HEALTH AND WELLBEING BOARD

Minutes of the meeting held at 1.30 pm on 2 February 2023

Present:

Councillor David Jefferys (Chairman)
Councillor Robert Evans (Vice-Chairman)
Councillors Chris Price, Will Connolly, Yvonne Bear, Mike Botting,
Diane Smith and Thomas Turrell

Richard Baldwin, Director: Children's Social Care Dr Nada Lemic, Director: Public Health Joanna Gambhir, Children's Services

Dr Angela Bhan, Bromley Place Executive Director: NHS South East London Harvey Guntrip, Lay Member: NHS South East London Dr Andrew Parson, Senior Clinical Lead: NHS South East London

Christopher Evans, Community Links Bromley

Also Present:

Teresa Bell (via conference call) Kim Carey (via conference call) Jane Walters (via conference call)

30 APOLOGIES FOR ABSENCE

Apologies for absence were received from Charlotte Bradford and Jim Gamble, and Jane Walters and Joanna Gambhir attended as their respective substitutes.

Apologies were also received from Jonathan Lofthouse (King's College Hospital NHS Foundation Trust) and Jacqui Scott (Bromley Healthcare).

Apologies for lateness were received from Councillors Yvonne Bear and Thomas Turrell.

31 DECLARATIONS OF INTEREST

In relation to agenda item 7 (minute 31), the Chairman and Christopher Evans advised that they sit on the Bromley Safeguarding Adults Board, Councillor Jefferys in his capacity as Chairman of the Health and Wellbeing Board.

32 QUESTIONS

No questions had been received.

33 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 8TH DECEMBER 2022

The Vice-Chairman noted the reference made to having an overall picture of the number of falls and an understanding of data on falls admissions and number of ambulance call outs. The Director of Public Health advised that this would be taken forward with health colleagues, however it was highlighted that this would only provide an estimate as not all falls were recorded. There was some London Ambulance Service (LAS) data available from the original falls work and they now had data on the number of referrals made to the Falls Clinic, which would give some indication. It was agreed that, once collated, this data could be circulated to Board Members.

In relation to minute item 20, Additional Hospital Discharge Funds 2022/23, the Chairman informed Board Members that the submission had been signed off and submitted, and the funding had been received. The Assistant Director for Integrated Commissioning advised that reporting on the spend was being undertaken on a fortnightly basis and good progress was being made. It was noted that an additional £1.2m had come into Bromley through the ICB.

RESOLVED that the minutes of the meeting held on 8th December 2022 be agreed.

34 HEALTH AND WELLBEING BOARDS - GUIDANCE NOVEMBER 2022

The Chairman advised that the guidance note had been requested at the last meeting of the Health and Wellbeing Board. There were some small changes regarding the way in which Health and Wellbeing Boards operated following the recent legislation related to the Integrated Care Boards (ICB) and Integrated Care Systems (ICS). This included taking into account what the local ICB and ICS were doing when setting the Joint Strategic Needs Assessment (JSNA) priorities— they also had to demonstrate in their annual reports that they were taking into consideration the Health and Wellbeing Board's proposed way forward. There were some minor changes in terms of the composition of the Health and Wellbeing Board which related to nominations, and this was being addressed by South East London ICB colleagues.

The Assistant Director – Legal Services said that the report picked out the key points from the guidance that had been issued by the government in November 2022, which followed on from the implementation of the Health and Care Act 2022. The aim of the Act was to empower local health and care providers to co-ordinate the planning and provision of services to deliver more person-centred and community care. The guidance did not change the obligations or statutory duties of the Health and Wellbeing Board, and instead set out how they could work together with the ICB to produce more joined up planning and working.

The Bromley Place Executive Director confirmed that as an ICB Board Member she would be the ICB representative on the Health and Wellbeing Board, and

enquired if formal notification of this needed to be submitted. The Chairman suggested that a formal letter confirming this appointment be provided.

In response to a question from the Vice-Chairman, the Chairman said that the policy had been brought in by the government to increase the integration of health and social care by creating the ICB, and ICS beneath. It was considered that Bromley was already well ahead, as they had been doing this for quite some time. The Portfolio Holder for Adult Care and Health agreed, and highlighted that they had been working together closely for several years. The work undertaken locally was reflective of the services that needed to be provided for residents, from both a health and social care perspective.

A Board Member noted that the guidance was non-statutory. The Health and Wellbeing Board, as it was set up, had been very effective and they should continue doing what they did well. The Chairman advised that they would be aligning their objectives with the South East London ICB, and vice versa.

RESOLVED that the update be noted.

35 UPDATE ON CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH

The Charman welcomed James Postgate, Associate Director – Integrated Commissioning, SEL ICB (Bromley) ("Associate Director") and the LBB Director of Children's Social Care to the meeting to provide an update on children and young people's mental health. A copy of the presentation is attached at Appendix A.

The Associate Director noted that Oxleas CAMHS, Bromley Y and LBB/ICB Commissioning had last presented an update to the Health and Wellbeing Board in June 2022. Board Members were advised that Children and Young People's Mental Health and Wellbeing Services remained in a challenging situation, having seen a 25% increase in the number of children and young people in services since 2017-18. There had been a stark increase immediately after the COVID-19 pandemic with, initially, a 50% increase in the number of referrals into services. This had remained very high, although there had been a slight reduction in October/November 2022 – however it was highlighted that this was still not back to pre-pandemic levels. The Associate Director advised that children were presenting with more complex issues, which was having a big impact, and this was a picture being seen across the country. Waiting times for CAMHS remained high in Bromley, as in other areas of London, and there had been a need to find ways to support children and young people to better manage their own mental health challenges.

Bromley Council and NHS SEL ICB had now established a Bromley CYP Mental Health and Wellbeing Partnership Board to oversee transformation and improvements in these services. The membership of the Partnership Board included the Director of Children's Services, the Director of Education, the ICB's Place Based Director, Oxleas CAMHS and Bromley Y. The Partnership Board had agreed an improvement programme for CYP Mental Health and Wellbeing

Services – they would look to shorten waiting times however the importance of implementing the right strategy was emphasised. The approach would be multifaceted and focus on prevention and early intervention. The Associate Director highlighted some key parts of the programme, which included:

- Integrated Single Point of Access for CYP MH and Wellbeing Services (Oxleas CAMHS/Bromley Y and other partners)
- Resilience and Recovery Programme (Bromley Y Lead)
- PCN Link Role (Bromley Y Lead)
- Bromley Eating Disorder Pilot (SLaM/Bromley Y)
- Empowering Parents, Empowering Communities (Bromley Y)
- Review of CYP ASD/ADHD Diagnostic and Support Pathway (LBB/ICB)

The LBB Director of Children's Social Care thanked the Board for ensuring that children's issues remained on the collective agenda. It was highlighted that children and young people's mental health remained a priority as there had been a significant uptick in the volume and complexity of presentations. Key areas of focus included:

- Early Identification/first responders and signposting in schools mental health support teams in school were important as they saw vulnerable children more than any other professional. They could identify any emerging concerns and signpost children and young people to the right resources, for example the Bromley Eating Disorder Pilot.
- Exploration of shared front door consideration was being given to taking this forward another step, and locating it within the Multi-agency Safeguarding Hub (MASH).
- Referral Pathways (avoiding duplication of referrals) strengthening the way in which agencies communicated, saving time and consolidating a response. This would also provide a more consistent eligibility criteria.
- Working with families/parents (holistic approach) any intervention was owned by all, and made it easier to action an intervention plan.
- Continue to engage ICB's to ensure that children's issues remained high on the agenda. If issues could be resolved earlier for young people this would make inroads and impact for adults.

The Senior Clinical Lead said that the areas highlighted were recognised, particularly the complexity with which problems with families, and their relationships, had played out since the pandemic. GP surgeries could be a scary place for children and being able to tackle problems in places where children should be, such as schools, in coordination with other professionals, was important. Families could be frustrated by the pace at which things happened and it was vital that support was provided whilst they waited for other interventions to be put in place. Bringing co-ordination to ensure that things happened quickly and effectively was welcomed.

In response to questions, the Associate Director said that the Local Authority and ICB had a Mental Health and Wellbeing Strategy (2020-2025) and a budget had been set aside to support initiatives, including those for children and young people. The Bromley CYP Mental Health and Wellbeing Partnership Board had been established, and this was where businesses cases and proposals for initiatives were discussed. They had also benefitted from involvement in the Eating Disorder

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Pilot which had been funded by another organisation.

The LBB Director of Children's Social Care highlighted that the wider issues associated with mental health did not fit in a neat box as they permeated other services. Having a shared front door would bring people together to make links back into other departments or schools – they needed to have the right people working alongside each other and having trusted relationships. It was highlighted that just one referral should be made – it was then the responsibility of the officer to ensure the information was shared with the relevant departments/partners.

A Board Member said the proposed strategy was welcomed, particularly the single point of access. It was questioned if the current waiting times for ASD and ADHD were known. In relation to referral to treatment, the Associate Director advised that there had been an average waiting time of a year. The waiting times were now under a year for both ASD and ADHD, and it was agreed that the exact figures could be provided to Board Members following the meeting. The Associate Director said that there was always some level of waiting times and they were managed dynamically with those who were most in need placed at the top. There was integration between the NHS services and voluntary sector with clinical supervision which allowed referrals to other types of interventions while they waited for more specialist services. The ASD waiting list had been a particular challenge for some time and it was exciting to be able to bring in people to support this. They wanted to get the whole journey right, and the support services around it would be important.

The Bromley Place Executive Director said that the waiting times for CAMHS services were far longer than they would want to see, which was a national picture. The average waiting time for treatment was thought to be around 36 weeks – however there was a triage system in place, and those that needed treatment quickly would not wait that length of time. Those waiting longer would have continued contact with other services. There were workforce challenges, but they were trying to manage these with provider colleagues. The single point of access was considered to be a good initiative, but they would need to be clear about where children and young people wanted to go for treatment and assessment. They could not put all services together as this may discourage them from accessing them – there would be a joint approach to look at how different models might work.

In response to a question regarding the proposed Resilience and Recovery Programme, the Associate Director confirmed that if someone relapsed it would be flagged so they did not go back to the end of the queue to re-access services.

In response to questions, the LBB Director of Children's Social Care advised that the Mental Health Support Teams had been effective and were now embedded in schools. Schools understood the importance of early identification, as it was in everyone's interest, and had been really engaged with the project. In terms of waiting lists, the LBB Director of Children's Social Care said it was clear that this was a national issue. When speaking with other Directors of Children's Social Care, from across London and the rest of the country, this was one of the top three issues and had been impacted by the pandemic.

The Chairman thanked the Associate Director and LBB Director of Children's Social Care for their presentation to the Board and requested that a further update be provided in the autumn.

RESOLVED that the updated be noted.

36 BROMLEY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2021/22

The Chairman welcomed Teresa Bell – Independent Chair of the Bromley Safeguarding Adult Board ("Independent Chair – BSAB") and Bulent Djouma – Bromley Safeguarding Adult Board Manager to the meeting to present the Bromley Safeguarding Adults Board (BSAB) Annual Report for 2021/22. It was noted that a video providing an overview of the Annual Report had been circulated to Board Members prior to the meeting, and can be viewed via the following link: BSAB Annual Report 2021-22

The Independent Chair – BSAB said she wanted to express her thanks to all those who worked within the BSAB, and emphasised the strength of this partnership. They worked in a way that was challenging, but transparent and supportive – it was a committed and dynamic group that was well supported by the Bromley Safeguarding Adult Board Manager. It was noted that the video circulated had captured the key points and, along with the full Annual Report and the Easy Read version, would be uploaded to the BSAB website.

The Chairman advised that the Health and Wellbeing Board had a statutory responsibility to agree the publication of the BSAB Annual Report. Next year consideration would be given as to how this process could be expedited with the possibility of releasing sections of the report throughout the year. The Independent Chair – BSAB agreed that they would like to get the document out sooner – in terms of the publication, the Annual Report belonged to the BSAB, however sign-off was required from partner agencies. They aimed to get the report out much earlier this year, and were keen to explore with the borough the best way for this to be achieved.

The Independent Chair – BSAB informed Members that their key priorities had remained the same:

- Domestic abuse
- Financial abuse
- Self-neglect
- Modern day slavery
- Transitional care of children into adulthood
- Vulnerable adults in specialist care and residential homes

The BSAB was working to a two-year delivery plan – they were half way through, and a review had been undertaken with all partners to ensure that the actions against the priorities were pertinent to current contexts.

A Board Member noted the connection between the first two priorities, and advised

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that as many as 1 in 12 people with a visual impairment were estimated to be a victim or survivor of domestic abuse, which could include financial abuse. It was suggested that this could be looked into further and better access to services considered. The Independent Chair – BSAB advised that the Kent Association for the Blind had become a partner of the BSAB and this was something that could be explored with them further.

The Chairman thanked the Independent Chair – Bromley Safeguarding Adults Board and Bromley Safeguarding Adult Board Manager for presenting the BSAB Annual Report to the Board, and for all the work undertaken.

RESOLVED that the Bromley Safeguarding Adults Board's 2021/22 Annual Report be noted.

37 UPDATE ON THE NEW HEALTH AND WELLBEING STRATEGY

Report ACH23-009

The Director of Public Health provided an update on the new Health and Wellbeing Strategy. Board Members had been provided with a report summarising the outcome of the workshop that had been held immediately prior to the Health and Wellbeing Board meeting on 8th December 2022.

The Director of Public Health advised that the workshop had been held to consider the priorities for the new Health and Wellbeing Strategy. It was noted that all three groups had expressed similar views which indicated that, as a Board, they had a good understanding of the needs of the local population. Attendance at the workshop had been extended to members of the One Bromley Executive, and the leads for the current priority groups, and they were already seeing some alignment.

The Bromley Place Executive Director advised that a strategy was being produced at ICS level with partners across South East London. The priorities would include:

- Prevention and wellbeing;
- Early years;
- Children and young people's mental health;
- Adults' mental health; and,
- Primary care and people with long term conditions.

The ICS strategy was intended to give direction and enhance what was already being done at a local level. The One Bromley system was also considering its strategic approach, and they would look to ensure they were all aligned. With regards to the Health and Wellbeing Strategy, it was noted that they wanted the One Bromley strategy to fit with this and better integrate primary and secondary care. There was also considered to be benefits, and better use of resources, if they did things together and the different strategic priorities did not cut across each other. They wanted to maximise preventative opportunities and consider other uses for the vaccination centre located in The Glades which would make a real difference to local residents.

The Director of Public Health said that, ideally, they would like to try and link the two local strategies. The SEL ICB strategy was quite high level, with broad themes – this included 'prevention' which could relate to any of the priority areas chosen for the new Health and Wellbeing Strategy. The Chairman said that it was proposed for a draft of the new Health and Wellbeing Strategy to be brought to the Health and Wellbeing Board meeting on 30th March 2023.

The Chairman asked Board Members to consider if anything important was missing from the proposed list of priorities. The Bromley Place Executive Director noted that the disparities and disproportionality of outcomes should be considered across all of the priorities.

A Board Member suggested that ease of access would encourage local residents to make use of hubs, such as that located in The Glades. A barcode, or something containing an NHS number, may encourage people to visit on the spur of the moment to get their blood pressure checked. Ease of access should be considered across all elements of the Strategy.

The Senior Clinical Lead said that they needed to consider how to promote a sense of responsibility about health and wellbeing, and increase awareness around access – this needed to be expressed in a more positive way.

In response to questions regarding representation, the Chairman advised that the previous plan had been taken to the Bromley Youth Council, which had raised issues relating to period poverty, perception of violence and adolescent mental health. The Director of Public Health advised that during the JSNA, they had engaged with the wider population. It was suggested that once the draft Health and Wellbeing Strategy was agreed by the Health and Wellbeing Board it could be taken to other groups, such as Bromley Youth Council and the Children's Executive Board, for further input. The Chairman advised that granular data would be provided by health colleagues and thought would need to be given as to how best to engage with hard-to-reach groups. It was noted that the final Strategy did not need to be published until December 2023, which allowed time for wider conversations about how to take the priorities forward in different parts of the borough.

A Board Member noted that obesity had been listed as a priority and enquired if this would be split into childhood obesity and adult obesity, and the drivers and actions would be different. The Director of Public Health advised that work related to obesity had been undertaken over the last four years as it had been included as a priority in the previous Health and Wellbeing Strategy. The Health and Wellbeing Board tended to take on much more of the work related to adults as the Children's Executive Board addressed elements relating to children.

The Director of Public Health advised that the Health and Wellbeing Strategy was a strategic document, and would not go into detail of individuals actions. Once the strategic priorities were agreed, the next stage would be to look at what the Health and Wellbeing Board could do support, and add value, to increase improvement in these areas.

RESOLVED that the update on the new Health and Wellbeing Strategy be noted.

38 SCREENING UPDATE

The Director of Public Health informed Board Members that there had been changes to the way in which screening data was reported, and they had been working to gain access to the necessary data.

The Bromley Place Executive Director advised that she had been given access to the data dashboard earlier that day. There had been a dip in the number of screening uptakes during the pandemic period, but the data indicated that Bromley was now doing better than other South East London boroughs. The uptake of bowel cancer screening was just under 70%, breast screening was at 69.6% and cervical screening was at 75.6%. Screening uptake was beginning to recover, and it was noted that a detailed report, including information relating to the prevalence of cancers, could be provided to the next meeting of the Health and Wellbeing Board.

RESOLVED that the update be noted.

39 UPDATE ON THE BRAIN HEALTH TASK AND FINISH GROUP

The Chairman advised that a for a variety of reasons, the Brain Health Task and Finish Group had not yet been taken forward. It was noted that the government had recently changed its approach – rather than having an individual dementia strategy there would be a 'main condition' approach. It was proposed that the Chairman and Vice-Chairman would meet with the Director of Public Health and Bromley Place Executive Director to consider how to proceed, and ideas could be shared at a future meeting of the Health and Wellbeing Board.

RESOLVED that the update be noted.

40 MEETING SCHEDULE FOR CIVIC YEAR 2023/24

Members were provided with the proposed Health and Wellbeing Board meeting dates for the 2023-24 municipal year.

Following a brief discussion, it was agreed that the clerk would email the list of proposed dates. Members of the Health and Wellbeing Board and health partners would be asked to provide feedback if any of these proposed dates cause a particular problem by close of play on 8th February 2023.

RESOLVED that the update be noted.

41 MATTERS OUTSTANDING AND WORK PROGRAMME

Report CSD23020

The Board considered its work programme for 2022/23 and matters arising from previous meetings.

A number of items were added to the forward rolling work programme for the Health and Wellbeing Board as outlined below:

- Draft Health and Wellbeing Strategy (30th March 2023)
- Update on Children and Young People's Mental Health (autumn 2023)

The Chairman highlighted that the March meeting had a very full agenda, and noted that some items may be deferred to a later date. The Director of Public Health advised that some of the items requested could be provided for information.

A Board Member said he was keen for the three items he had raised to be presented at the next meeting, or the first meeting of the new municipal year – HIV infections monitoring, vaping and nitrous oxide in children and an update on the Long COVID Service.

RESOLVED that the work programme and matters arising from previous meetings be noted.

42 ANY OTHER BUSINESS

There was no other business.

43 DATE OF NEXT MEETING

The next meeting of the Health and Wellbeing Board would be held at 1.30pm on Thursday 30th March 2023.

The Meeting ended at 2.56 pm

Chairman





Bromley Children and Young People's MH and Wellbeing – Update (Jan 2023)

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James Postgate



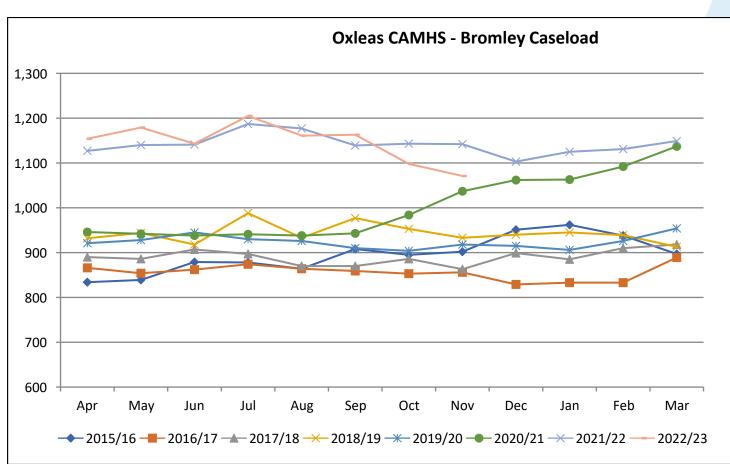


Bromley CYP MH and Wellbeing Services - overall

 Oxleas CAMHS, Bromley Y and LBB/ICB Commissioning presented an update to the Health and Wellbeing Board in mid-2022. An update was requested in early 2023.

• Children and Young People's Mental Health and Wellbeing Services remain in a challenging situation with a 25% increase in the number of children and young people in services since 2017/18. There was a stark increase immediately after the covid-19 pandemic with, initially, a 50% increase in the number of referrals into services. This remains very high with a slight reduction in October/November 2022 (though this is still not back to pre-pandemic levels).

 Waiting times for CAMHS remain high in Bromley, as in other areas of London, Kent, Sussex and elsewhere.







Bromley CYP MH and Wellbeing Service – improvement programme

- Bromley Council and NHS SEL ICB have established a Bromley CYP Mental Health and Wellbeing Partnership Board to oversee transformation and improvements in these services. The membership of the Partnership Board includes the Director of Children's Services, the Director of Education, the ICB's Place Based Director, Oxleas CAMHS and Bromley Y.
- The Partnership Board has agreed an improvement programme for CYP MH and Wellbeing Services that includes the following initiatives:
 - the roll-out of improvements to ensure timely assessments for children and young people referred to CYP MH and Wellbeing Services.
 - the mobilisation of a new integrated health/voluntary community service "Single Point of Access" (SPA) for children and young people's mental health and wellbeing services.
 - the establishment of a new pilot service to support children and young people with eating difficulties/eating disorders relating to their mental health
 - the establishment of a new CYP Mental Health practitioner in GP Practices, to support improved support to children and young people with mental health challenges in primary care.
 - a review of the children and young people's ASD-ADHD diagnostic and support pathway, with an aim to improve outcomes for children and their families, and reduce waiting times.





Key Transformation Project Updates	Summary of project	STATUS (RAG)
Integrated Single Point of Access for CYP MH and Wellbeing Services (Oxleas CAMHS/Bromley Y and other partners)	Work is underway to take the next step in Bromley's longstanding commitment to an integrated health/voluntary community service hub for CYP MH and Wellbeing Services. This work will see the establishment of an integrated Single Point of Access (SPA) for all services, with work also taking place with children's social care on a more joined-up approach with these services.	G
Resilience and Recovery Programme (Bromley Y Lead) Page 31	The Bromley MH and Wellbeing Partnership Board agreed in September 2022 to establish a new resilience and recovery programme in Bromley with a joint health/voluntary community services offer for children and young people waiting for CAMHS support, or who are "stepping down" from more specialist services. The new programme is recruiting staff at this time and will become fully operational in the coming months.	G
PCN Link Role (Bromley Y Lead)	A new role is also being established between GPs (Primary Care Networks – PCNs) and the Integrated Single Point of Access (SPA). This role will link with GPs to better support them to meet the needs of children and young people with mental health challenges.	G





Key Transformation Project Updates	Update	STATUS (RAG)
Bromley Eating Disorder Pilot (SLAM/Bromley Y)	Bromley has been successful in being awarded funding to pilot an eating disorder prevention/early intervention service between SLAM and Bromley Y. This new service will comprise a number of wellbeing interventions, linked to the local Mental Health Support Teams (MHSTs) in schools, alongside training and specialist consultation from SLAM. The pilot is expected to begin on 1st April 2023, although has been delayed awaiting a decision on the final funding envelope.	Α
Empowering Parents, Empowering Communities (Bromley Y)	Bromley Y has now joined the Empowering Parents, Empowering Communities (EPEC) initiative, with work taking place to better support families struggling with mental ill health — not just looking at the child alone. The programme is now up and running, with support a specialist EPEC hub.	G





Key Transformation Project Updates	Update	STATUS (RAG)
Review of CYP ASD/ADHD Diagnostic and Support Pathway (LBB/ICB)	Bromley Council/NHS SEL ICB have now agreed to review the local children and young people's ASD/ADHD diagnostic and support pathway. This is an area of particular challenge with long waiting times and significant frustration expressed by some parents. The proposed course of action will see a specialist brought into Bromley to review the current service model, working with parents and providers, and recommending changes to the current way of delivering services.	A





Any comments/questions?

Young People's Mental Health;

Early Identification/first-responders and sign -posting in Schools

Exploration of shared front door

Referral Pathways (avoiding duplication of referrals)

Working with families/parents (Holistic approach)

Continue to engage ICB's