



# 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

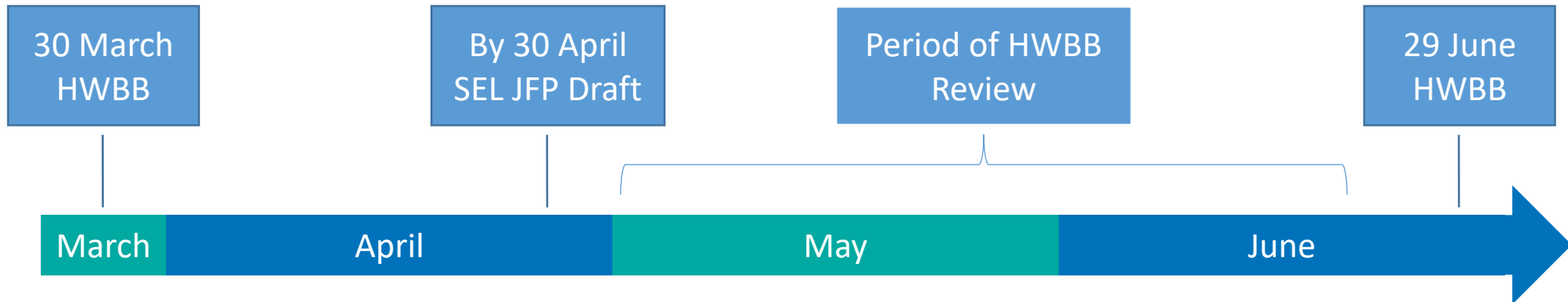


Ensuring that people, including those with continuing health needs, can conveniently access high quality primary care services

# 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

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- 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 3<sup>rd</sup> 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

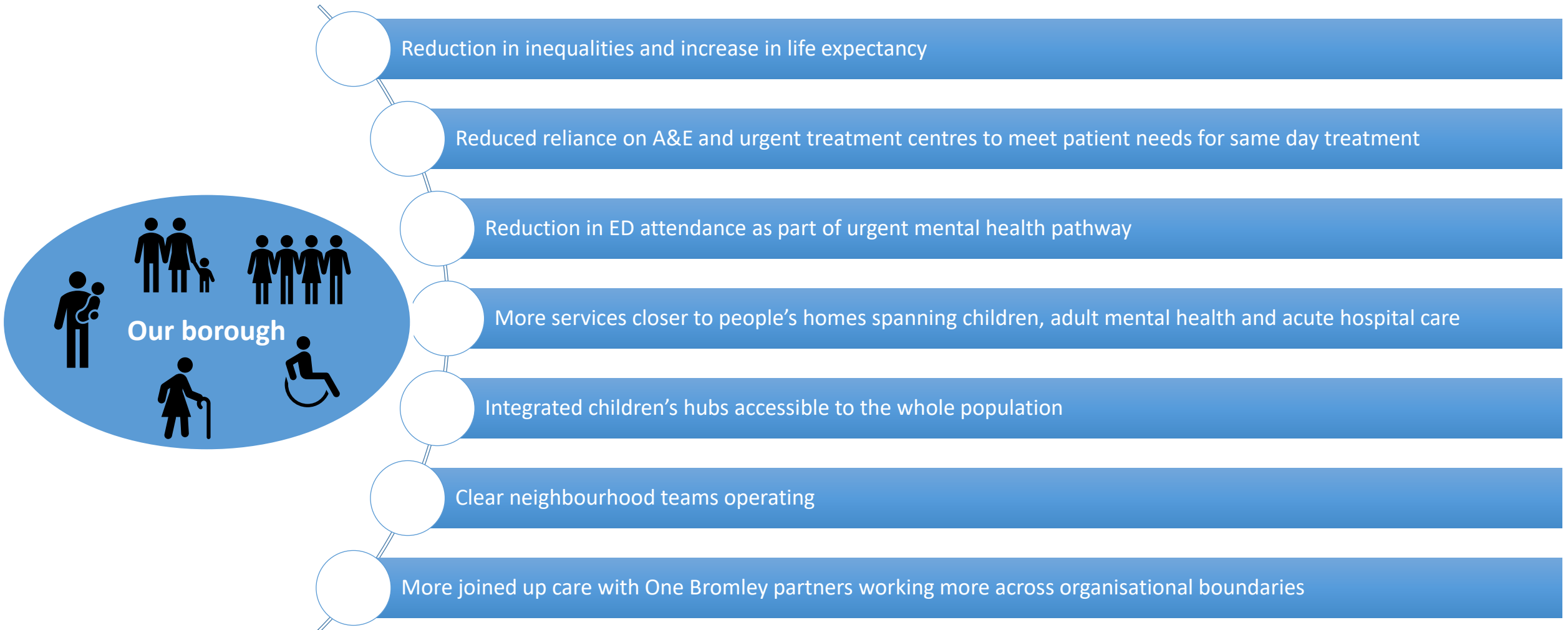
2) Evolve neighbourhood teams into integrated geographic footprints to meet health and prevention needs of the local population: spanning primary, community and social care, with third sector and specialist physical and mental health

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

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**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](mailto:Angel.Bhan@selondonics.nhs.uk) by close, Friday 14 April 2023

