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DATE: 22 March 2023

To: Members of the
HEALTH AND WELLBEING BOARD

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

London Borough of Bromley Officers:

Richard Baldwin	Director: Children's Social Care
Kim Carey	Director: Adult Social Care
Rachel Dunley	Head of Service: Early Intervention and Family Support
Dr Nada Lemic	Director: Public Health

Integrated Care Board:

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

Bromley Safeguarding Adults Board

Teresa Bell	Independent Chair: Bromley Safeguarding Adults Board
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Bromley Safeguarding Children Partnership:

Jim Gamble QPM	Independent Chair: Bromley Safeguarding Children Partnership
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Bromley Voluntary Sector:

Charlotte Bradford	Healthwatch Bromley
Christopher Evans	Community Links Bromley

A meeting of the Health and Wellbeing Board will be held at Bromley Civic Centre on
THURSDAY 30 MARCH 2023 AT 1.30 PM

TASNIM SHAWKAT
Director of Corporate Services & Governance

Copies of the documents referred to below can be obtained from
<http://cds.bromley.gov.uk/>

AGENDA

1 APOLOGIES FOR ABSENCE

2 DECLARATIONS OF INTEREST

3 QUESTIONS

In accordance with the Council's Constitution, questions that are not specific to reports on the agenda must have been received in writing 10 working days before the date of the meeting.

Questions specifically relating to reports on the agenda should be received within two working days of the normal publication date of the agenda. Please ensure that questions specifically on reports on the agenda are received by the Democratic Services Team by **5pm on Friday 24th March 2023**.

4 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 2ND FEBRUARY 2023 (Pages 1 - 10)

5 UPDATE ON THE BROMLEY MENTAL HEALTH AND WELLBEING STRATEGY (Pages 11 - 68)

6 UPDATE ON POST-COVID SYNDROME SERVICE (Pages 69 - 84)

7 JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) UPDATE (Pages 85 - 90)

8 PRESENTATION OF THE CHILDREN'S JSNA (Pages 91 - 100)

9 HEALTH AND WELLBEING STRATEGY UPDATE (Pages 101 - 106) *including an update on the SEL ICS Strategy (Pages 107 - 120)*

10 SCREENING UPDATE (Pages 121 - 138)

11 PUBLIC HEALTH - SURVEILLANCE UPDATE

- *HIV Infections Monitoring*
- *Combating Drugs Partnership*
- *Suicide Prevention Workstream: Update and Plans*

12 UPDATE ON THE BRAIN HEALTH TASK AND FINISH GROUP

13 CHAIRMAN'S ANNUAL REPORT (Pages 139 - 140)

14 QUESTIONS ON THE HEALTH AND WELLBEING BOARD INFORMATION BRIEFING

The briefing comprises:

- Better Care Fund and Improved Better Care Fund Performance Update
- Integrated Commissioning Board Update

- Vaping in Children

Members of the Health and Wellbeing Board have been provided with advance copies of the briefing via email. The briefing is also available on the Council's website at the following link:

<http://cde.bromley.gov.uk/ieListMeetings.aspx?CId=559&Year=0>

Printed copies of the briefing are available on request by contacting the Democratic Services Officer.

15 MATTERS OUTSTANDING AND WORK PROGRAMME (Pages 141 - 148)

16 ANY OTHER BUSINESS

17 DATE OF NEXT MEETING

1.30pm, Thursday 29th June 2023

1.30pm, Thursday 21st September 2023

1.30pm, Thursday 16th November 2023

1.30pm, Thursday 1st February 2024

1.30pm, Thursday 18th April 2024

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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

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 Chairman 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

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

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

Report No.
CSD23050

London Borough of Bromley

Decision Maker: HEALTH AND WELLBEING BOARD

Date: 30th March 2023

Title: Bromley Joint Mental Health and Wellbeing Strategy (2020-25) – Update – March 2023

Contact Officer: James Postgate
Associate Director Integrated Commissioning, NHS South East London ICB (Bromley)
Tel: 0208 930 0218 E-mail: james.postgate@selondonics.nhs.uk

Ward: Borough wide

1. BROMLEY MENTAL HEALTH AND WELLBEING STRATEGY (2020-25)

- 1.1. The Bromley Mental Health and Wellbeing Strategy (BMHWS) 2020-25 sets out a five-year delivery plan to make improvements across mental health and wellbeing services in the borough.
- 1.2. At the heart of the BMHWS are the voices of patients and service users who rely on good mental health services in Bromley. Since the BMHWS was adopted by Bromley Council and the local NHS it has ensured that patients and service users are at the forefront of designing their own service offer in Bromley.
- 1.3. The BMHWS sets out a joint vision to support communities and individuals to have improved mental health and wellbeing. This strategy sets out an approach in which the Council and local NHS will work together with partners to prevent children, young people and adults reaching a crisis point through the provision of a strong prevention and early intervention offer. It also puts in place a joint plan for the provision of a number of important services for people with mental health challenges, including good advice and information, talking therapies and counselling, employment and training schemes, mental health support in schools and supported housing.
- 1.4. The BMHWS is led by the Bromley Mental Health and Wellbeing Partnership Board, which is made of senior representation across Bromley mental health services. The specific actions for children and young people's services are being taken forward by the Children and Young People's Mental Health and Wellbeing Partnership Board. The Council and NHS South East London Integrated Care Board provide oversight to this work through Integrated Commissioning Board (ICB) and there is broader partnership ownership of the work also through the One Bromley Executive.
- 1.5. This is an update on progress to deliver the BMHWS action plan as set out in Appendix A.
- 1.6. The Bromley Mental Health and Wellbeing Strategy (2020-25) is set out in Appendix B.

Reason for report going to Health and Wellbeing Board

- 1.7. To update members.

2. SPECIFIC ACTION REQUIRED BY HEALTH AND WELLBEING BOARD AND ITS CONSTITUENT PARTNER ORGANISATIONS

2.1. To note progress to deliver the Bromley Mental Health and Wellbeing Strategy (2020-25).

Health & Wellbeing Strategy

1. Related priority: Dementia, Adults Mental Health, Homelessness, Drugs and Alcohol in Young People, Adolescent Mental Health, Learning Disabilities and Autism

Financial

1. Cost of proposal: Not Applicable:

2. Ongoing costs: Not Applicable:

3. Total savings: Not Applicable:

4. Budget host organisation: London Borough of Bromley/NHS South East London Integrated Care Board

5. Source of funding: Various including local authority funding and NHS funding sources.

6. Beneficiary/beneficiaries of any savings: Not Applicable

Supporting Public Health Outcome Indicator(s)

Various – can be provided by public health team on request.

3. COMMENTARY

4.1 See Appendix 1.

4. IMPACT ON VULNERABLE PEOPLE AND CHILDREN

4.1. Maintaining good mental health can be a delicate balance and many people require health, care and/or support to make healthy choices and to cope with stress and anxiety. Whilst access to treatment or recovery and rehabilitation is crucial, the first and foremost need for many people is to be able to get help prior to requiring these services. The Council and the local NHS will work with partners across the mental health system to develop a cohesive mental health system which ensures that people experiencing mental health challenges are able to receive the support they need to stay well and to live independently in the community. The overarching vision for Bromley mental health and wellbeing services was developed in consultation with patients and service users.

5. FINANCIAL IMPLICATIONS

5.1. Not Applicable

6. LEGAL IMPLICATIONS

7.1 Not Applicable.

7. IMPLICATIONS FOR OTHER GOVERNANCE ARRANGEMENTS, BOARDS AND PARTNERSHIP ARRANGEMENTS, INCLUDING ANY POLICY AND FINANCIAL CHANGES, REQUIRED TO PROCESS THE ITEM

8.1 Progress to deliver the Bromley Mental Health and Wellbeing Strategy is reported on a regular basis to Integrated Commissioning Board (ICB) and the One Bromley Executive.

8. COMMENT FROM THE DIRECTOR OF AUTHOR ORGANISATION

9.1 No additional commentary necessary.

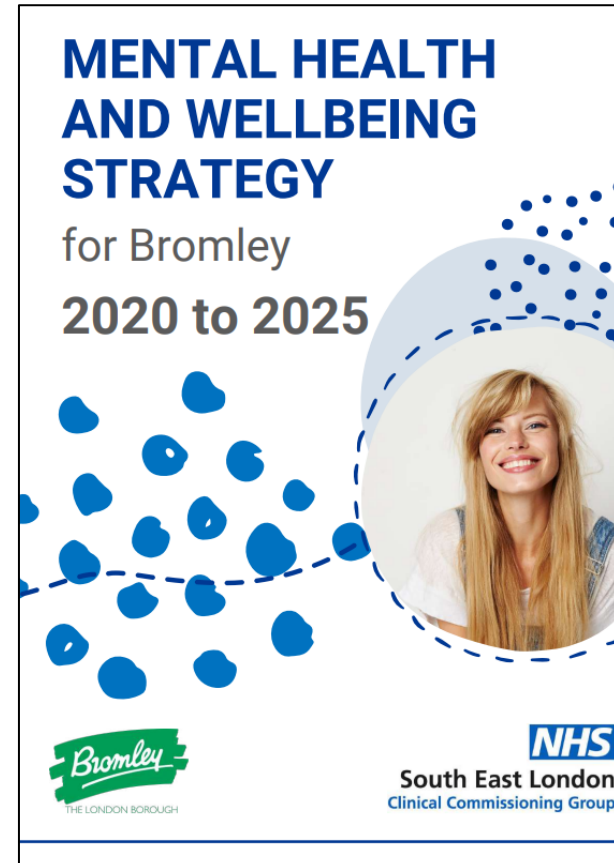
Non-Applicable Sections:	<p>Commentary, Financial and Legal Implications, Implications for other</p> <p>Governance Arrangements, Boards and Partnership Arrangements, including any Policy and Financial</p> <p>Changes required to Process the Item, Comment from the Director of Author Organisation.</p>
Background Documents: (Access via Contact Officer)	Bromley Mental Health and Wellbeing Strategy 2020-25

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Bromley Joint Mental Health and Wellbeing Strategy 2020-25 – Update (March 2023)

Bromley Mental Health and Wellbeing Strategy

- The Bromley Mental Health and Wellbeing Strategy (2020-25) is a joint endeavour by both Bromley Council and the NHS South-East London Integrated Care Board (ICB) which sets out the joint vision and action plan to support communities and individuals to have good mental health and wellbeing.
- The strategy sets out an approach in which the Council and NHS will work together with partners to prevent children and adults reaching a crisis point through the provision of a strong prevention and early intervention offer. It also puts in place a joint plan for the provision of a number of important services for people with mental health challenges.
- The All-Age strategy was developed in 2019-20 following a significant period of engagement and co-production with people with mental health or who have had a history of mental health challenges.



Supporting communities and individuals to have good mental health and wellbeing.



Bromley MH and Wellbeing Strategy – The Five Pillars

- The Bromley Mental Health and Wellbeing Strategy (2020-25) is built around **“Five Pillars”** – prevention, early intervention, multi-disciplinary approach to treatment, long-term conditions and recovery and rehabilitation
- There has been substantial progress across each of these five areas, with a need to begin work now on what will follow the current strategy post-2025.

OUR VISION

This strategy is founded on an overarching vision to provide excellent mental health and wellbeing services for people in Bromley.

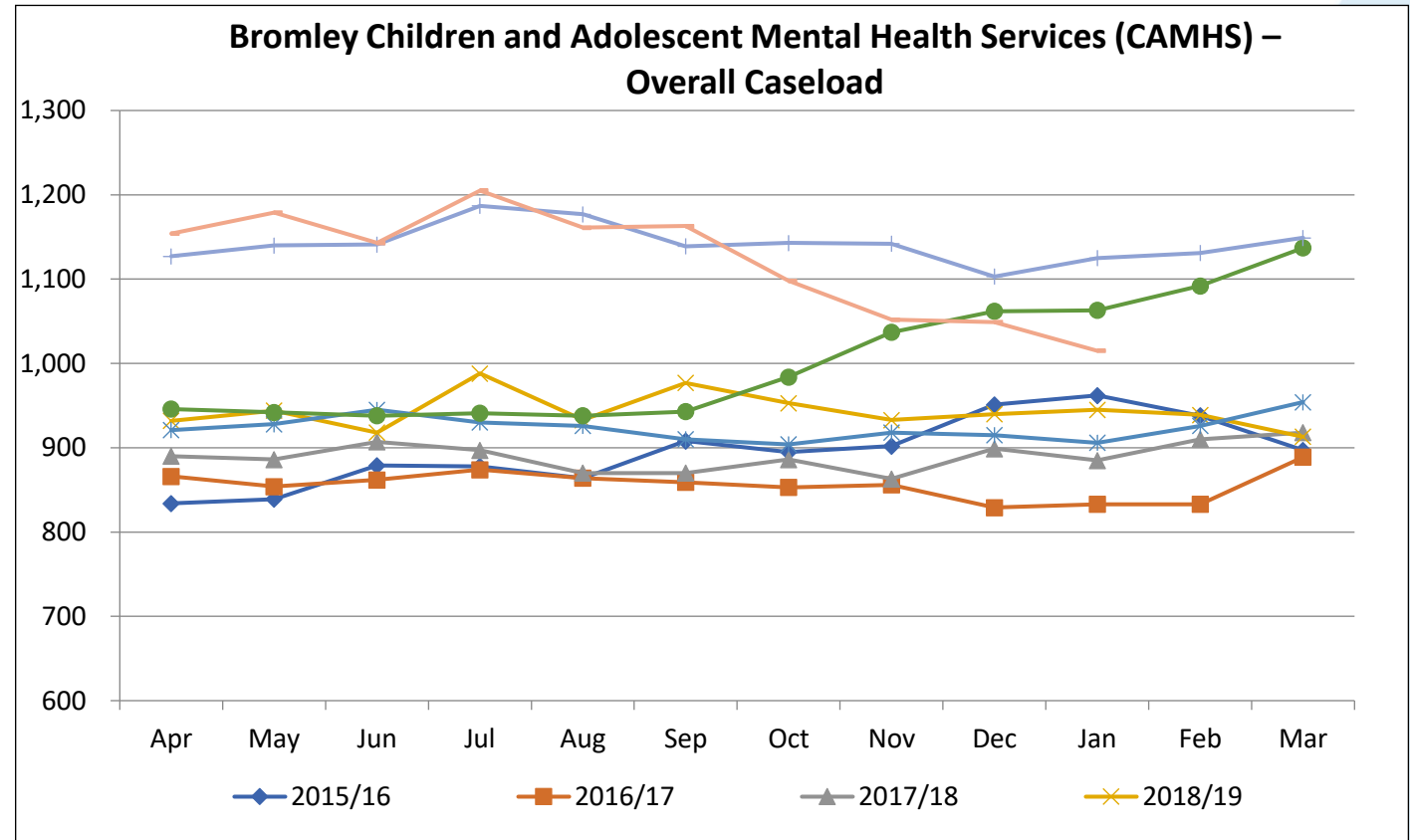


- Living well with mental health
- Resilient communities
- Better health and care
- Best use of resources



Bromley Mental Health and Wellbeing Strategy - new challenges

- The finalisation of the Bromley Mental Health and Wellbeing Strategy coincided with the COVID-19 pandemic. Whilst the full picture of the pandemic was not possible to see at that time, in subsequent years, the impact on both individual's and communities' mental health and wellbeing have become increasingly clear.
- One area where the impact of the covid-19 pandemic has been seen is on the mental health and wellbeing of children and young people (see graph right – green line) where, from September 2020, there was a significant rise in referrals to CYP MH and Wellbeing Services.
- For children and young people, who have experienced lockdowns and school closures, this was a particularly challenging period – and services have seen more complex and multi-faceted mental health presentations.
- The strategy has had to adapt to meet these new challenges.

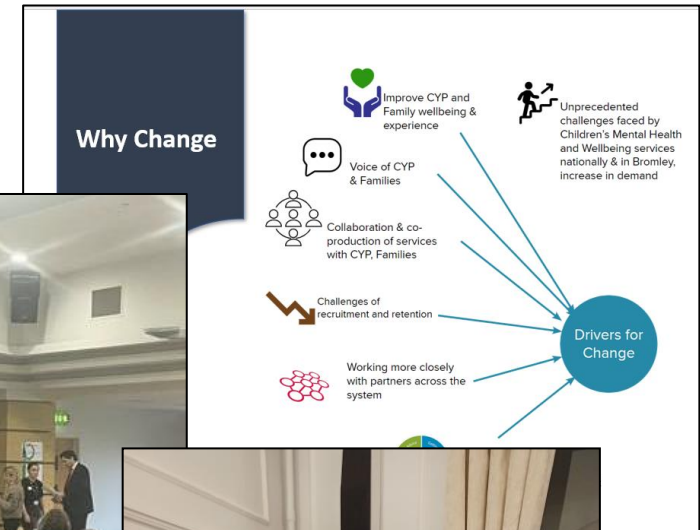


Children and young people – key achievements

The following key achievements have been delivered in terms of children and young people’s MH and Wellbeing:

- The roll-out of three mental health support teams (MHSTs) to Bromley schools. The teams provide “on the ground” support to teachers and pupils dealing with mental health challenges.
- Established the Mental Health Network between Bromley Schools and CYP mental health and wellbeing services.
- Expansion of the mentoring programme, establishment of a youth ambassador, roll-out of cutting-down (eating disorder) programme, new support to children in the Youth Justice System.
- Agreement on a new integrated NHS/voluntary sector Single Point of Access (SPA) and specialist Eating Disorder Pilot.

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Prevention and early intervention – key achievements

The following key achievements have been delivered in terms of prevention and early intervention for adults with mental health and wellbeing challenges:

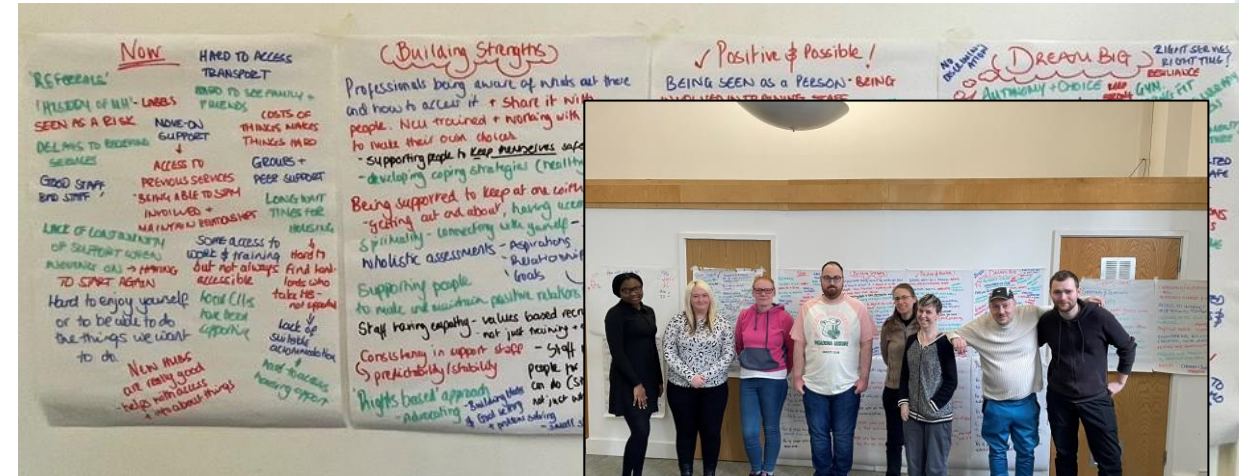
- opened the Bromley Mental Health and Wellbeing Hub – an innovative NHS/voluntary sector partnership between Oxleas NHS Foundation Trust and Bromley Mind. The new hub is a “single point of access” for adults seeking help with mental health and wellbeing challenges.
- established mental health practitioner roles in GP Practices (Primary Care Networks) – supporting GPs with mental health clients, and delivering physical healthchecks for people with mental ill health.
- improved access for Bromley talking therapies, with more people able to access services and better recovery outcomes.
- rolled-out improved employment support services for people with mental health challenges including the Individual Placement Scheme (IPS) service.



Recovery and long-term conditions – key achievements

The following key achievements have been delivered in terms of recovery and long-term conditions for adults with mental health and wellbeing challenges:

- commenced a large-scale transformation programme of mental health recovery services, enabling 80+ people to live more independently – taking on tenancies. This has been done through co-production with clients, who have shaped and designed their new service offer.
- opened a new “step down” services for adults with mental health challenges who are moving into their own homes.
- established a new joint funding panel across Bromley Council, Oxleas NHS Foundation Trust and the SEL ICB to agree packages in a joined-up way.
- rolled-out a pilot personal health budget (PHB) service between Bromley Council and the ICB – which includes mental health.



Improved joint working – learning disabilities and autism

- The Bromley Mental Health and Wellbeing Strategy was developed in concert with the Bromley Learning Disability Strategy. There have been increasing opportunities for the delivery of the two strategies to be aligned, with areas including housing, employment and community treatment reviews (CTRs) managed together.
- The Bromley All-Age Autism Strategy (2022-27) was also recently agreed, with a common framework between the different areas of work to ensure strong joint delivery.
- The coming period will see activities underway to refresh the Mental Health and Wellbeing Strategy and Learning Disability Strategy with opportunities to work even closer together.



All-Age Autism Strategy
for 2022 to 2027

www.bromley.gov.uk/localoffer

Bromley
THE LONDON BOROUGH

**BROMLEY
AUTISM
PARTNERSHIP**
...because Autism matters

NHS
South East London

Next steps

- Despite a number of challenges, the Bromley Mental Health and Wellbeing Strategy (2020-25) has been successful; it has demonstrated what can be achieved when Bromley Council and the local NHS come together around a shared vision.
- It is proposed that we commence work to refresh the strategy – towards a new plan commencing in 2025/26.
- The Health and Wellbeing Board will provide a key role in overseeing the development of the new strategy.

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Any comments/questions?

MENTAL HEALTH AND WELLBEING STRATEGY

for Bromley

2020 to 2025



**Supporting
communities
and individuals
to have good
mental health
and wellbeing.**



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Mental health - our common resources

FOREWORD

from the Portfolio Holder of Adult Care and Health Services and the Bromley Clinical Lead of NHS South East London Clinical Commissioning Group (CCG).

Mental Health is something that affects us all. There is “no health without mental health”. Whether you are experiencing mental health issues, caring for, living with or working with someone who has mental health challenges – mental health is everyone’s business.

Nationally one in four people will experience a mental health problem at some point in their lives. Across the country we have seen an increase in the number of people accessing health and care services in order to get help for their mental health challenges - and this is no different in Bromley.

The COVID-19 pandemic has also had a seismic impact on individuals’ mental health and wellbeing. There have been changes for children and young people who have not been at school; for adults who may have had changes to their employment or have been made redundant; we have all seen restrictions to our daily living arrangements; many people have also had to deal with sickness or bereavement. Whatever the impact of the pandemic, it is imperative that mental health and wellbeing services respond so that those in need are able to access help.



This Mental Health and Wellbeing Strategy for 2020 to 2025 sets out the joint vision of Bromley Council and NHS South East London CCG (Bromley) to support communities and individuals to have good mental health and wellbeing. This strategy sets out an approach in which the Council and CCG will work together with partners to prevent children and adults reaching a crisis point through the provision of a strong prevention and early intervention offer. It also puts in place a joint plan for the provision of a number of important services for people with mental health challenges, including good advice and information, talking therapies, employment and training schemes, mental health support in schools and supported housing.

The strategy is underpinned by a detailed assessment of local need and has been developed and shaped by local partners, stakeholders and other important contributions. At the heart of the strategy though are the voices of patients and service users who rely on good mental health services in Bromley. In the coming years, as we deliver our strategy together, no matter what area of mental health is involved, we are committed to ensuring that patients and service users are at the forefront of designing their own service offer in Bromley.

This strategy is also at the forefront of our common response to the impact of the COVID-19 pandemic on mental health and wellbeing. The pandemic has been felt unequally across different groups and communities. It provides an impetus and a lesson to all of us who have a role in transforming services to make sure that those most in need are able to access help.

In Bromley, this strategy shows how we will meet these ambitions locally – bringing a partnership approach to the delivery of improved mental health and wellbeing in the borough. To deliver this we will establish an integrated mental health commissioning team resource across the Council and CCG – ensuring a single coordinated approach, delivering the best possible mental health services for the residents of Bromley.



Cllr Diane Smith

Portfolio Holder: Adult Care and Health
London Borough of Bromley



Dr Andrew Parson

GP Clinical Lead: Bromley
NHS South East London CCG

EXECUTIVE SUMMARY

In Bromley, a strong culture of integrated working is being developed across Bromley Council and NHS South East London Clinical Commissioning Group (CCG). The two organisations are committed to a shared vision of better, more joined-up health and care.

To support this approach, the Council and CCG are developing a number of commissioning strategies which will set out how the two organisations will plan and provide services in an integrated way in the future.

This strategy sets out our plans to ensure that people are supported to live the lives that they wish to, with the knowledge that they can access the right community support in the right place and at the right time. People can and do recover from mental ill health; though some people require ongoing help and coping strategies to manage their own mental health challenges. The Council and CCG will work with other partners to promote prevention, early intervention, self-management and recovery – ensuring that best practice is embedded in all aspects of our different mental health and wellbeing services.

For those who have been in hospital due to their mental health, our approach will help those who are able to, to live more independently outside of services.

Bromley currently spends over £46 million on mental health services across both the Council and the NHS. The majority of this resource is spent on higher-end treatment and hospital services.

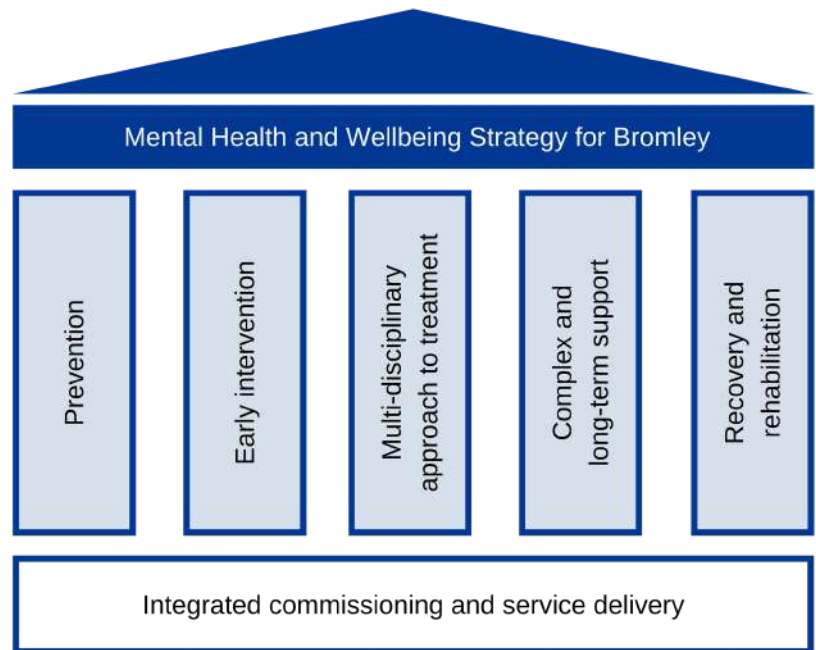
Whilst the Council and CCG will always maintain a place for people to go in crisis, in order to access the urgent and emergency help that they need, this strategy sets out a plan in which, over time, there will be a shift towards more prevention, early intervention and community services. The approach will mean less people requiring hospital stays or placements in residential care homes.



The five pillars

Following engagement with patients, service users and key partners, this strategy has been developed around five key pillars.

These five pillars are themselves supported by a foundation of joint working between the Council and NHS.



A number of new mental health and wellbeing services have recently been developed in Bromley which will be at the core of the delivery of parts of the strategy. The Bromley Well community hub for example is helping people with mental health challenges and their carers to access advice, information and joined-up voluntary sector services.

COVID-19

The finalisation of this strategy in early 2020 coincided with the COVID-19 pandemic. The impact of the pandemic has been felt across all parts of society, with a significant bearing on individuals' and communities mental health and wellbeing. The full picture of events is not possible to see at the time of this strategy's publication. It is clear however, that there will be a need through the life course of this strategy to meet the unprecedented mental health and wellbeing challenges that will arise due to the pandemic.

It is our belief that the principles we set out in this strategy, including a focus on early intervention and recovery, remain as true now as they did prior to the pandemic. The societal and economic upheaval that we have seen, with changes such as lockdown measures in place and schools closing, if anything, means that there is an even greater imperative on making improvements to mental health and wellbeing services. In the coming years we will adapt our action plans to meet the full impact of the pandemic, seeking to counter the unequal negative consequences of this across different groups.

Service users and patients at the heart of the strategy

This strategy was formed out of the ideas and stories that were offered up by people in Bromley and their carers who use mental health services.

As part of work to develop the strategy there was extensive engagement with patients and service users, including a number of workshops which brought together people from across different parts of the mental health system.

Just as the development of the strategy required this input from patients and service users, so the successful delivery of its action plan will ensure that service users are at the heart of every part of this important work – enabling the people who need mental health help to design and shape their own service offer.

National and regional policy drivers

The local strategy is aligned with the national approach set out in the NHS Long Term Plan which was published in January 2019. The long term plan has a particular focus around building on the current NHS mental health offer, with a focus on improving outcomes through a joined-up approach across primary, social care, community and secondary mental health services. The plan also sets out how the NHS will continue to invest in both children's and adults' mental health services. The NHS will ensure that there is a comprehensive offer for 0-25 year olds, whilst ensuring an overall smooth transition for those who need this help between children's and adults' mental health services. The NHS long term plan will also ensure that there is continuing progress nationally in ensuring parity between physical and mental health services, and in tackling health inequalities between different areas.

The local strategy is also aligned with the regional approach of the emerging NHS South East London Integrated Care System (ICS). It is recognised that whilst there are some challenges that can be tackled in local areas, there are others which require cross-borough or regional approaches. The ongoing work of the NHS South East London ICS to foster common approaches across borough boundaries is an important element in ensuring better outcomes for all Bromley residents. The South-London Mental Health and Community Partnership (SLP) between Oxleas NHS Foundation Trust, the South London and Maudsley (SLAM) NHS Foundation Trust and South West London and St George's Mental Health NHS Trust is another key partnership which is fostering innovation and improved outcomes through collaborative working.

One Bromley: Integrated Care System

In Bromley itself, a partnership between NHS organisations, alongside the Council and other key groups, will see greater collective responsibility for improving the health of people in Bromley.

This is the One Bromley partnership.

Mental health is a key part of the One Bromley delivery programme and will provide a common vehicle across services to meet the ambitions of this strategy.

Our local partnership for delivering change

This strategy sets out both how local commissioning and service delivery will meet the ambitions of national and regional plans, but also sets out the approach to delivering against local mental health and wellbeing priorities in Bromley.

In order to ensure that this strategy is delivered, it is fundamental that there is a collaborative approach across a wide range of organisations. The Council and CCG have therefore established the Bromley Mental Health Strategic Partnership. This partnership will take forward work to deliver the strategy together, bringing the total expertise and resources of all of the different services and partners to the challenge of improving mental health and wellbeing outcomes for people in Bromley.

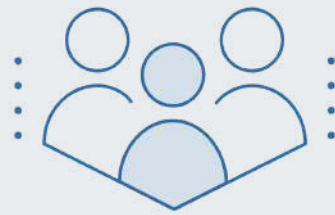


OUR VISION

This strategy is founded on an overarching vision to provide excellent mental health and wellbeing services for people in Bromley.



**Living well
with mental health**



**Resilient
communities**



**Better health
and care**

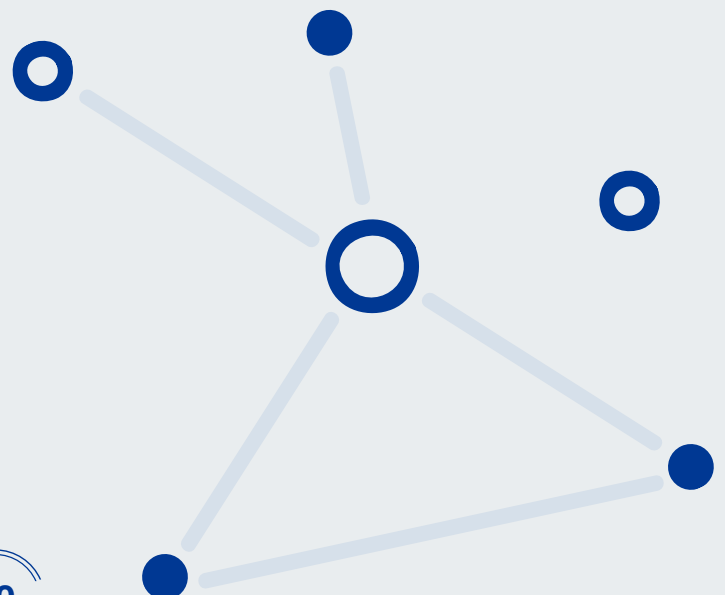


**Best use of
resources**

Maintaining good mental health can be a delicate balance and many people require health, care and/or support to make healthy choices and to cope with stress and anxiety. Whilst access to treatment or recovery and rehabilitation is crucial, the first and foremost need for many people is to be able to get help prior to requiring these services.

The Council and the CCG will work with partners across the mental health system to develop a cohesive mental health system which ensures that people experiencing mental health challenges are able to receive the support they need to stay well and to live independently in the community.

The overarching vision for Bromley mental health and wellbeing services was developed in consultation with patients and service users. The overarching vision is set out over the next few pages.





Living well with mental health

- People with mental health challenges will be able to live well and independently in places that they wish to live.
- People with mental health challenges will be helped to self-manage their own mental health, with a strong prevention and early intervention offer.
- For people who have required a stay in hospital due to mental ill health, there will be help for them to recover and to safely and sustainably return to independent living outside of services.
- People will be provided with help both to be healthy but also, importantly, to be able to have good wellbeing outcomes in their lives.
- For people who require medication to help manage their mental health, they will be at the heart of decision-making about their own medication needs.



Resilient communities

- People with mental health challenges will be kept safe in the communities in which they live.
- The families, friends and carers of people with mental health challenges will be able to access information, advice and support – better enabling those who help to help others.
- People will be helped to be more aware of mental health issues and there will be access to common information, advice and help in the places that people want these to be.
- People with mental health challenges will be able to access help and support with their local GP and with community and voluntary services – they will not need to go to hospital for this help.
- Access to emergency, hospital and treatment services for mental ill health is crucial; there will however be a particular focus on creating a strong prevention and early intervention offer in the community so that people are able to get help prior to requiring these services.



Better health and care

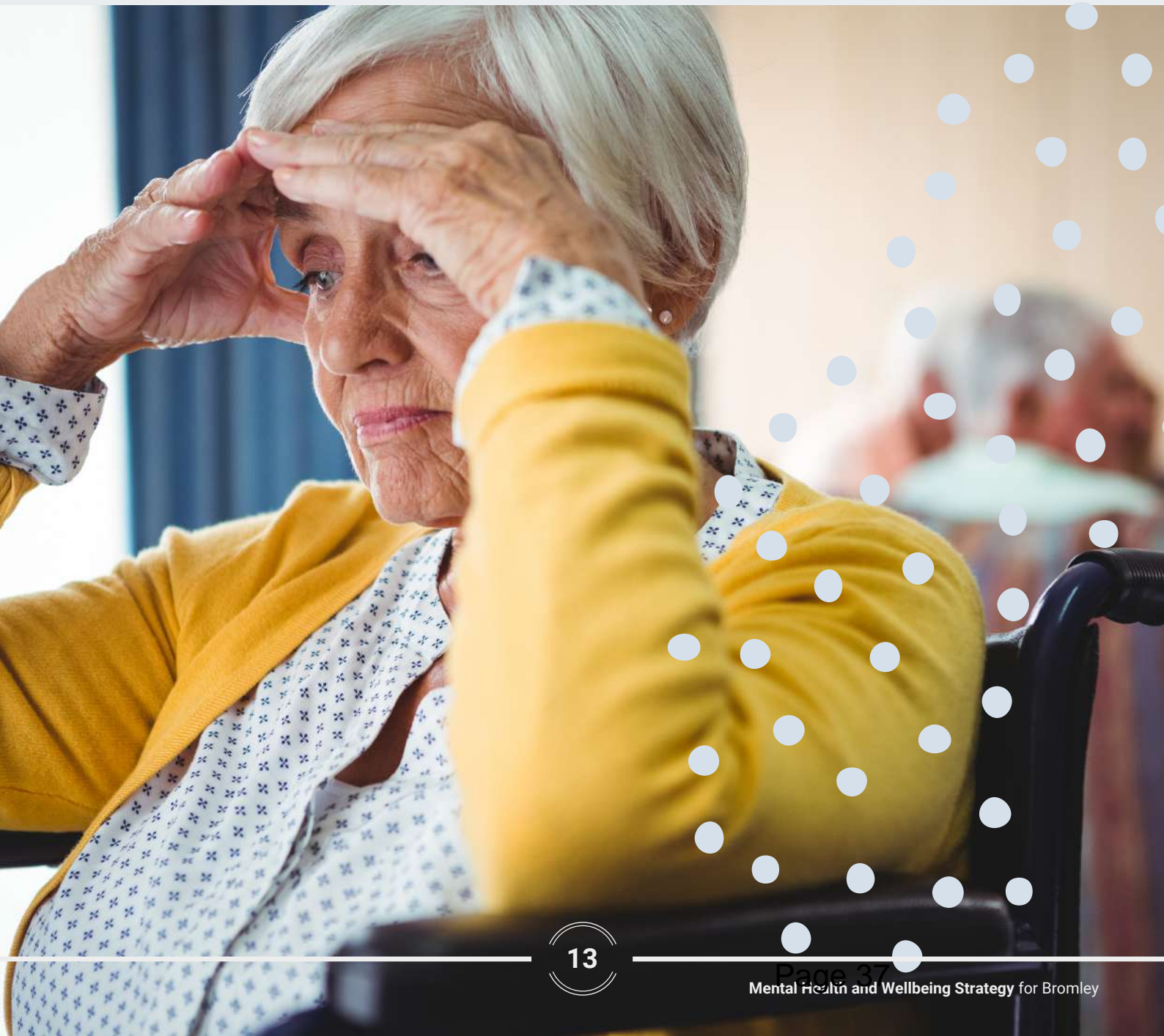
- Mental health services in Bromley will always ensure that people are safe from harm.
- People with mental health challenges are supported to manage their own mental health and to live longer healthy lives outside of services.
- There will be a focus on access to prevention and early intervention services in the community.
- People can and do recover from mental ill health; though some people require ongoing help and coping strategies to manage their own mental health challenges – there will always be the clinical expertise, care and support available to help people recover and to live as independently as possible in places that they wish to live.
- Carers will be provided with the skills and support they need to help people with mental health challenges.
- People at risk of experiencing a crisis due to mental health will be supported at the earliest point, preventing their requiring acute treatment or hospital care wherever possible.
- There will be parity between physical health and mental health, and people who have both physical health conditions and mental health challenges will be provided with joined-up health and care support.
- There will be joined up commissioning and integrated services for mental health across the Council and NHS.
- The mental health workforce in Bromley will be supported to work in a joined-up manner across health and social care boundaries – always providing compassionate, skilled and professional support and placing the patient and service user at the heart of their care.





Best use of resources

- Commissioners will design and deliver person-centred mental health services, which are underpinned by evidence, and which support people in leading fuller and happier lives.
- There will be a single “front door” into mental health services so that anyone requiring services gets the right service at the right time every time and by the right person.
- Real innovation will be promoted by developing services that have been coproduced with patients and service users.
- The Council and CCG will work together to commission services using the total resources available for mental health in Bromley – putting in place what is needed locally together.

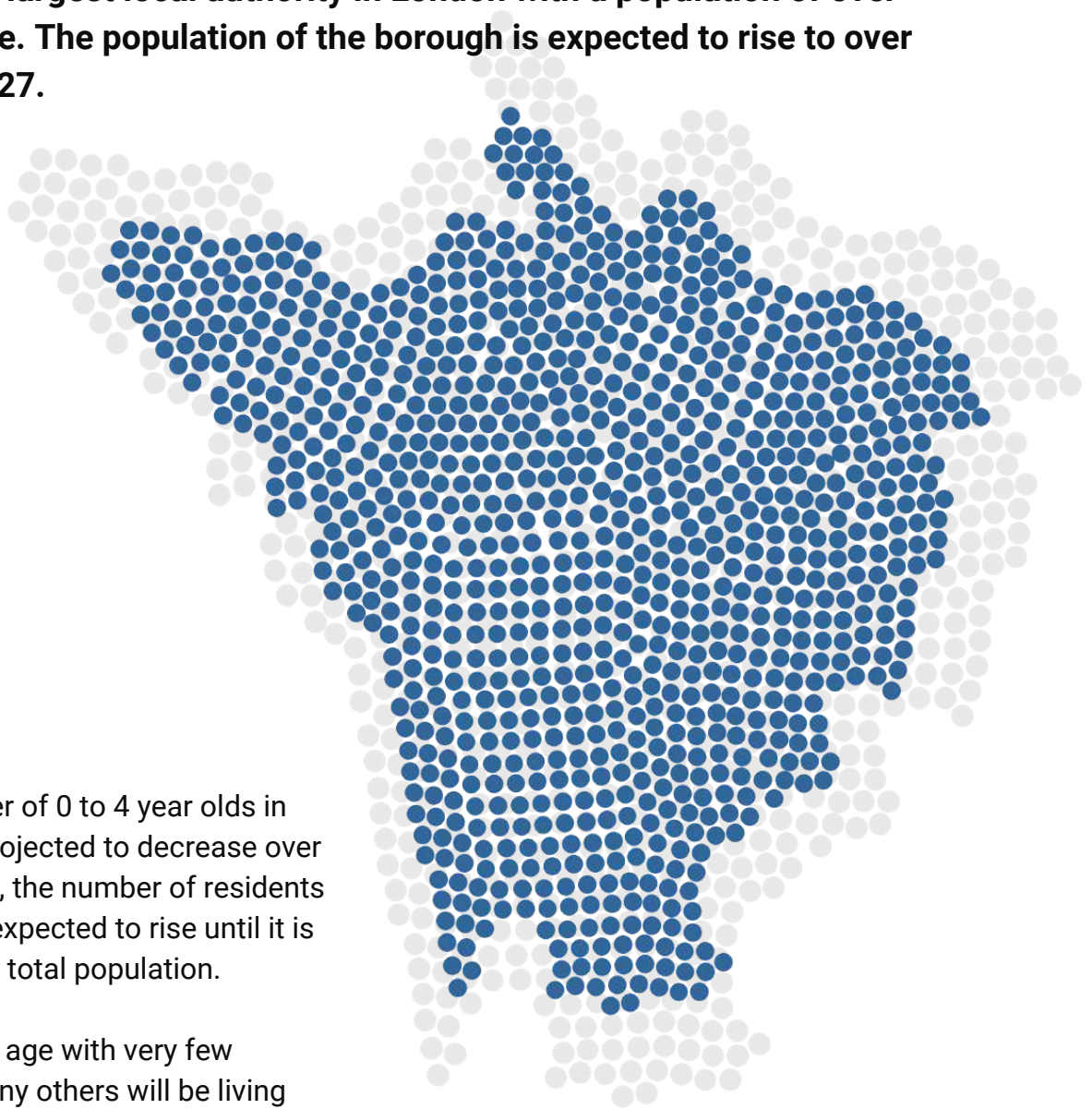


MENTAL HEALTH AND WELLBEING IN BROMLEY

– KEY CHALLENGES

Overall – Bromley demographics

Bromley is the largest local authority in London with a population of over 330,000 people. The population of the borough is expected to rise to over 350,000 by 2027.



Whilst the number of 0 to 4 year olds in the Borough is projected to decrease over the next 10 years, the number of residents over 65 years is expected to rise until it is nearly 20% of the total population.

Some people will age with very few problems but many others will be living with long term conditions and have complex health needs.

Some key considerations:

These overall changes mask significant differences within and between the communities of Bromley. For example, Darwin in the south of the borough is currently experiencing a large rise in the numbers of younger people living in the area, whilst in neighbouring Biggin Hill there has been a rise in the proportion of residents over 75 year olds.

As well as changes to the age of the different communities in Bromley, there are also changes to the ethnic make-up of the area. In the next ten years, for example, the proportion of people from Black, Asian and Minority Ethnic (BAME) community groups in Bromley is projected to increase to 23%, with the number of people from the Black African community experiencing the greatest increase - that is, from 4.5% of the population in 2016 to 6.6% in 2027.

BAME community groups are over-represented across all types of severe mental health needs. In Bromley, BAME groups account for 20% of the serious mental health cohort. In general, people from ethnic minority groups are more likely to be diagnosed with poor mental health and admitted to hospital whilst significantly less people of BAME origin access early intervention and support for more common mental disorders.

Lesbian, Gay, Bisexual and Transgender (LGBT) people can be at a higher risk of experiencing a mental health problem than the wider population. Mental health challenges faced by LGBT people have been linked to discrimination, bullying and homophobia, biphobia and transphobia.



Mental health and wellbeing in Bromley

Mental health challenges affect a significant proportion of the population of Bromley:

Approx.

64,000

people (19%) have had problems relating to their mental health

16%

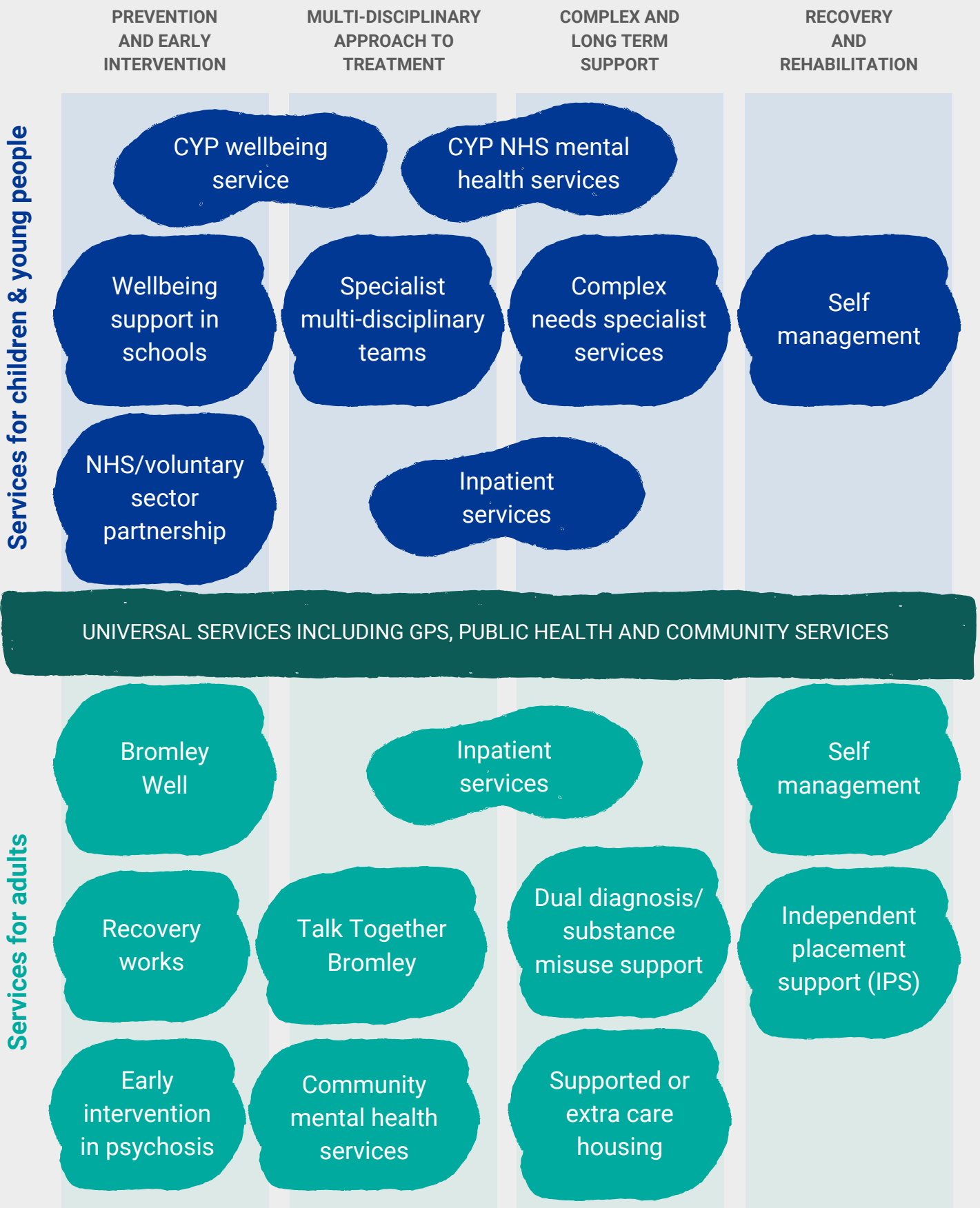
of people in Bromley will have a recognised mental health problem at some stage in their lives and will require some level of support from secondary healthcare service

Est.

1 in 4

adults will experience a mental health problem each year which will remain undiagnosed

The Council and the CCG commission a wide range of services to support people with mental health challenges in the borough:



CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH AND WELLBEING SERVICES

Supporting good mental health and wellbeing outcomes starts with ensuring children and young people have a good start to their lives, including with good mental health. The story of the last few years however has been of increasing numbers of children and young people requiring mental health services, with more needing specialist help, and many with complex and multi-faceted challenges. The result of this has been to increase the pressure on specialist services, with more children and young people on long waiting lists awaiting treatment.



KEY ISSUES FOR CONSIDERATION:

2,621 referrals were made to the children's and young people's mental health and wellbeing single point of access in 2018/19 of which 647 required specialist help from Oxleas NHS Foundation Trust – CAMHS.

Over the last four years there has been a 12% increase in the CAMHS caseloads held by individual practitioners at Oxleas NHS Foundation Trust – CAMHS.

The key presenting need for children and young people requiring mental health and wellbeing services in Bromley relates to issues with parental relationships and peer relationships.



ADULTS MENTAL HEALTH AND WELLBEING SERVICES

There have been significant improvements to adult mental health and wellbeing services in Bromley. Whilst there are key hospital and community mental health services, which provide treatment and care for those people with mental health challenges who need this support, the Council and CCG have in addition been fostering new voluntary and community services for adults, including Bromley Well, Recovery Works and Community Options. Our journey to improvement means that there is more to do however, and that there is also a need for a greater level of integration between NHS and voluntary and community services for adults.



KEY ISSUES FOR CONSIDERATION:

ANXIETY AND DEPRESSION

8.5% of adults in Bromley have been diagnosed with depression. This is the third highest level in London and higher than the London average (6.6%). The highest levels of depression are prevalent amongst 45-54 years olds (23.2%). A disproportionate number of people reporting depression are women (65%) and there is a further disproportionate number of people from Black, Asian and Ethnic Minority (BAME) backgrounds.

During 2018/19, there were 6,178 referrals made to Talk Together Bromley service. Whilst the majority of referrals (3,857) were self-referrals, a high proportion of those (2,640) were from GP Practices. The primary need for people accessing this service was support for depressive episodes and anxiety disorders. This mirrors the needs highlighted in the 2016 General Practice (GP) patient survey which reported that approximately 10.7% of people on the GP register said that they feel moderately or extremely anxious or depressed.

CRISIS CARE – ADULT MENTAL HEALTH

A snapshot of data in August 2018, indicated that there were 6,515 people in contact with mental health services in Bromley. 320 people had a learning disability and may have been in contact with both a Learning Disability and Mental Health service. 5,240 people were in contact with adult mental health services and over 4,600 were over 19 years old. During the same period, 55 people were subject to the Mental Health Act including 40 people detained in hospital. 640 people were aged 18-19 years.

During 2018/19 there were significantly more people being admitted to mental health wards in Bromley and the total numbers have continued to increase during the first two quarters of 2018/19. For the same period, there were 80 open ward stays in adult acute mental health inpatient care and 60 inpatients in specialist adult mental health services.

IMPROVING PHYSICAL HEALTH FOR PATIENTS WITH SEVERE MENTAL ILL HEALTH (SMI)

At the more severe end of the mental health needs spectrum, over 2,500 people in Bromley have been identified by GPs as experiencing a severe mental ill health (SMI). These individuals often have a diagnosis of schizophrenia, schizoaffective disorder, psychosis and/or personality disorder.

Schizophrenia is the most common form of severe mental illness in Bromley, closely followed by individuals with psychosis. More men than women are affected by schizophrenia, but there are more women with psychosis, bipolar disorder and severe depression. Nationally 1 in 5 mothers experience depression, anxiety or psychosis during pregnancy or in the first year after childbirth.

The gap between life expectancy in patients with a mental illness and the general population has widened since 1985 and people with a severe mental illness die younger than adults in the general population. When comparing the rate of premature deaths in Bromley of those with SMI to those without, the mortality rate for adults shows a 366% increased risk of premature death for people with SMI. This is higher than the average rate for London (327%) and only marginally below the national rate of 370%.

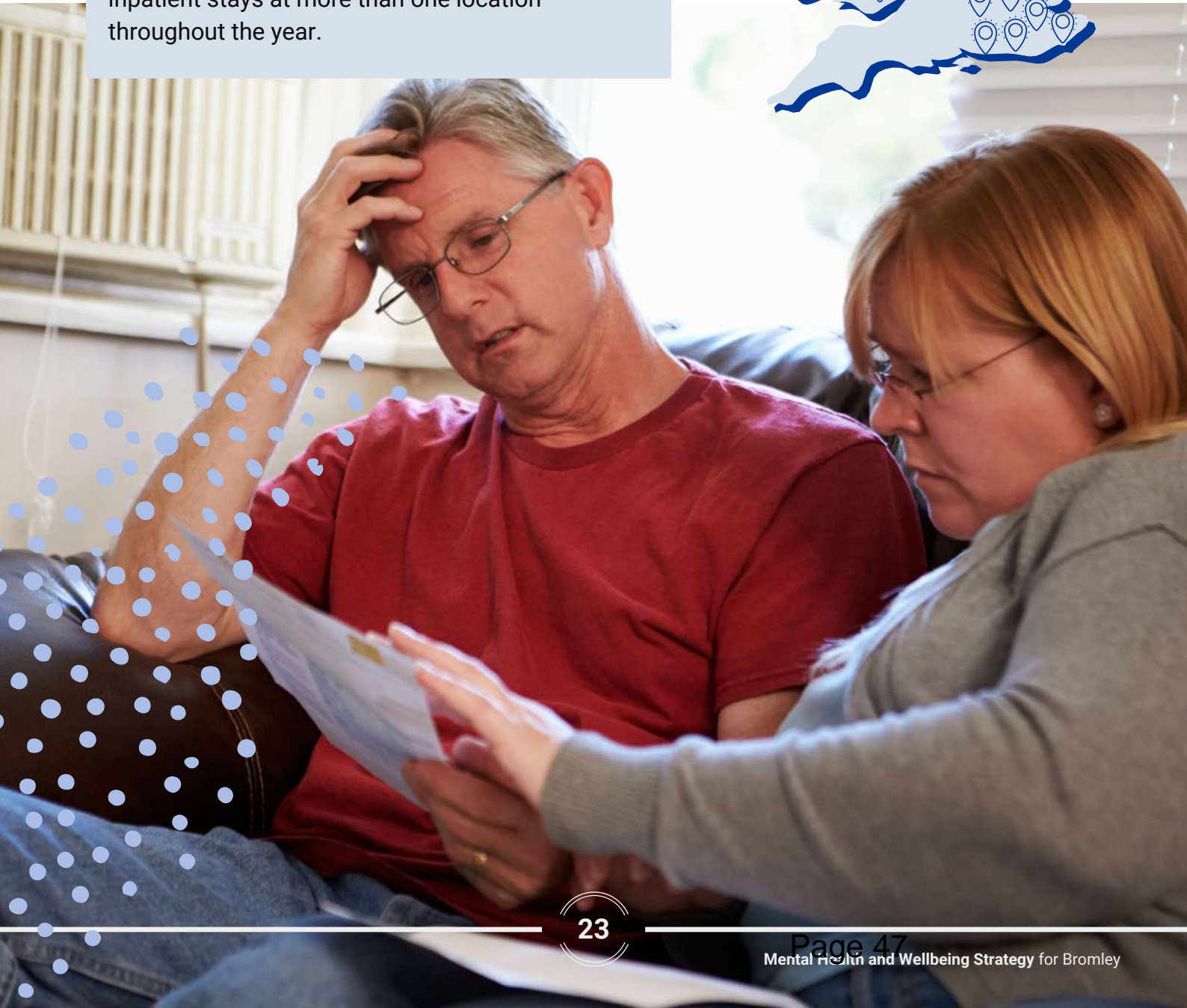
People with SMI more often than not have a recorded physical health condition. In Bromley 20% of all those on the SMI register experienced with Hypertension, 6.3% with COPD, 5.4% Diabetes, 5.4% Chronic Kidney Disease and 4.2% with Ischaemic heart disease.

SUICIDE PREVENTION

Bromley experiences a relatively low number of deaths from suicide each year. There are approximately 20 deaths a year by suicide in the borough. Although our suicide rates are lower than in London and nationally, we have higher rates of people under 18 with depression. Death by suicides is a particular concern for men aged 15-49. The Bromley Suicide Prevention Strategy focuses on those most at risk: men, people who self-harm, young people under 18 who suffer with depression, people who misuse drugs and alcohol, people who are in the care of mental health service or who are in the criminal justice system as well as some very specific occupational groups.

UNPLANNED EMERGENCY ADMISSIONS TO MENTAL HEALTH SERVICES

Unplanned admission to hospital is an increasing problem for the NHS and spend on this unplanned activity is increasing locally, particularly where there is insufficient local provision for people requiring acute or psychiatric intensive support. In 2017/18 there were 93 Unplanned Emergency Admissions (UEA) placed outside of Bromley to both acute and PICU provision. The cost for these placements was around estimated £903k. The map of the UK on the right highlights placement location; however, it should be noted that there may be more than one person placed at each location and some individuals may have had inpatient stays at more than one location throughout the year.



HOUSING SUPPORT

Bromley currently has 9 community options housing schemes providing short and long term rehabilitation accommodation and support for up to 61 people with mental health challenges. The cost of the service is variable depending on the property type and classification. This provision offers short and long term rehabilitation and support to enable residents with a mental health need to live in the community by promoting recovery and opportunities for social inclusion.

The majority of referrals received to the service were for more intensive rehabilitation and supported housing. The majority of these were from acute settings with a number of referrals from other supported accommodation or residential/out of borough placements.

75% of people accessing these accommodation support services have a primary diagnosis of schizophrenia. However, during the last year the service has supported more people with substance misuse challenges, personality disorder, autism, anti-social behaviour and generally more challenging behaviours.



DEMENTIA

In Bromley there were 2,611 patients registered with GPs who had a dementia diagnosis against an estimated population of 4,000. The prevalence of dementia is predicted to rise to 6,000 by 2030. Although the number of individuals receiving a dementia diagnosis has increased in Bromley over the last two years, there are still many people expected to have dementia who are not known to clinical services. This means that there are more individuals who could benefit from early diagnosis and through an improvement to their capacity to manage their condition through services like the Bromley Dementia Support Hub.

The Bromley Dementia Support Hub received 789 referrals for individuals cared for in 2018/19. 70% of referrals were received from the memory service in Oxleas NHS Foundation Trust. There were also 419 enquiries/referrals from carers and 113 people were re-referred to the service.

In 2015, analysis of health needs of all those residing in both private and local authority care homes who received support from a visiting medical officer, found that 117 individuals had dementia. It is expected that this number would have increased since then and many care home residents would benefit from enhanced support to manage their condition.

Of those individuals accessing the Dementia Hub Support during 2017/18 who reported having a disability or additional health need, 26% had a physical impairment, 4% reported a mental health condition and 22% of those seen reported other physical health conditions. This does not include carers or family – only those individuals with a diagnosis.



WHAT WE NEED TO DO

– OUR PLAN ON 2 PAGES

In Bromley there is **already a strong foundation of good mental health and wellbeing services** across the Council, NHS and voluntary sector. These services however are under pressure and a large proportion of our common resources are committed to high-end treatment and hospital services. The engagement exercise carried out with patients and service users found that **too many people are struggling to access the help that they need**. In order to meet the common challenges of mental health in Bromley, a common approach is needed across organisational boundaries and services. To meet this test, we will bring the best of the NHS together with the best of social care and the voluntary sector, creating coordinated holistic support and treatment services which meet the mental health needs of people in Bromley.

The “Five Pillars” identified have been used to structure our plan into five core priorities:

PRIORITY 1

Prevention

PRIORITY 2

Early intervention

PRIORITY 3

Multi-disciplinary approach to treatment

PRIORITY 4

Long-term conditions

PRIORITY 5

Recovery and rehabilitation

Actions, resources, integrated commissioning, targets and expectations

For children and young people this means that we will **continue to develop our joint and innovative NHS/voluntary sector partnership across Child and Adolescent Mental Health Services (CAMHS)**. Building on this foundation, we will begin to provide mental health support teams into schools and reduce waiting times into specialist services. We recognise that there is further to go with our local partnership however and we will continue to integrate these services, enabling children and young people to access the support that they need in the places they would wish to get this help. We will also embed mental health support in other areas including the youth offending service and children's social care. For children and young people making the transition to adult mental health services we will ensure that there is a tailored approach meaning that children and young people always get the right support in the right place regardless of their age.

Our strategy means that we will also need to look collectively at our prevention and early intervention offer for adults in Bromley. **We will ensure that people receive the help that they need at the earliest point so that they do not reach a point of crisis.** With a focus on our Bromley Well community hub, we will develop a partnership of services which includes a single point of access, the ability to access help, advice and therapies, and NHS clinical and professional expertise which is embedded within community services. At the heart of our new system will be an improved mental health offer from primary care – including a new offer of help for mental health in GP surgeries.

It is important that **those people who are recovering from mental health challenges or who have long term conditions will be provided with support in order to live as independently as possible.** So we will look collectively at our recovery and rehabilitation services in Bromley, ensuring that there is a joined-up approach across the NHS, Council and voluntary sector to help people to overcome challenges and, ultimately, for those who are able to, to live outside of mental health services altogether. People can and do recover from mental ill health; though some people require ongoing help and coping strategies to manage their own mental health challenges. We will put a focus on housing, employment support, financial advice, health provision, social care and other services – including drug and alcohol services. People will be supported to step down from hospital services or residential care placements into housing schemes or into a home of their own. And for those with long term conditions, we will provide the right community services to meet their needs locally.

PRIORITY 1

PREVENTION

We will establish a strong mental health and wellbeing prevention offer across services in Bromley, placing a focus on:

- building resilience for individuals and communities
- helping to ensure that individuals are able to access information and advice
- improving health and wellbeing outcomes for people with mental health challenges

WHAT WE AIM TO DO

For all:

- ✓ Undertake work across services and the community to reduce the stigma often associated with mental health.

For children and young people:

- ✓ Establish tailored mental health and wellbeing support across Bromley schools, ensuring that children and young people are able to access the right mental health and wellbeing help whilst at school.
- ✓ Establish mental and health and wellbeing outreach services for children and young people in community settings, in order to reach individuals in need who would prefer to be supported in these places.
- ✓ Co-produce new ways to deliver services to children who have Autism Spectrum Disorder (ASD) and their families in order to improve outcomes for this group.

For adults:

- ✓ Drive forward the development of a community hub and “single point of access” for mental health and wellbeing in Bromley where people can access information, advice and services; bringing together health, social care and voluntary sector services in one place.
- ✓ Improve health and wellbeing outcomes for people with mental health challenges in Bromley through a coordinated programme of healthchecks for people with mental health challenges and Mental Health First Aid (MHFA) courses.
- ✓ Deliver the Bromley Suicide Prevention Strategy.

WHY IS THIS IMPORTANT?

People can and do recover from mental ill health; though some people require ongoing help and coping strategies to manage their own mental health challenges. The Council and CCG currently work with partners to promote prevention, providing a range of services that help people to get the help they need before they reach a point of crisis. The Council and CCG will provide services that help ensure that people are able to be born, grow up and live in an environment that fosters positive wellbeing.

WHAT ARE SOME OF THE THINGS WE ARE ALREADY DOING?

For children and young people, mental health challenges are often at their most acute in the school environment. The time when children move from primary to secondary school can be a period of high anxiety. Exam stress and peer pressure can also be factors in mental health challenges for children and young people. It is in recognition of the role of schools in ensuring good mental health that the Council and CCG have set up the **Bromley Wellbeing in Schools** service. The service has been developed in partnership with schools and is tailored to the individual needs of each area. Trained mental health practitioners are now located in schools and provide support, training, wellbeing sessions and, in some cases, one-on-one support for pupils who would benefit from this.

The voluntary and community sector super-hub, **Bromley Well**, was jointly commissioned by the Council and CCG in 2017 with a specific aim to help people in Bromley to improve their health and wellbeing. Bromley Well is a partnership of key voluntary and community partners in the area and provides a range of services specifically aimed at people with mental health challenges. The **Bromley Well Mental Wellbeing Service** is a first port of call for many people looking for information and advice about mental health. The service runs a number of workshops and support groups where people with mental health challenges can get help outside of NHS services.

People with mental health challenges are more likely to also have physical health problems. It is for this reason that the CCG set-up **Free Healthchecks for People with Mental Ill Health** which are conducted by GPs or in a hospital. The checks cover an individuals' Body Mass Index (BMI), blood pressure and cholesterol, and can also provide help for people with alcohol or substance misuse challenges. The checks are particularly useful in identifying diabetes, hypertension and other health conditions whilst ensuring that individuals can access the right help and medical care to manage these.

The **Bromley Suicide Prevention Strategy** has been developed in parallel to this strategy as an area of specific focus to put in place measures to reduce the risk of suicide in key high risk groups and to tailor approaches to improve mental health and wellbeing in specific groups, including children and young people. In order to help prevent deaths from suicide, the plan will bring together Bromley services such as mental health and substance misuse services to help to identify and support people who are at a heightened risk of suicide.

EARLY INTERVENTION

We will establish a strong mental health and wellbeing early intervention offer across services in Bromley, ensuring those in need are able to get the early help they need prior to reaching a crisis.

WHAT WE AIM TO DO

For all:

- ✔ Provide tailored health and community support to key groups where there are barriers to accessing support around mental health challenges including the Black, Asian and Minority Ethnic (BAME) communities and people who are Lesbian, Gay, Bisexual and Transgender (LGBT).
- ✔ Drive forward service improvements for children and young people who have Special Educational Needs and Disabilities (SEND) as well as adults who require SEND services up to the age of 25. This includes support for children and young people with Social, Emotional and Mental Health (SEMH) difficulties and also those requiring broader mental health and wellbeing support.

For children and young people:

- ✔ Complete the delivery of our innovative NHS/voluntary sector partnership with a “one service, many providers” mental health and wellbeing offer for children and young people in Bromley. We will put in place services which mean that children and young people in need are able to access the help they need with short waiting times. We will also put in place an online offer of support for children and young people who would benefit from accessing help in this way.
- ✔ Put in place an enhanced offer of mental health support for children looked after (CLA)/care leavers and children and young people at risk of entering the criminal justice system, as groups at particular risk of having mental health challenges.

For adults:

- ✔ Ensure that social care (“Care Act 2014”) outcomes are embedded in all Bromley services for adults with mental health challenges, including healthcare and community support.
- ✔ Put in place an enhanced primary care offer for mental health and wellbeing in Bromley - supporting GP Practices to roll-out joint mental health prevention and early intervention services with hospital and community health services.
- ✔ Improve access to psychological therapies in Bromley (including “talking therapies”) through a partnership approach across GPs, health and community services.
- ✔ Deliver an increased offer of support for people who have had their first ever episode of psychosis, helping to prevent these individuals from requiring ongoing mental health support from the first point of contact.
- ✔ Improve the early identification of people with Autistic Spectrum Disorder (ASD), ensuring that there is a tailored approach of support in the community to meet the needs of people with this condition.
- ✔ Improve the early identification of people with dementia, ensuring that there is a tailored approach of support in the community to meet the needs of people with this condition.
- ✔ Provide tailored support for new mums and dads who are at risk of having mental health challenges.

WHY IS THIS IMPORTANT?

Ensuring that there is early support for people with mental health challenges can prevent these from getting worse. When we engaged people about the mental health strategy, many talked about the need for help at the earliest stage, for advice and support, prior to needing higher levels of intervention.



WHAT ARE SOME OF THE THINGS WE ARE ALREADY DOING?

In Bromley, the Council and CCG have been fostering an innovative partnership between NHS clinical expertise and the voluntary sector – with the **Bromley Wellbeing/NHS CAMHS**. The alliance between the two organisations is bringing the best parts of the NHS system together with the best parts of the voluntary sector in order to create a “one service, many providers” mental wellbeing hub for children and young people. For children and young people who require specialist help, professional expertise and care will always be available; for others who require preventative support, help and advice, they will be able to access this outside of an NHS setting.

The Council and CCG are also working together to deliver improvements to services for children and adults who have **Special Educational Needs and Disabilities (SEND)**, including pupils with Social, Emotional and Mental Health (SEMH) difficulties. The role of mental health and wellbeing services is a critical part of our broader education, health and care offer for children and adults’ with SEND. The Council and CCG lead a partnership Governance Board for SEND which includes schools, social care and NHS providers. The SEND Governance Board has an action plan to take forward improvements for SEND, including in the area of mental health and wellbeing services for this group. There have been recent improvements in the way that the Bromley Wellbeing/NHS CAMHS work with children and young people with SEND, as well as how the two organisations contribute to individual Education, Health and Care Plans (EHCPs).

For adults with mental health challenges, Bromley has an **integrated health and social care service** managed by Oxleas NHS Foundation Trust. The approach means that social workers are embedded with NHS mental health community teams. The joint health and social care teams deliver coordinated care with a focus on wellbeing, housing and employment alongside work by clinicians to ensure that individual health and mental health outcomes are reached.

Talk Together Bromley is part of the national Improving Access to Psychological Therapies (IAPT) programme. For people who are suffering with anxiety or depression, the service offers one-to-one counselling (talking therapies) in person, on the phone, or over the internet. People accessing the Talk Together Bromley service can have access to professionals, including psychologists, counsellors, therapists and mental health practitioners who are able to provide expertise and help. The service will help people with these conditions to understand their own thoughts and feelings, and what it is that triggers their own experiences of anxiety, depression and other conditions. Service users are also offered advice and strategies on how to deal with their own mental health challenges.

Psychosis is a mental health problem that causes people to perceive or interpret things differently to those around them. People with psychosis may experience hallucinations, changes in thinking, frightening and unusual ideas and changes in emotions. The **early intervention in psychosis team** in Oxleas NHS Foundation Trust specialises in supporting people who have had their first ever experience of psychosis, or who may be at risk of developing the problem. The multi-disciplinary team offers a range of advice, support and treatments, including therapy. Over the last year the team has been under mounting pressure from an increasing number of people who require these services. A greater focus on early intervention, with a more joined-up approach to delivering outcomes across services as set out in this strategy, is expected to improve this situation.

Dementia is a syndrome associated with a decline in brain functions. Often associated with memory loss, it can also affect how you feel, speak, think and behave. Whilst anyone can have dementia, it is more prevalent amongst people who are over 65 years old. As Bromley is an area with an older and ageing population, this is a particular challenge and it is for this reason that the Council and CCG have jointly commissioned the **Bromley Dementia Support Hub**. These important services, which are run by Bromley, Lewisham and Greenwich Mind, provide crucial information and support for people who have dementia, their friends, families and carers. The hubs run a number of services including dementia cafes, which are informal settings where people with dementia can come together and share their experiences.



MULTI-DISCIPLINARY APPROACH TO TREATMENT

We will establish a strong multi-disciplinary approach to treatment for people with mental health challenges, ensuring that those in the most urgent need are able to get the best possible treatment and care.

WHAT WE AIM TO DO

For children and young people:

- ✔ Put in place an increased offer of specialist multi-disciplinary care for children and young people with mental health challenges who require this help.
- ✔ Deliver improved mental health care and support for children and young people up to the age of 25, ensuring that there is no “cliff edge” for those young people turning 18 who need ongoing mental health support as they move between children’s and adults’ services.

For adults:

- ✔ In line with the findings of the Independent Review Modernising the Mental Health Act, we will put in place services which ensure people receiving help have choice and autonomy, have the least restriction possible, receive a therapeutic benefit from their services, and that people are treated at all times as individuals.
- ✔ The NHS will always maintain a safe place for people to go in a crisis, in order to access the urgent and emergency help that they need.
- ✔ Ensure that people can access mental health treatment and support in their homes and communities rather than in hospital wherever possible.
- ✔ For individuals needing hospital care, ensure that planning for the time when they leave hospital is considered at every stage of their care and treatment.

WHY IS THIS IMPORTANT?

The NHS will always maintain a safe place for people to go in a crisis. Whilst the focus on prevention, early intervention and recovery is rightly at the forefront of this strategy, this is in no way to diminish the continued importance of emergency and hospital services for people who require this particular support. Treatment services are one of the most important parts of all mental health services in Bromley and uniquely bring together a number of different disciplines, with high levels of specialism, in order to support people who require this help in a safe environment.

In the development of this Strategy, we were informed by the independent national review of the Mental Health Act 1989: Modernising the Mental Health Act – increasing choice, reducing compulsion. Whilst the Government have not yet fully responded to the recommendations of the review, there are a number of areas which can be taken forward locally – in terms of ensuring that people in services are at all times treated as individuals, and that patients have choice and autonomy, wherever possible, to determine their own care.

WHAT ARE SOME OF THE THINGS WE ARE ALREADY DOING?

The word “crisis” can mean different things to different people, but for many people with mental health challenges, crisis can refer to a time when they are becoming increasingly unwell and when they may not be able to cope with many of the tasks that they need to do. Oxleas NHS Foundation Trust have set up a **mental health urgent advice line** for people, their friends, families or carers, who are faced with these situations. The mental health urgent advice line is an important service that ensures that those who need this urgent help are able to access the right support, with trained practitioners available to provide this, as quickly as possible.

Bromley has a modern mental health unit at **Greenparks House**, which is run by Oxleas. The unit is located on the same site as the Princess Royal University Hospital enabling strong joint working between the hospital, including the local emergency department, and the mental health unit. Greenparks House comprises a number of wards which focus on different groups, including older people. It provides a safe, therapeutic environment where people can recover from mental health challenges with a wrap-around offer of treatment and care provided by multi-disciplinary teams. There are a wide range of dedicated services based on the site which have a focus on helping people to return home successfully after their time at the unit.

Oxleas also provide **Home Treatment Teams (HTT)** which provide healthcare and support to people in their own homes and communities as an alternative to spending time in hospital. The multi-disciplinary HTTs comprise nurses, social workers, psychiatrists and support workers. For many people with mental health challenges, a stay in hospital can be the right place to receive the healthcare they require, but for others the best place to receive this care is in their own home. Each individual is unique and support should be tailored to individual needs. The important offer made by HTTs helps to ensure that those people who do not need to receive help in a hospital setting do not have to do so.

COMPLEX AND LONG TERM SUPPORT

We will establish an integrated approach across health and social care for the delivery of services for people with complex needs and for people requiring longer term support – ensuring that everyone is kept safe whilst being able to live as independently as possible

WHAT WE AIM TO DO

For adults:

- ✔ Reduce the number of people with mental health challenges requiring a long-term placement in a hospital, residential or nursing care home setting by commissioning tailored community services that meet individual needs.
- ✔ Provide the right support for people with complex needs in the places where they would like to live.
- ✔ Ensure that people who have been discharged from mental health services but then have a relapse are able to access help quickly, and do not need to “start again” as if this was their first time requiring these services.

WHY IS THIS IMPORTANT?

The importance of prevention, early intervention and recovery in this strategy does not and should not lessen the very real and ongoing need for healthcare and support for people with complex and long term needs. In many ways this strategy is being put in place to ensure that, over time, fewer people are in a position to require long term support. There is however a particular need to support people with long-term and complex conditions, and to help everyone with mental health challenges to achieve the absolute best that they can, no matter how long this help is required.

WHAT ARE SOME OF THE THINGS WE ARE ALREADY DOING?

The Council and CCG commission **special placements** for people with complex and long term conditions including, in some cases, residential and nursing care. For people with particular needs, the Council and CCG will work with partners to ensure that individuals can access the right tailored package of support. It is recognised that people with complex and long-term conditions are more likely to need intermittent hospital or community mental health care, and there is a particular need in these cases to ensure a joined-up approach to the provision of support.



RECOVERY AND REHABILITATION

We will establish a strong mental health and wellbeing recovery and rehabilitation offer for people with mental health challenges, placing a focus on: helping people to overcome individual challenges, building resilience; ensuring that individuals who are able to are supported to move to independent living outside of services; and improving health and wellbeing outcomes for people with mental health challenges.

WHAT WE AIM TO DO

For children and young people:

- ✔ Put in place a holistic model of “step down” support for children and young people leaving hospital or specialist services but who still require ongoing tailored support in the community.

For adults:

- ✔ Develop an integrated recovery and rehabilitation pathway across all health, care and support mental health community services, ensuring that those who are able to, are supported to move to more independent settings including, when able, outside of services altogether.
- ✔ Ensure that the independence and wellbeing of people in mental health community services is at the forefront of provision, with services shaped and designed by the service users who use these.
- ✔ Provide good housing options for people who are at risk of homelessness due to their mental health; some people will want to stay living in Bromley whereas others may wish to move to other places – we will support people to make the right choices about where they want to live.
- ✔ Improve links between mental health services and substance misuse (including alcohol) services, ensuring that there is improved coordination between the two services to meet individual needs.
- ✔ Provide support (including valuable “peer support”) to people with mental health challenges in order to resolve problems and gain new skills; as well as to access meaningful and sustainable employment, training and volunteering opportunities.
- ✔ Ensure that everyone who would benefit from a personal health and care budget in mental health services is able to take these up.

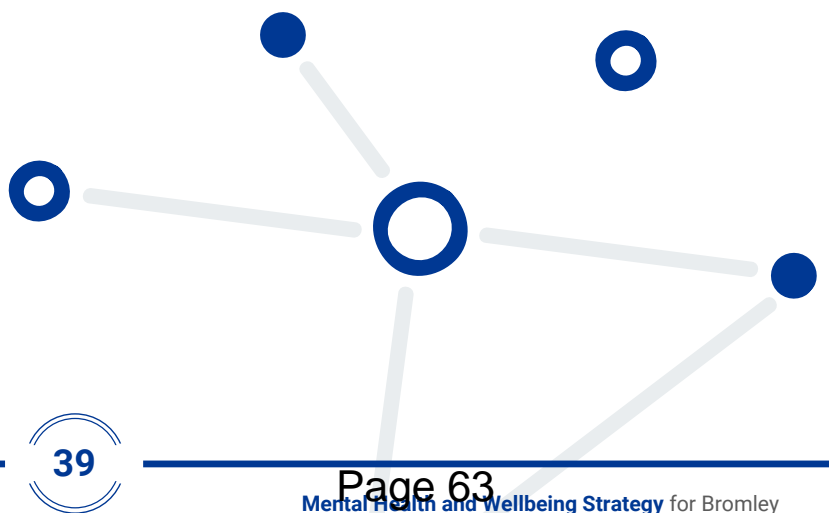
WHY IS THIS IMPORTANT?

People can and do recover from mental ill health. For some people, their journey to recovery can be thankfully short; for others, the period can be one of many years and involve a range of different services provided by the Council and CCG including housing, employment support, financial advice and community health and social care teams. Ensuring that there is the right support in place for people recovering from a period of mental ill health is as important as ensuring that there is the early support in place to prevent people from requiring specialist services in the first place.

WHAT ARE SOME OF THE THINGS WE ARE ALREADY DOING?

For people who require ongoing care and who have been in hospital due to their mental ill health, the Council and CCG will put in place a package of **mental health aftercare**. These individually tailored packages of support often include housing, healthcare and community services. The aim of aftercare is to better enable people with mental health challenges to make the adjustment to living more independently after a time in hospital. The provision of aftercare prevents a “cliff-edge” where all support is removed at the point where an individual leaves hospital. Professionals from the Council and CCG sit alongside mental health workers and social workers from Oxleas NHS Foundation Trust to consider individual needs in the establishment of aftercare packages. Ongoing **care coordination** is also provided so that people’s progress can be monitored and any issues quickly rectified.

The Council and CCG have jointly commissioned **Recovery Works**, a key plank of our local mental health community offer. The service, run by Bromley, Lewisham and Greenwich (BLG) Mind, provides personalised advice and support to adults who have mental health challenges, and offers peer support for those who would benefit from help provided by people with a lived experience of mental health. For many people with mental health challenges, finding and sustaining employment can be a significant obstacle to more independent living. In consideration of this, BLG Mind have worked in partnership with Oxleas NHS Foundation Trust to put in place the **Individual Placement and Support (IPS)** service, providing help for people with mental health challenges to locate and sustain meaningful employment. The IPS service locates employers who would be willing to employ people with mental health challenges and provides a package of advice and support to ensure that every role someone is in is not simply a work placement, but is a meaningful job, with individuals rightly paid a full salary for their efforts.



The Council and CCG jointly commission a range of support and housing services through our partnership between **community options and floating support services**. These services provide a combined offer of housing and support, helping individuals as they recover from a period of mental ill health to learn skills and access employment, whilst overcoming challenges and ultimately moving to a permanent home. People with mental health challenges are more likely to be at risk of homelessness and our services will ensure that these individuals are provided with good quality housing, with support in place to help them to sustain their tenancies. There is a need however to better link-up a range of community services, including housing, to ensure that people can return to sustained independent living as rapidly as possible. The risk with services like community options and floating support is that they become the end-point for an individuals' journey to recover as opposed to a crucial way-point to independent living, and the work that we will undertake through this strategy will ensure that these services are put on the right-footing to fulfil this offer.

The CCG has recently piloted a **shared care scheme** between GP Practices and Oxleas NHS Foundation Trust. The aim of the scheme is to allow people who are supported by hospital or community mental health services to receive the same level of help from their local GP Practice. This is often an important part of an individuals' recovery journey, helping them to receive medical care outside of a more clinical setting, whilst maintaining the important links to the clinical expertise found in the mental health Trust. Whilst the pilot scheme has been an important step in fostering services between GP Practices and Oxleas NHS Foundation Trust, it is recognised that the scheme has been small in scale. The development of Primary Care Networks (partnerships of GP Practices working together in the same area) is also an opportunity to embed mental health support across a number of GP Practices at one time.





INTEGRATED COMMISSIONING AND SERVICE DELIVERY

This strategy sets out a commitment between the Council and CCG to work in partnership to improve the mental health and wellbeing outcomes for the residents and patients in the borough.

The two lead organisations have developed an action plan which set out details of what we need to do in order to deliver on our strategic priorities as set out in the strategy.

The actions are based on the service user feedback, policy drivers and service analysis set out in this strategy.

The Council and CCG will work with key partners in the delivery of the action plan including service users and patients, social care, housing, health services and the voluntary and community sector.



MENTAL HEALTH

– OUR COMMON RESOURCES

The Council and NHS spent over £46 million on mental health services in Bromley in 2018/19. Local mental health services include help for children and young people, improving access to psychological therapies – including so-called “talking therapies” (IAPT), recovery and rehabilitation services and voluntary and community services.

The majority of the Bromley mental health budget however is spent on secondary care services. This is not untypical of different areas, with a high proportion of the overall mental health budget committed to higher-end treatment and hospital services.

Bromley currently spends £46.6m on mental health services across both the Council and the NHS. The vast majority of this resource is spent on higher-end treatment and hospital services. Whilst the Council and CCG will always maintain a place for people to go in crisis, in order to access the urgent and emergency help that they need, this strategy envisages a shift, over time, towards more prevention, early intervention and community services. The approach will mean less people requiring hospital stays or placements in residential care homes.



Produced by:

Adult Services
London Borough of Bromley
Civic Centre
Stockwell Close
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ONE BROMLEY

WORKING TOGETHER TO IMPROVE HEALTH AND CARE IN BROMLEY

Post COVID syndrome service update

Health & Wellbeing Board: 30th March 2023

- Rachel Perry: Head of Integrated Services (SEL ICB)
- Lindsay Pyne: Head of Adult Therapies (BHC)
- Ellen Shiner: Physiotherapist- Long Covid (King's)
- Dr Zia Buckhoree: GP Partner, Co-Clinical Director Beckenham PCN

What is Post COVID Syndrome and service provision in Bromley

Symptoms

Problems with memory & concentration ("brain fog")

Shortness of breath

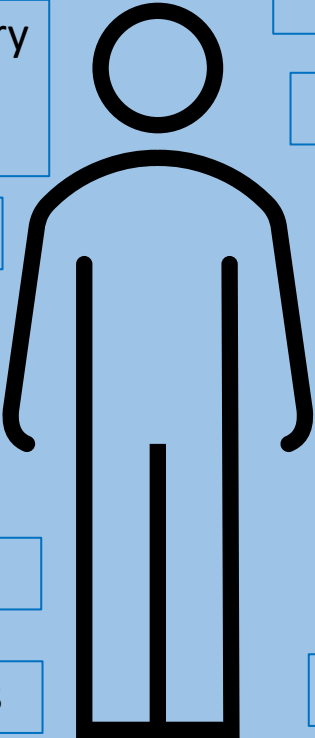
Dizziness

Rashes

Tinnitus, earaches

Heart palpitations

A high temperature, cough, headaches, sore throat, changes to sense of smell or taste



Depression and anxiety

Pins and needles

Difficulty sleeping (insomnia)

Extreme tiredness (fatigue)

Joint pain

Chest pain or tightness

What is Post COVID syndrome

- Signs and symptoms that develop during or after an infection consistent with COVID
- Ongoing for more than 12 weeks that cannot be explained by an alternative diagnosis
- Also known as Long COVID

Post COVID pathway in Bromley

An integrated pathway has been established to educate and empower individuals to manage their symptoms and improve their health outcomes (both physical and mental health). Advice, guidance and sign-posting as well as one-off interventions to support the patient is provided via:

- 1) Self management' Your COVID Recovery' website
- 2) Primary Care
- 3) Post COVID community services
- 4) Specialist Post COVID Syndrome assessment clinic



Self Management: Components of the pathway

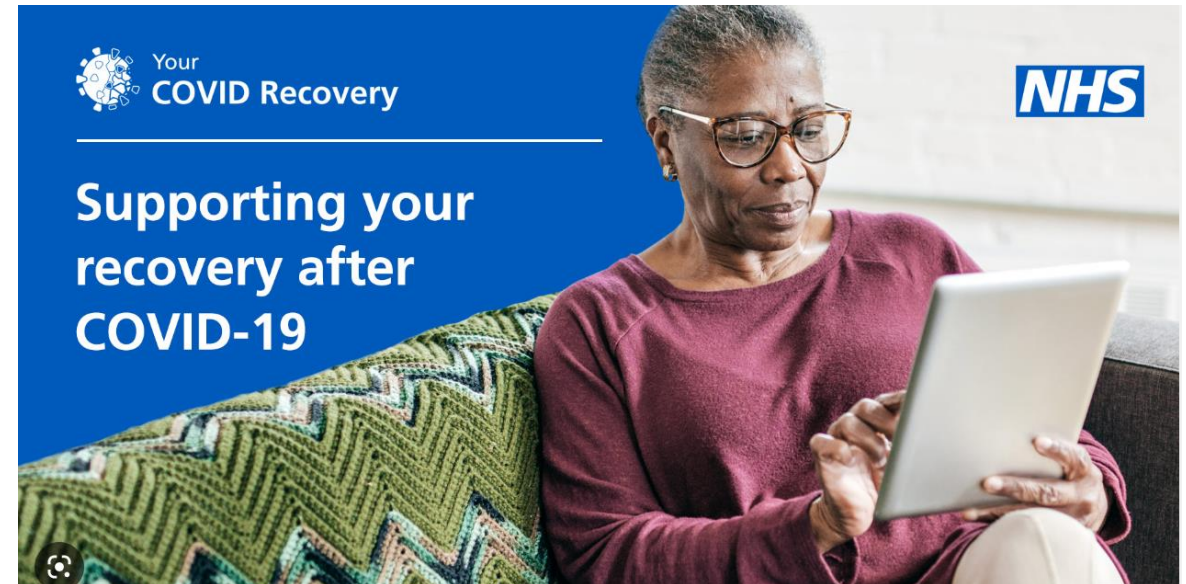
Self Management

- Your COVID Recovery website launched nationally in Summer 2000
- Provides a personalised and tailored package of modules covering topics such as fatigue and breathlessness management and nutritional advice for use by patients following a clinical consultation, under the supervision of a clinician
- Support from the Bromley Well services also available

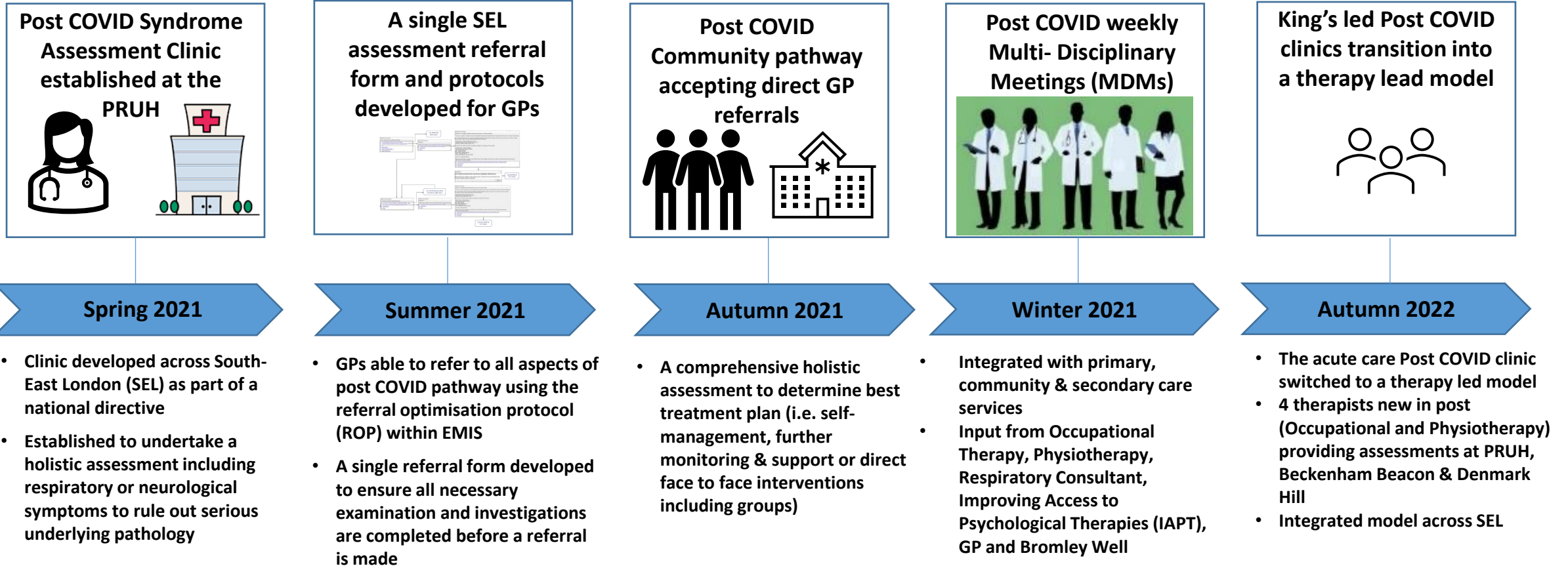
Your COVID Recovery on-line recovery

Website resources:

<https://www.yourcovidrecovery.nhs.uk/>



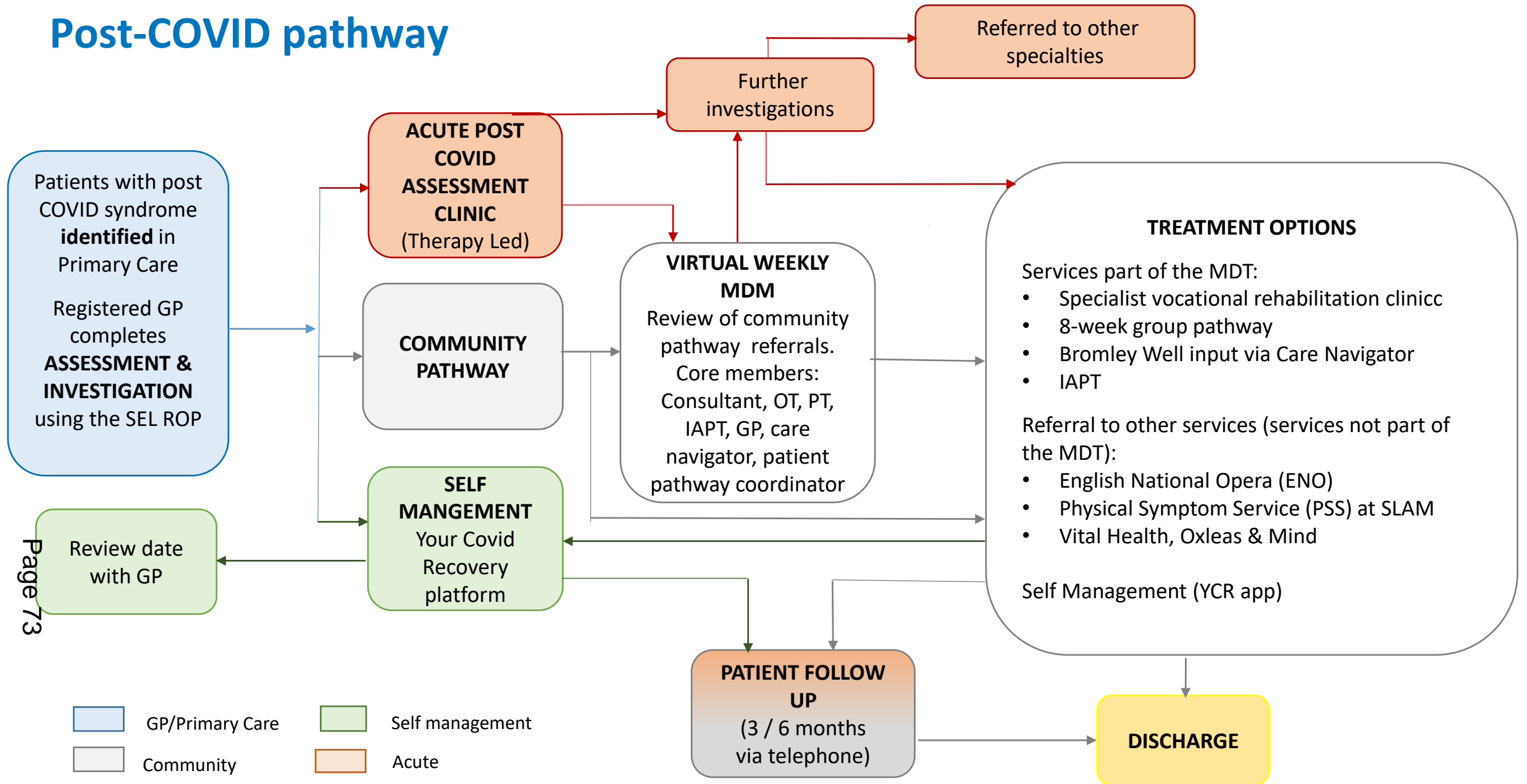
Primary, Community & Secondary care: Components of the pathway and stages of development



Training & support for GPs including a video to support clinical decision making and overview of the local pathway

Research, data analysis and patient surveys on the impact on Bromley patients

Post-COVID pathway



What we have in place and progress to date

- A locally developed integrated Post COVID pathway
- Use of a single assessment referral form and protocols agreed across all SEL boroughs
- Collaborative MDMs held weekly with input from community, secondary and mental health services professionals
- Care Navigator role with knowledge of the third sector and able to signpost
- Transition of the acute assessment clinic to include a therapy lead clinic resulting in a reduction in waiting times

Page 74
Bromley Post COVID service won the One Bromley integration staff awards in 2022 under the 'successful collaboration working in Primary Care service' category



Post COVID Acute Service

From October 2022 our MDT assessment clinics switched from consultant led to therapy led:

- Therapy led triage involved in checking all bloods and chest x-ray are normal to indicate that Long COVID assessment is appropriate
- 2 x physiotherapist and 2 x occupational therapists in post completing new patient assessments across SE London
- Detailed assessment and objective tests completed.
- Consultant supervision and MDM run alongside this to discuss caseload
- Referral into community settings across the boroughs with a personalised approach

Assessments used

6OSTS

- Mimics a patient climbing the stairs
- Aim to review HR and SPO2 changes on exertion
- Replacement for 6MWT/shuttle walk

BPAT

- Breathing Pattern Assessment Tool
- Observational tool

Nijmegen

- Hyperventilation screen
- Looks at signs and symptoms
- >23



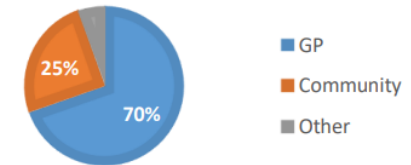
Post COVID Assessment clinic performance: Specific Bromley data

Specific Bromley Data

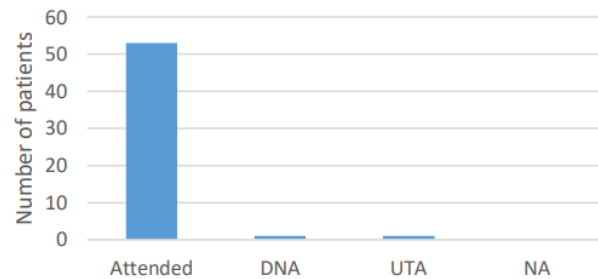
Number of patients booked at PRUH since Oct 2022

58

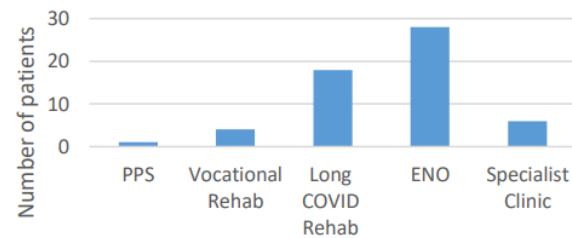
REFERRAL SOURCE



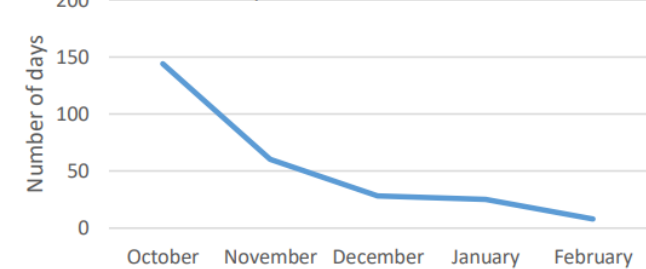
Appointment status for PRUH clinics



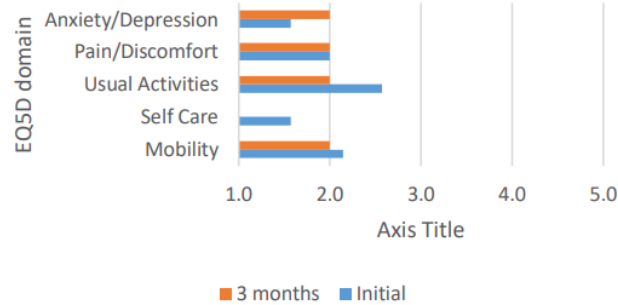
Number of patients referred onto referral pathways



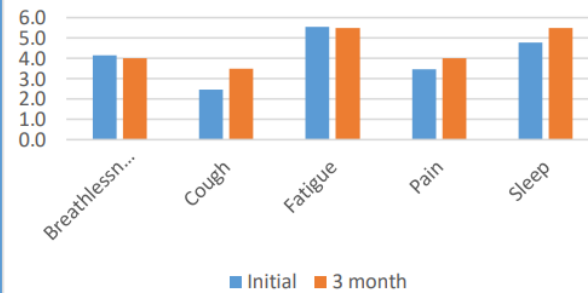
Referral wait time to initial appointment in days per month



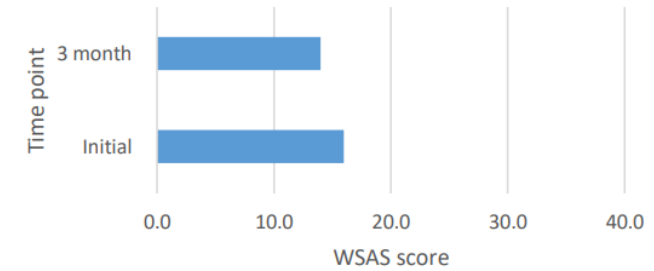
EQ5D at initial vs 3 month



VAS scores across 5 domains, initial vs 3 months



WSAS SCORE FROM INITIAL TO 3 MONTHS



Data source:
King's:
Oct 2022 to Feb
2023

Post COVID Community Service

Treatment

- Assessments completed via the phone
- All patients discussed at MDM
- As appropriate, individuals are invited to attend the 8 week group community programme
- Individual follow up at 12 week and 6 months
- Peer support group every fortnight provided by Care Navigator from Bromley Well (including follow ups and signposting)

8 week group community programme

Week	Content
1	Introduction to Post COVID & the programme
2	Fatigue
3	Fatigue
4	Breathlessness
5	Sleep
6	Anxiety
7	Depression
8	Relapse management & summary of programme

Next steps

- Expansion of the community post covid service
 - Physiotherapy in post
 - Psychological Wellbeing Practitioner in post (more responsive 121 sessions)
 - Employing x2 Occupational Therapist
 - Employing a Therapy Assistant
- To deliver more face to face, individualised care (e.g. visits to home) to improve recovery. Also looking at exercise sessions
- To deliver living with COVID recovery app across SEL

Post COVID Community referral data

Referrals Received [🔗](#)

126

Referrals Accepted [🔗](#)

106

Initial Assessments [🔗](#)

102

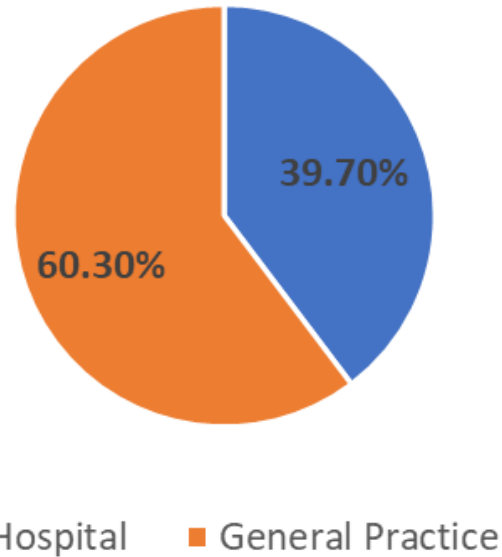
Average Waiting Times / Days...

105.1

MDT Meetings [🔗](#)

87

Referral Source



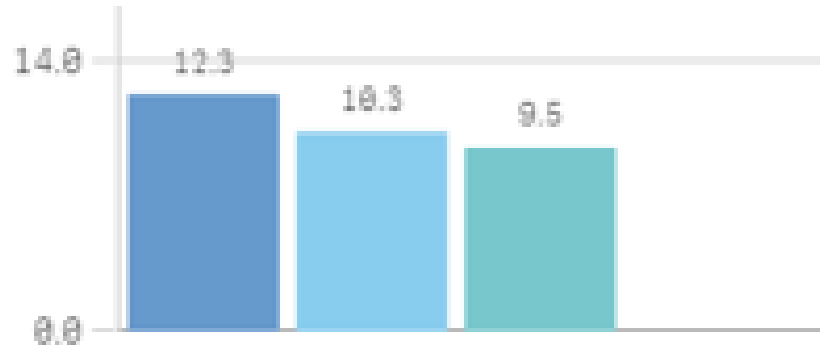
Outcome at MDM meeting

Outcome	No.
8 week Post Covid Group	48
ENO Breathe	16
Additional Referrals	11
GP	10
IAPT	8
Bromley Well	6
Post Covid Acute Assessment Service	3
Physiotherapy	1
Vocational Rehab	1
Age UK	1

Post COVID Community Outcome Data

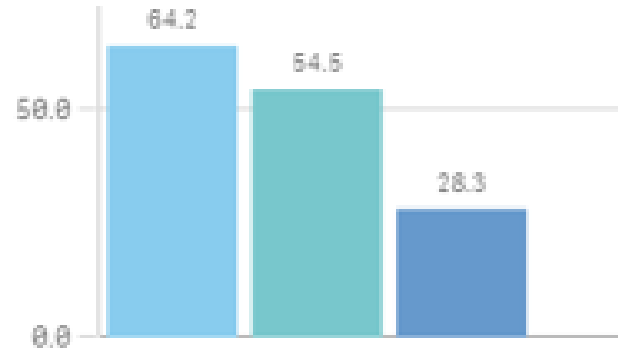
Average PHQ-9 Overall Scores

Each item is scored 0 to 3, with a score of 0 representing no issues



Average EQ5D-VAS Scores

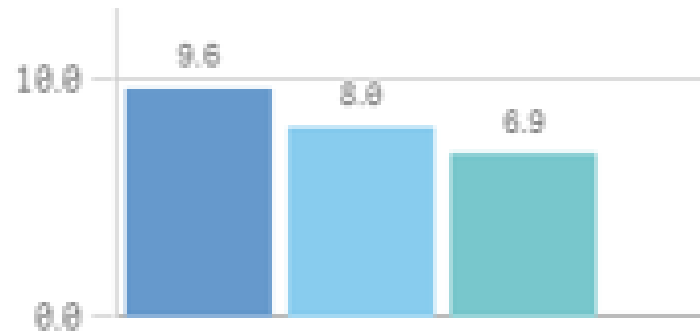
A score 100 represents the best health a patient can imagine



- Initial Assessment
- 8-12 Week Review
- 6 Month Review

Average GAD-7 Overall Scores

Each item is scored 0 to 3, with a score of 0 representing no issues



Data Source: Bromley Healthcare QlikSense: Oct 2022 to Mar 2023

Example of patients feedback from 8 week community programme

"Breathing exercises **changed my life**, I have learned about pacing and not overdoing it"

"The groups made a **massive difference** in my life, sleep has improved hugely"

"The groups really gives people **hope and confidence** through all of this, helps us to feel less scared"

"Have never felt better, and have much more **understanding** of what I am suffering from"

Patient & Public Engagement & Social Research: Long COVID

“Long COVID is both diagnosed and undiagnosed in the population, and so the scale of the problem remains unknown”

Guy’s & St Thomas’, Brompton & Harefield Hospital, Evelina London Children’s Hospital and King’s College lead on a programme researching Long COVID working with health professionals and communities. The approach used:

- Desk research
- Mapping cohorts and inviting participants to workshops
- A series of co-production workshops, including Bromley, bringing people living with Long COVID, their carers, health and care professionals together

Recommendations to enhance model of care for people living with long COVID:

- A bespoke model of care that is pragmatic and not reliant on a GP referral to access the pathway
- The Long COVID clinic as the foundation for all therapies and interventions that is embedded in the community at Borough level
- Universally accessible so not to increase inequalities
- Open to people’s experience as the model develops

(More detailed recommendations for Primary Care and NHS can be found in the report)

EST 1892 **LSBU**

Patient & Public Engagement and Social Research: Long COVID

Report to the Joint Programme for Patient, Carer and Public Engagement in COVID Recovery
September 2022

Guy's and St Thomas' NHS Foundation Trust (including Royal Brompton and Harefield Hospitals and Evelina London Children's Healthcare) and King's College Hospital NHS Foundation Trust.

Authors
Prof R Malby, Mary Ryan, Hai Saint, Sandie Smith, Lucie Stephens

Contact
healthlab@lsbu.ac.uk
engagement@gstt.nhs.uk

Generously funded by Guy's & St Thomas' Charity and King's College Hospital Charity



SEL Long COVID Programme

The programme is a UK initiative, designed to **speed-up the recovery of people** living with Long COVID in South-East London

The outcomes from the work will create the blueprint for national NHS-wide rollout, developing a **'gold-standard'** of multidisciplinary care working closely with communities and GP

Phase 1 – Mapping the services, Gap Analysis

Phase 2 – Pilot Workstream Themes

Phase 3 – SEL Long COVID Programme workstreams

Pilot Workstreams: January – May 2023

1. Local Community Engagement via Lambeth Health Bus
2. Helping Healthcare Workers
3. Establish Needs of Vulnerable Population
4. South East London Long COVID Prevention Resources
5. Long COVID Community Recovery Pathway



Details copied from SEL ICS slide deck

Next Steps

- Funding provided for 2023/24 & 2024/25. Further work is being taken forward pan London to review the models in practice to determine future resources
- Continuing to expand Post COVID community service
- Use of performance data to review individual outcomes to refine and improve the service
- Working with colleagues across SEL to share best practice

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Report No.
ACH23-018

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: HEALTH AND WELLBEING BOARD

Date: 30th March 2023

Decision Type: Information only

Title: Joint Strategic Needs Assessment (JSNA) update

Contact Officer: Jon Walker, Senior Public Health Analyst
Tel: 0208 313 4753 E-mail: Jonathan.Walker@bromley.gov.uk

Chief Officer: Dr Nada Lemic, Director of Public Health
Tel: 020 8313 4220 E-mail: Nada.Lemic@bromley.gov.uk

Ward: All

1. Reason for decision/report and options

- 1.1 This paper provides an information update to the Health and Wellbeing Board on the JSNA and related needs assessments.
-

2. **RECOMMENDATION(S)**

- 2.1 This is an update only on the JSNA and related work.

Impact on Vulnerable Adults and Children

1. Summary of Impact: The JSNA may identify needs of vulnerable adults and children
-

Transformation Policy

1. Policy Status: Existing Policy
 2. Making Bromley Even Better Priority (delete as appropriate):
 - (1) For children and young People to grow up, thrive and have the best life chances in families who flourish and are happy to call Bromley home.
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
-

Financial

1. Cost of proposal: No Cost
 2. Ongoing costs: Not Applicable
 3. Budget head/performance centre: Not Applicable
 4. Total current budget for this head: Not Applicable
 5. Source of funding: Not Applicable
-

Personnel

1. Number of staff (current and additional): Not Applicable
 2. If from existing staff resources, number of staff hours: Not Applicable
-

Legal

1. Legal Requirement: Statutory Requirement
 2. Call-in: Not Applicable
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Property

1. Summary of Property Implications: Not Applicable
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications: Not Applicable
-

Customer Impact

1. Estimated number of users or customers (current and projected): This is a public facing document
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

3. COMMENTARY

Joint Strategic Needs Assessment (JSNA) is a process designed to inform and underpin the Joint Health and Wellbeing Strategy (JHWS) by identifying areas of unmet need, both now and into the future. It is a statutory requirement for Local Authorities and their partners (under both the Health and Social Care Act 2012 and the Local Government and Public Involvement in Health Act 2007 s116 and s116A) through the Health and Wellbeing Board who have delegated this responsibility to the Public Health team.

The past year has seen completion of the Children's JSNA. The Alcohol and Substance Misuse Needs Assessments are in production and close to being finalised before publication. The Homeless Needs Assessment is also in production.

The plan for this year is to produce a JSNA chapter on Morbidity and Mortality in Bromley and to update the demography chapter on a rolling basis as Census data is released supported by a public facing interactive Power BI report. In addition, there will be a short paper covering the Covid-19 pandemic: cases, deaths and outbreaks. The intention is also to resurrect the JSNA steering group post-pandemic which has a monitoring role of the content and strategic direction of the JSNA.

4. IMPACT ON VULNERABLE ADULTS AND CHILDREN

The JSNA may identify needs of vulnerable adults and children

5. TRANSFORMATION/POLICY IMPLICATIONS

Relevant to life course of all residents. Making Bromley Even Better Priority 1 & 2

6. FINANCIAL IMPLICATIONS

Not applicable

7. PERSONNEL IMPLICATIONS

Not applicable

8. LEGAL IMPLICATIONS

The JSNA is a statutory requirement under both the Health and Social Care Act 2012 and the Local Government and Public Involvement in Health Act 2007 s116 and s116A

9. PROCUREMENT IMPLICATIONS

Not applicable

10. PROPERTY IMPLICATIONS

Not applicable

11. CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS

Not applicable

12. CUSTOMER IMPACT

This is a public facing document

13 WARD COUNCILLOR VIEWS

Not applicable

Non-Applicable Headings:	FINANCIAL IMPLICATIONS; PERSONNEL IMPLICATIONS; PROCUREMENT IMPLICATIONS; PROPERTY IMPLICATIONS; CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS; WARD COUNCILLOR VIEWS
Background Documents: (Access via Contact Officer)	Not applicable

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Agenda Item 8

Report No.
ACH23-015

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Health and Wellbeing Board

Date: 30th March 2023

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **JOINT STRATEGIC NEEDS ASSESSMENT OF CHILDREN AND YOUNG PEOPLE IN BROMLEY, 2022**

Contact Officer: Dr Jenny Selway, Consultant in Public Health Medicine
Tel: 0208 313 4769 Email: jenny.selway@bromley.gov.uk

Chief Officer: Dr Nada Lemic, Director of Public Health

Ward: All

1. REASON FOR REPORT

1.1 This report is for information only.

2. RECOMMENDATION(S)

2.1 The Health and Wellbeing Committee are asked to note the contents of this report.

Impact on Vulnerable Adults and Children

1. Summary of Impact:

This JSNA looks at what we know about children and young people living in Bromley in early 2022. This information is used to shape services for children and young people in Bromley.

Transformation Policy

1. Policy Status: Not Applicable

2. Making Bromley Even Better Priority (delete as appropriate):

(1) For children and young People to grow up, thrive and have the best life chances in families who flourish and are happy to call Bromley home.

Financial

1. Cost of proposal: No Cost

2. Ongoing costs: Not Applicable:

3. Budget head/performance centre:

4. Total current budget for this head: £

5. Source of funding:

Personnel

1. Number of staff (current and additional):

2. If from existing staff resources, number of staff hours: 100

Legal

1. Legal Requirement: No

2. Call-in: Not Applicable:

Procurement

1. Summary of Procurement Implications:

Property

1. Summary of Property Implications:

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications:

Customer Impact

1. Estimated number of users or customers (current and projected): 73,000 (young people aged 0-18 in 2022)

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable

3. COMMENTARY

3.1 Introduction

This Joint Strategic Needs Assessment (JSNA) for children and young people in Bromley is the second update of this JSNA. The first JSNA for children was written in 2016 and updated in 2018. It was due to be updated in 2020 but was delayed due to the pandemic.

This JSNA aims to pull together all information available about the health and wellbeing of children and young people in Bromley using data and information from across the council, health partners, and the Police. It should be noted that a detailed JSNA of child and young person mental health in Bromley is not included in this document as it is being commissioned separately.

Since finalising this JSNA in October 2022 more information has become available about some long term health conditions in children and young people in Bromley, and this will be published separately.

3.2 Future work

It is hoped to repeat the School Health Education Survey next spring 2024 which will inform the next update of the JSNA in late 2024.

4 IMPACT ON VULNERABLE ADULTS AND CHILDREN

Where data is available at local area level rather than borough level this information is presented in order to identify where additional resources may be needed for vulnerable children and their families.

The School Health Education Survey used subgroup analysis of the dataset to identify some vulnerable groups of young people in the borough and work is already underway to address the needs of these young people.

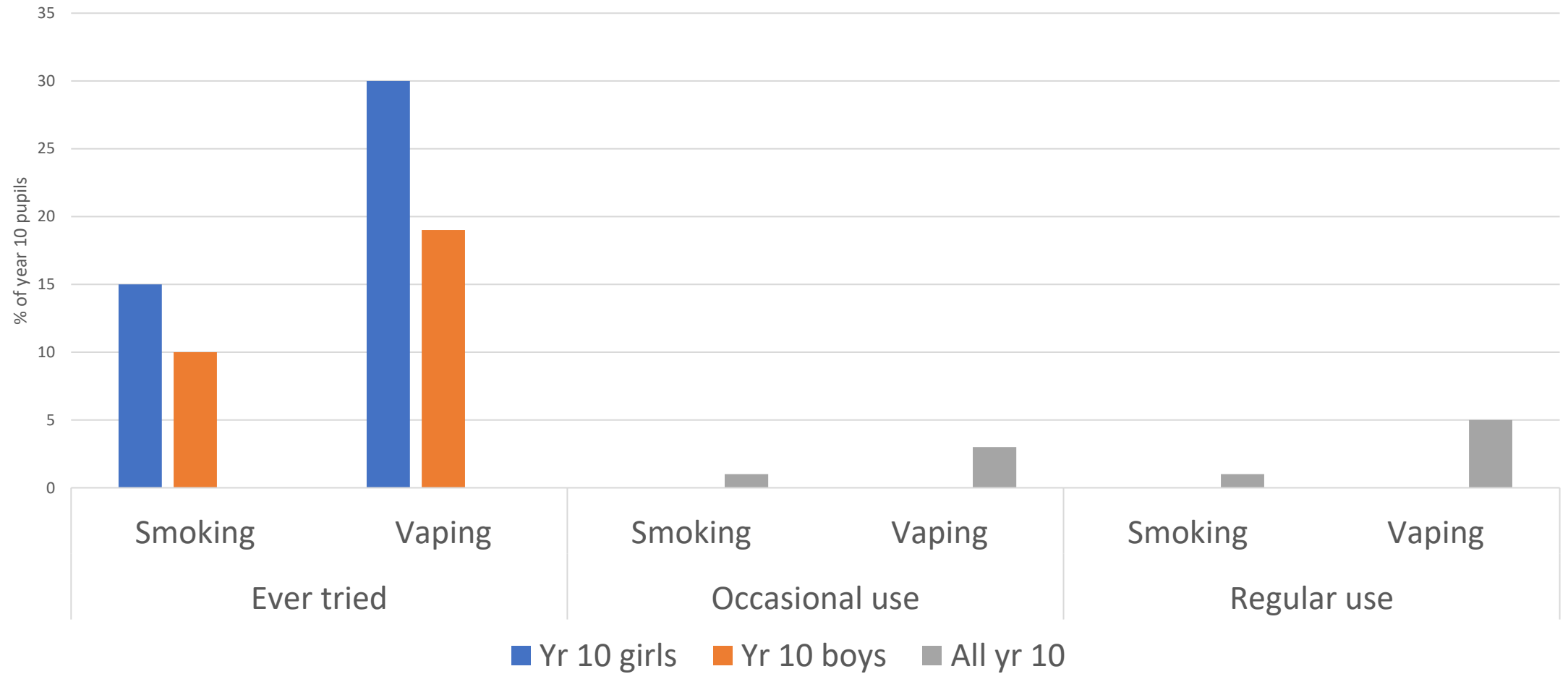
Non-Applicable Headings:	TRANSFORMATION/POLICY IMPLICATIONS, FINANCIAL IMPLICATIONS, PERSONNEL IMPLICATIONS, LEGAL IMPLICATIONS, PROCUREMENT IMPLICATIONS, PROPERTY IMPLICATIONS, CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS, CUSTOMER IMPACT, WARD COUNCILLOR VIEWS
Background Documents: (Access via Contact Officer)	

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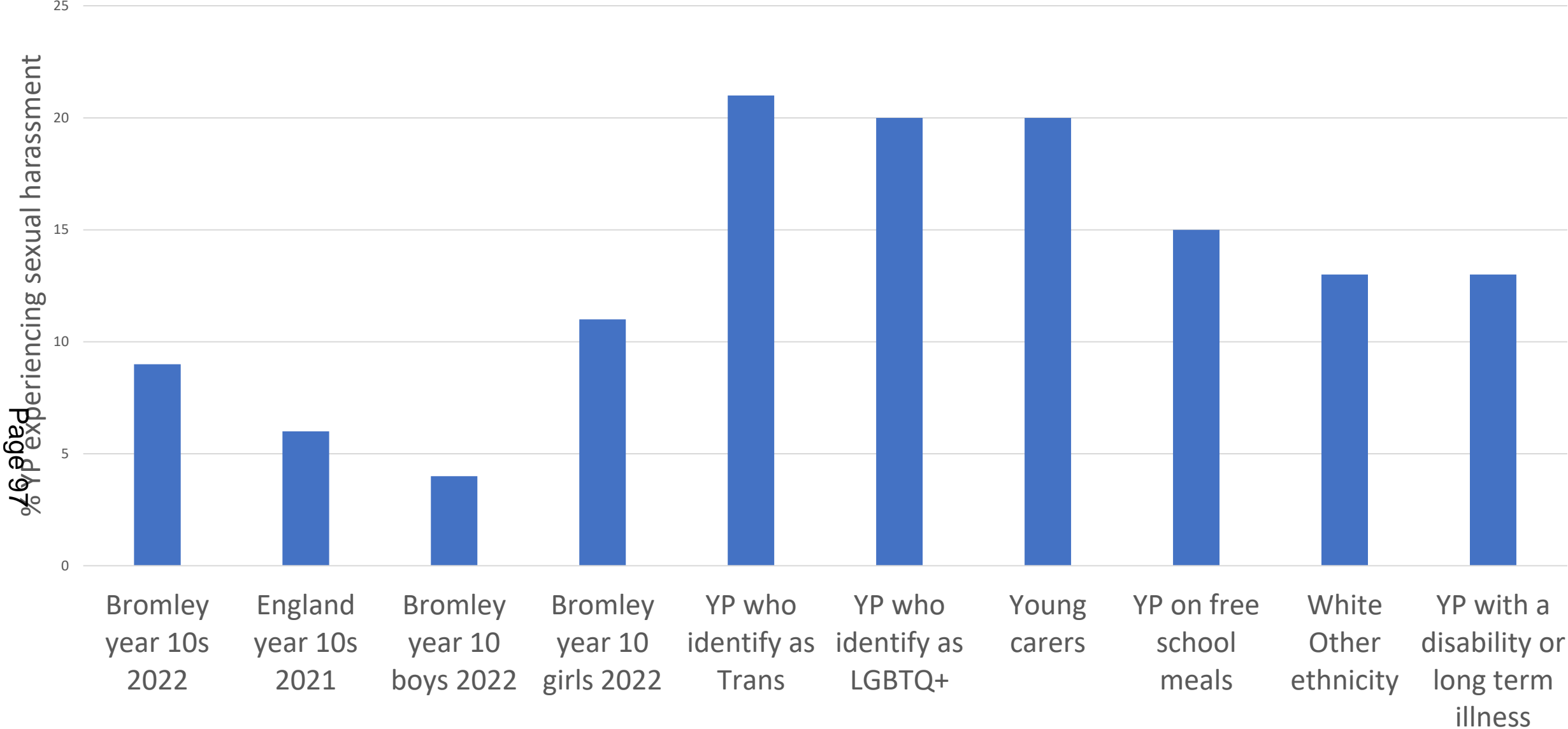
Summary of key issues from Children's JSNA 2022

- Particularly vulnerable groups of young people in Bromley:
 - Young carers
 - Young people who are LGBTQ/Trans
- Increasing levels of vaping in children and young people in Bromley
- Sexual harassment rates higher in Bromley than national rates
- Relatively high rates of substance misuse in CLA compared to national
- Majority of young people in year 10 worry about knives at least sometimes when they go out

Yr 10 pupils smoking and vaping, 2022



Yr 10: being sexually harassed by another student



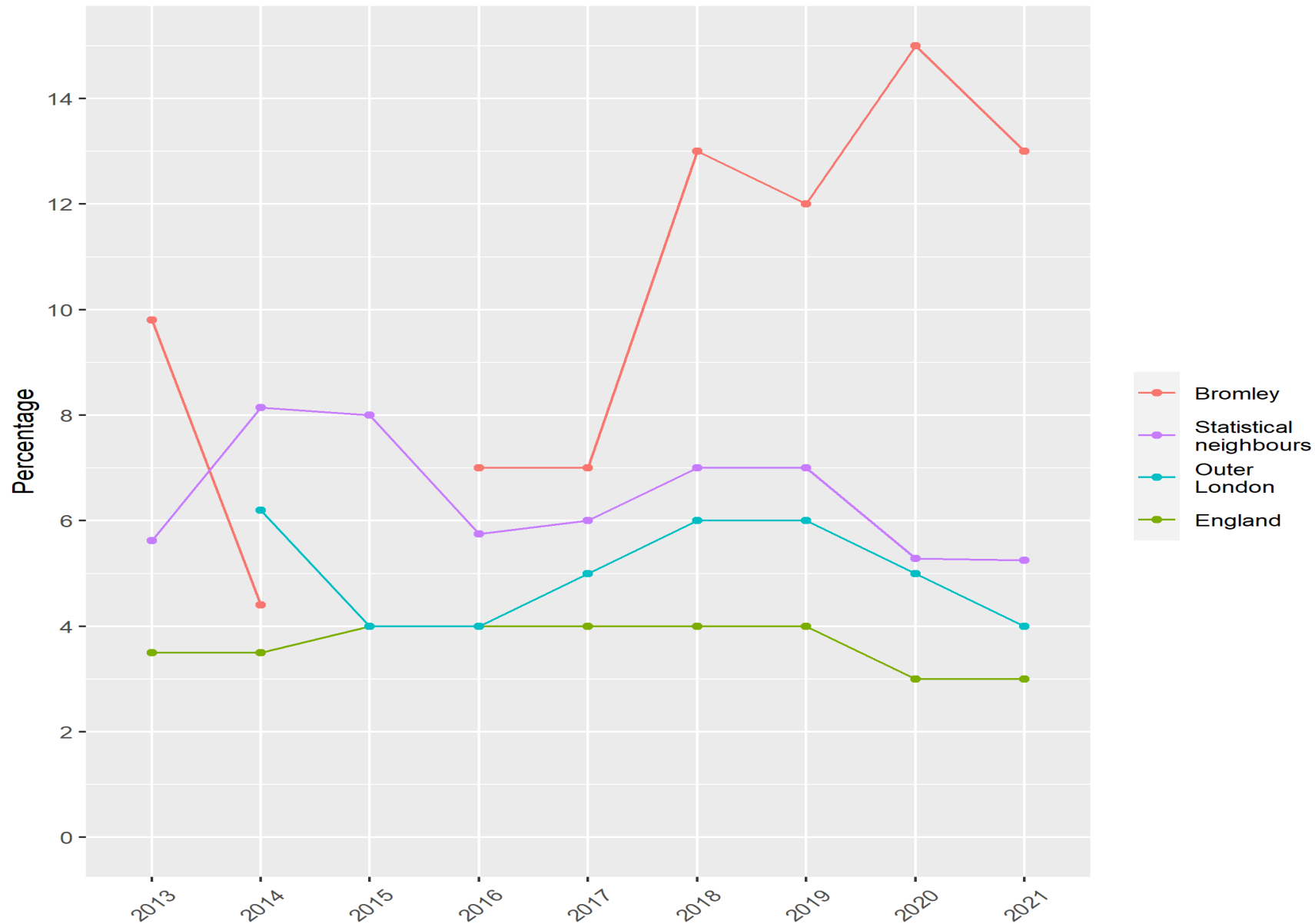
Serious youth violence: victims in Bromley & comparators



Worrying about weapons, yr 10 Bromley, 2022

Worry about weapons when going out?	Boys %	Girls %
Never	33	26
Sometimes	50	55
Often	11	13
Very often	6	6

CLA with substance misuse issues, Bromley, 2013-2021



Agenda Item 9

Report No.
ACH23-017

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: HEALTH AND WELLBEING BOARD

Date: 30th March 2023

Decision Type: Non-Urgent Non-Executive Non-Key

Title: Update on the new Health and Wellbeing Strategy

Contact Officer: Chloe Todd, Consultant in Public Health
Tel: 020 8313 4708 E-mail: Chloe.Todd@bromley.gov.uk

Chief Officer: Dr Nada Lemic, Director of Public Health

Ward: All

1. Reason for decision/report and options
 - 1.1 To outline the proposed structure for the new Joint Health and Wellbeing Strategy.

2. RECOMMENDATION(S)

The Health and Wellbeing Board is asked to note and agree the proposed structure for the new Joint Health and Wellbeing Strategy.

Impact on Vulnerable Adults and Children

1. Summary of Impact: Not applicable
-

Transformation Policy

1. Policy Status: Not Applicable
 2. Making Bromley Even Better Priority (delete as appropriate):
 - (1) For children and young People to grow up, thrive and have the best life chances in families who flourish and are happy to call Bromley home.
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
 - (3) For people to make their homes in Bromley and for business, enterprise and the third sector to prosper.
 - (4) For residents to live responsibly and prosper in a safe, clean and green environment great for today and a sustainable future.
 - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.
- Not Applicable:
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre:
 4. Total current budget for this head: £
 5. Source of funding:
-

Personnel

1. Number of staff (current and additional): Not Applicable
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement:
 2. Call-in: Not Applicable:
-

Procurement

1. Summary of Procurement Implications: Not applicable
-

Property

1. Summary of Property Implications: Not applicable
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications:
-

Customer Impact

1. Estimated number of users or customers (current and projected):
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No
2. Summary of Ward Councillors comments:

2 COMMENTARY

2.1 At the Health & Wellbeing Strategy workshop held on 8th December 2022, members of the Board discussed in small groups the potential priority areas for the next publication of the Health & Wellbeing Strategy to focus on.

2.2 The purpose of this paper is to outline a proposed structure for the new Joint Health and Wellbeing Strategy.

2.3 The proposed structure is as follows:

Foreword.

Contents.

Introduction.

What's happened since the last strategy?

Our process to develop this Strategy.

Our Vision / Ambition (linking to the ICS strategy and ICB priorities).

Our Priorities – overview of each priority area (Improving Health and Wellbeing of young people; Improving Health and Wellbeing of Adults; Disease prevention and helping people to stay well).

Our Implementation plan (linking to the ICS strategy and ICB priorities).

How we will measure progress (linking to the ICS strategy and ICB priorities).

2.4 The plan is to have 3 overarching priority areas:

1. Improving Health and Wellbeing of young people (to include obesity, youth violence, adolescent mental health).
2. Improving Health and Wellbeing of Adults (to include obesity, diabetes, dementia, mental health, substance misuse).
3. Disease prevention and helping people to stay well (linking with our ICB prevention priority and achieving this through our vital 5 work).

2.5 Monitoring the areas listed in section 2.4 above will be achieved by the following:

1. For the 'Improving Health and Wellbeing of young people' priority area it is suggested that the Children's Executive Board to lead on this.
2. For the 'Improving Health and Wellbeing of Adults' priority we already have groups set up and identified whom it is suggested take a lead on each of these are, for example, the Diabetes Partnership Group, the Bromley Obesity Working Group, Bromley Mental Health and Wellbeing Partnership Board, Combatting Drugs and Alcohol Partnership Board.
3. For the 'Disease Prevention and helping people to stay well' priority this is work that we are currently doing with the ICB and so will be picked up in these workstreams.

We will be asking these groups about their priorities and asking them to include the Health and Wellbeing Strategy priorities into their action plans.

2.6 The Public Health Team will work on the development of the new strategy over the summer and propose to bring a draft of the strategy to the Health and Wellbeing Board meeting on 21st September 2023

3 IMPACT ON VULNERABLE ADULTS AND CHILDREN

Not applicable

4 TRANSFORMATION/POLICY IMPLICATIONS

Not applicable

5 FINANCIAL IMPLICATIONS

Not applicable

6 PERSONNEL IMPLICATIONS

Not applicable

7 LEGAL IMPLICATIONS

7.1 The production of a Joint Health and Wellbeing Strategy has been a statutory requirement of upper tier local authorities and partners since the Health and Social Care Act (2012).

8 PROCUREMENT IMPLICATIONS

Not applicable

9 PROPERTY IMPLICATIONS

Not applicable

10 CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS

Not applicable

12 CUSTOMER IMPACT

Not applicable

13 WARD COUNCILLOR VIEWS

Click here and start typing

Non-Applicable Headings:	[List any of headings 4 to 13 that do not apply.]
Background Documents: (Access via Contact Officer)	Not applicable

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South East London Strategy and Joint Forward Plan and Developing the One Bromley 5 Year Strategy

30 March 2023

Our strategic planning context

**South East London
ICB Strategy**

**South East London
Joint Forward Plan**

**One Bromley
Strategy**

**Bromley Health and
Wellbeing Strategy**

**Making Bromley
Even Better 2021-31**

**Bromley Mental
Health and
Wellbeing Strategy
2020-25**

**Bromley CYP Plan
and Paediatric
Transformation**

**2023/24 Operating
Plan**

Two plans for HWBB review

South East London Strategy and Joint Forward Plan

One Bromley 5 Year Strategy

Incorporates Bromley's delivery plan of the South East London Joint Forward Plan

SEL Strategy published in March 2023. Now drafting Joint Forward Plan (JFP).

As a minimum, the JFP should describe how the ICB and its partners intend to arrange and/or provide NHS services to meet their population's physical and mental health needs. This should include the delivery of universal NHS commitments, address ICSs' four core purposes and meet legal requirements .

South East London Joint Forward Plan

HWBB Review planning



South East London Strategy and Joint Forward Plan

ICS Priorities



Become better at preventing ill health and helping people in south east London to live healthier lives



Ensuring parents, children and families receive the most effective support before and during childbirth and in early years



Ensuring that children and young people receive early and effective support for common mental health challenges



Ensuring that adults in south east London receive early and effective support for common mental health challenges

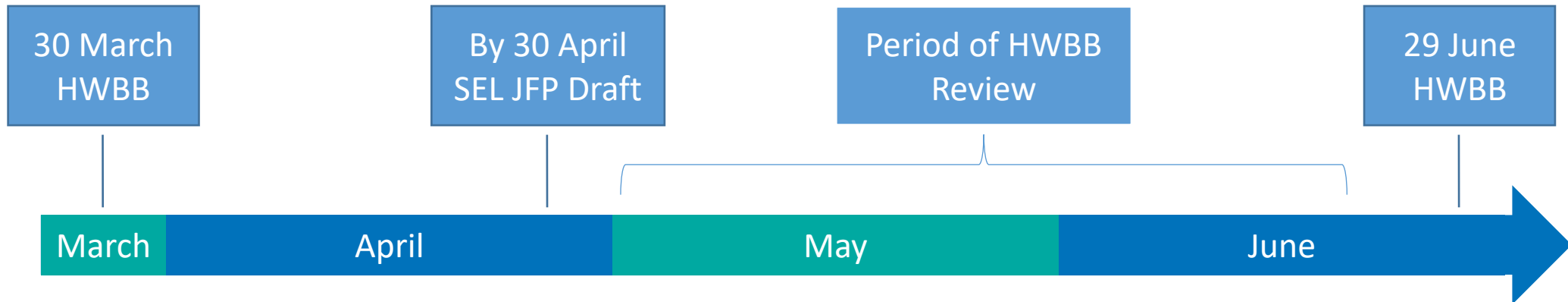


Ensuring that people, including those with continuing health needs, can conveniently access high quality primary care services

HWBB & South East London Joint Forward Plan

By the end of June 2023 HWBB is asked to:

- Confirm whether the draft takes proper account of the joint local health and wellbeing strategy
- Provide a statement for inclusion in the final Joint Forward Plan



One Bromley Strategy

HWBB Review and Input



Our draft One Bromley 5 Year Strategy

- A population health management approach
- Focus on prevention at scale and continuity of care and a more holistic approach to people's needs
- A bold vision for Bromley: delivery will involve significant changes in how agencies work together for our population
- Developed through discussion of One Bromley partners across 2022 and 2023 with support of the King's Fund

Strategy structure

- Bromley's population and health outcomes
- Priorities
- Programmes
- Projects
- Enablers
- Principles of how we will deliver together

Our draft strategy

Our population

- **Population expected to rise** to 352,000 by 2027. **Second oldest population in London** (17.7%) - expected to grow to 76,100 over 65s by 2032. Life expectancy is 81.3 for men and 85.1 for women, with up to 8.3 years of variation between wards. **People live on average 17.7 years in poor health.** Net growth in child population is in the 11-18 age group.
- The **ethnic minority population of Bromley is 19.8%** with Black African population the fastest growing BAME group. 19% of 0-4 year olds in Bromley are from BME groups compared to 5% of those post retirement age. Between 2017 and 2027 the overall **ethnic minority population is projected to rise by 23%.**
- Index of multiple deprivation shows Bromley's **east and north west has wards in the most deprived 10% and 20% nationally**, equally Bromley's **central belt and far south west have wards in the least deprived 10% and 20% nationally.**

Health outcomes for our population

- The main underlying causes of death in Bromley 2016-2020 were **cancer** (29.5% of deaths), **circulatory disease** (27.9%) and **respiratory disease** (13.9%).
- Latest indicators showing areas of potential concern for Bromley include:
 - **Diabetes diagnosis rate** 66.1% (worst 95% of LAs in England, below England & London av.)
 - **Breast cancer screening coverage** 64% (decreasing & getting worse, below England & London av.)
 - **Sexual health:** Rates of STI diagnosis have gone down from 2014 to 2018 the rate of diagnosis for Chlamydia, gonorrhoea and Syphilis have gone up.
 - **Recorded depression** in adults 3rd highest in London and rate increasing.
 - **Drugs:** High proportion of drug users with a co-occurring mental health condition
 - **Smoking** rates in young people in Bromley are higher than London and national rates and areas of highest deprivation are disproportionately affected.

Inequalities within our borough

- **Substance misuse:** Low levels of recorded drug use mask high rates of opiate and/or crack use in 15-24 year olds. Hospital admissions and drug-related mortality highest in most deprived wards.
- **Learning disabilities:** Shortfall in the number of people identified with learning disability who have had an annual health check.
- **Sexual health:** 50% of STIs in Bromley diagnosed in 15-25s; they plus men who have sex with men, and Black African/Caribbean ethnic groups have the highest rates of new STI. Majority of new STIs in 2017 were diagnosed in the more deprived wards.
- **Deprivation:** Life expectancy lower in more deprived wards, especially for men. More adults report poor health in Cray Valley & Mottingham and Chislehurst North.
- **CYP:** Teenage pregnancy rates highest in areas of greatest deprivation and where more children live in households with unemployment and financial issues. Children in north east & north west and Mottingham have the highest rates of obesity.

What we've heard from the public

- Strong support for moving more care into the community, including: ease of access at the One Bromley Health Hub, positive response to plans to develop a Bromley Town health and wellbeing centre, Beckenham UTC seen as essential service in this part of the borough; exceptional user feedback for Children's and Adult Hospitals at Home.
- Frustration regarding accessing primary care in general and getting information on waiting times, including at our UTCs.
- Mixed responses on use of technology for home monitoring: generally positive from those who have used it, but caution when considering establishing virtual wards.

Priorities for One Bromley 2023-2028



One Bromley culture and wider enablers

- One culture to help us deliver joined up services
- Asset based community approach with engaged population
- One Bromley organisations are tied to the wellbeing of the populations we serve
- Workforce, estate, digital tools (including analysis and artificial intelligence) and finance in place to deliver our priorities

Our draft strategy

1 Improve population health and wellbeing through prevention & personalised care

- Evidence driven population health management tackling inequalities, improving outcomes and formed around the needs of service users.
- Patients and carers supported in the management of long term conditions – including transitions between services.
- Influencing the strategy of partners on wider determinants of health

2 High quality care closer to home delivered through our neighbourhoods

- Primary care is on a sustainable footing and tackling unwarranted variation in patient outcomes, experience and access.
- Neighbourhood teams based on geographic footprints provide seamless services across health, social care and third sector services.
- Improving access through moving services into the community and into people's home by removing services from hospitals and delivering new approaches for mental health care and children and young people.

3 Good access to urgent and unscheduled care and support to meet people's needs

- Residents have and understand how to use same day and emergency care across Bromley spanning physical and mental health, social and third sector care.

1) Coherent system-wide approach to integrated urgent care in a more sustainable model and easier to navigate for professionals and all service users

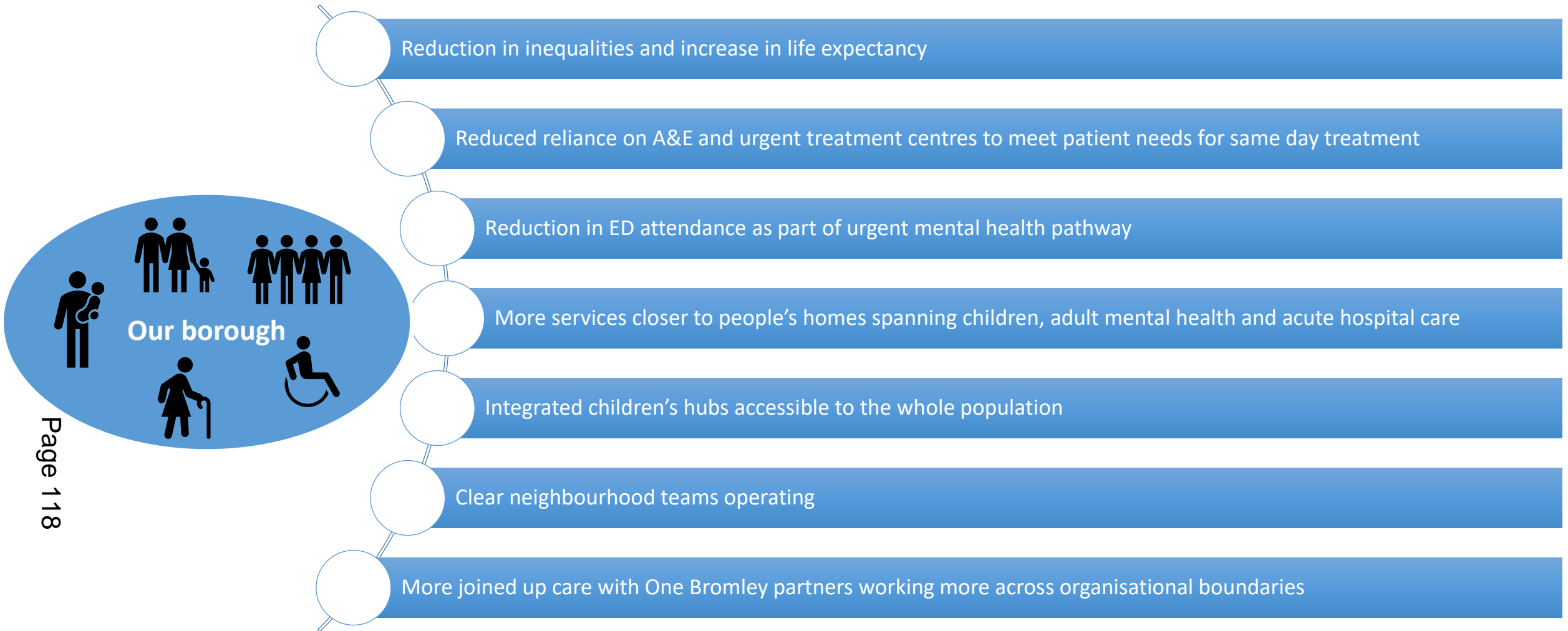
2) Evolve neighbourhood teams into integrated geographic footprints to meet health and prevention needs of the local population: spanning primary, community and social care, with third sector and specialist physical and mental health

3) Deliver evidence-driven population analysis to support teams in targeting prevention and improving population health outcomes

4) Support primary care sustainability and access

5) Implement our care closer to home programmes across Children's and Young People, Community Mental Health Transformation, and Hospital at Home.

How will things be different in 5 years' time...?



Question for the Health and Wellbeing Board

Given the health and wellbeing needs assessments for Bromley, and the HWBB Strategy:

Welcome your comments on approach and priorities and health outcomes

Welcome discussion today and any further comments back to Angel.Bhan@selondonics.nhs.uk by close, Friday 14 April 2023



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WORKING TOGETHER TO IMPROVE HEALTH AND CARE IN BROMLEY

Cancer Screening

Health and Well Being Board
30th March 2023

Dr Moizza Mansoor
GP Registrar

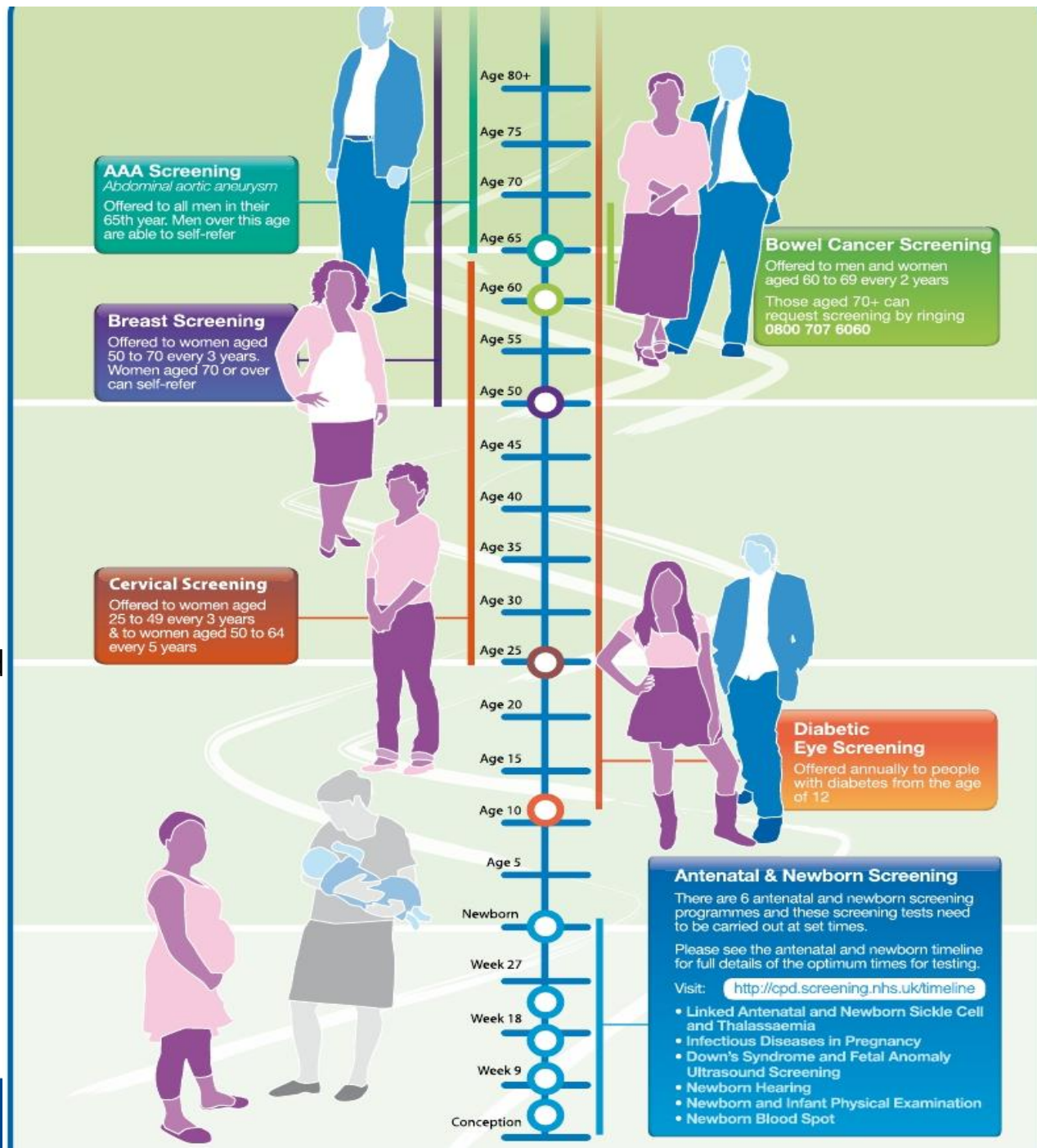
Definition

Screening involves using simple tests across a healthy population to identify those individuals who have a disease, but do not yet have symptoms.

Aim is to identify individuals with abnormalities suggestive of a disease and to refer them promptly for diagnosis and treatment.

NHS Screening Timeline

www.screening.nhs.uk/england



Antenatal & Newborn Screening

There are 6 antenatal and newborn screening programmes and these screening tests need to be carried out at set times.

Please see the antenatal and newborn timeline for full details of the optimum times for testing.

Visit: <http://cpd.screening.nhs.uk/timeline>

- Linked Antenatal and Newborn Sickle Cell and Thalassaemia
- Infectious Diseases in Pregnancy
- Down's Syndrome and Fetal Anomaly Ultrasound Screening
- Newborn Hearing
- Newborn and Infant Physical Examination
- Newborn Blood Spot

NHS Cancer screening programmes

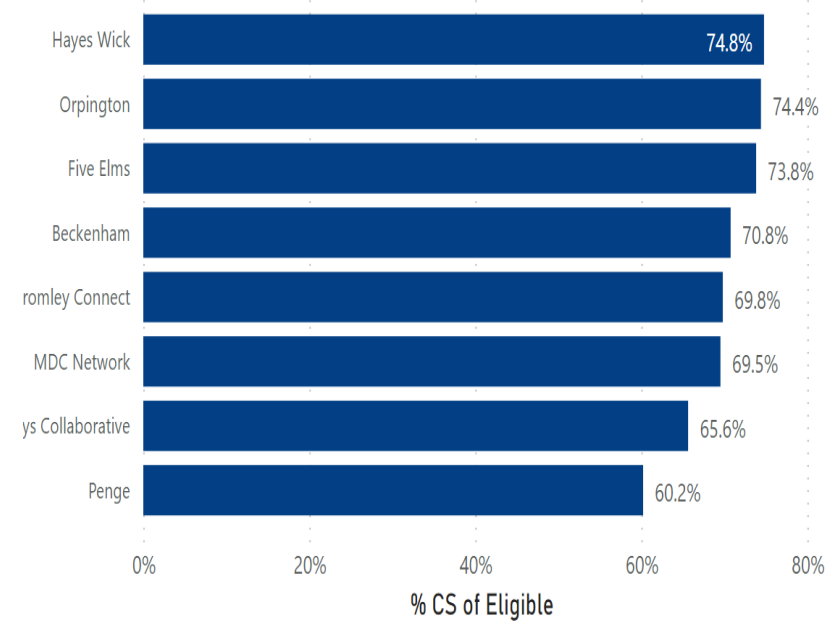
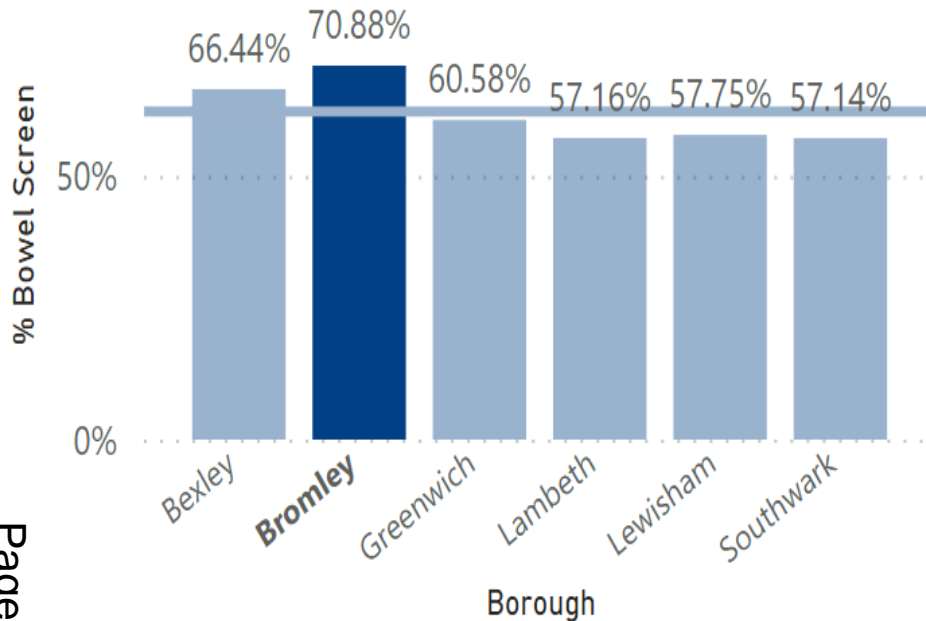
- **Bowel screening** is offered every 2 years to everyone aged 60 to 74 (inclusive). The programme is currently expanding to also include people aged 50 to 59 years. This is happening gradually over 4 years and started in April 2021.
- **Breast screening** is offered to female patients aged 50 to 70 (inclusive).
- **Cervical screening** is offered to all women and people with a cervix aged 25 to 64 to check the health of cells in the cervix. It is offered every 3 years for those aged 25 to 49, and every 5 years from the ages of 50 to 64.

Key terms

Screening Coverage is the percentage of people in the population who are eligible for screening at a particular point in time, who have had a test with a recorded result at least once within the screening round.

Page 125 **Screening Uptake** is the proportion of those invited for screening who attended for a test within 6 months (183 days) of their invitation date.

Bromley Bowel Cancer Screening



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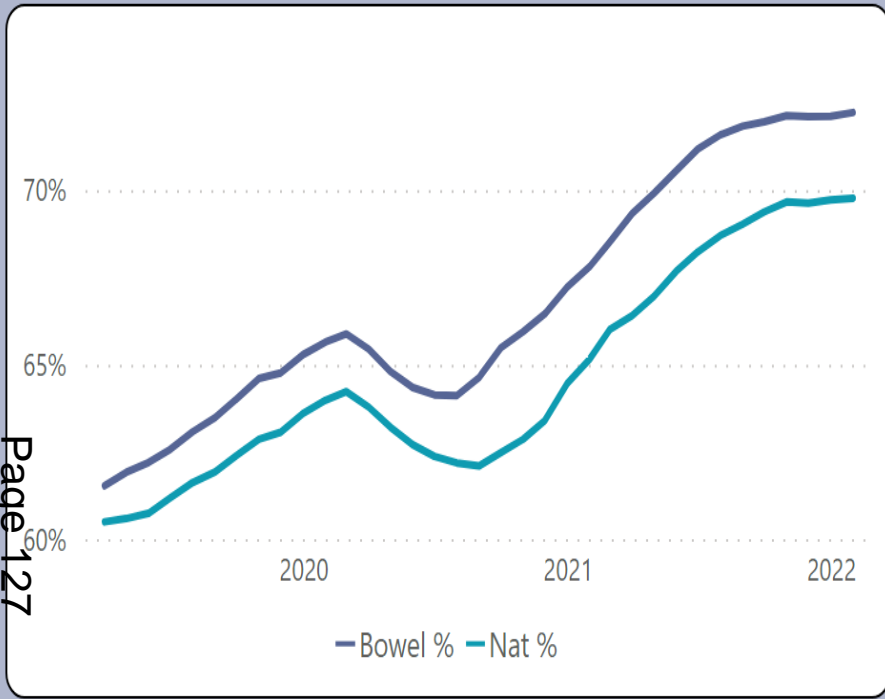
As of 01/02/23, out of **56,558** patients eligible for bowel screening, **40,086 (70.88%)** have been screened within the last 2.5 years.

The operational standard for this is **60%**.

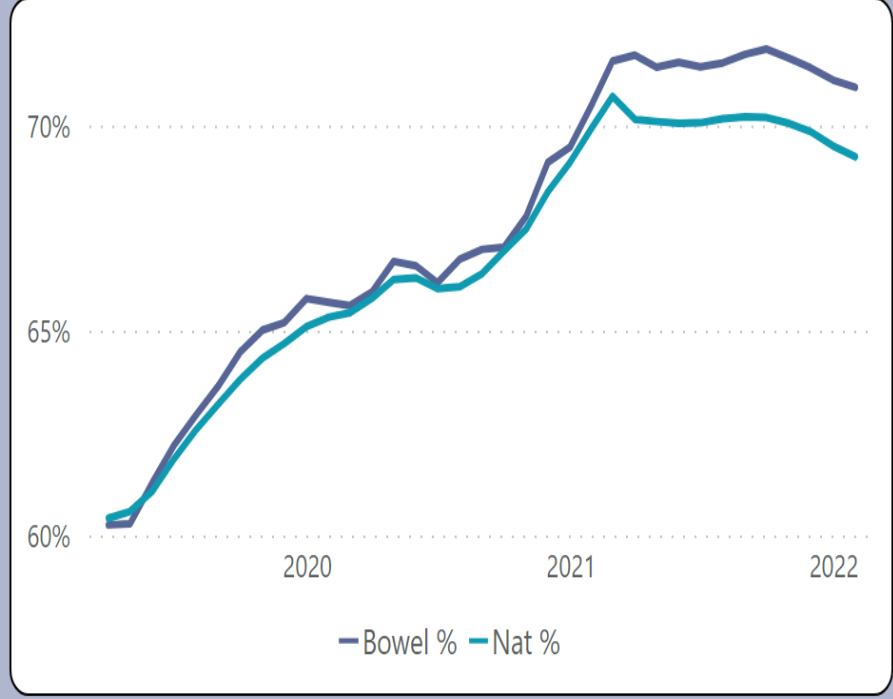


Bromley Bowel Cancer Screening 2.5 yr Coverage

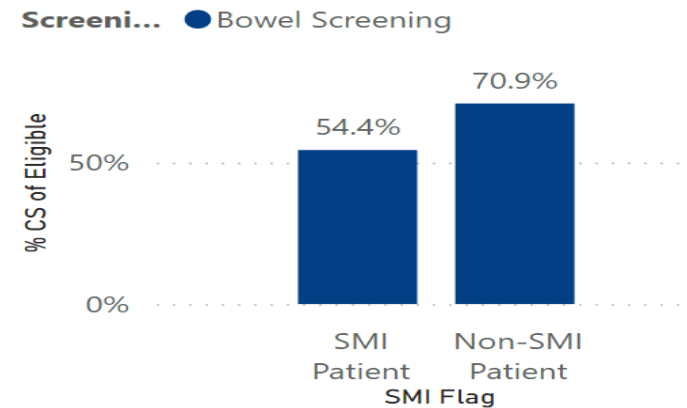
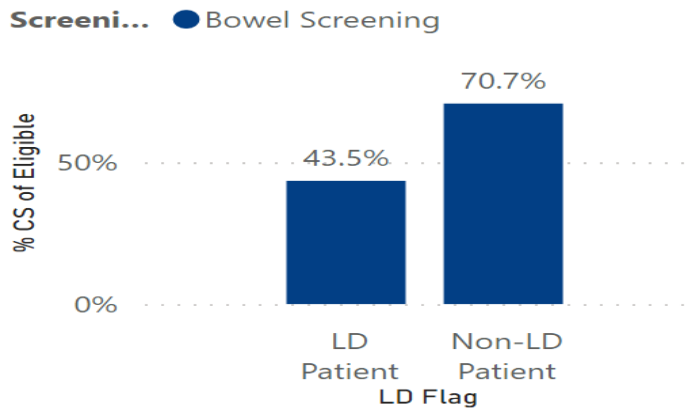
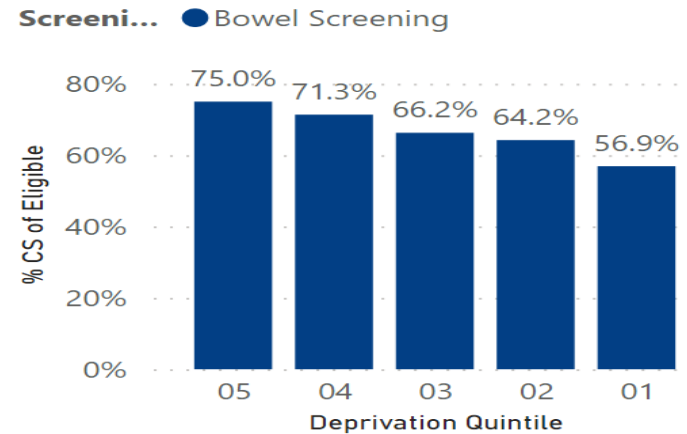
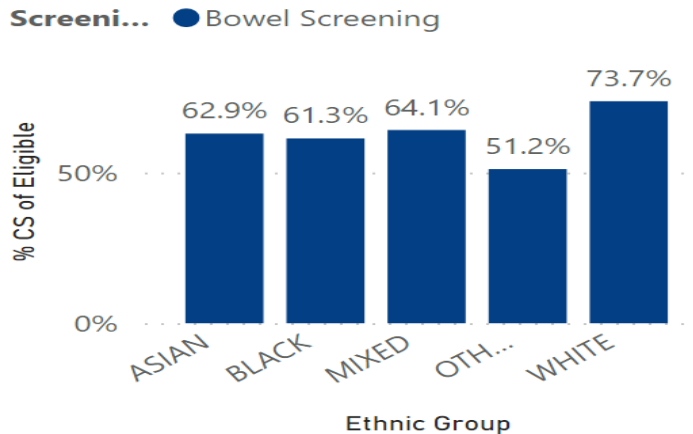
Screening - 2.5yr coverage % (60-74)



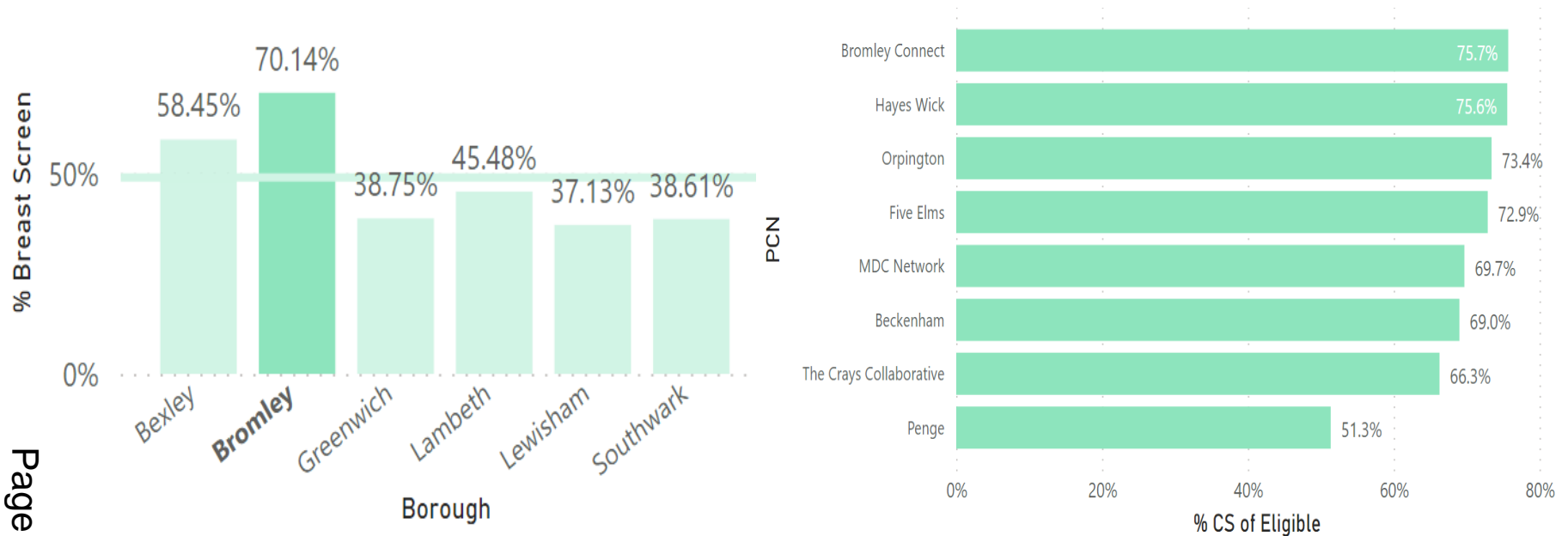
Screening - Uptake % (60-74)



Bromley Bowel Cancer Screening Demographics



Bromley Breast Cancer Screening



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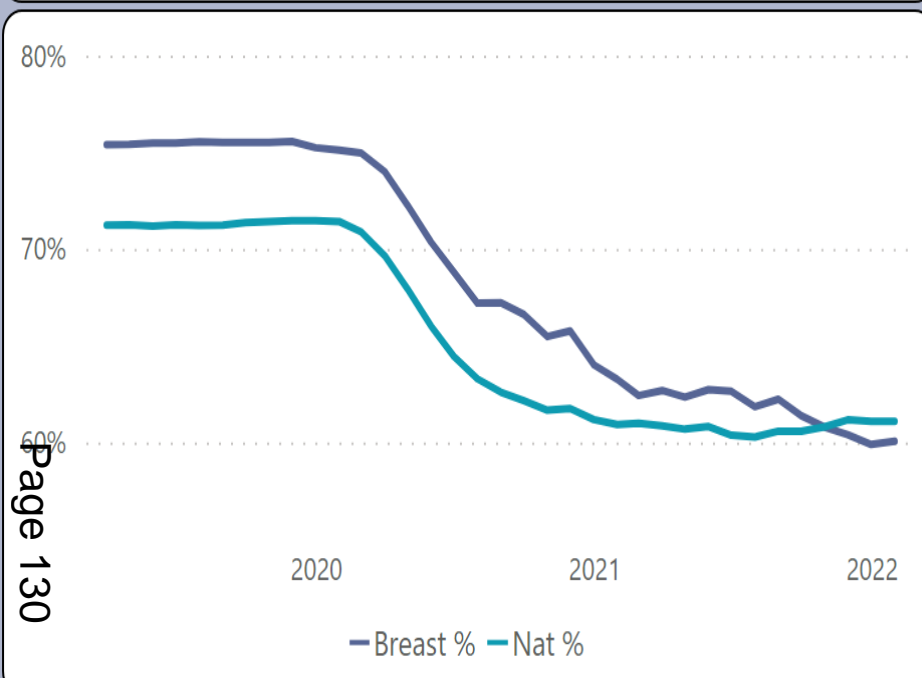
As of 01/02/23, out of **37,703** patients eligible for breast screening, **26,443 (70.14%)** have been screened within the last 3.5 years.

The operational standard for this is **80%**.

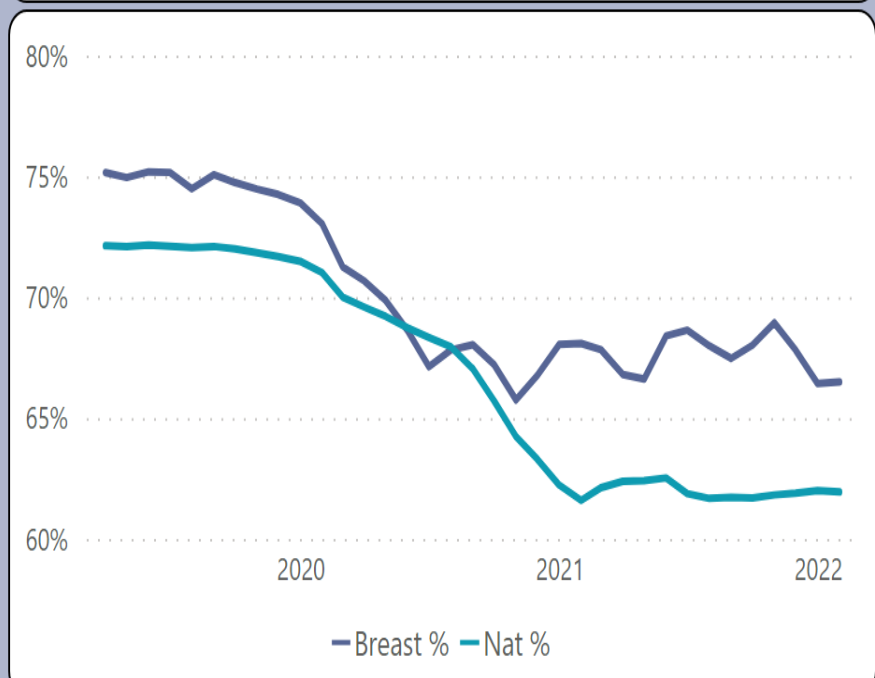


Bromley Breast Cancer Screening 2.5 yr Coverage

Screening - 36 month coverage % (50-70)

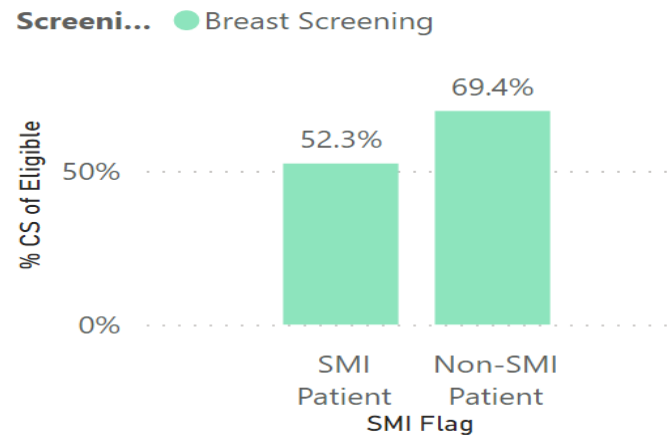
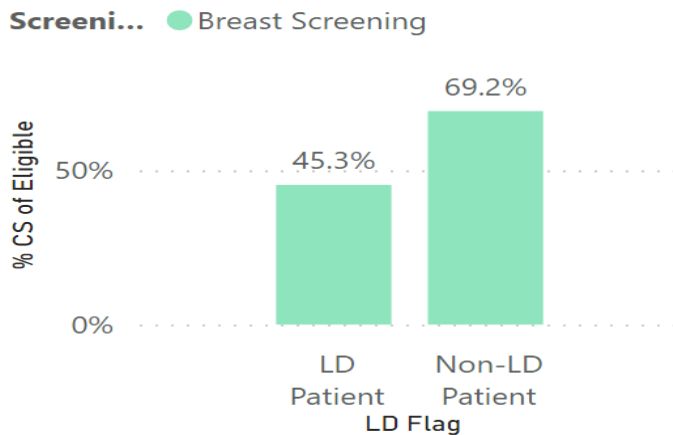
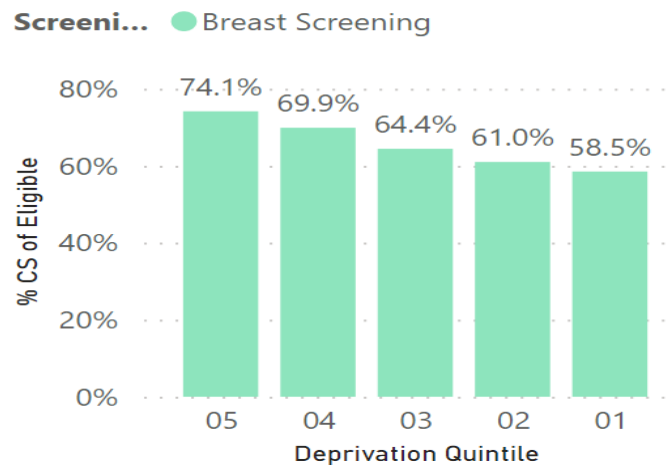
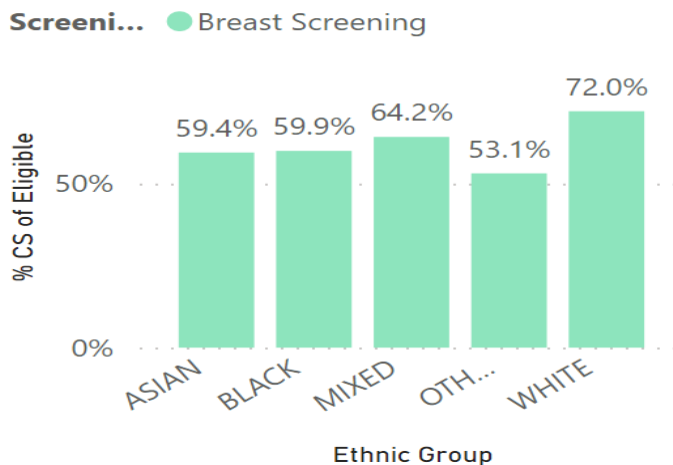


Screening - Uptake % (50-70)

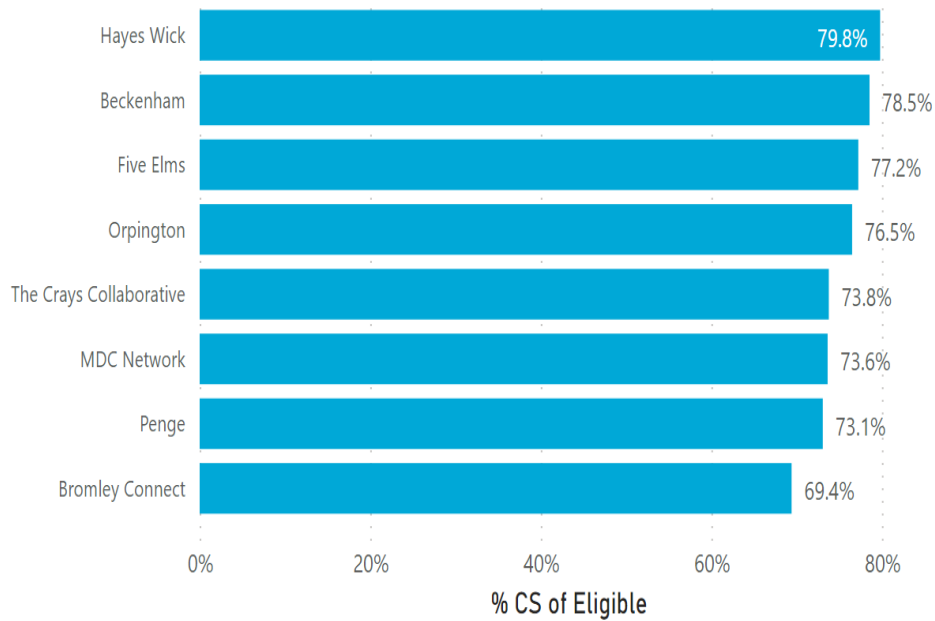
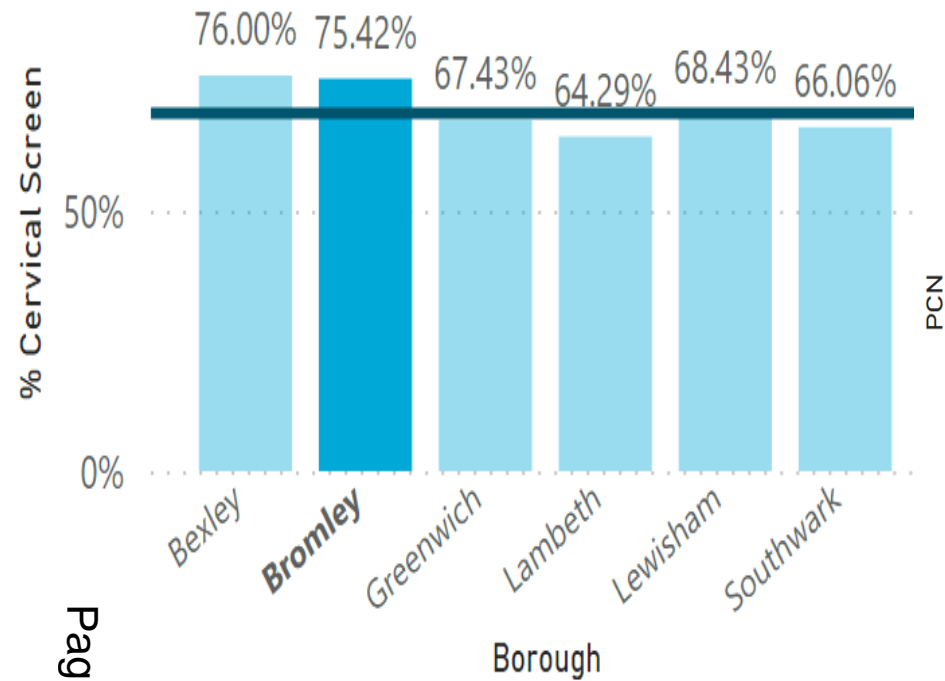


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Bromley Breast Cancer Screening Demographics



Bromley Cervical Cancer Screening



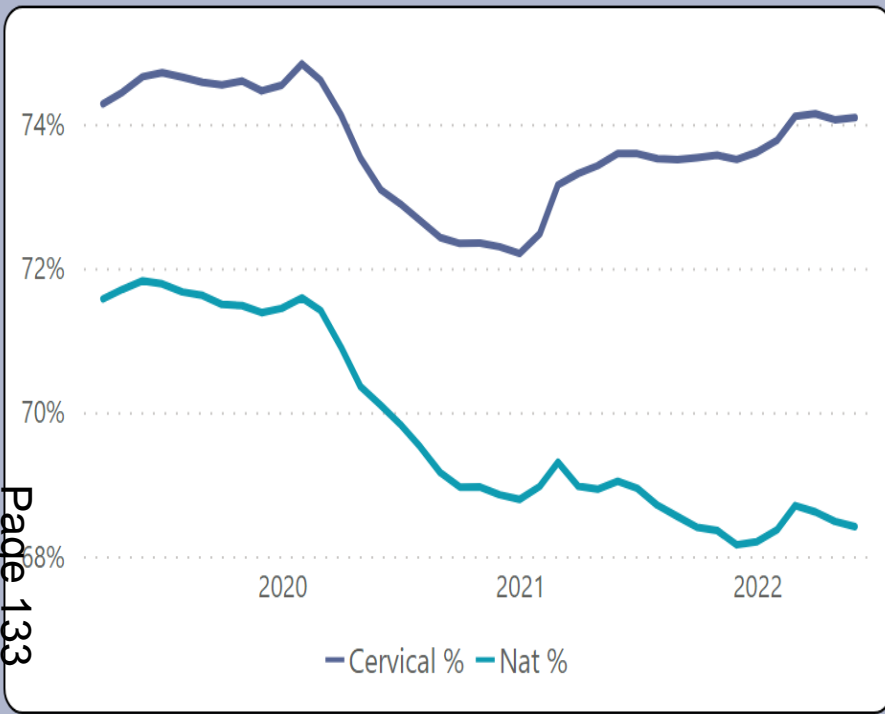
As of 01/02/23, out of 92,601 patients eligible for bowel screening, 69,838 **(75.42%)** have been screened within the last 3.5 (Ages 25-49) and 5.5 (Ages 50-64) years.

The operational standard for this is **80%**.

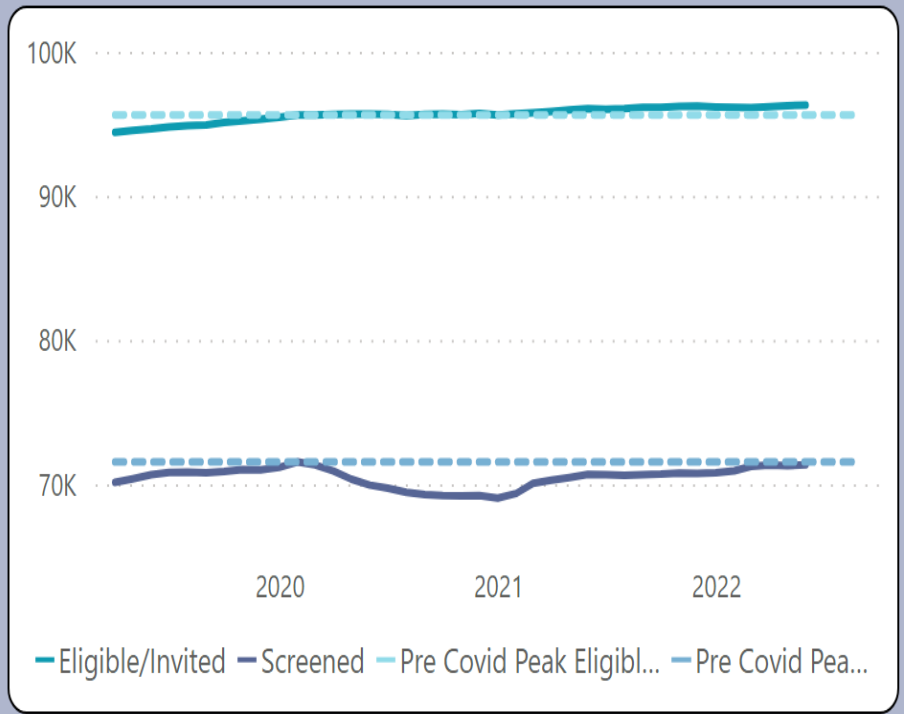


Bromley Cervical Cancer Screening 2.5yr Coverage

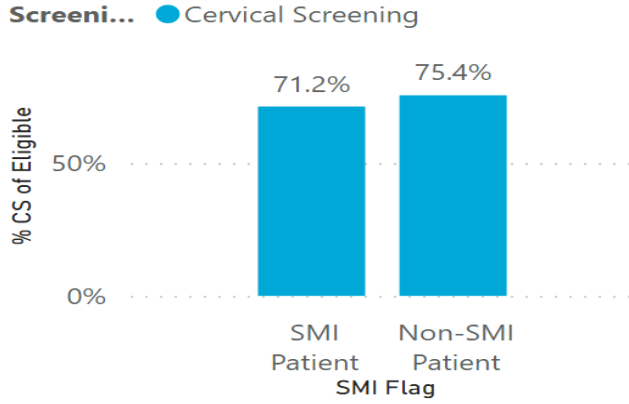
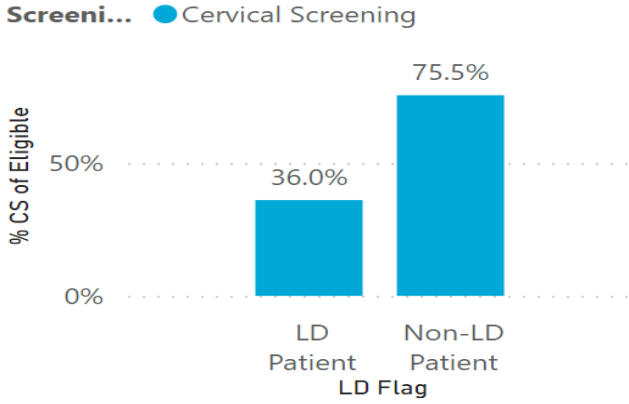
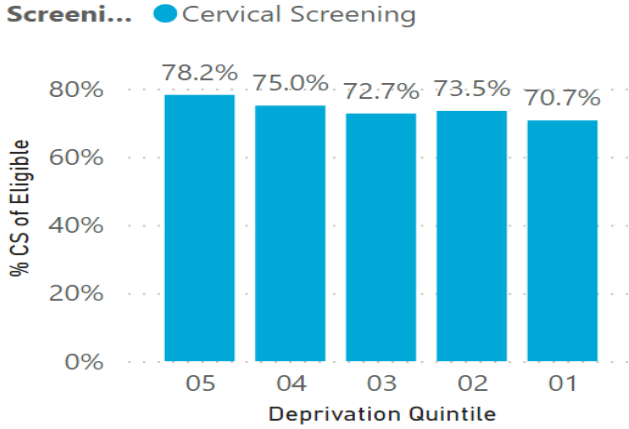
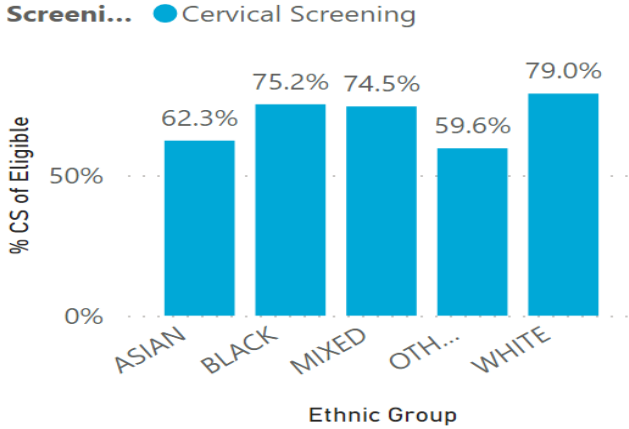
Screening - 3.5/5.5-year coverage % (25-64)



Screening - 3.5/5.5-year coverage Patient Nums (25-64)



Bromley Cervical Cancer Screening Demographics



Potential Interventions to improve screening uptake 1

For General Practice

- Regularly maintain the practice list and patient contact details. If cancer screening is overdue, flag it.
- Promote cancer screening during clinical consultations, and interactions between practice staff & patients.
- Create a regular monthly audit process in the practice to check on number of non-responders and send reminders to them.

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GP endorsement and enhanced letters in engaging with patients and increasing uptake in non-responders (central screening teams)

- Encourage and record discussions of screening during annual LD and SMI reviews. Customise communication approach.



Potential Interventions to improve screening uptake 2

Communications and Engagement

- Using information in a range of languages for people where English is not their first language.
- Targetted campaigns eg national bowel cancer week
- Encourage and record discussions of screening during annual LD and SMI reviews. Customise communication approach.
- Local promotional material and advertisement (such as social media, New shopper and buses).
- Promotion of a local patient survey to obtain patient feedback.

Potential Interventions to improve screening uptake 3

System wide approaches

- Work with Public Health to produce a health equity report to look at specific areas in the borough where uptake is low or a high number of non-responders/declines to support a target approach in these areas (being undertaken for cervical screening)
- Engage with local community groups to support service in increasing awareness of the screening
- Engage with other primary care settings to promote screening (eg pharmacies)

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Health and Wellbeing Board Chairman's Annual Report 2022/23

Chairman: Cllr. Dr. David Jefferys
Vice-Chairman: Cllr. Robert Evans

The Health and Wellbeing Board met four times in 2022/23. The September meeting was cancelled following the sad passing of Her Majesty Queen Elizabeth II.

The Board discussed a wide range of issues during the Civic Year. These discussions covered four themes, namely developing, and monitoring the Winter Preparedness Plan (this was anticipated to be a very difficult winter with predictions of a high incidence of influenza infections and the impact of Covid-19 variants); reviewing the health and wellbeing consequences of the pandemic; working on health promotion and prevention initiatives; and working on the new 5-year JSNA Plan for Bromley. This work was undertaken in addition to fulfilling the statutory responsibilities of Board.

The areas of work that have been explored include:

June 2022:

- Update on Children and Young People's Mental Health
- Public Health Management of COVID-19 Pandemic (including discussion on lessons learnt from the pandemic)
- Substance Misuse Needs Assessment
- Review of Current Health & Wellbeing Strategy Priorities
- Promoting Brain Health – proposal for a Task and Finish group

December 2022:

- Health and Wellbeing Strategy: JSNA Priority Area - Presentation from the Falls Service
- Bromley Winter Plan 2022/23 Update
- Additional Hospital Discharge Funds 2022/23
- Learning from the COVID-19 Vaccination Programme
- Integrated Commissioning Board Update
- Bromley Safeguarding Children Partnership Annual Report
- Innovations from the ICB/CCG
- Annual Public Health Report – “The Calendar of Bugs 2023”

February 2023:

- Health and Wellbeing Boards - Guidance November 2022
- Update on Children and Young People's Mental Health
- Bromley Safeguarding Adults Board Annual Report 2021/22
- Update on the New Health And Wellbeing Strategy
- Screening Update

March 2023:

- Health and Wellbeing Strategy update
- JSNA Update
- Update on the Bromley Mental Health and Wellbeing Strategy
- Presentation of the Children's JSNA
- HIV infections monitoring

- Update on Post-COVID syndrome service
- Integrated Commissioning Board Update
- Vaping in Children
- Suicide Prevention Workstream: Update and Plans
- Screening Update
- Combating Drugs Partnership
- Update on the Brain Health Task and Finish Group

Development of the new JSNA

Prior to the December meeting of the HWB, a 'Workshop on the new Health and Wellbeing Strategy' was held. HWB Members, and wider partners received an initial presentation on the new Health and Wellbeing Strategy following which attendees were allocated to smaller breakout groups to hold further discussions. This output was taken forward in discussions at the February and March meetings. The Board has paid close attention to the health and prevention priorities developed by the SE London ICB. The Bromley HWB has sought to appropriately complement and implement the ICB strategy recognising the particular needs and circumstances in our Borough and communities.

Throughout the year the HWB were also provided with updates on the Better Care Fund and Improved Better Care Fund Performance and Healthwatch Bromley - Patient Experience Reports. The Board was also pleased to receive and agree the publication of the annual reports from the Bromley Safeguarding Children Partnership and the Bromley Safeguarding Adult Board. The Board commented on the great work undertaken by the two Boards and the clarity of their new style annual reports.

There has been a continued emphasis on partnership working within the Health and Wellbeing Board which has representation from a range of key partners including the Local Authority, Bromley Integrated Care System, Bromley Safeguarding Adults Board, Bromley Safeguarding Children Board and Bromley Voluntary Sector.

The Chairman attended the pan London HWB Chairs meetings organised by London Councils (these were held monthly in the first half of the Civic Year) and several ad hoc meetings called by the London Councils Group. The Chairman also represented the HWB at the meetings of the Adult Safeguarding Board and the Bromley "inter chairs meeting".

I would like to thank the commitment and hard work of Board Members, key partners and Local Authority Officers in continuing to support and provide challenge to this wide-ranging work programme which is key to improving the quality of health and wellbeing provision across Bromley.

Councillor Dr. David Jefferys
Chairman, Health and Wellbeing Board

Report No.
CSD23044

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: HEALTH AND WELLBEING BOARD

Date: Thursday 30th March 2023

Decision Type: Non-Urgent Non-Executive Non-Key

Title: MATTERS OUTSTANDING AND WORK PROGRAMME

Contact Officer: Jo Partridge, Democratic Services Officer
Tel: 020 8461 7694 E-mail: Joanne.Partridge@bromley.gov.uk

Chief Officer: Director of Corporate Services and Governance

Ward: (All Wards);

1. Reason for decision/report and options

- 1.1 The Health and Wellbeing Board is asked to review its work programme and to consider progress on matters outstanding from previous meetings of the Board.

2. **RECOMMENDATIONS**

2.1 **The Health and Wellbeing Board is requested to:**

- 1) **Consider matters outstanding from previous meetings; and,**
- 2) **Review its work programme, indicating any changes required.**

Impact on Vulnerable Adults and Children

1. Summary of Impact: Not Applicable
-

Transformation Policy

1. Policy Status: Not Applicable
 2. Making Bromley Even Better Priority (delete as appropriate): Not Applicable:
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: £336k
 5. Source of funding: Revenue Budget
-

Personnel

1. Number of staff (current and additional): 6
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: None:
 2. Call-in: Not Applicable: Non-Executive reports are not subject to call-in
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Property

1. Summary of Property Implications: Not Applicable
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications: Not Applicable
-

Customer Impact

1. Estimated number of users or customers (current and projected): This report is intended primarily for the benefit of Committee Members.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

3. COMMENTARY

- 3.1 The Matters Outstanding table updates Board Members on “live” matters arising from previous meetings and is attached at **Appendix 1**.
- 3.2 The Health and Wellbeing Board’s Work Programme is attached at **Appendix 2**. In approving the Work Programme, Board Members will need to be satisfied that priority issues are being addressed in line with the priorities set out in the Board’s Health and Wellbeing Strategy and Terms of Reference which were approved by Council in April 2013.

Non-Applicable Headings:	Impact on Vulnerable Adults and Children, Transformation/Policy Implications, Financial Implications, Personnel Implications, Legal Implications, Procurement Implications, Property Implications, Carbon Reduction/Social Value Implications, Customer Impact, Ward Councillor Views
Background Documents: (Access via Contact Officer)	Minutes of previous meeting

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Health and Wellbeing Board: Matters Outstanding / Action List

Agenda Item	Action	Officer	Update	Status
Minute 26 24th September 2020 Bromley Health and Wellbeing Centre Update	A copy of the Bromley Health and Wellbeing Centre outline business case to be circulated to Board Members.	One Bromley Programme Director – SEL ICS	The Outline Business Case (OBC) has been updated to reflect the new arrangements in respect of the Adventure Kingdom site is currently going through the assurance process with South East London ICB and NHS England. Comments have been received from the respective assurance teams and the OBC has been updated to reflect these before going to the ICB for final approval. Once approved, this will be shared with the members of the HWB.	Open
Minute 46 31st March 2022 Integrated Commissioning Board Update	An update on the proposal for a new special free school in Bromley to be circulated to Board Members following the meeting.	Director of Education	DfE Feasibility underway. Site surveys due to start shortly in advance of DfE appointing contractor to develop planning application.	Ongoing
Minute 33 2nd February 2023 Minutes of the Meeting of the Health and Wellbeing Board Held on 8th December 2022	Information providing an overall picture of the number of falls and an understanding of data on falls admissions and number of ambulance call outs to be circulated to Board Members once collated.	Director of Public Health		In progress
Minute 35 2nd February 2023 Update on Children and Young People's Mental Health	Information regarding waiting times for ASD and ADHD to be provided to Board Members following the meeting.	Associate Director – Integrated Commissioning, SEL ICB (Bromley)		In progress

HEALTH AND WELLBEING BOARD WORK PROGRAMME

30 th March 2023	
Update on the Bromley Mental Health and Wellbeing Strategy	James Postgate / Sean Rafferty
Update on Post-COVID syndrome service	Rachel Perry / Lindsay Pyne / Ellen Shiner / Dr Zia Buckhoree
JSNA Update	Dr Nada Lemic / Chloe Todd
Presentation of the Children's JSNA	Dr Jenny Selway
Health and Wellbeing Strategy update (including an update on the SEL ICS Strategy)	Dr Nada Lemic / Chloe Todd / Dr Angela Bhan
Screening Update	Dr Angela Bhan / Dr Moizza Mansoor
Public Health – Surveillance Update (verbal update)	Dr Nada Lemic
Update on the Brain Health Task and Finish Group	Chairman
Chairman's Annual Report	Chairman
Work Programme and Matters Outstanding	Democratic Services
<i>Information Briefing: Better Care Fund and Improved Better Care Fund Performance update</i>	<i>Ola Akinlade</i>
<i>Information Briefing: Integrated Commissioning Board Update</i>	<i>Sean Rafferty</i>
<i>Information Briefing: Vaping in Children</i>	<i>Dr Jenny Selway</i>

PROPOSED WORK PROGRAMME 2023/24

29 th June 2023	
Health and Wellbeing Strategy: JSNA Priority Areas	
Alcohol Misuse Needs Assessment	Jonathan Walker / Mimi Morris-Cotterill / Finola O'Driscoll
HIV Infections Monitoring	Mimi Morris-Cotterill / Stephanie Sawyer
Suicide Prevention Workstream: Update and Plans	Chloe Todd
Combating Drugs Partnership	Dr Nada Lemic / Mimi Morris-Cotterill
<i>Information Briefing: Better Care Fund and Improved Better Care Fund Performance update</i>	<i>Ola Akinlade</i>
<i>Information Briefing: Healthwatch Bromley Patient Experience Report</i>	<i>Charlotte Bradford</i>

Work Programme and Matters Outstanding	Democratic Services
21st September 2023	
Health and Wellbeing Strategy: JSNA Priority Areas	Dr Nada Lemic
Health and Wellbeing Strategy	Dr Nada Lemic / Chloe Todd
Integrated Commissioning Board Update	Sean Rafferty
<i>Information Briefing: Better Care Fund and Improved Better Care Fund Performance update</i>	Ola Akinlade
<i>Information Briefing: Healthwatch Bromley Patient Experience Report</i>	Charlotte Bradford
Work Programme and Matters Outstanding	Democratic Services
16th November 2023	
Update on Children and Young People's Mental Health	James Postgate / Richard Baldwin
Bromley Safeguarding Children Partnership Annual Report	Jim Gamble / Joanna Gambhir / Kerry Davies
Bromley Safeguarding Adult Board Annual Report	Bulent Djouma / Teresa Bell
<i>Information Briefing: Healthwatch Bromley Patient Experience Report</i>	Charlotte Bradford
Work Programme and Matters Outstanding	Democratic Services
1st February 2024	
Health and Wellbeing Strategy: JSNA Priority Areas	
<i>Information Briefing: Healthwatch Bromley Patient Experience Report</i>	Charlotte Bradford
Work Programme and Matters Outstanding	Democratic Services
18th April 2024	
Health and Wellbeing Strategy: JSNA Priority Areas	
Integrated Commissioning Board Update	Sean Rafferty
<i>Information Briefing: Better Care Fund and Improved Better Care Fund Performance update</i>	Ola Akinlade
<i>Information Briefing: Healthwatch Bromley Patient Experience Report</i>	Charlotte Bradford
Work Programme and Matters Outstanding	Democratic Services

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