outcomes have been positive. This has been funded by Healthy Communities grant led by Support Staffordshire.
What has been successful and what hasn't gone as planned?	The beta was well attended with 7 participants and the pilot is also well attended with 8 participants. The lead facilitator has personal experience of mental health problems and is volunteering in this role, providing her with the capacity to join our bank of paid associates for future instances. We have also provided a 'paid for' provision for a national company with head office in Burton on Trent. The proceeds of this will enable Burton and District Mind to bring the sessions to Burntwood Quarter 4 of 2024-25, making use of the Old Mining College as a venue.

How has this benefitted the community?	Burton and District Mind will have a coproduced and sustainable 3-month psychoeducation programme to deliver for a number of audiences to meet local needs. This can be tailored at audience request (we have prepped 15 sessions but will deliver 12 based on priority). Volunteers will be trained to deliver this and then paid as associates when delivering to workplace, adding value to their CV and building vocational capacity. Additional value has been participants taking up volunteer roles in Lichfield District for other charities as a direct outcome of this project and the increase in confidence and wellbeing.
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Outcome 4: Three aspirational and vocational-focused volunteer opportunities aimed at people with lived experience of mental health problems leading to vocational outcomes.	
What have you achieved so far?	We have successfully retained 4 volunteers towards a goal of 8 volunteers by end of year one.
What has been successful and what hasn't gone as planned?	Overall, our charity volunteer recruitment remains strong compared to industry, with 32 expressions of interest in volunteers' roles, in the period. Six of which can travel to Burntwood. We have had two volunteer applications from within Burntwood in this period which are in progress. Onboarding volunteers into roles has slowed down over summer period, which is assumed and normal. We are booked to attend Support Staffordshire Volunteer Fayre and re-promoted roles with Support Staffordshire. Losing the Outreach Service may impact the quality of supervision of volunteers, and capacity is under review with development opportunities identified.
How has this benefitted the community?	This has enabled the Peer Support Group to continue with limited resource from staff. It has enabled facilitation of projects reducing the need for Project Coordinator to be present. Delivering projects has enabled volunteers to explore vocational roles including join our bank of paid associates.

Outcome 5: Increased access into our clinical service such as coaching and counselling, providing more equity across our service area.	
What have you achieved so far?	Discussions with Midlands Partnership NHS Foundation Trust to get the venue approved to add to the IAPTUS database. We have purchased and installed equipment for privacy purposes. This will enable bookings at Unit 5, Old Mining Collage for counselling clients.
What has been successful and what hasn't gone as planned?	We have developed a manual for the staff to use the room safely.

	The venue has been approved by our Operations Manager. Awaiting final checks and IT implementation. The delay has been within NHS systems. We are hopeful that referrals will start by end of November 2024. We have communicated with Phoenix Counselling (who rent a unit at OMC) regarding our presence and plans; this has been welcomed, and their staff have sought our advice on occasion. Take up of Low-Cost Counselling and Coaching has not happened in Burntwood at date of the report. We are working on new promotional materials to improve on this.
How has this benefitted the community?	Once implemented, we'll be able to provide one to one integrative counselling at the Old Mining College with capacity of 5 clients per week should demand require this. Currently the only venue we use in Lichfield District is Westgate Practice and this is at capacity. We are hopeful this our new office will cut down on waiting lists.

Outcome 6:

Dialogue and involvement with private sector businesses around mental health, emotional wellbeing and staff welfare to secure sponsorship and fundraising to support and expand the above delivery.

What have you achieved so far?	We have engaged with Finch Engineering based in Ashby who have strong historical links to mining in Staffordshire. They are committed to fundraising for Burntwood Projects as they have staff living in the area. Currently they had raised £3,402. We have engaged with Beaudesert Park Farm and secured around £2,500 towards the development of an additional community garden and ecotherapy space at Old Mining College. This is being scheduled for Quarter 4 of 2024/25. We have also provided a 'paid for' Mind Makeover for a national company with head office in Burton on Trent. The proceeds of this will enable Burton and District Mind to bring the sessions to Burntwood Quarter 4 of 2024-25, making use of the Old Mining College as a venue.
What has been successful and what hasn't gone as planned?	Previously volunteers had offered to approach local businesses, but, understandably, this has not happened due to low confidence. We have successfully recruited a new Funding Project Coordinator who commences role on 1 November 2024. Approaching local businesses will be a priority matter. We are looking for reach into Tara to support this outcome in the future, with some insight into the needs of their staff.
How has this benefitted the community?	Around £7,000 to go towards match funding Burntwood and Lichfield projects into Q4 and Q1 of 2025-26.

Outcome 7:

A three-year programme of work that ramps up self-funding and self-sustaining opportunity by the end of its life, giving more power to people with mental health problems to take ownership of the services they receive.

What have you achieved so far?	Some insight into community need, appetite and aspirations, including the will for a community café at the end of three years. A full feasibility study will be conducted by end of 3 years. There's a plan to review similar/parallel projects with community representative in November 2024. Review of grants and match-funding (donation in kind) opportunities with potential sources of funding underway. Opportunities include: • Lichfield District Council Councillor's Community Fund • Lichfield Community Lottery • Coalfields Regeneration Trust • Supportive Communities & Better Health Staffordshire • Awards for All • Severn Trent Water • Key Fund • Staffordshire County Council Climate Fund • B&Q
What has been successful and what hasn't gone as planned?	Progress and appetite has been stronger than anticipated however much of the local knowledge is still anecdotal and word of mouth. The next stages of the community engagement (through the 'Help Us to Help You' survey and other means will strengthen future strategic planning.
How has this benefitted the community?	Currently mapping the opportunities to the identified needs of the community. Crucial work is planned for Quarter 3 and 4 of 2024-25 ahead of new financial year.

Please provide a short case study linking to one or more of the above outcomes that demonstrates the impact your project is having on the local community:

Over the first six months of the project we have made significant progress on getting the fundamentals and have secured staff, volunteers, community representatives and venues. We have also provided match-funded projects in both Burntwood and in Lichfield. This is just the start...

In future it is likely that we will provide case studies regarding participants who have made use of the projects outlined in Outcomes 2, 3 and/or 3. For this report, we would like to provide a copy of the community development exercise report as an attachment to the report, together with the details of the 'Help Us to Help You' community survey. We have provided key summaries below.

Executive Summary Extract

Burton and District Mind have recent proven experience in Development and Sustainability over the last three years, with significant growth (332% of income) through the successful deployment of a Development and Sustainability Team throughout the charitable area of East Staffordshire, Tamworth Borough, and Lichfield District. This programme of work is now coming to an end of its current cycle.

As we enter a new stage, it is important to reflect on the learning we have taken, celebrate the successes, and look to future by way of exploring the existing and emerging needs of:

- Our mental health community and of members of the community who are at greater risk of developing mental health problems.
- Our funders, which includes grant-funders, community fundraisers, and our local health and social care economy, represented by the Integrated Care Board, NHS and local authorities.
- Our partners and the other VCSE organisations that can influence or be influenced by our audience, such as Midlands Partnership NHS Foundation Trust, Support Staffordshire, and other charities and associates.

This document is to complement the Burton and District Mind Strategic Plan. It unpins the work of the Development and Sustainability Team by providing a summary of need, work undertaken and work to be completed as a living project plan.

This work is part-funded by the Lichfield District Mental Health Development Framework and it is key that we demonstrate the following outcome within this report:

“A community development exercise following previous work, updating evidence and detail based on coproduction within Lichfield and Burntwood.”

However, it is prudent to explore Lichfield District in the wider context of Staffordshire and include the districts of Tamworth Borough and East Staffordshire Borough for sake of comparison and for complimentary opportunities.

Key Outcomes:

Pending further community involvement, Charity Strategy Review and development of the Operational Plan, the following outcomes will be used by the Development and Sustainability Team:

- 1) Understand audience need and prioritise more effectively
- 2) Consolidate and standardise Development and Sustainability processes
- 3) Diversify and improve on Income Generation
- 4) Improve Marketing and Communications across the Charity Area
- 5) Grow and sustain the team

Priority Audiences identified and work so far:

Audience Category	Needs Identified (some assumptions and generalisations)	Delivery so far
Black and Ethnic Minority groups	More appropriate 'mental health mapping' More home support Recognisable allies in workforce More audience specific projects	Older Adults Outreach Bat n Chat Cricket Retro-Sports Day More involvement with Black Caribbean groups More involvement with mosques and Asian groups.
People in poverty	Social Intervention work Form Filling Hand-holding and confidence building Psychoeducation	Future Focus Mind Makeover Offer of participation fees on projects Helen's Bursary

Young People (16-24)	Digital (and anonymous) delivery Promotion on 'what to trust' Volunteering/work experience Innovation Psychoeducation	Continued work in colleges Review of work experience opportunities
Suicide Prevention	High risk and post-attempt support Step-down models of support post crisis and post discharge from IMHT More support for social prescribers	Safe Hands service Safe Haven Crisis Cafe Development of programme of work (not currently funded) Close relationship with SCC and ESBC Health Scrutiny
Women: menopause	Counselling/Coaching Information and mapping of provision Psychoeducation	Older Adults Outreach (50+ provision) Psychoeducation (but not specific)
LGBTQI+	Audience specific provision Recognisable allies in workforce Psychoeducation More audience specific projects	Psychoeducation (but not specific)
Neurodiverse	Audience specific counselling/Coaching Activity based projects Psychoeducation More community awareness and employer awareness	Psychoeducation (but not specific) Gaming Project in development Neurodiversity workshop developed
Criminal Justice	Support for domestic violence (both victim and perpetrator) Mental Health Awareness and Psychoeducation	Mental Health Awareness to be delivered to Pathway Project

Please complete and return this document by Monday 14th October 2024 to kat.horner@burntwood-tc.gov.uk.

Signature	
Date	15 October 2024

Commissioning Outcomes Feedback, April – September 2024

Organisation name	Burntwood Platinum ABC
Project name	Opening futures with consequential thinking
Name and position within the organisation	Steve Cadman Head Coach
Contact details	07913123541
Start date of project and reporting period	01/04/2024, April – September 2024
Have there been any significant changes in your organisation since the grant was agreed?	None

For each of your project outcomes please, briefly, answer the following questions and where relevant please include figures. We understand that the project outcomes relate to the whole 3-year project, so if you expect this outcome to be delivered at a later stage, please note this in your response. Please limit each response to 50 words.

Outcome 1: To expand on the current numbers of active members.	
What have you achieved so far?	An increased number of participants with more classes offered to accommodate more age groups and “starter classes”. Carded registered boxers has risen to 18 covering age ranges 11 to 20+ years of age.
What has been successful and what hasn’t gone as planned?	We now have four registered and regular attending coaches enabling more classes and coaching hours. The facility to accommodate individuals who struggle with payments has also been well received and taken up by some.
How has this benefitted the community?	An increase in participants has demonstrated the need from the community with new starters being added on a frequent basis. Around the park area less groups are forming or using the area for anti-social behaviour. This has also been noted by local people when using the park.

Outcome 2:

Promote more actively with the education of dietary requirements and health and wellbeing to assist with mental health, and to guide and mentor individuals through a consequential thinking approach to coaching.	
What have you achieved so far?	As part of our program the participants are regularly advised on dietary requirements along side being active. This has been welcomed by participants and we found it surprising how little young people understand the need for a healthy diet and the effects on activity. It is planned in future months to engage parents in online and face to face workshops in simple dietary advice for young people in sport, this I have participated in for a recent Level3 England boxing high performance coaching course that outlines the benefits in very simple terms.
What has been successful and what hasn't gone as planned?	Another success and not specifically targeted area is helping with mental illness, four members after a period have advised that they suffer with mental illness and that the boxing facility assist them when they have periods of illness. These individuals have felt that they can talk to coaches when they require which assists in coaches knowing when to encourage / push / or allow the participant just to be in the gym and participate without any pressure. Due to increased class numbers we were able to bring another coach on board who has openly stated about their own struggles with mental health and has felt that the gym has helped with focus / a rewarding position seeing young people achieve / have the engagement socially & providing a feeling of being needed by others.
How has this benefitted the community?	I have been surprised how people have felt that they can openly discuss mental health struggles within the gym and I am pleased that the environment provided has enabled individuals to speak about this. As a club we are looking into how we can promote this more in the future.

Outcome 3: To see the uptake increase over the 12 months with a measurable program completion tracking in place.	
What have you achieved so far?	Uptake has increased as stated previously with a measure of carded registered boxers increasing. This demonstrates the development from "new starters" who develop their skill set / fitness/ confidence to enable them to get to competition level.
What has been successful and what hasn't gone as planned?	One area that has not been implemented is a recognition award program where the participants work through set tasks to develop skills / demonstrate the skills to achieve a certain level of grade. This has been a time constraint currently but I am planning to get this off the ground in the next 6 months.
How has this benefitted the community?	Again with the improvements made and the uptake it demonstrates the need from the community and is the only registered club in this local area providing the classes that we do and not making it exclusive to competing boxers, some individuals wish to train the same as boxers but without the extensive competitive contact. This we support and provide the same training and mentoring to the individuals.

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Outcome 4:

Following an increase in uptake the age groups will be split into specific age groups - minors/schools 10-13 years, juniors 14-15, youth 15-18 & Seniors 18+.

What have you achieved so far?	The classes now are structured structured 1. New starters 2. 10-15 3. 16+
What has been successful and what hasn't gone as planned?	The introduction of the groups and more classes has worked well with uptake so that classes are busy every session. It is now looking that we need to restructure further to include more classes focused on age groups and more days may need to be added such as Saturday and Sundays to enable more participants.
How has this benefitted the community?	With the growing need of classes this demonstrates the need from the community.

Outcome 5:

An increase in coaches including junior coaches.

What have you achieved so far?	We have now 4 qualified coaches who regularly attend sessions. 1 further coach who attends when work commitments allow. In addition, two ex-boxers have shown interest in coaching and currently I am sourcing relevant courses for them these being 1. Safeguarding of vulnerable people 2. First aid including Defib training. 3. Level 1 England boxing coaching course. Alongside the coaching we also have a registered England Official who has Grade A Judge & Timekeeper status & Grade B Supervisor status. 2 coaches have professional British boxing board of control Trainers licences and recently a Boxers manager has been put in place. This is to provide opportunities for those that wish to compete in the professional arena.
What has been successful and what hasn't gone as planned?	Success is demonstrated in the above as the starting point was two coaches. The next step is to look to expand to more coaches.
How has this benefitted the community?	The community benefits from having qualified people in place that operate a safe environment with progressive coaching to enable individuals to improve whilst enjoying themselves and not being exposed to dangers. Lots of "boxing gyms" are unlicensed and therefore open to poor practices and potential risks as they are not monitored or checked.

Outcome 6:

Further engagement with the local police and other agencies looking at supporting individuals who are at risk of or have been convicted of violence or antisocial behaviour.	
What have you achieved so far?	This is an area that needs further work, we engaged with the local development officer, but this person moved on, and we have had little contact since. Occasionally we see PCSO's at the park but not as often as we used to. (this maybe as it is not seen to be a hotspot anymore?)
What has been successful and what hasn't gone as planned?	The engagement with local police we would welcome and would need further assistance with moving forward.
How has this benefitted the community?	

Please provide a short case study linking to one or more of the above outcomes that demonstrates the impact your project is having on the local community:

I could not single out one area or aspect of what the club has had on the community, but I will focus on the number of participants that we have which is still increasing. We are seeing new starters and many individuals returning on a weekly basis; this is not only those wishing to box but also those who just wish to train in the classes. As we are still receiving new enquiries and starters this demonstrates the need from the local community and gives the participant the opportunity to train numerous times a week. This also has an extension that the participants are encouraged to also spend time away from the gym working on core fitness aspects which again occupies their time giving them focus / routine and discipline.

Please complete and return this document by Monday 14th October 2024 to kat.horner@burntwood-tc.gov.uk.

Signature	Steve Cadman
Date	22.10.24



2024

Community Development Report and Plan



PUBLIC VERSION

Last Update:

22 October 2024

Contributions from

**Emma Godfrey, Ben Longmore, and
Keri Lawrence**

Table of Contents

Executive Summary	3
Intended Outcomes of this Report	4
Overarching Goal.....	4
Charity Values.....	4
Local Mind Association Charity vision, mission and values	4
Mind Strategy 2023.....	5
Our vision We won't give up until everyone experiencing a mental health problem gets both support and respect.....	5
Four Objectives.....	5
Mind's Strategic Pillars	5
Key Drivers and Scoping Audit.....	7
Review of National Statistics and Agendas.....	7
Other national statistics	7
Work Force prevalence.....	8
NHS Long Term Plan.....	9
NHS Long Term Workforce Plan	11
Commitments from new Labour government from party manifesto 2024.....	12
What does the Darzi report mean for local Minds?	13
Cost of Living Crisis and Poverty	15
Suicide Prevention	15
Substance Misuse	16
Neurodivergence.....	16
The contribution of the voluntary sector to mental health crisis care: a mixed-methods study....	19
Grant Funding.....	20
Review of County-wide Statistics and Agendas.....	21
Staffordshire Integrated Care Board 2022	21
Staffordshire Mental Health Strategy	22
Community Mental Health Transformation Program.....	23
HealthWatch Staffordshire Reports	23
Young People.....	24
Local prevalence	24
Review of District Statistics and Agendas	27
Enhanced Strategic Needs Analysis	27
Suicide Prevention	30
Emerging Service Provision	30
Local Organisations.....	31
Local Stakeholder Engagement	33
Our Internal Needs.....	35
Reflection on 2023-2024	35
Current Capacity of Services	37
Key Takeaways from Analysis.....	38
Delivery Hubs.....	38
Project Delivery 2024-2025	39
Community Survey "Help Us to Help You"	40
Development Strategy 2024-2027	41
Key Outcomes.....	41
Outcome One: Understand audience need and prioritise more effectively	41
Outcome Two: Consolidate and Standardise Development and Sustainability processes	43
Outcome Three: Diversify and improve on Income Generation	43
Outcome Four: Improve Marketing and Communications across the Charity Area	44
Outcome Five: Grow and sustain the team	45

Executive Summary

Burton and District Mind have recent proven experience in Development and Sustainability over the last three years, with significant growth (332% of income) through the successful deployment of a Development and Sustainability Team throughout the charitable area of East Staffordshire, Tamworth Borough, and Lichfield District. This programme of work is now coming to an end of its current cycle.

The context of our work has changed since the last plan was developed. Mental health, for the first time, became a key talking point in our nation's consciousness, with more fundraising and awareness occurring. We have addressed the needs coming from the post-pandemic period; however, we continue to see increases in health anxieties and issues related to the cost-of-living crisis. We have a new Government and new MPs across our area although we are yet to see the impact of new policies. Our communities are as divided as ever on topics such as welfare benefits, refugees, and anxieties about war internationally. The wellbeing of children and young people is never far from anyone's mind – but there is still a lack of resource. Our Outreach service has brought marginalised audiences closer to us, and yet we all still need to adapt to meet their diverse needs and find ways of sustaining this valuable work.

As we enter a new stage, it is important to reflect on the learning we have taken, celebrate the successes, and look to future by way of exploring the existing and emerging needs of:

- Our mental health community and of members of the community who are at greater risk of developing mental health problems.
- Our funders, which includes grant-funders, community fundraisers, and our local health and social care economy, represented by the Integrated Care Board, NHS and local authorities.
- Our partners and the other VCSE organisations that can influence or be influenced by our audience, such as Midlands Partnership NHS Foundation Trust, Support Staffordshire, and other charities and associates.

The team's success comes from various skills, knowledge and experience, including:

- Strong skills around identifying and responding to community needs in way of evidence gathering, with both qualitative information and quantitative data.
- Forging communication, involvement, and coproduction opportunities for people with mental health problems, both people making use of mental health services, and those who don't or can't.
- Building strong and lasting partnerships within VCSE sector and the Health and Social Care Sector for joint funding opportunities and intelligence.
- Developing and sourcing funding for coproduced, innovative mental health projects and services that deliver high quality impact for the community.
- Developing the infrastructure for charitable growth and mobilising new teams with the appropriate skills and experience.

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Intended Outcomes of this Report

Overarching Goal

This document is to complement the Burton and District Mind Strategic Plan. It unpins the work of the Development and Sustainability Team by providing a summary of need, work undertaken and work to be completed as a living project plan.

This work is part-funded by the Lichfield District Mental Health Development Framework and it is key that we demonstrate the following outcome within this report:

“**A community development exercise following previous work, updating evidence and detail based on coproduction within Lichfield and Burntwood.**”

However, it is prudent to explore Lichfield District in the wider context of Staffordshire and include the districts of Tamworth Borough and East Staffordshire Borough for sake of comparison and for complimentary opportunities.

Previous Development and Sustainability Outcomes have included the following objectives:

1. Burton, Lichfield, Tamworth District Communities.
2. Volunteering Programme
3. Commercial Modelling
4. Increased Capacity and Infrastructure

A key goal of the document is to explore if these objectives are still fit for purpose.

Charity Values

Local Mind Association Charity vision, mission and values

Our Vision - At Burton and District Mind our vision is for everyone in our community to experience better mental health.

Our Mission - We provide advice and support to empower everyone to experience better mental health.

- Service and Quality
- Integrity
- Client Focus
- Respect
- Inclusivity
- Collaboration
- Sustainability

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Previous Development and Sustainability Values

The previous Development and Sustainability Plan adopted the following values:

- a) Consistent quality of Service Provision
- b) Improving the resilience of participant
- c) Community – focused and not business driven
- d) People before paper
- e) Never say no (to our participants and people with mental health problems)
- f) Recognise and align to the ethos of National Mind
- g) Need to factor in Covid-19 as risk on all projects

Mind Strategy 2023

Our vision

We won't give up until everyone experiencing a mental health problem gets both support and respect.

Four Objectives

Taken from: No Mind Left Behind: Our Strategy to 2030

1. Every person will know that they can turn to Mind.
2. Inspire more people to support Mind.
3. Prioritise working together across our federation. Together we will focus on positive impact for our beneficiaries and communities.
4. Create a mentally healthy nation by working to eradicate social injustice and inequality in mental health.

Mind's Strategic Pillars

1. Changing Minds
2. Engaging Minds
3. Equitable Minds
4. Supporting Minds

“We're fighting for mental health. For support. For respect. For you. Find out how.”

Areas for strategic work:

- Becoming an anti-racist organisation
- Supporting young people
- Fighting for people in poverty

The infographic is a vertical rectangle with a light blue background. It contains text in white and dark blue. At the top, the heading 'Our vision' is in large white font. Below it, the vision statement is in white: 'We won't give up until everyone experiencing a mental health problem gets both support and respect.' The next section is 'Our purpose' in large white font. Below it, four pillars are listed in white: 'We are Mind.', 'We connect minds', 'We support minds', and 'We change minds'. Each pillar has a short description in white. At the bottom, the statement 'We're here to fight for mental health.' is in white, followed by 'For support. For respect. For you.' in white.

Our vision

We won't give up until everyone experiencing a mental health problem gets both support and respect.

Our purpose

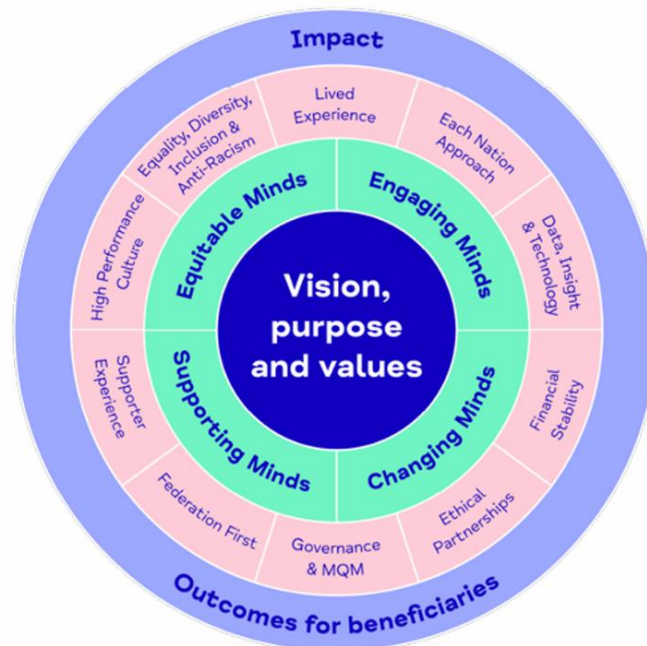
We are Mind.

We connect minds
We bring people together to make change in their communities.

We support minds
We deliver life-changing support.

We change minds
We speak out and demand better from policymakers and the public.

We're here to fight for mental health.
For support. For respect. For you.



What we'll achieve

With the generous support of funders and supporters, we will ensure that:

350,000
people receive life-changing services from local Minds each year

18.5 million
people access information each year that empowers them to get support, assert their rights and live their lives fully

100,000
people give and receive peer support through Side by Side Online

3 million
employees are offered workplace wellbeing support – with a focus on low-paid sectors

Mind becomes a truly **anti-racist organisation**

– with diverse leaders, an inclusive organisational culture, no ethnic disparity in programme reach or outcomes and unflinching advocacy on racial justice and mental health

100,000
young people receive mental health support that takes trauma into account

Welfare systems
are reformed so that people with mental health problems are treated fairly and don't get trapped in poverty

Mental health commitments
in the Long Term Plan and Welsh Government Mental Health Strategy are delivered and the Mental Health Act is reformed – improving the quality and equity of access to mental health services

We'll use our performance framework to report on progress towards our strategic ambitions in a clear, transparent way.

Key Drivers and Scoping Audit

Review of National Statistics and Agendas

Official statistics announcement

Mental Health Services Monthly Statistics, Performance July 2024 available from - <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-services-monthly-statistics/performance-july-2024>



Key Facts:

- 1.95 million people were in contact with mental health services, at the end of July
- The majority of these (1.34 million) were in contact with adult mental health services
- 453,127 people were in contact with children and young people's mental health services, at the end of July
- 279,308 people were in contact with learning disabilities and autism services, at the end of July
- 457,917 new referrals were received, and 2.30 million care contacts were attended, during July
- 22,258 people were subject to the Mental Health Act, including 16,317 people detained in hospital, at the end of July



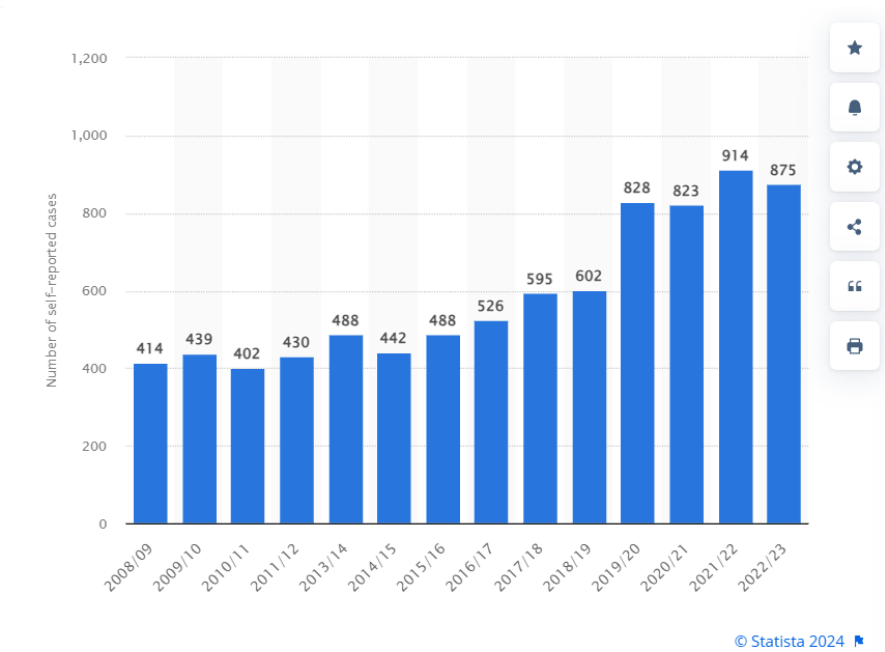
Other national statistics

- **3% of population of UK using mental health services in one month.**
- 40% of GP appointments involve mental health.
- On average, people with a mental health problem die 15 to 20 years earlier than those without.
- The prevalence of psychosis is higher in the following groups compared to their peers:
 - Men (with the exception of affective psychosis)
 - People living in urban areas
 - Ethnic minority groups and people with immigration status
 - People living in deprived areas

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

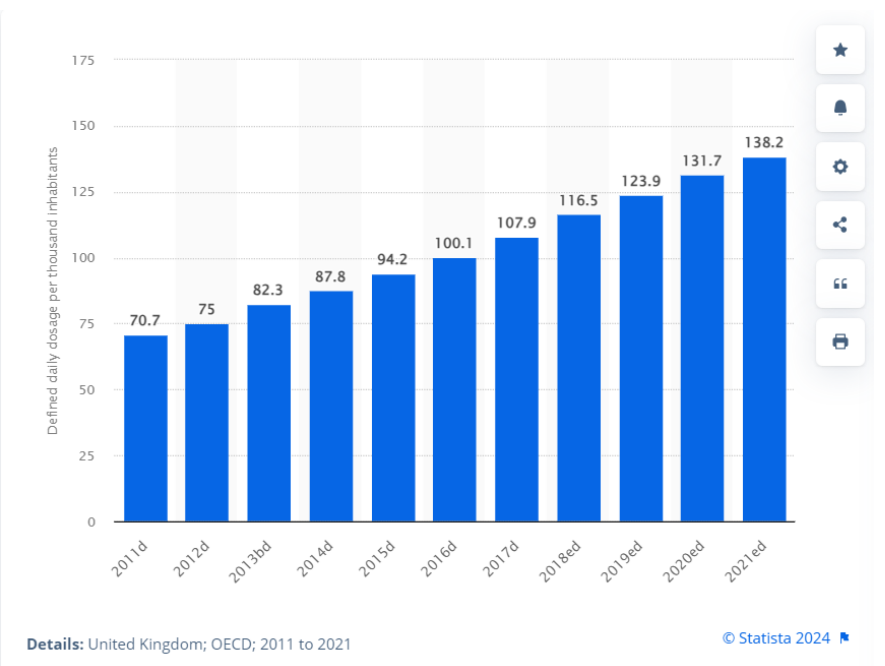
Work Force prevalence

Number of workers reporting work-related stress, depression or anxiety in Great Britain from 2008/09 to 2022/23 (in 1,000s)



Published by D. Clark, Jul 3, 2024 - <https://www.statista.com/statistics/292309/work-related-stress-depression-or-anxiety-among-workers-in-great-britain-gb/>

Consumption of antidepressants in the United Kingdom from 2011 to 2021*(in DDD per 1,000 inhabitants)



Published by Matej Mikulic, Jul 19, 2024 -

<https://www.statista.com/statistics/1020751/antidepressants-pharmaceutical-consumption-in-the-uk/>

From OECD data - [https://data-](https://data-explorer.oecd.org/vis?df[ds]=DisseminateFinalDMZ&df[id]=HEALTH_PHMC%40DF_KEY_INDIC&df[ag]=OECD.ELS.HD&dq=..DDD_10P3HB..NO6A&pd=2010%2C&to[TIME_PERIOD]=false)

[explorer.oecd.org/vis?df\[ds\]=DisseminateFinalDMZ&df\[id\]=HEALTH_PHMC%40DF_KEY_INDIC&df\[ag\]=OECD.ELS.HD&dq=..DDD_10P3HB..NO6A&pd=2010%2C&to\[TIME_PERIOD\]=false](https://data-explorer.oecd.org/vis?df[ds]=DisseminateFinalDMZ&df[id]=HEALTH_PHMC%40DF_KEY_INDIC&df[ag]=OECD.ELS.HD&dq=..DDD_10P3HB..NO6A&pd=2010%2C&to[TIME_PERIOD]=false)

“In 2021, the consumption of antidepressants in the United Kingdom increased by 6.5 dosages per 1,000 inhabitants per day (+4.94 percent) since 2020. With 138.2 dosages per 1,000 inhabitants per day, the consumption thereby reached its highest value in the observed period. Notably, the consumption continuously increased over the last years.”

NHS Long Term Plan

Milestones for mental health services for adults

- New and integrated models of primary and community mental health care will give 370,000 adults and older adults with severe mental illnesses greater choice and control over their care and support them to live well in their communities by 2023/24.
- By 2023/24 an additional 380,000 people per year will be able to access NICE-approved IAPT services.
- By 2023/24, NHS 111 will be the single, universal point of access for people experiencing mental health crisis. We will also increase alternative forms of provision for those in crisis, including non-medical alternatives to A&E and alternatives to inpatient admission in acute mental health pathways. Families and staff who are bereaved by suicide will also have access to post-crisis support.
- By 2023/24, we will introduce mental health transport vehicles, introduce mental health nurses in ambulance control rooms and build mental health competency of ambulance staff to ensure that ambulance staff are trained and equipped to respond effectively to people experiencing a mental health crisis.
- Mental health liaison services will be available in all acute hospital A&E departments and 70% will be at 'core 24' standards in 2023/24, expanding to 100% thereafter.

- P48: Around one in four women experience mental health problems in pregnancy and during the 24 months after giving birth⁸¹. The consequences of not accessing high-quality perinatal mental health care are estimated to cost the NHS and social care £1.2 billion per year.
- P.50 Mental health problems often develop early and, between the ages of 5-15, one in every nine children has a mental disorder. Half of all mental health problems are established by the age of 14, with three quarters established by 24 years of age⁹¹. Prompt access to appropriate support enables children and young people experiencing difficulties to maximise their prospects for a healthy and happy life. While the latest prevalence survey has shown only a modest increase in diagnosable problems since 2004 – from 10.1% to 11.2% – this overall figure

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

includes concerning rates of mental distress particularly amongst late teenage girls.

- P. 68 The Long Term Plan makes a renewed commitment to grow investment in mental health services faster than the NHS budget overall for each of the next five years. The NHS in England is already meeting the goal set in the recently launched Lancet Commission on Global Mental Health that high income countries should be spending at least 10% of their health services budget on mental health.
- Stress, anxiety and depression were the leading cause of lost work days in 2017/18. The cost of poor mental health to the economy as a whole is estimated to be far in excess of what the country gives the NHS to spend on mental health. So reducing the impact of common mental illness can also increase our national income and productivity.
- Expand access to IAPT services for adults and older adults with common mental health problems, with a focus on those with long-term conditions.
- New waiting time standards covering the NHS' IAPT services, early intervention in psychosis and children and young people's eating disorders.
- New and integrated models of primary and community mental health care will support adults and older adults with severe mental illnesses. A new community-based offer will include access to psychological therapies, improved physical health care, employment support, personalised and trauma-informed care, medicines management and support for self-harm and coexisting substance use.
- Redesign and reorganise core community mental health teams to move towards a new place-based, multidisciplinary service across health and social care aligned with primary care networks.
- The NHS will ensure that a 24/7 community-based mental health crisis response for adults and older adults is available across England by 2020/21. no acute hospital is without an all-age mental health liaison service in A&E departments and inpatient wards by 2020/21.
- Safe havens and crisis cafes provide a more suitable alternative to A&E for many people experiencing mental health crisis, They are commissioned through the NHS and local authorities, provided at relatively low costs, high satisfaction, and usually delivered by voluntary sector partners. While these services now exist in a number of areas, we will work to improve signposting, and expand coverage to reach more people and make a greater impact.
- Ambulance staff will be trained and equipped to respond effectively to people in a crisis. We will introduce new mental health transport vehicles to reduce inappropriate ambulance conveyance or by police to A&E.
- Contribute to ending acute out of area placements by 2021 and upgrade the physical environment for inpatient psychiatric care
- Since 2015, the suicide rate has reduced from 10.1 to 9.2 per 100,000 of the population, but certain groups of people remain at heightened risk. Suicide is more common in men than women, though male suicide rates are now at their lowest rates in over 30 years, and considerably lower than many other comparable countries.

- P. 73 Mental Health Safety Improvement Programme, which will have a focus on suicide prevention and reduction for mental health inpatients
- P.102 We will also create a new Financial Recovery Fund (FRF) to support systems' and organisations' efforts to make all NHS services sustainable. As a result of this funding, we expect the number of trusts reporting a deficit in 2019/20 to be reduced by more than half, and by 2023/24 no trust to be reporting a deficit.
- Research shows as many as 50% of patients do not take their medicines as intended and pharmacists will support patients to take their medicines to get the best from them, reduce waste and promote self-care. We will reduce the prescribing of low clinical value medicines and items which are readily available over the counter to save over £200 million a year.
- Cut delays and costs of the NHS automatically having to go through procurement processes. We propose to free up NHS commissioners to decide the circumstances in which they should use procurement, subject to a 'best value' test to secure the best outcomes for patients and the taxpayer. The current rules lead to wasted procurement costs and fragmented provision, particularly across the GP/urgent care/community health service workforce. **This would mean repealing the specific procurement requirements in the Health and Social Care 2012 Act.** We also propose to free the NHS from wholesale inclusion in the Public Contract Regulations. We would instead set out our own statutory guidance for the NHS to follow. At the same time, we propose to protect and strengthen patient choice and control, including through our wider programme to deliver personalised care;
- **Increase flexibility in the NHS pricing regime.** This would provide further flexibility in the setting of national prices, support the move away from activity-based tariffs where that makes sense, facilitate better integration of care and make it easier to commission Section 7A public health services as part of a bundle with other related services, on a nationally consistent basis.

NHS Long Term Workforce Plan

Fact sheet 26th October 2023 - published under the 2015-2024 Conservative Administration

Based on the NHS Long Term Plan needs the government made commitments as follows:

- Double the number of medical school places by 2031 from 7,500 today to 15,000, with more medical school places in areas with the greatest shortages to level up training and help address geographic inequity. A higher proportion of the new medical students will carry out their postgraduate training in services such as primary care, mental health and cancer. The first new medical school places will be available from September 2025.
- Almost double the number of adult nurse training places by 2031, with around 24,000 more nurse and midwife training places a year by 2031. Within this we will train over 5,000 more mental and learning disability nurses a year.

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Commitments from new Labour government from party manifesto 2024

- “The factor that is markedly different from the past decades is our understanding of mental health. Across society, mental health has stepped out of the shadows, yet it is difficult to argue the NHS has kept up. Indeed, Britain is currently suffering from a mental health epidemic that is paralysing lives, particularly those of children and young people. This is a tragedy – arguably nothing says more about the state of a nation than the wellbeing of its children. So right at the core of our mission will be a bold new ambition to raise the healthiest generation of children in our history. And, as a crucial part of that, we will reform the NHS to ensure we give mental health the same attention and focus as physical health.”
- “The principle of integrating health and care services will improve the treatment patients receive. We know that more of this care needs to happen outside hospitals. Therefore, we will trial Neighbourhood Health Centres, by bringing together existing services such as family doctors, district nurses, care workers, physiotherapists, palliative care, and mental health specialists under one roof.”
- “The NHS has struggled to keep up with greater awareness of the challenges of mental health. Waiting lists for those referred for support are too high, and shamefully so for young people.”
- “Labour will bring waiting times down and intervene earlier. We will recruit an additional 8,500 new staff to treat children and adults through our first term. As part of our mission to reduce the lives lost to suicide, these new staff will be specially trained to support people at risk. Labour’s new Young Futures hubs will provide open access mental health services for children and young people in every community.”
- “Mental health legislation is also woefully out of date. The treatment of people with autism and learning difficulties is a disgrace. The operation of the Mental Health Act discriminates against Black people who are much more likely to be detained than others. Labour will modernise legislation to give patients greater choice, autonomy, enhanced rights and support, and ensure everyone is treated with dignity and respect throughout treatment.”

Forthcoming Mental Health Bill

The King’s Speech 2024 included a commitment to legislate to modernise the Mental Health Act.

<https://commonslibrary.parliament.uk/research-briefings/cbp-9132/>

“The accompanying [briefing notes to the King’s speech](#) highlighted concerns about increased rates of detention under the act and its application to autistic people and people with a learning disability. It also noted that Black people are three and a half times more likely to be detained under the act than White people and over eight times more likely to be placed on a community treatment order.

The notes said the bill would bring in amendments to the act “to give people detained greater choice and autonomy, enhanced rights and support, and ensure everyone is treated with dignity and respect throughout treatment”. This would be achieved through steps such as:

- increasing the risk threshold for detention
- limiting the application of the act to people with a learning disability and/or autistic people

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

- adding statutory weight to the voice of patients.

The reforms would take a number of years to implement and would be introduced in phases. New powers would not be introduced until there were sufficient staff in place to ensure safety.”

What does the Darzi report mean for local Minds?

- available from https://connectingminds.org.uk/whats-happening/news/what-does-the-darzi-report-mean-for-local-minds/?utm_source=AS+newsletter+02%2F10&utm_medium=email+&utm_content=Darzi+report+meaning+fro+LMs&utm_campaign=14685439_ConnectingMinds_Newsletter_02%2F10%2F24_ZW_Manual_Recurring&dm_i=CZC.8QRCV.CVIS.BM.10C275.1

The Darzi report in a page:

- People are struggling to access timely care across the NHS – GPs, community and mental health services, A&E, surgery and treatment.
- Too much money is being spent in hospitals and not enough in the community – the opposite of the stated policy intention. More funding should go to primary, community and mental health care which will mean financial incentives have to change.
- The health of the nation is deteriorating, particularly since the pandemic, with an increase in mental health and long-term conditions and worsening of the social determinants of health. Cuts to prevention and social care are putting extra pressure on the NHS.
- The NHS is not contributing to national prosperity as it should, with so many people out of work and waiting for health treatment. Most of the recent rise in long-term sickness is being driven by mental health conditions.
- There are three key drivers of the current state of NHS performance;; austerity in the 2010s; the Lansley reforms enacted in the Health and Social Care Act 2012 which took a “scorched earth” approach to NHS management; and the Covid-19 pandemic.
- Lord Darzi thinks that current system with 42 ICBs, 7 regions and NHSE “has the makings of a sensible structure” but that national NHSE team is too big and the large increase in regulators is not justified. He thinks ICB roles and responsibilities need to be better defined, especially on population health.
- The NHS is not listening enough to the voices of patients and carers and could improve the quality of care if it did so. The report only includes one passing reference to the VCSE, regarding their role in Integrated Care Partnerships. We still have a challenge getting the contribution of the VCSE to health and care – as providers and system partners - recognised.
- Investment in mental health has led to more people getting access to care but services cannot match demand. Productivity low because of lack of data and tech but broadly stable, while it has declined in acute services.
- He is particularly concerned about the state of the mental health estate, long waits in A&E departments and the increased use of restrictive practices.
- The NHS overall has too few managers, but that any increase should come at a regional or local level rather than at the centre. This may provide more bandwidth for VCSE engagement.

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

- He favours payment systems that incentivise activity rather than block contracts which reward effort – we know VCSE providers have mixed experiences of PbR-type contracts. In this context, the ability of VCSE providers to flow performance data back to the system will be increasingly vital.

Mind's Policy and Campaigns and System Influencing teams have been digging into the report to work out what it means for local Minds. Here are our top seven takeaways:

1. The report finds too much money is being spent in hospitals and not enough in the community – the opposite of the stated policy intention. More funding should go to primary, community and mental health care which will mean financial incentives have to change. This would be good news for mental health but will be tough to deliver.
2. The NHS is not contributing to national prosperity as it should, with so many people out of work and waiting for health treatment. Most of the recent rise in long-term sickness is being driven by mental health problems. This is an opportunity to make the case for much speedier support to prevent people falling out of work and support them back to work, but only when they are ready.
3. Integrated Care Systems are likely here to stay although Integrated Care Board roles and responsibilities need to be better defined, especially on population health. Hopefully this will mean no more top-down restructures for a while. He also thinks they need more managerial capacity, which might help with VCSE engagement.
4. The NHS is not listening enough to the voices of patients and carers and could improve the quality of care if it did so. National and local Minds are well placed to help with this.
5. There is much more to do to get decision-makers to understand the contribution of the VCSE to health and care as providers and system partners. The report only includes one passing reference to the VCSE, regarding their role in Integrated Care Partnerships.
6. Lord Darzi favours payment systems that incentivise activity rather than block contracts which reward effort – we know VCSE providers have mixed experiences of PbR-type contracts. In this context, the ability of VCSE providers to flow performance data back to the system will be increasingly vital
7. Lord Darzi seems to support a scaled-down NHS England national team and the use of fewer nationally set performance targets. He recognises the tensions between nationally-defined spending pots such as the Mental Health Investment Standard and local autonomy. Having clear national targets and ringfenced funding have been crucial to expanding mental health services in recent years and we are concerned that ICBs may prioritise plugging acute sector deficits over investing in mental health.

Cost of Living Crisis and Poverty

Relative income and its relationship with mental health in UK employees a conceptual and methodological review:

Produced by Bethany Croak, Laura E Grover, Simon Wessely, Kalpa Kharicha, Danielle Lamb, Sharon A.M. Stevelink

<https://www.medrxiv.org/content/10.1101/2024.08.02.24311400v1>

- The relative income hypothesis theorises that one's earnings relative to others exert a greater influence on subjective wellbeing than absolute income. Understanding the relationship between relative income and mental health could contribute to employee wellbeing. Pg 2
- Having a lower income than the reference group was commonly associated with diminished wellbeing, though moderating factors (gender, income inequality and composition of reference group) are discussed. Pg 2
- Income inequality was identified as a moderating variable in the relationship between relative income and mental health; Becchetti et al. (2022) found that negative relative income effects were stronger in areas where inequality was higher. Pg 11
- All but one study concluded that there was a relationship between relative income and mental health. This effect was frequently found to be negative (lower relative income compared to reference group was associated with poorer wellbeing). This aligns with a recent meta-review (Dougall et al., 2024) which found that lower subjective social status was associated with poorer mental health. Pg 13
- Relative income has an effect on mental health and this is most commonly, a negative effect for those who earn less than their reference group, particularly pertinent in a socio-political climate dominated by pay disputes and public sector retention challenges. We also highlighted important moderating factors that can influence this relationship such as gender, age and income inequality, emphasising the importance of policies which aim to close this wealth disparity and tackle poverty. Positive relative income effects identified in this review offer an opportunity for policymakers and private organisations alike to encourage social mobility and create fair and aspirational work environments. Pg 16

Suicide Prevention

"The overall suicide rate increased in 2018, changing a trend of continuous decline since 2013, and stayed largely constant in 2019. Around three-quarters of registered deaths in 2019 were among men, and rates among the under 25s have generally increased in recent years."

"Around 5,691 people took their own lives in England and Wales in 2019. This is around 16 deaths by suicides every day, or approximately 1 every 80 minutes."

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

“In terms of men, the age group with the highest suicide rate is 45 to 49 year olds, (25.5 deaths per 100,000 people). For women, it is 50 to 54 year olds (7.4 suicides per 100,000 people) - this is around 5 years older than in 2018.”

“Men are three times more likely to die by suicide than women, and this has been the case since the mid-1990s, although more suicide attempts are made by women. Suicide rates among men increased by 9% from 2017 to 2018 - the rate was consistent from 2018-19.”

Office for National Statistics (2020) Suicides in the UK: 2019 registrations

“66% of people claiming ESA have thought about taking their life... 43% of people claiming ESA have made a suicide attempt..”

NHS Digital (2016) Mental Health and Wellbeing in England, Adult Psychiatric Morbidity Survey 2014

Substance Misuse

Comorbidity of substance misuse and mental illness in community mental health and substance misuse services –

Weaver T, Madden P, Charles V, et al. Comorbidity of substance misuse and mental illness in community mental health and substance misuse services. *British Journal of Psychiatry*. 2003;183(4):304-313. doi:10.1192/bjp.183.4.304

Key findings

- Comorbidity of psychiatric disorders and substance misuse is highly prevalent in those receiving treatment for one of these conditions.
- Psychiatric teams and substance misuse services fail to identify significant proportions of patients with such comorbidity on their caseloads. Most patients with substance misuse problems on psychiatric caseloads receive no substance misuse interventions, and a third of substance misuse patients with mental health problems do not receive any mental health interventions.
- Comorbidity cannot be adequately managed by cross-referral between psychiatric and substance misuse services as currently configured and resourced. A new approach is needed to enable psychiatric and substance misuse services to offer evidence-based treatment of comorbid conditions to a much higher proportion of their patients.
- Drug and alcohol treatment services already provide mental health interventions (both pharmacological and psychotherapeutic) to significant numbers of their patients with mental health problems. However, there were equally large numbers of patients with comorbidity whose needs were unmet or unidentified. Resources need to be deployed enabling substance misuse services to offer evidence-based treatments to a much higher proportion of these patients. Models of collaborative working with local general practitioners and psychotherapy services (in addition to general adult psychiatry) should be developed and evaluated

Neurodivergence

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Recognising and responding to physical and mental health issues in neurodivergent girls and women | British Journal of Hospital Medicine (magonlinelibrary.com)

Neurodivergent people in general, and women and girls in particular, are more prone to a wide variety of serious physical and psychological health issues, and it is important that clinicians learn to recognise and respond to various clinical cues and clues for these. As a group of individuals with extensive experience of neurodivergence in females at both a personal and a clinical level, the authors of this paper are committed to highlighting health care issues among autistic girls and women. As part of this process, we wish to emphasise the wide range of associated conditions that they may develop, the potential differences in their presentation compared to non-autistic women, and the challenges which clinicians can face in aspects of both their diagnosis and management. We propose recommendations for clinicians to enhance the healthcare experience for this substantial and crucial demographic.

Adverse childhood experiences can adversely affect health and appear to occur more frequently among autistic girls and women.

hypersensitivity, impaired executive function and communication issues all contribute to the difficulty that autistic women and girls experience with accessing medical care. Lack of awareness of these issues by health care professionals accentuates the neglect of their health care needs, producing poorer outcomes as a result.

Syncope in autistic females commonly relates to hypersensitivity of the autonomic nervous system triggering postural orthostatic tachycardia syndrome (POTS) which is now recognised as being associated with hypermobile joints.

Suicide represents a leading cause of early death among autistic girls and women, with two-thirds reporting considering suicide at some stage and over half of these planning or attempting it. autistic females without learning difficulty are at higher risk of suicide than autistic males, with suicidal ideation often occurring in the absence of clinical depression.

Anxiety disorders are an almost invariable accompaniment of neurodivergence in females, and ADHD may be more strongly associated with anxiety than autism alone. Both autism and ADHD are associated with meltdowns and panic attacks. **Depression is also found in 38% of neurodivergent people.**

Neurodivergent females also account for a high percentage of patients presenting with chronic pain syndromes to pain clinics and rheumatologists.

Key points

- The health care needs of women and girls with neurodivergence have been largely overlooked until recently, perhaps because of underdiagnosis as a consequence of camouflage and masking.
- Neurodivergent females suffer increased morbidity and mortality from a wide range of physical and mental health comorbid conditions.
- Doctors should increase their awareness of both the diagnosis and management of neurodivergent conditions in women and girls.

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

- Priorities for clinical research should include the management of chronic pain, eating disorders and gender incongruence, all of which are grossly overrepresented with neurodivergent females.

Frontiers: The positive impact of identity-affirming mental health treatment for neurodivergent individuals (frontiersin.org)

The objective of this study was to analyze differences in mental health symptom presentation at intake and compare treatment outcomes among three groups: clients with an affirming neurodivergent diagnosis, clients without an affirming diagnosis, and neurotypical clients.

Neurodivergent clients reported significantly worse mental health symptoms at intake than neurotypical clients, regardless of diagnosis status. Additionally, clients who identified as neurodivergent but did not report an affirming medical diagnosis reported significantly worse mental health symptoms than those who did report an affirming medical diagnosis. By discharge from IOP treatment, no significant differences were found in symptom change scores between neurodivergent and neurotypical individuals, or neurodivergent individuals with an affirming diagnosis and those without.

Neurodivergence-informed therapy - Chapman - 2023 - Developmental Medicine & Child Neurology - Wiley Online Library

Neurodiversity theory can help therapists support neurodivergent clients.

Neurodivergence-informed therapy helps shift to a relational rather than individual conception of dysfunction.

Disability pride may be helpful for cultivating neurodivergent thriving.

Clinicians should, to the extent that this is possible, depending on communication difficulties, follow the guidance of the neurodivergent individuals regarding what they are in the therapeutic space for, and why. Doing this itself promotes an epistemic agency. This means that neurodivergent individuals may request help for some emotions or behaviours which are divergent from the norm, but embrace other divergencies as core to their identity and this should be respected.

The contribution of the voluntary sector to mental health crisis care: a mixed-methods study

Published July 2020

From the responses to the survey and regional mapping, five types of voluntary sector organisations were identified as having a role to play across the crisis continuum from prevention, providing an urgent response and supporting recovery.

Variation and inequalities in access to voluntary sector provision were identified for Type 1 voluntary sector organisations (i.e., crisis specific), with people living in rural areas particularly disadvantaged by a lack of provision. Inequalities in access for other groups were identified, namely Black, Asian and minority ethnic communities, people who use substances and people who identified as having a personality disorder. Access to Type 1 voluntary sector organisations is typically restricted by NHS services such that people with higher needs or presenting with greater risks are assessed by mental health staff and diverted to other services.

Most of the dissatisfaction with voluntary sector services related to access and lengthy waiting times for follow-on sessions for one-to-one support or therapeutic programmes. Good working relationships with the public sector were associated with a positive impact on the attitudes and behaviours of mental health staff.

While the contribution of the voluntary sector was widely appreciated, participants were often critical of their experience of NHS services, the lack of responsiveness of crisis resolution home treatment teams, the high thresholds to access services, and waiting lists as compromising their access to crisis support.

One participant described their experience of being passed from service to service as 'responsibility tennis'. Service user participants were also critical of dismissive and insensitive attitudes within public sector services and referred to a mistaken view of agency as shifting responsibility back to the person experiencing a crisis.

Recommendations for improving the crisis system and better realising the contribution of the voluntary sector included:

- (1) a better appreciation of the voluntary sector contribution;

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

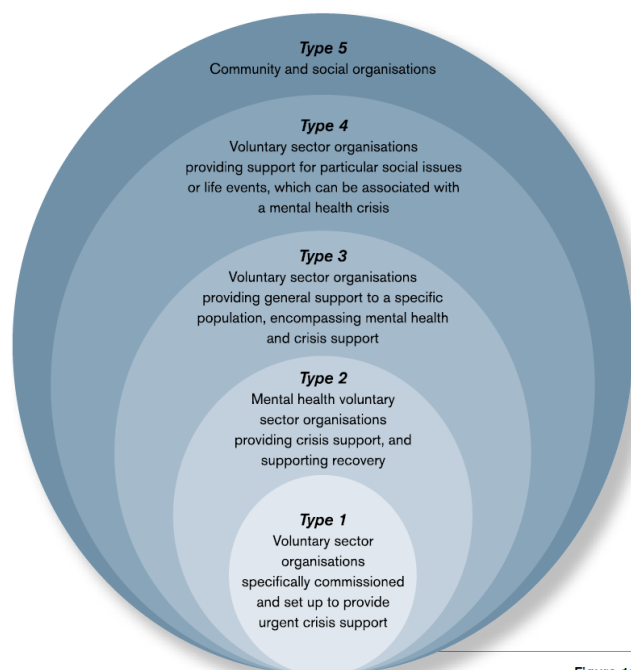


Figure 1:



Figure 2: Activities provided by voluntary

- (2) clear standards for crisis support, so that people know what support they can expect;
- (3) a demonstrable commitment to equity and addressing variations in access to crisis care; and
- (4) investment in the voluntary sector.

Key recommendations for improving commissioning emphasised more resources, more integrated commissioning and consequently joined-up services, greater recognition of what the voluntary sector offers and how its role in commissioned services can be sustained, and greater involvement of voluntary sector organisations and communities in the commissioning cycle.

Grant Funding

Grant funding from traditional sources is becoming more challenged year on year. Match funding to be utilised alongside traditional funding as a “lever in” to source more funding using local authority grants and community fundraising as seed money and match-funding to other grants as it will cover some staffing costs. The need for this is evidenced by research by the Institute of Fundraising, and backed up by studies from Mind, Kings Fund and NCVO, who report:

...”43 per cent of charities expected to see an increase in demand for services against a decline of 48 per cent in voluntary income, and 52 per cent of charities expected to reduce services.”

Blackbaud *Status of Fundraising 2024* reports:



Blackbaud also highlight the opportunities and risks brought on by the introduction of Artificial Intelligence and suggest charities have “Use of AI” Policies.

Review of County-wide Statistics and Agendas

Staffordshire Integrated Care Board 2022

“We’re committed to ensuring that older people, adults, young people and children in Staffordshire and Stoke-on-Trent are supported whether they find themselves in need of help in a mental health crisis, or whether their day-to-day mental health and wellbeing is affected. We’re working in a collaborative way to ensure your mental health and physical health needs receive equal priority and also ensure you receive help and support closer to your home and family.”

Priorities and projects

- Children and young people will not be unnecessarily admitted to hospital, while children with an eating disorder will receive a responsive service. Furthermore, we want to see a greater number of children and young people accessing mental health services when they need them
- You will experience services that are built around your needs, with mental health and physical health services working alongside primary, community and social care
- We have an ambition of zero suicides
- We will ensure you do not have to go out of the area to receive in-patient care as we aim to have enough beds across Staffordshire and Stoke-on-Trent
- If you are in mental crisis, we want you to be able to access support 24/7 and ensure you know where you can access this support.

“Aims and outcomes

1. We want to increase the number of psychiatric intensive care beds and reduce significantly the number of patients being sent out of Staffordshire and Stoke-on-Trent to receive care
2. We are committed to providing seven-day-a-week child and adolescent mental health services (CAMHS)
3. We are expanding crisis and home treatment teams to ensure more people are treated in their own home, avoiding inpatient stays
4. We are committed to reducing the number of people who take their own life or experience self-harm
5. We want to reduce the number of people who frequently attend accident and emergency with mental health concerns and also reduce the number of frequent callers to ambulance services
6. We’re developing a 24/7 intensive outreach service that includes support to young people with eating disorders”

Operational Plan 2024-25

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

- A. Everyone can look after their own mental well-being and find support in their communities when they need it
- B. People have access to services when needed.
- C. A timely response to crisis.
- D. There is equal access to support to improve mental wellbeing and services to manage mental health problems.
- E. People with severe mental health problems are supported to live in the community and have good quality, integrated care.
- F. More integrated, good quality services for young people that focus on achieving independence in adulthood.

Community Mental Health Transformation Program

The vision: the following has been co-produced with people with lived experience of mental health services:

“Our vision is that by working together we create mental health services that are inclusive, accessible, values people as they are and is responsive to their needs. We will embrace innovation and new ways of working to remove traditional barriers, improve communication and training, and provide personalised support that enables people to live well and realise their full potential.”

Key new services contracted by MPFT included:

- Future Focus: served in the west by Changes and in the East by Burton and District Mind (with partner organisations).
- Finance Services: Mid Mercia CAB
- Housing: Tamworth Borough Council and Trent & Dove Housing
- Lifestyle: Everyone Health
- Substance Misuse/Dual Diagnosis: Humankind – this has since been delivered by MPFT inhouse.

In addition, MPFT contracted Burton and District Mind to deliver Safe Haven and Safe Hands to support the Crisis Resolution and Home Treatment Teams.

Also, short-term grant funding (3 rounds) was made available to VCSE organisations with the goal of providing support for emerging needs for people with experience of serious mental illness.

As of 2024, much of the services introduced as part of the Transformation programme have been ‘mainstreamed’ into MPFT’s IMHT and we are expecting contract extensions pending tendering processes.

HealthWatch Staffordshire Reports

Gender Affirmation

“In June 2022 we spoke with people who had been waiting a long time to be seen by a Gender Dysphoria Clinic to undergo Gender Affirmation. As none of these clinics are

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

based in Staffordshire, we could not influence the waiting times. However, we chose to look at people's experiences of local healthcare, related to their gender affirmation, whilst on the waiting list. This was because people told us about the negative effects of waiting such a long time for transition was having on their mental health. We found that a lack of knowledge in Primary Care, combined with long waiting times to be seen by specialist care had a negative impact on people's health and wellbeing. We also found that more local support for individuals who were waiting to be seen was needed, as this would help prevent a deterioration in their wellbeing and mental health.

People with cooccurring needs

When carrying out our engagement work, we found that carers and people with cooccurring needs, felt there was a general lack of understanding of their needs. From the 86 respondents to our survey 73% were carers of people with co-occurring needs. People were asked which of seven different diagnosis' they/the person they cared for had. Out of a total of 163 answers (some people had multiple diagnosis') 72 people said Autistic Spectrum Disorder, and 36 ADHD. These were the top two diagnoses. In the survey we asked how going to various health and social care services affected people. For visiting a GP, hospital, dentist, social worker, and mental health services, people said their co-occurring need affected them 'a lot'. When asked why this was, common themes were that the professional they were seeing had a lack of knowledge about their diagnosis, that the patient struggled to express themselves, and they struggled with the waiting room/environment.

Young People

Mental health issues among young people have increased, with the government adopting measures to support the achievement of improved emotional wellbeing and mental health. Staffordshire County Council (SCC) has developed a joint Strategy to improve mental health outcomes for young people and the Staffordshire population, through collaboration with key stakeholders.

Transitioning from children's mental health services into the adult services proved problematic for some young people, due to the following factors:

- There was not a clear pathway: some cases were transferred from CAMHS to AMHS; other young people were discharged on their 18th birthday, without too much involvement or say into those decisions; they were just informed via a letter they received, at a later stage.
- Care experienced young people expressed that they were not always listened to, or not taken seriously, by the practitioners, when attending on their own. When an adult/ carer was present, clinicians tended to rely more on what the adult carer was saying.

Local prevalence

Data sourced in 2020: Our 'patch' therefore contains 297,586 people, 124,275 households (2.39 people/household compared to UK 2.41). Based on figures we can project that 63,780 people have a mental health problem in our area.

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Table 2: Summary of population age-structure characteristics, 2017

	Resident population	Aged 18-64	Aged 65-74	Aged 75 and over	Old age dependency ratio	Minority ethnic groups (2011)
Cannock Chase	99,126	61.1%	10.7%	8.1%	29.7	3.5%
East Staffordshire	117,552	59.4%	10.5%	8.5%	30.7	13.8%
Lichfield	103,507	57.4%	13.2%	10.3%	39.5	5.4%
Newcastle-under-Lyme	128,963	61.4%	11.1%	9.1%	31.8	6.7%
South Staffordshire	111,890	58.5%	13.0%	10.9%	39.5	5.4%
Stafford	134,764	58.9%	12.3%	9.8%	36.1	7.4%
Staffordshire Moorlands	98,496	57.1%	13.9%	10.6%	41.3	2.5%
Tamworth	76,527	60.0%	10.9%	7.4%	29.3	5.0%
Staffordshire	870,825	59.3%	12.0%	9.4%	34.7	6.4%
West Midlands	5,860,706	59.8%	10.0%	8.4%	29.6	20.8%
England	55,619,430	60.6%	9.9%	8.2%	28.7	20.2%

Source: 2017 mid-year population estimates, Office for National Statistics, Crown copyright and 2011 Census, Office for National Statistics, Crown copyright and

Table 1: Projected mental health needs of Staffordshire population aged 18-64, 2020 – 2035

	2020	2025	2030	2035
Population aged 18 – 64	510,600	505,000	496,300	487,400
Mental health need				
Common mental disorder (e.g. depression, anxiety and Obsessive-Compulsive Disorder (OCD))	96,251	95,145	93,484	91,694
Borderline personality disorder	12,224	12,084	11,874	11,647
Antisocial personality disorder	17,198	17,018	16,753	16,464
Psychotic disorder	3,574	3,534	3,475	3,410
Two or more psychiatric disorders	36,745	36,333	35,717	35,051
Survivors of sexual abuse				
Survivors of childhood sexual abuse	58,449	57,762	56,726	55,614
Drug and alcohol misuse				
Alcohol dependence	30,798	30,475	30,000	29,400
Drug dependence	17,426	17,240	16,966	16,666
Suicide				
Predicted to commit suicide	38	38	37	36

Source: Projecting Adult Needs and Service Information (PANSI)

Table 2: Projected health conditions of Staffordshire population aged 65 and over, 2020 – 2035

	2020	2025	2030	2035
Population aged 65 or over	194,900	210,700	231,300	249,300
Mental health needs				
Depression	16,691	18,072	19,845	21,300
Severe depression	5,269	5,885	6,466	6,988

Source: Projecting Older People Population Information (POPPI)

Data updated for 2023 with use of NHS Data

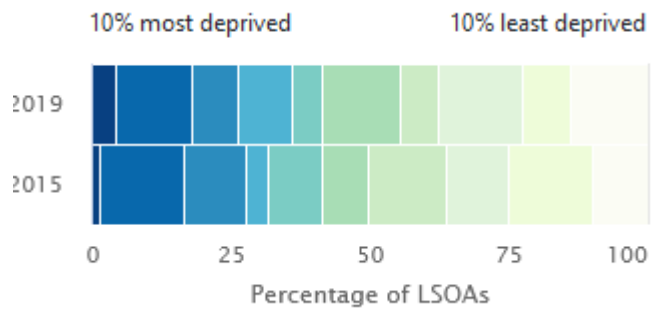
District	Population	16-64	65 and over	Total Charitable Population	Charitable Population as % of population	Minority ethnic groups	Income deprived %	Numbers income deprived	Depression Prevalence %	Depression Numbers	Self Harm	Secondary (inc LD) 5.8%	Estimate of secondary mental health, not inpatient	Total Charitable Audience	% of population
East Staffordshire	124,000	77,400	23,100	100,500	15.3%	23,000	18.8%	18,894	11.2%	11,256	140	4990	2,146	13,542	10.9%
Lichfield District	106,400	63,100	25,500	88,600	13.5%	4,000	3.8%	3,367	12.6%	11,164	170	5,076	1,892	13,226	12.4%
Tamworth Borough	78,600	48,900	1,500	50,400	7.7%	5,000	19.6%	9,878	14.1%	7,106	145	3,749	1,076	8,328	10.6%
Total	309,000	189,400	50,100	239,500		32,000	14.1%	32,139		29,526	455	13,815	5,115	35,096	11%

Based on these calculations, our assumed target audience (people with mental health problems) equates to around 35,000.

Review of District Statistics and Agendas

Enhanced Strategic Needs Analysis

Indices of Deprivation: 2019 and 2015



Burton on Trent

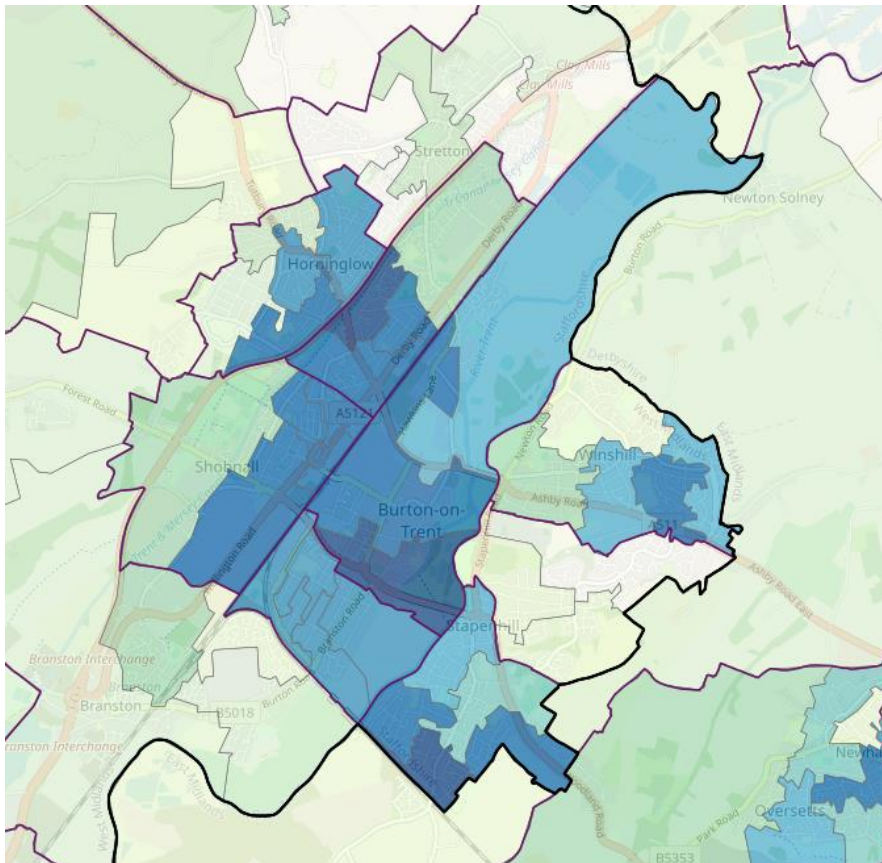


Figure 1 <http://dclapps.communities.gov.uk> – Burton on Trent

Areas of Deprivation:

- Eton Park 10%
- Burton 10%
- Stapenhill 10%
- Winshill 20%
- Horninglow 20%
- Shobnall 20%

Utttoxeter

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

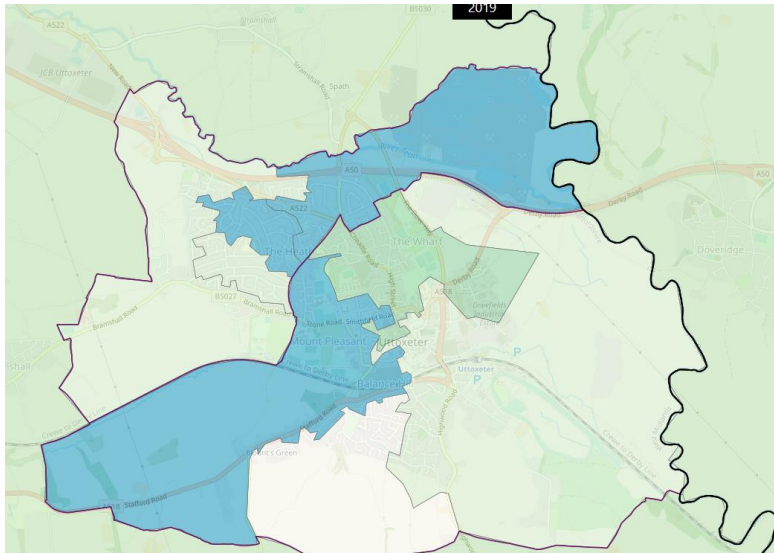


Figure 2 <http://dclgapps.communities.gov.uk> Uttoxeter

Areas of Deprivation:

- Heath 40% most deprived
- Town 40% most deprived

Tamworth

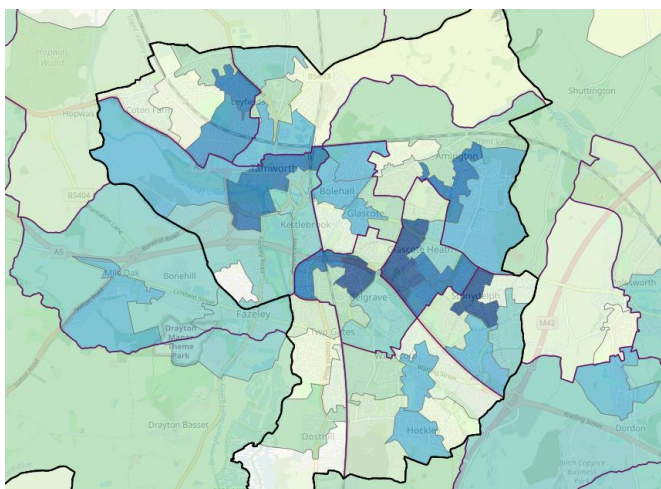


Figure 3 <http://dclgapps.communities.gov.uk> Tamworth

- Belgrave 10% most deprived, Health deprived
- Glascote 10% most deprived
- Stoneydelph 10% most deprived, health deprived
- Amington 20% most deprived
- Castle 20% most deprived – Health deprived,
- Mercian 20% most deprived

Burntwood

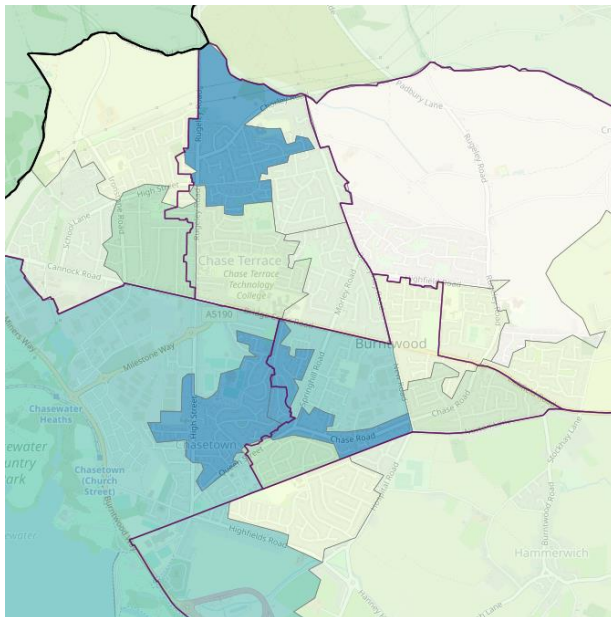


Figure 4 <http://dclgapps.communities.gov.uk> Burntwood

Areas of Deprivation: Boney Hay - 40% most Deprived

- Summerfield and All Saints – 30% most Deprived

Lichfield

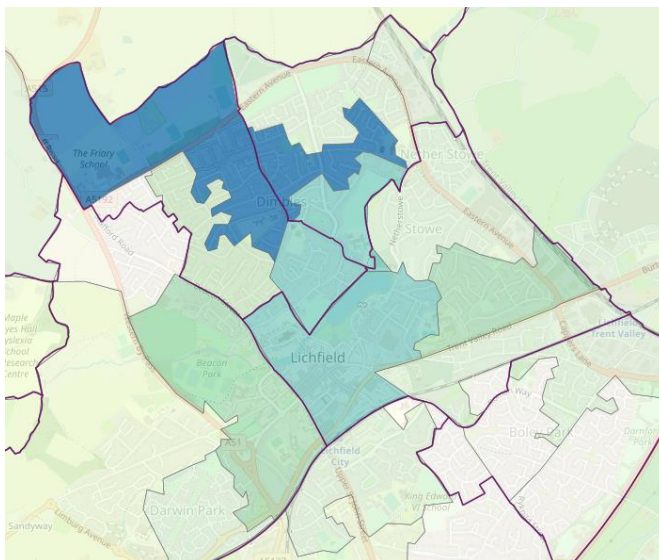


Figure 5 <http://dclgapps.communities.gov.uk> Lichfield

Chadsmead – 20% most deprived

- Curborough 20% most deprived and health deprived,

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Suicide Prevention

"I was picked up by the police during my suicide attempt, I was just taken home. That was it - no one called to check in. No one referred me anywhere. No one helped me to sort out the mess I was in. At my lowest moment, all I got was a free car ride back to the life I can longer cope with. My view of my situation has not changed. I have no hope and I am a burden on those around me. It is inevitable I will try again and will try harder."
Burton and District Mind Safe Hands Participant 2023

Out of 71 incidents of suicidal behaviours at public locations in Staffordshire this year, 19 were repeat presenters. Our target area has a higher rate of suicide than the national and the county average. East Staffordshire has a rate of 16.4 deaths per 100,000 people. 33 people took their own lives in our service area in 2021.

A 'gap' in support is highlighted by colleagues in the Staffordshire and Stoke on Trent Suicide Prevention Partnership, a view shared by East Staffs Primary Care Network and Survivors of Bereavement Suicide Lichfield.

Identified groups at increased risk:

- Young people (16 – 24) through promotion with Family Support Services, MPFTs School Support provision and our work with Sixth-Form Counselling.
- Middle-aged men through our portfolio of physical activity groups and connections with local substance misuse charities.
- People who have previously self-harmed and/or are in contact with mental health services through our Crisis and Future Focus Services, Mental Health Liaison in A&E and Street Triage, and Integrated Mental Health Teams
- People in contact with the justice system though growing our links with probation services and domestic abuse agencies.
- Autistic people through our work with MPFTs Mental Health and Autism services and our networks with LD charities including COGS and Friends to Friends.
-
- Pregnant women and new mothers though our work with NHS Talking Therapies
- Marginalised groups, including LGBTQ+ communities through our Outreach Service.

Emerging Service Provision

New Online Service Provision available, paid therapy/counselling packages – competing with local face to face service providers.

Better Help Therapy online – www.betterhelp.com

Relate – Burton Library, 01332 349177 or Bore Street Lichfield, 0121 643 1638,
www.relate.org.uk

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

Re-StART – Elim Corner, <https://burtonelim.com/Groups> Mondays & Wednesdays
11.30am-1.30pm

Burton Albion Community Trust (BACT) – Programme of services, 01283 246207,
www.burtonalbioncommunitytrust.co.uk

Burton & District Mind fairs well in internet searches for local Mental Health Provision in
Burton, Lichfield and Tamworth.

Local Organisations

Name of Local Organisation	Contact Details	Current Activities (Aug 24)
Staffordshire Network for Mental Health (SNFMH)	Lichfield, info@snfmh.org www.snfmh.org	Toolbox – free to referrals Mixture of paid workshops including workplace health, anxiety, EFT and more
Changes	Across Staffordshire www.changes.org.uk	Making Changes workshops Peer support groups
Richmond Fellowship	www.richmondfellowship.org.uk	Brendan House Employment Services Supported Housing and Residential Recovery Services Crisis Services and Havens Community Based Services Social Enterprises Domestic Abuse Services
Changes Tamworth	www.changestamworth.com	Peer support groups in Tamworth (Kins Street) and Burton (Peel Croft Surgery & Fire Station)
Tillys Voice	01283 890256 support@tillysvoice.co.uk tillysvoice.co.uk	Peer support groups Client Trips 1 to 1 support
Burton Hope	enquiries@burtonhope.co.uk www.facebook.com/BurtonHOP E.co.uk	Hope2Home delivers food parcels Hope2Street offers a twice-weekly collection service Hope4Support can offer many services including general Social Prescribing which allows us to offer our service users referrals for the services they need.
Burntwood be a friend	Contact Us – Burntwood Be a Friend burntwoodbeafriend@gmail.com	Community Store Community Garden Men's Walk
Community Together CIC	www.communitytogethertocic.org.uk/ ctcicinfo@gmail.com	H.O.M.E Hub Service Transfer of Care Support Services – Hospital to Home Form Filling Service Asylum Seeker and Refugee Support Befriending Services

Trent & Dove	www.trentanddove.org/ enquiries@trentanddove.org	Wheel Connections Offer well-maintained, affordable homes across East Staffordshire, South Derbyshire, and North West Leicestershire. Cost of living support Warm Spaces Customer Discount App Helping Hands Fund Coffee Connect Community Fridge
PHOENIX COUNSELLING SERVICE	phoenixcounselling2@gmail.com https://www.phoenixcounselling-service.co.uk/ 07415 517663	Phoenix Counselling Service provides professional and affordable counselling for people living in Burntwood, Lichfield and the surrounding areas.
Blast CiO	www.blastsupport.org/ office@blastsupport.co.uk	Autism Peer Support Parents Support group
You 1st	www.you1st- emotionalsupport.com contact@you1st- emotionalsupport.com 07850 588672	Foodbank in Burton on Trent Debts and Bills Universal Credit Light duties around the home Appointments that need booking Local activities Filling out forms e.g. PIP Crisis, Mental Health, Addiction
North Staffs Mind	www.nsmind.org.uk reception@nsmind.org.uk 01782 262100	Counselling: Adults Counselling: Children and YP Community activity Supervision services
YMCA Burton	01283 538802 Office@burtonymca.org Burtonymca.org	Counselling Emergency Housing Foodbank Mental Health Support Chaplaincy Supported Housing

Local Stakeholder Engagement

Who	Representing	Engagement Activity
MPFT (Midlands Partnership Foundation Trust)	Funder and community	Representation at Transformation Stakeholder Meeting and coproduction activity
Staffordshire Country Council	Wider Community	Discussion with SCC Public Health leads Discussion with SCC Commissioning re Mental Health Strategy
Burntwood Town Council	Funder and community	Funding for PSC and local mental health support
East Staffs Council	Local Community	Discussion with Mayor and Health & Scrutiny Committee
Lichfield District Council	Funder and community	Funding for PSC and local mental health support
Tamworth Borough Council	Local Community	No current activity
Healthwatch Staffordshire	Local Community	Ongoing relationship through Board membership and VCSE meetings
BACT Social Prescribers	Local Community	Ongoing relationship through Future Focus and shared projects. Training Opportunities.
Support Staffs Social Prescribers	Local Community	Ongoing discussion and training opportunities.
Community Together Social Prescribers	Local Community	Ongoing relationship through Future Focus.
Staffordshire Network for Mental Health	Local Community	Relationship through fundraising and attendance at coordinated meetings.
Support Staffordshire and VCSE Sector	Local Community and funder	Active Membership through: East Staffs VCSE Forum Lichfield VCSE Forum Tamworth VCSE Forum SES Healthy Communities Forum ICB Mental Health Forum Strong relationship with development officers
SCYVS	Local Community	Membership and attendance at funding events
Redacted	Local Organisation	Fundraising Support
Redacted	Local Organisation	Funding through purchasing training for employees (Mind Make-Over)
Redacted	Local Organisation	Fundraising Support
Redacted	Local Organisation	Fundraising Support
Burton on Trent participants	Participants	Peer Support Group CEFs from projects Coproduction from Future Focus and Safe Hands Soft Intel from Listening space and office calls

AGENDA ITEM 9 - ENCLOSURE NO. 5 - APPENDIX C

		Soft Intel from Outreach and volunteers Help Us to Help You Survey
Lichfield District participants including Burntwood participants	Participants	Peer Support Group CEFs from projects Coproduction from Future Focus and Safe Hands Soft Intel from Listening space and office calls Soft Intel from Outreach and volunteers Help Us to Help You Survey
Tamworth Borough participants	Participants	Peer Support Group CEFs from projects Coproduction from Future Focus and Safe Hands, and Safe Haven Soft Intel from Listening space and office calls Soft Intel from Outreach and volunteers Help Us to Help You Survey
Redacted Bowls Club	Local Community	Charity of the Year – Fundraising Support
Boxing & Martial Arts Club	Local Community	Fundraising Support
Mercers Family Charitable Foundation	Local Charitable Foundation, Funder	Fundraising Support, Project funding
Toyota UK Charitable Foundation	Local Charitable Foundation and Funder	Project funding
Remedies – Jo Smith	Local Organisation	Associate Services – Forest Bathing
Thrive Fitness – David Garb	Local Organisation	Associate Services – Running Coaching
Life Sport Fitness – Lloyd Fox	Local Organisation	Associate Services – Running Coaching
Little Trees – Sarah Ryan	Local Organisation	Associate Services – Eco-Therapy
Forest Harvest – Nick Burton	Local Charity	Associate Services – Eco-Therapy (up to Summer 2024)
Lalita Heier	Local Organisation	Associate Services – Mindfulness
Participants	Customers/Clients	Attending counselling and community projects
Volunteers	Volunteering team	Support for projects and participants
Associates	Paid Associates of the Charity	Operation & coordination of all services

Our Internal Needs

Reflection on 2023-2024

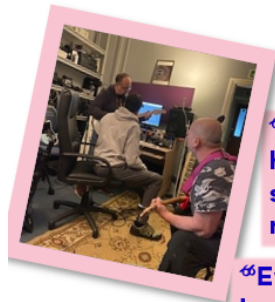
The last financial year increased our successes in terms of delivering new projects which grew our number of participants across the charitable area. We were able to reach audiences we have historically struggled to interact with, both through new projects such as Bat n Chat Cricket, and through the Older Adults Outreach Service.

Goals set	Key Outcomes
Increase service provision in East Staffordshire, Lichfield District and Tamworth Borough	New Older Adults Outreach with Alzheimer's Society. Activity projects: a) 3 Eco-therapy projects b) 2 Bat n Chat Cricket projects c) 1 Music Minds Pilot d) Wellbeing Techniques to Older Adults (Mindfulness) Employability Pilot. Peer Support Groups embedded in the charity. Strong models of coproduction through Ambassador Forum and Sideways.
Volunteer Programme	23 volunteers across 4 roles. Donation of 649 hours, value of £6,700. Additional reach to 815 people.
Commercial Modelling	Charity of Year to Making Trails, Finch, JB Kind, Russell Roof Tiles, Staffordshire Dental Network. Mentor 2.0 – funded by Mind. Catalyst – Community Fundraising Project – stronger fundraising.
Increase in infrastructure	More staff – now filling key gaps. Roll out of MS 365. Training for staff and volunteers: Mental Health First Aid, Active Listening, Autism, Dementia. New expert associates – cricket, forest bathing, yoga, coaching

We sustained the number of volunteers, despite some previous volunteers moving on to find employment within the sector and even within our staff team. We have been able to work alongside several businesses, who despite previously only signing up for one year were so impressed with our work and offer that they continued into a second year. This has secured further business and workplace health opportunities.

Internally, we have successfully recruited into the new services to ensure we have a strong staff team and have supported further with increased training and improved supervision practices, including wellbeing plans.

Successes 2023-24



“I really got a lot out of today’s session. Felt good. Channelling controlled aggression focused all anger into the bat and sent that flying down the range. Excellent therapy.” - Bat n Chat Cricket



“I loved the meditation we did, I continued at home with this, put some calming music on and sat on the end of my bed and it helped clear my mind.” - Music Minds

“Even the bus journeys to and from the sessions were beneficial, we had a sing-along then too!” - Music Minds

“The course highlight for me was about making the time to sit down and do some self-care. The visualisations were great too.” – Wellbeing Techniques for over 60s



Kindly funded by
**Strachan and
Buxton Trust**

Successes 2023-24



“Forest bathing was brilliant, I just loved losing myself from the real world for a while and being by the water.”
“It felt so nice to be around friendly people every week who treat me with respect.” – Eco Therapy



“It was great for having reasons for getting out of the home environment which was very stressful at the time of starting the course. It was like a haven to de-stress/Relax and unwind. The course has supported me with my self-confidence and self-esteem as well as my communication skills and relaxation. It has helped me to be punctual and on time for groups and be more organised. I loved Forest bathing and meeting new people. I would say to other people thinking of coming along, feel the fear and do it anyway, you might be pleasantly surprised. People are always made to feel welcome”

- HN, Participant Winter 2023



Current Capacity of Services

Service name	Service elements	Total target Individual Participants	Total Individual Participants
Community Help	Telephone	750	2116
	Walk ins	36	
	Info@ and webform	750	
	Listening Space - Library	100	
	Other Volunteer activity	480	
	Other		
Clinical	NHS Funded Counselling	500	629
	Low Cost Counselling	40	
	Low Cost Coaching	24	
	Anger Management	40	
	Young Persons Counselling	25	
	Other		
Workplace Health	Counselling		135
	Contracted Counselling	30	
	Supervision		
	Psychoeducation	25	
	Mental Health Awareness	40	
	Associate Work	40	
	Other Training		
Activity Groups	Ecotherapy East Staffs	36	136
	Ecotherapy Lichfield	8	
	Sports East Staffs	36	
	Sports Lichfield	24	
	Arts East Staffs	8	
	Arts Lichfield	8	
	Mindfulness East Staffs	8	
	Mindfulness Lichfield	8	
Psychoeducation	East Staffs	16	24
	Lichfield District	8	
Participation	ND	8	16
	LGBTQIA+	8	
Peer Support	Burton Arts	12	32
	Burntwood Mind Matters	12	
	Virtual	8	
Future Focus	52 week average		300
Safe Hands	Contract total		102
Safe Haven	Contract total		60
Outreach	Workshops	30	230
	Engagement/events	150	
	One to one	50	

Current total capacity is 3,780 participants each year against a potential charity reach of 35,000 people, representing 10.8% of potential audience.

Key Takeaways from Analysis

1. We have a strong and secure infrastructure, including venues, leadership, governance.
2. We have a reputable, trusted brand and reputation, both nationally and locally.
3. We are person-centred and believe in coproduction and involvement and participation.
4. We have a passionate and committed team.
5. We have a strong fulfilling volunteer programme which leads to vocational outcomes.
6. We have a wide range of service and project delivery.
7. We have more opportunities regarding equality, equity and diversity.
8. There is more to do to promote the non-clinical services and projects.
9. We have more headroom to make use of the community through the volunteer programme and other opportunities.
10. There's more scope for partnerships, with Minds and with local VSCE organisations.
11. There are more opportunities within local business and with fundraising.

Delivery Hubs

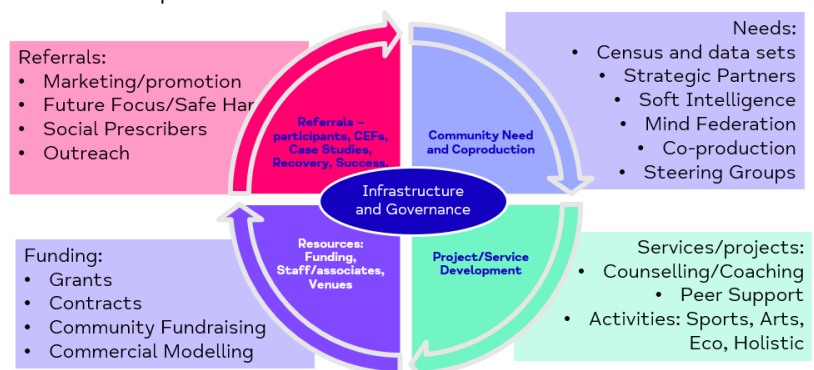
In June 2024, the Chief Officer asked Development and Sustainability to explore having Delivery Hubs.

A delivery hub would be open at least 1 day per week in District as a semi-drop in facility. In order to facilitate and sustain the hub, certain aspects would be required as part of the model or contributing to the model:

1. Income generators
2. Ability to Project Manage
3. Coproduction
4. Venue for office
5. Venue for Delivery
6. Volunteers
7. Associate Programme
8. Activity Programme: sports, arts, holistic
9. Peer Support Group

Long Term Goal of having Delivery Hubs

Delivery Hubs in each area by end of next strategy period.
Allows Burton and District Mind to be flexible in approach based on coproduction and identified need:



Long Term Goal of having Delivery Hubs – updated October 2024

	East Staffs	Lichfield	Tamworth	Virtual/Digital
Income generators	D&SO in place. Project Support Coordinator role	D&SO in place. Project Support Coordinator ready for personal development.	D&SO in place but stretched. Part of Team Leader role. Fundraising.	D&SO in place but limited direction.
Ability to Project Manage	Project Support Coordinator role	PSC in post. Matched funded role for 3 years.	No post assigned.	No post assigned.
Coproduction	Peer group and consultations, CEFs	Peer group and consultations, CEFs.	SH and FF participants	Previous work completed.
Venue for office	Office secured	Office base secured.	NHS funded/ lease in progress – looking at Dec 2024	Website and social media –infra-net?
Venue for Delivery	Some ability through room hire.	Some ability through room hire.	NHS funded/ lease in progress – looking at Dec 2024	Platforms required?
Volunteers	Established – 10 volunteers active	8 volunteers active	2 volunteers active	3 volunteers active.
Associate Programme	Established	Part established	Part established	Part established
Activity Programme: sports, arts, holistic	Full programme – aiming to be 52 weeks	Some activity started with plan in progress.	Some activity at Safe Haven. Needs more planning.	No
Peer Support Group	In place	In place	No – under scope.	In place

As can be seen on the above chart, updated October 2024 following the Community Engagement events, progress is strong in East Staffs and Lichfield, with some work undertaken in Tamworth. Mind would like to see more digital delivery and this is echoed by feedback from Community Engagement days.

Project Delivery 2024-2025

Delivery Plan for 2024-2025

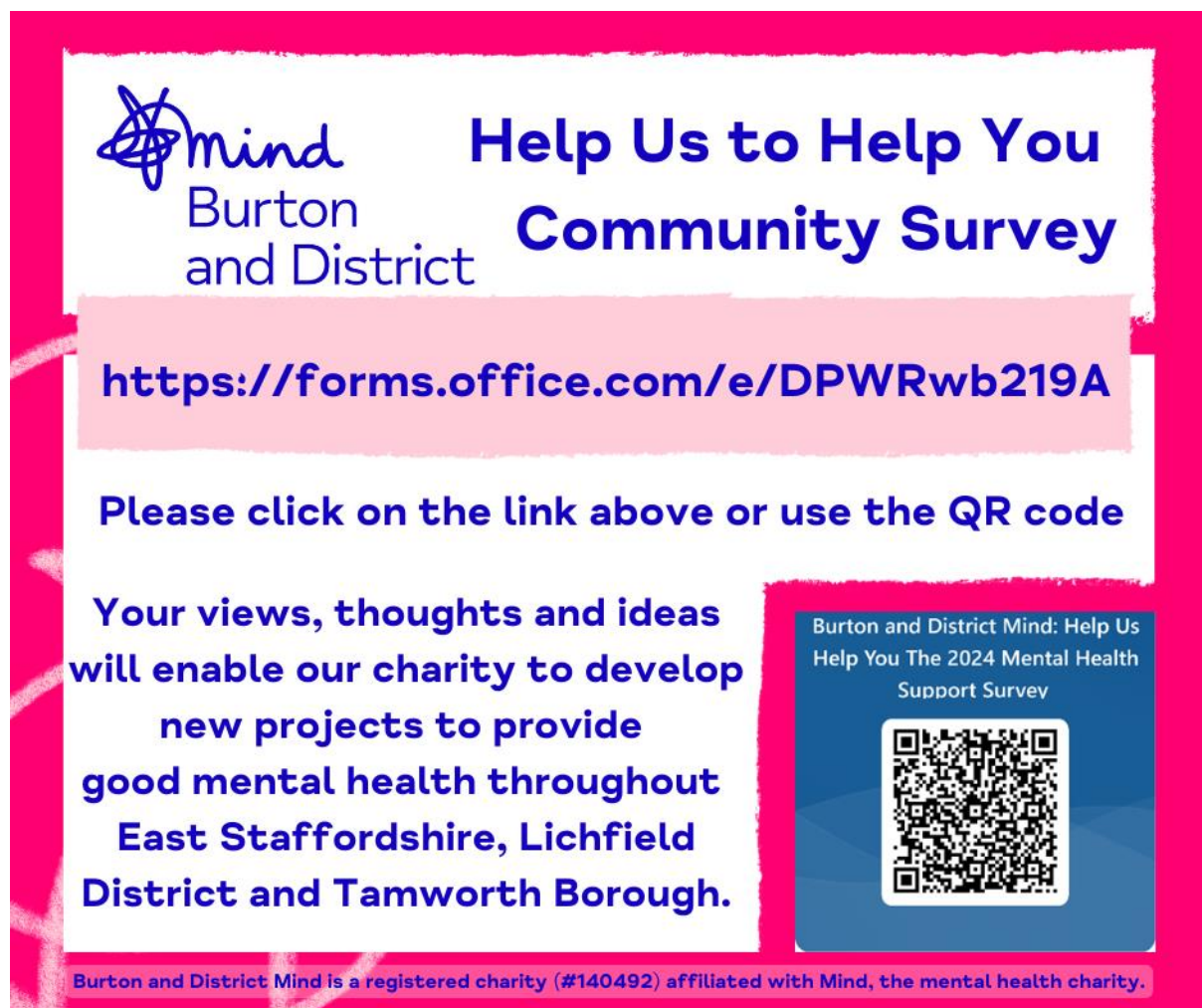
	East Staffs	Lichfield	Tamworth	Virtual/Digital
Peer Support Group	In place – need to split and find funding!	In place – funded this year.	Plan to develop this.	In place – low cost, needs funding.
Arts/music	Music Minds delivered for 20 weeks	Mindful Music delivered for 8 weeks	No plans.	No plans.
Sports/physical activity	Running group delivered for 8 weeks	Running group delivered for 8 weeks	Match funding available.	No plans.
Ecotherapy and Nature	Eco therapy delivered	To be launched Jan 2025	Match funding available. Supplier in contact	N/A
Psychoeducation	Make Over delivered for workplace	Make Over being delivered – 24 weeks	Future Focus development	Make Over delivered for workplace
Holistic Programme	Funding sourced for Q3 delivery	Mindfulness for 8 weeks	Yoga at Safe Haven	No plans.
Workplace Health	Planned work with Punch and Ceva	Need to develop.	Need to develop.	Need to develop.
Fundraising	Reggae, Mayor, Geek	Kaleidoscope, Finch	Moving Mountains	No current plans.
Volunteers	Established – 10 volunteers active	5 volunteers active – target 8.	2 volunteers active – target 3.	3 volunteers active.

We currently are currently on target to deliver a comprehensive programme of work for East Staffordshire and Lichfield District. We still have gaps in delivery in Tamworth which will form some focus in Quarter 4 of 2024-2025 once a venue is secured. The Safe Haven team have completed significant fundraising, and this can be used as match funding. In addition, there may be scope to start a peer support group at Sacred Heart for participants in Glascote who do not move to the town centre with the Safe Haven service.

A digital delivery strategy will be explored in 2025.

Community Survey “Help Us to Help You”

As an outcome of the Community Development Days, a survey was coproduced and went live in September 2024.



Burton and District Mind

Help Us to Help You Community Survey

<https://forms.office.com/e/DPWRwb219A>

Please click on the link above or use the QR code

**Your views, thoughts and ideas
will enable our charity to develop
new projects to provide
good mental health throughout
East Staffordshire, Lichfield
District and Tamworth Borough.**

**Burton and District Mind: Help Us
Help You The 2024 Mental Health
Support Survey**

Burton and District Mind is a registered charity (#140492) affiliated with Mind, the mental health charity.

Survey Results will be published here from January 2025.

Development Strategy 2024-2027

Key Outcomes

Pending further community involvement, Charity Strategy Review and development of the Operational Plan, the following outcomes will be used by the Development and Sustainability Team:

1) Understand audience need and prioritise more effectively

2) Consolidate and standardise Development and Sustainability processes

3) Diversify and improve on Income Generation

4) Improve Marketing and Communications across the Charity Area

5) Grow and sustain the team

Outcome One: Understand audience need and prioritise more effectively

Key actions:

- a) Conduct a coproduced Community Survey with a target of 100 respondents by end of December 2024.
- b) Complete Stakeholder Analysis by end of December 2025 including soft intelligence from participants.
- c) Explore further opportunities for Equity Steering Groups and the role of the Mental Health Ambassador steering group.
- d) Assess and priorities need – we know the potential target audiences – our issue is prioritising and reaching them with projects they will attend.

We have identified the following priority target audiences so far:

Audience Category	Identified how?	Needs Identified (some assumptions and generalisations)	Delivery so far
Black and Ethnic Minority groups	Mind Strategy Older Adults Outreach Soft intelligence	More appropriate ‘mental health mapping’ More home support Recognisable allies in workforce More audience specific projects	Older Adults Outreach Bat n Chat Cricket Retro-Sports Day More involvement with Black Caribbean groups More involvement with mosques and Asian groups.
People in poverty	Mind Strategy National reports Future Focus clients	Social Intervention work Form Filling Hand-holding and confidence building Psychoeducation	Future Focus Mind Makeover Offer of participation fees on projects Helen’s Bursary
Young People (16-24)	Mind Strategy involvement work with colleges Development Events	Digital (and anonymous) delivery Promotion on ‘what to trust’ Volunteering/work experience Innovation: More audience specific projects Psychoeducation	Continued work in colleges Review of work experience opportunities
Suicide Prevention	Local strategy and contact with County Council	High risk and post-attempt support Step-down models of support post crisis and post discharge from IMHT More support for social prescribers	Safe Hands service Safe Haven Crisis Cafe Development of programme of work (not currently funded) Close relationship with SCC and ESBC Health Scrutiny
Women: menopause	Soft intelligence Older Adult Outreach	Counselling/Coaching Information and mapping of provision Psychoeducation	Older Adults Outreach (50+ provision) Psychoeducation (but not specific)
LGBTQI+	National statistics Rainbow Mind Older Adult Outreach Expression: Equity Steering Group	Audience specific provision Recognisable allies in workforce Psychoeducation More audience specific projects	Psychoeducation (but not specific)
Neurodiverse	Sideways: Equity Steering Group National statistics Soft intelligence Future Focus clients	Audience specific counselling/Coaching Activity based projects Psychoeducation More community awareness and employer awareness	Psychoeducation (but not specific) Gaming Project in development Neurodiversity workshop developed
Criminal Justice	Soft intelligence Staffordshire County Council	Support for domestic violence (both victim and perpetrator) Mental Health Awareness and Psychoeducation	Mental Health Awareness to be delivered to Pathway Project

Further work is required to check assumptions and design delivery plans. However, we have made a start as noted above.

Outcome Two: Consolidate and Standardise Development and Sustainability processes

Key actions:

- a) Ensure all supporting documentation is available.
- b) Consider ‘rebrand’ of team moving away from Development and Sustainability to something more welcomed by the community.
- c) Develop set of procedures which are used to underpin delivery of Development and Sustainability which include Logical Framework Analysis, project cycle management principles, annual programmes, and reduces ‘waste’ through removing underspends.
- d) Re-develop Operations Manuals for project delivery to simplify publication and include more participant-led activities.
- e) Ensure Common Evaluation Framework is used on all projects.

Most standardised documents are available as templates. The requirement is to bring it into one handbook.

Common Evaluation Framework makes use of selected questions from:

- The mental wellbeing monitored by using The Short Warwick–Edinburgh Mental Wellbeing Scale, SWEMWBS.
- Impact on social connection monitored using The Social Provision Scale, SPS-10.
- Impact on self-esteem using The Rosenberg Self-esteem Scale, RSES.

We also make use of the Net Promoter Friends and Family Question, scaling between 100 and -100.

Outcome Three: Diversify and improve on Income Generation

Key actions

- a) Review of Applications to funders – celebrate success and learn from unsuccessful applications.
- b) Community Fundraising – Learning from Catalyst and production of Fundraising Manual and training for all staff.
- c) Workplace Health and Commercial Modelling – increase of activity in Lichfield District, particularly in Burntwood.

Review started and maintained in August 2024 with data collected and feedback activity used (when available).

A new Fundraising Manual will be produced in November 2024 to compliment new Funding Project Coordinator commencing post.

This is coincide with more fundraising activity within Lichfield District to compliment and sustain growth in this local authority.

Burton and District Mind Community Development Report and Plan – updated 22 Oct 24

Outcome Four: Improve Marketing and Communications across the Charity Area

Key actions

- Review Communications Strategy in line with Strategy.
- Re-brand local 'voice' including substantial website review.
- Produce quarterly Key Performance Indicators to measure reach on social media and other means.
- Increase presence at local events and activities through use of the volunteer programme.

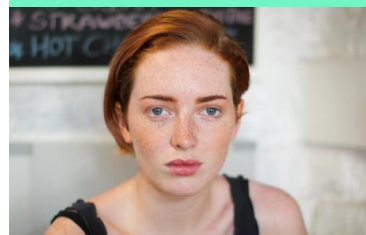
The current communications strategy was produced as part of the Mental Health Ambassador Forum to address the communication needs during and after the pandemic and lockdowns.

Based on feedback so far, audiences would like to see themselves represented in our images and our wording. Work has been undertaken by the Outreach Team in coproduction with the individual audiences to strong effect and other internal development has started.

In addition, we will take learning from innovation taken by the Outreach Team, such as increased radio presence, 'free giveaways' and beer mats.

A list of Key Performance Indicators for the Communications Team is now in place and first report is due in November 2024.

**Please talk to us.
We are listening.**



**You are worth the help,
and together
we'll find you help.**

**are you worried
about your
memory or your
mental health?**

outreachstaffordshire@alzheimers.org.uk
www.burtonmind.co.uk/contact-us
01543 573936 or 01283 566696



All conversations with
our advisers are treated
with discretion, dignity
and respect.



Outcome Five: Grow and sustain the team

Key actions

- a) Review of current team members and needs of the team with sustainability in mind.
- b) Consider 'rebrand' to support the team's identity and position within the charity.
- c) Review of Volunteer Programme (last reviewed April 2023) to assess capacity and most effective deployment of volunteers. Celebrate the success of the programme and build on this.
- d) Review of Associate Programme to assess capacity, charity needs and close any gaps.

The volunteer programme currently supports 20 volunteers over 4 defined volunteer roles. All volunteers go through due diligence processes appropriate to role, undertake Induction, Code of Conduct workshop, mental health awareness and NHS eLearning. They have 3 monthly one to ones with a named Volunteer Coordinator and have Wellbeing Action Plans. However, not all volunteers are actively supporting the charity and not all volunteers are reporting regularly.

There is a thorough Volunteer Programme Handbook and Volunteer Coordinator training is available for staff. The standards align with Investing in Volunteers.