APPENDIX 1 DRAFT 2013/14 Annual Review of the Health and Wellbeing Strategy Priorities

Priority Area	By 2015 we will have achieved:	Summarise Main Achievements 2012 – 14	RAG Rating	What do we intend to do 2014/15?
Diabetes	Halt rise in incidence and prevalence; improvement of 10% in identifying those at risk; Reduction in diabetes complications & 10% reduction in mortality for people aged under 75yrs; Improved medicine optimisation;	Bromley CCG has commissioned new Diabetes Service across primary, community and secondary care to be led by Bromley Healthcare. Training programme in progress to enable staff to implement new service.	Amber	 The new Diabetes Service to be fully implemented by March 2015 it aims to improve all aspects of Diabetes management. New service to include: Most patients will continue to be managed in Primary Care Some GP Practices will also offer additional Advanced Care Complex patients will continue to be managed in specialist clinics - more accessible across borough. Improvements made to hospital care Whole service will have an integrated team
Dia	patients with diabetes with consequent reduction in hospital stay; 20% improvement in Glycosylated Haemoglobin	NICE guidelines published for 'Prevention of Type 2 Diabetes'. Providing Bromley with guidance of best practice to inform baseline audit planning	Amber	approach with improved links and joint working across all Providers Assessment of Bromley performance against NICE guidelines recommendations
	levels; Improved support for children with diabetes and their parents;	Prevention of Diabetes project in progress Funding secured. Audit commenced to identification and management of those at high risk.	Amber	Utilise audit results to identify improvements to be made in both identification and management of people identified at high risk of Diabetes. Utilise this information to improve patient's pathway, target education and inform commissioning.
	Better blood pressure technique across the borough;	Having hypertension as a priority within the Health & Wellbeing strategy has raised the profile of the importance of blood pressure;	Green	To identify all opportunities to raise awareness of blood pressure at events.
Hypertension	Improved communication between organisations through patients; Increased identification of people who may have hypertension;	Re-energised CVD Working Group into CVD Strategy group with all stakeholders meeting quarterly. CVD Strategy Group developed and monitors the Hypertension Action Plan where one of the domains was a Baseline Assessment. This was completed by each organisation resulting in the development of the Hypertension Action Group (HAG) where - <i>Improving Blood</i> <i>Pressure Together</i> focuses on getting the basics right. Two initial actions detailed below:	Amber	 Bromley Hypertension Action Group will focus on: Deliver and review actions to improve blood pressure technique and early identification by: Agreement of Bromley Standard for blood pressure technique with a training programme to underpin Printing and distribution of patient BP results cards Evaluation of uptake and use of BP results cards and of training programme.

Priority Area	By 2015 we will have achieved:	Summarise Main Achievements 2012 – 14	RAG Rating	What do we intend to do 2014/15?
	Improve the recorded prevalence of hypertension; Increased blood pressure control from 74% to 79%; Reduction in hypertension complications & maintaining downward trend for stroke	Blood pressure technique measurement underpins subsequent investigation, diagnosis and treatment. It is therefore essential that wherever possible the best technique is used and should be done to the same standard. Each organisation to agree and implement the Bromley standard for blood pressure technique.	Amber	Undertake a patient survey into perceptions and understanding of blood pressure, which will help to underpin future Actions
	mortality;	 Early identification communication of blood pressure results across and between organisations is key. Therefore having a simple BP results card given to any patient who has a blood pressure recording of >140/90mmHg indicating they should make a routine appointment at their GP practice for repeat measurement. Each organisation to agree and use the BP results cards wherever blood pressure is taken. 	Amber	Monitor any change in prevalence Monitor blood pressure control Monitor complications
		In 2012-2013 there was a pilot across 21 practices using home and 24hour blood pressure monitoring to diagnose hypertension. This was evaluated in 2013-2014 and the learning shared across the borough.	Green	
		The Clinical Commissioning Group are trialling a Telehealth 'Flo' system for patients to manage their blood pressure. Telehealth is the use of electronic information and technology to help people manage their health independently whilst being monitored remotely by health professionals	Green	

Priority Area	By 2015 we will have achieved:	Summarise Main Achievements 2012 – 14	RAG Rating	What do we intend to do 2014/15?
	Reduce prevalence of obesity in adults from 21% to 18%. Children (reception) from 8% to 7% and year 6 from 17% to 13%; Increase the: ~ capacity of weight loss service to cover 3% of the obese population in 2012/13; ~ efficiency of weight loss service from 11% to 30% ~ cost effectiveness of the	 Adults BMI recording has increased from 29% in 2009, to 55% in 2013. Adults Tier 2 service has been reviewed and recommissioned, with increased capacity – covering 2.6% of the obese population, increased efficiency from 11% to >40% and increased cost effectiveness by 82%. 2014/15 will focus on designing and implementing the Tier 3 element of the obesity pathway. 	Amber	Work continues in establishing a pathway for the management of obese adults. Tier 1 – Commitment to engage with universal services including national campaigns such as Change 4 Life and Smart Swaps. Tier 2 – Now established. Efficient and effective programme in place. Under continuous review. Tier 3 – Priority to establish specialised intervention adhering to NICE guidance to reduce the need for Tier 4 services (bariatric surgery). Work continues to capitalise on partnership opportunities to create an environment in Bromley which will support achievement of healthy weight.
Obesity	weight loss service by reducing the average cost per person by 50% (compared to 2011) ~ HENRY increase the number of trained health visiting staff from 50% (2011/12) to 90% in 2015; Increase adult participation in physical activity & sport;	 Children and Young People: Healthy Schools Bromley now in place and 33 schools signed up, with two already achieving Bronze award. HENRY training of Health Visiting staff on target. 	Amber	 There are also key workstreams to address the increasing trend of childhood obesity: Reducing prevalence of obesity in children (reception) from 8% to 7% and year 6 from 17% to 13%. Focus on early years and children to ensure more emphasis on prevention with providers and partners; Set up a Bromley Healthy Schools programme to support schools in obesity prevention Ensure the environment plays a key role in helping children to stay healthy.
	Maintain percentage of physically active adults (achieving at least 150minutes per week) 62% target (PHOF 2013); Decrease number of physically inactive adults 24.1% by 1% annually (PHOF 2013);	Adults Exercise: Continue working with Pro- Active Bromley to increase physical activity participation. Unfortunately, national measure has changed and not possible to assess % improvement. Public Health Programme Manager chairs the Adult's and Older People's subgroup, this role makes the link between the latest physical activity developments and relevant healthy eating programmes to maximise the impact on healthy lifestyles.	Amber	 Maintain the percentage of physically active adults (achieving at least 150minutes per week) 62.1% (Public Health Outcomes Framework 2013). Decrease the number of physically inactive adults 24.1% by 1% annually (Public Health Outcomes Framework 2013).
	Children (maintain 3hrs of physical participation activity in children aged 5-16 years at 53% and aim to increase by 1% annually;	Children and Young People: Members of the healthy weight programme board are also represented on the Children and Young People's Pro-Active subgroup.	Amber	 Maintain 3hrs of physical participation activity in children aged 5-16 years at 53% and aim to increase by 1% annually

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	Increased access to NICE approved psychological therapies to 15% of the pop with depression/ mild mental health problems;	Increase of coverage from 5% to 9% (3000 cases) of Bromley Population.	Green	From 2014-2015 the Bromley working for wellbeing service will cover 9% of the population and will work towards achieving 15% coverage by 2015-2016.
al health)	Increased number of patients entering treatment with reduced waiting times; An improvement of the mental and emotional wellbeing of the population;	The Bromley working for Wellbeing Service has been identified as a service with very good recovery rates compared to other areas in both London and England, however, referrals into the service need to be increased.	Green	Increased investment agreed from BCCG to reach increased service for 14/15 and 15/16. The Bromley working for Wellbeing Service needs to increase number of referrals. A plan has been developed by BCCG to address this issue and increase referrals in 2014-2015.
ety (menta	Evidence clients remaining in or returning to employment;	Self-referral is now established. Current waiting time for initial triage is within 14 days (currently 8 days).	Green	Single point of access from April 2014 for IAPT and counselling service.
l Anxie	Improved client satisfaction with the Bromley Working	The service is just about to launch its new website. www.workingforwellbeing.org.uk	Green	
Depression and Anxiety (mental health)	For Wellbeing Service; Positive impact on the numbers diagnosed, in primary care, with Medically Unexplained Symptoms. Measuring numbers of people <i>recovering</i> after treatment i.e. no longer judged as requiring further treatment;	Bromley has one of the higher reported levels of supporting people off benefits and back to work. With 100 back into work as at the 30 th September 2013. The other area now being monitored is those who have stayed in employment as a result of our intervention. April 2012 – March 2013 there were 114 referrals into employment support 48 clients successfully completed treatment 29 were job retention clients.	Green	

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	The Council and health services provide a joint approach which ensures that service provision is increased within the Borough to meet the growing		Green	Continue to implement Phase 5 of the Special Educational Needs provision review to increase in borough provision - including the delivery of a capital scheme as part of an invest to save project which is being developed to provide in-borough places for secondary aged pupils with ASD.
Disabilities	needs of children and young people, within the reducing financial context of public sector funding, whilst ensuring that the quality of service provision is maintained.	The launch of new facilities at Bromley College to support learners with complex learning disabilities took place on 21 st June 2013. The college achieved full capacity (121 learners) for their September 2013 intake.	Green	Implement the joint Pathfinder Bid for the Special Educational Needs and Disabilities Green Paper with the London Borough of Bexley.
Children with Complex Needs and Disabilities		Expanded Riverside school by 52 places from September 2013 to support the increasing numbers of secondary aged pupils presenting with Autistic Spectrum Disorder (ASD) in the borough;	Green	Increase joint working between the Council and health services to improve the co-ordination of support to families through the joint disability service across Health, Education and Social Care.
th Comple		Expanded the Glebe School by two forms of entry from September 2014 to extend high quality provision for children with Autistic Spectrum Disorder (ASD) in borough;	Amber	Work with Croydon, Merton and Bexley, to proactively manage SEN educational placements with the independent market by using the collective 'voice' to negotiate consistency in practice as well as seeking increased value for money.
Children wi		The Bromley Local Offer, for children and young people (from birth to 25 years) with Special Educational Needs and Disabilities was published on MyLife on 18 th December 2013. The Bromley Local Offer can be accessed at Local Offer	Green	Work with stakeholders to ensure that the online local offer information is accessible and develop an electronic Education Health and Care Plan.

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ems	A joint approach by organisations within the statutory sector, together with support from voluntary and community sector organisations will ensure that service provision meets the growing needs of children and young people, within the reducing financial context of public sector funding, whilst ensuring that the quality of service provision is maintained.	Undertook a robust Needs Assessment of Mental Health in Children and Young People in Bromley was undertaken in 2012. This then fed into the commissioning plans for the CAMHS	Green	Continue to improve provision of emotional wellbeing, mental health services, substance misuse and counselling services for children and young people.
vith Mental lealth Probl		To enable a new service model for provision of services for Children and Adolescent Mental Health Issues (CAMHS) that targets prevention/ early intervention and encompasses a single point of access contracts with Bromley Y and Oxleas have been extended to September 2014	Amber	Re-commission the CAMHS framework in the borough based on early intervention and prevention.
en v al H	within the reducing financial context of public sector funding, whilst ensuring that	Oxleas NHS Foundation Trust have established a service for children under the age of 5.	Green	Implement the joint family nurse programme
Childr Emotion	the quality of service provision is maintained.	The Bromley Youth Council ran a very successful bullying awareness campaign during 2012/13 and identified emotional health as a priority for 2013/14.	Green	
		Developed a joint Family Nurse Programme with Bexley for implementation from April 2014.	Green	
dren Care)	Ensure that service provision is appropriate to meet the increasing numbers and complexity of needs of children and young people	22 new sets of in house foster carers were recruited during 2012/13 against a target of 20. 4 new foster carers (units) have been approved in first half of 2013/14 a further 10 currently been assessed for presentation to panel in early 2014.	Green	Continue to improve partnership working at case- level across the Borough to ensure that different organisations continue to work together to improve outcomes for children and young people.
ble Chil s Social	referred to Children's Social Care, within the context of reducing public sector funding, whilst ensuring that	In the first half of 2013/14, 6 children have been subject to an adoption order. Current indications are that the number of children adopted during 2013/14 will exceed the 17 in 2012/13.	Green	Further develop and embed the use of the MASH system.
Vulnerable Children (Children's Social Care)	the quality of service provision is maintained. ~ Reduce referrals to children's social care	87% of all adopter assessments are completed within the statutory timeframe of eight months. Significant work has been undertaken, including increasing capacity within the team, to ensure that the revised timescale of six months is met.	Green	Continue to increase the number of foster carer placements within the borough for the most challenging children and young people.
E	services	MASH team established with full range of partners involved in July 2013	Green	

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		Focused on improving early intervention support for families: The number of new referrals to Outreach Family Support (including Step Down to Social Care) has increased from 193 in the first six months of 2012/13 to 276 in 2013/14	Green	
		Footfall and numbers of families using Children's Centre services continues to rise with 40,147 visits (8,714 unique users), during the first half of this year compared with 35,173 (7,629) for the same period last year.		
		335 Common Assessment Framework forms were completed in 2012/13. As referrals from schools have reduced, targeted meetings and training have taken place to further support the use of the new shortened Common Assessment Framework form and associated training at the beginning of July.		
	The expected outcomes, which are in line with the National Dementia Strategy	Increased capacity at the Memory Clinic. A multi-disciplinary team is in place and caseload increased by over 1,000 since October 2012. An	Green	Many of the projects currently being undertaken will continue into 2014/15.
	priorities, include:	average of 94 referrals per month.	0	Other initiatives are covered below:
Dementia	improving public and professional awareness and understanding of dementia; early intervention diagnoses increased	Integrated Dementia Care Pathway improved and tested. Enabled a Care Manager Assistant, based in the Memory Clinic, to ensure 90% of 220 people worked with remained in the community using assistive technology, day care and, for some, domiciliary care. Original sample of clients being tracked to see if further improvements are needed.	Green	The roll-out of the ProMISE programme's GP based integrated care teams which will identify people with dementia and their carers and refer, as appropriate, to the Memory Clinic for formal diagnosis together with information provision on the disease and current and future support options.
Δ	further reduction in time between referral and diagnosis; enabling easy access to care, support and advice following diagnosis; improved quality of care for	Staff in 14 care homes have been trained and supported to work with people with dementia to enhance their care and prevent hospital admission. 154 staff in new Extra Care Housing schemes have received training to help them support residents and delay the need for more intensive services. Both schemes will continue into 2014/5.	Green	Enhance the Psychiatric Liaison Team at the PRUH to work with older adults to identify people with dementia, support staff with their care and facilitate diagnosis.

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		5 GP practices have begun training in dementia to encourage early referral and enable them to support carers, manage severe distress and end of life care.	Green	Review the feasibility of CSV volunteers supporting people in their own homes to enable them to retain their independence.
		BME communities have received information on dementia.	Green	Continue to establish the integrated dementia care pathway and explore best practice which could be implemented in Bromley.
		The Coping with Caring programme has provided training for carers to understand the impact of dementia and provide support and advice. 290 carers have taken part in a series of workshops, received training at home or been given 1-1 support and advice.	Green	Respite Care, including respite at home, will be reviewed in the context of requirements in the new Care Bill around carer assessments, services for carers and personal budgets. This will include respite for carers of people with dementia.
		Training to become Dementia Friends has been given at the PRUH, to fire-fighters, staff at libraries, Carers Bromley, housing associations and church volunteers.	Green	The private sector is trialling the use of Elderly Mentally Infirm (EMI) beds for respite to assess demand.
		Use of anti-psychotic drugs in primary and secondary care was reviewed and found to be in line with NICE guidelines. The Prescribing Advisor will continue to review usage in primary care regularly.	Green	Non-statutory organisations working together to develop community services.
		The Falls Service has begun working with Mindcare to run clinics for people with dementia.	Green	Alzheimer's Society is refocussing on support in the community through Dementia Advisers.
		Working with St Christopher's Hospice to prevent unnecessary admissions to hospital during the last year of life and allow death in the place of choice – this will include people with dementia.	Green	Where appropriate the relevant links will be made with the supporting carers health and wellbeing priority to ensure that family carers of people with dementia are considered.

Priority Area	By 2015 we will have achieved:	Summarise Main Achievements 2012 – 14	RAG Rating	What do we intend to do 2014/15?
	Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the	Although confidentiality issues prevented the sharing of carers' information between the council and voluntary organisations, a wide- ranging survey of adult carers was carried out in autumn 2013 which will inform the JSNA and Bromley Carers Strategy.	Amber	Identification of hidden carers & carers undergoing increased pressure through: front-line domiciliary care staff; GP Practices via the Patient Liaison Officers and Carer Registers and Community Matrons. Exploring a neighbourhood/ community approach.
	outset both in designing local care provision and in planning individual care packages;	The number of carer assessments increased from 30% to 32% in 2012/13 following work within Care Management to promote carer assessments and improve recording methods;	Amber	Carer assessments - improve the number and quality of assessments and improve the awareness of carers assessments among carers
0	Enabling those with caring responsibilities to fulfil their	The first Adult Services Stakeholder Conference held in November 2013 theme was 'Building Better Support for Carers'.	Green	Training - promote training on back care and identification of urinary tract infections. Review carer training for care management staff.
ll ages	educational and employment potential;	The Carers Forum, supported by Carers Bromley, has been revitalised. They have contributed to the planning and content of the	Green	A new Bromley Carers Strategy will be compiled and published. Underpinned by the recent carers surveys and engagement events. Undertake a
rs of a	Personalised support both for carers and those they support, enabling them to	Carers Survey; attended Adult Stakeholder Conference and have provided feedback on the ProMISE programme.		survey with young carers in spring 2014.
j Care	have a family and community life;	Information available to carers on Bromley MyLife is continually reviewed and updated. Now includes 'Talking Head' videos on a range	Green	Information - improve information available on the impact of the condition of the person cared for on the carer, aids and adaptations and benefits.
Supporting Carers of all ages	Supporting carers to remain mentally and physically well;	of subjects. Links to information and services provided by partners including training, aids and adaptations, benefits and legal advice were strengthened following the Carers Survey;		Mental Wellbeing - promote the new Bromley Working for Wellbeing website and service to carers via the voluntary sector.
Sul		The issue of hidden carers is ongoing: the Carers Partnership Group reviewed referrals to Carers Bromley highlighting the low level of referrals from health services. An audit of GP support to carers in Bromley was carried out to explore this further.	Amber	Respite - promote use of Direct Payments for better targeted respite.
		The commissioning of the Patient Liaison Officers at GP practices is helping to identify carers and provide information and support. GP Practices are being funded to establish Carers Registers containing 6,000 carers.	Green	Review the impact of the Care Bill and Children and Families Bill on assessments and services for all carers including respite and use of personal budgets.
		Bromley Healthcare Single Point of Entry (GP contact point) now includes a direct referral system to Carers Bromley	Green	

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		The young carers (YC) included in redesigning	Green	
		the YC Information and YC training is now		
		included in the Bromley Safeguarding Children		
		Board calendar of events. Internal processes to		
		ensure that YC are supported when moving		
		between workers/ teams have been improved.		