

## HEALTH AND WELLBEING BOARD

Minutes of the meeting held at 10.00 am on 16 November 2023

### Present:

Councillor David Jefferys (Chairman)  
Councillor Robert Evans (Vice-Chairman)  
Councillor Chris Price

Dr Nada Lemic, Director: Public Health

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

Christopher Evans, Community Links Bromley

### Also Present:

Councillors Yvonne Bear, Will Connolly, Colin Smith and Diane Smith (*via conference call*)  
Kim Carey (*via conference call*)  
Jane Walters (*via conference call*)  
and Angela Helleur (King's College Hospital NHS Foundation Trust) (*via conference call*)

The Chairman thanked Members for their understanding and forbearance with the rearrangement of the meeting which had been made to allow Members to attend the funeral of Councillor Andrew Lee. Several options had been explored to try to accommodate report deadlines and Members' diaries.

## 27 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Thomas Turrell, Richard Baldwin, Teresa Bell, Rachel Dunley, Jim Gamble and Harvey Guntrip.

Apologies for absence were received from Charlotte Bradford and Jane Walters attended as substitute.

Apologies were also received from Jacqui Scott (Bromley Healthcare).

## **28           DECLARATIONS OF INTEREST**

In relation to item 6, Councillor Yvonne Bear declared that she was Governor at Oxleas NHS Foundation Trust.

## **29           QUESTIONS**

One question had been received from a member of the public for written reply and is attached at Appendix A.

## **30           MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 21ST SEPTEMBER 2023**

**RESOLVED** that the minutes of the meeting held on 21<sup>st</sup> September 2023 be agreed.

## **31           HEALTH AND WELLBEING STRATEGY**

The Director of Public Health noted that an amended version of the Health and Wellbeing Strategy had been provided – the changes were highlighted in red and incorporated the comments received from Board Members. Work would be undertaken to develop action plans for the individual priorities – this would be done in collaboration with partners, and they would ensure they aligned with the ICB Strategy.

The Bromley Place Executive Director agreed that the strategy linked well with the ICB five-year strategy, including its focus on prevention and the approach to population health. It was suggested that further discussion be held with regards to implementation to ensure that there was no duplication.

A Board Member highlighted the importance of the implementation plan being co-produced with partners. In response to questions, the Senior Clinical Lead noted that the measurements of success were currently being considered – partners were already collecting data and they would need to discuss how it would best be collated to provide a true picture. The Chairman noted that it may take in excess of ten years to see the full effects of some of the priorities. The Bromley Place Executive Director advised that with regards to the work around the South London Listen's pledges, some pledges related to the work of the ICB, but some were broader and applied more to the inner London boroughs that had been engaged with this approach. However the principles around listening to vulnerable populations and using their input to shape services was appropriate. With regards to young people, the Chairman noted that the strategy would be presented to the Youth Council.

The Director of Public Health advised that the 'Vital 5' key preventative areas would feed into the implementation plan and there would be input from other partner agencies and Boards. Once the action plan was agreed it was proposed

that there be a standing item at each meeting during which a progress update would be provided.

The Chairman thanked the Director of Public Health and her team for all the work undertaken to produce the strategy.

**RESOLVED that the Health and Wellbeing Strategy 2024-2029 be agreed.**

## **32 UPDATE ON CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH**

### **Report CSD23142**

The Board considered a report providing an update on Children and Young People's Mental Health. The Chairman welcomed James Postgate, Associate Director – Integrated Commissioning, NHS South East London (Bromley) ("Associate Director"), Johanna Dench, Senior Commissioning Manager – CYP MH & Wellbeing, NHS South East London (Bromley) ("Senior Commissioning Manager"), Gill Allen, CEO – Bromley Y, Ingrid Bresnahan, Operations Manager – Bromley Y and Dominic Leigh, CAMHS Service Manager – Oxleas NHS Foundation Trust to the meeting.

The Associate Director noted that an update had been provided to the Board in June 2022. At that time services were receiving a high number of referrals, complex presentations and long waiting times. Since then a number of initiatives had been implemented and progress had been made, however a number of challenges were emerging. The Senior Commissioning Manager delivered the presentation provided in the agenda pack which summarised the current situation. The CEO – Bromley Y highlighted that since coming out of the COVID-19 pandemic services had experienced enormous pressure. They were now seeing a drop in the number of referrals into the single point of access (SPA) and a decrease in caseloads. It was considered that the integrated SPA was working effectively, with more young people being accepted onto the right pathway at the right time.

A Members noted that it was pleasing to see the improvement in waiting times to access CAMHS. During the last update received there had been some concerning data related to emergency presentations of children in crisis at A+E and it was questioned if this had reduced following improved access to services. The Associate Director advised that a deep dive was currently being undertaken in relation to this. The CAMHS Service Manager said that over the last year there had been a slight reduction in the number of presentations at A+E. For a number of years Bromley had been an outlier but was now at the same level as its neighbouring South East London boroughs. This was due to a number factors, which they were currently evaluating, including significant investment into crisis care. Specialist CAMHS clinicians were based in hospitals – 24/7 crisis and liaison services were available at the PRUH and Queen Elizabeth Hospital, and intense community treatment pathways had also been established. It was noted that a significant increase in the complexity of presentations was still being seen, and

they often saw a number of young people regularly attending A+E. The CEO – Bromley Y said that they now covered all of the Bromley secondary schools and would be looking at the data to ensure that appropriate referrals were being dealt with.

In response to a question from the Chairman, the Associate Director said that more referrals were received during exam times. The data would be reviewed, and they would be working with the Director of Education to provide outreach and support to schools. The Associate Director said he would be happy to share any data as it came forward. The CAMHS Service Manager said that there was a seasonal spike of acute presentations at the end of the autumn and spring terms. This had been seen across recent audits with a pronounced rise and drop off being seen in Bromley. It was noted that some of the schools which had been seen as outliers had since seen the number of referrals reduce following support interventions being implemented, and a similar approach would again be taken.

A Member said he welcomed the progress being made, however the waiting time of 35 weeks between referral and first assessment was unacceptable and it was questioned how this could be reduced. The CAMHS Service Manager said that they were not happy with any waiting times – this had been a long term issue and a focus within Oxleas. This had been impacted by a number of issues, including a capacity gap in terms of the number of referrals that could be seen and treated. Some issues were still being experienced, but they were now in a better position in terms of clinical capacity and significant improvements related to waiting times were being seen. A huge amount of work had been undertaken to work towards the target set by the SEL ICB – they were on track to achieve these but there was still a huge amount of work to continue to do. The CAMHS Service Manager highlighted that they were continually looking to transform services, and they were in the process of aligning their services with a nationally recognised framework. It was noted that the waiting times were across a variety of pathways. Some CAMHS services saw referrals within a matter of days, whilst others faced much longer waits – Bromley was not an outlier in relation to this, it was a national issue.

In response to a question from the Chairman, the Associate Director advised that there had been a lot of investment into Oxleas CAMHS – as more staff joined the reduction in the waiting times would continue. However a systematic approach was needed – early intervention and work with schools would be extremely important. They needed to create a specialist service of the correct size, as not everyone referred would need the level of support provided by CAMHS. The CEO – Bromley Y highlighted that no one was happy with the waiting times, but CAMHS had done an incredible job to reduce them, and the hard work undertaken was recognised. There needed to be a focus on early intervention and prevention, with more investment into schools and the community – the new ‘Early Help Hubs’ initiative was a great offer and would help build resilience which could impact on the CAMHS waiting times.

With regards to a question on transition into adult care pathways, the CAMHS Service Manager said that this was a national issue which had led to the development of a clinical pathway for 16-25 year olds. The aim of this was to increase the flexibility across both children and young people and adult services,

ensuring that care plans appropriate to a young person's age were provided. It was usual practice to highlight those young people who were approaching 18 years, and they worked closely with the adult mental health team to prioritise these service users. The family of the young person would be involved in the decision making process.

In response to a question regarding targets, the CAMHS Service Manager advised that there were a range of targets. From referral to first assessment they were on schedule to eliminate any young people waiting over 52 weeks. They then had a target to reduce the waiting time down to 44 weeks by April 2024, following which a further target would be set. It was highlighted that this was the maximum waiting time, and not an average, and was safely managed. The NHS was still calculating what was an acceptable waiting time for CAMHS services and ultimately they would work towards a referral to help timeline of four weeks. The Associate Director noted that the focus had been on reducing the high waiting times after a spike when the schools reopened following the pandemic lockdown. In recent years there had been national investment into mental health services however they would "need to live within their means in the future".

*Christopher Evans left the meeting at 10.50am.*

In terms of staff caseloads, the CAMHS Service Manager said that the reduction in waiting times was not as a result of putting more pressure on the workforce. Over the last twelve months they had developed a document which clearly outlined the limitations of what was expected from staff – this had brought productivity in line with the expectation. This had been really positive for staff – good retention figures, and less staff turnover, were being seen. They had also received positive responses from the staff survey and the Trust had done well in relation to its strategic priority to make Oxleas a great place to work. Members were reassured that Oxleas had put a lot of focus on staff wellbeing – it highlighted that they had featured in The Sunday Times 'Best Places to Work 2023' rankings in the Very Big Company category, as well as winner in the Best Places to Work for disabled people category. The CEO – Bromley Y agreed that the welfare of staff was very important – there were long waits, but they ensured that interventions were put in place during this time. There were large caseloads, with more complexity, so the staffing infrastructure had been increased. They had also held emotional wellbeing days and provided flexible working for staff.

In summary the Associate Director highlighted that the journey would continue – lots of progress had been made, but other challenges were arising. In the coming year they would be reviewing some of the initiatives put in place, and it was agreed that an update in relation to children and young people's mental health be provided to the Health and Wellbeing Board during the summer of 2024.

The Chairman thanked the Associate Director, Senior Commissioning Manager, CEO – Bromley Y, Operations Manager – Bromley Y and CAMHS Service Manager for their update.

**RESOVED that the update be noted.**

**33 HIV INFECTIONS AUDIT (VERBAL UPDATE)**

The Director of Public Health informed Board Members that the HIV infections audit had now concluded and would be brought to the Board meeting on 8<sup>th</sup> February 2024. As previously mentioned, the surveillance programme had highlighted that although Bromley had relatively low incidents of HIV there tended to be late diagnosis and the demographic of patients had changed. It was noted that as the numbers were so small it was harder to draw general conclusions. A workshop would be held with clinicians from across London to gain better learning from those experiencing similar situations.

In response to a question, the Director of Public Health highlighted that the late diagnosis was mainly due to late presentations. Clinically, there were no issues in terms of managing and treating patients. With regards to the demographic of patients, they were seeing more older heterosexual males being diagnosed.

**RESOLVED that the update be noted.**

**34 BROMLEY SAFEGUARDING CHILDREN PARTNERSHIP ANNUAL REPORT**

**Report CEF23057**

The Chairman noted that apologies had been received from the Independent Chair of the Bromley Safeguarding Children Partnership, however a video providing an overview of the Annual Report had been circulated to Board Members prior to the meeting.

A Member considered that a fantastic report had been produced – it was very detailed and provided an excellent picture of the work being undertaken in Bromley.

The Chairman advised that any questions could be sent directly to the Bromley Safeguarding Children Partnership Manager for response.

**RESOLVED that the Bromley Safeguarding Children's Board Annual Report 2022/23 be noted.**

**35 QUESTIONS ON THE HEALTH AND WELLBEING BOARD INFORMATION BRIEFING**

The Health and Wellbeing Board Information Briefing comprised 2 reports:

- Better Care Fund and Improved Better Care Fund Performance Update – Q1 and Q2
- Pharmaceutical Needs Assessment (PNA) reprocurement

The Director of Public Health advised that it was a statutory duty of the Board to

publish a PNA which was an assessment of need for pharmaceutical services in the borough. The process for reprocurring a consultancy to produce and maintain the PNA had commenced and would be ready for publication in 2025.

**RESOLVED that the Information Briefing be noted.**

### **36 MATTERS OUTSTANDING AND WORK PROGRAMME**

#### **Report CSD23127**

The Board considered its work programme for 2023/24 and matters arising from previous meetings.

The following items would be added to the forward rolling work programme for the Health and Wellbeing Board:

- Health and Wellbeing Strategy – update on priority areas (standing item)
- Update on Children and Young People's Mental Health (summer 2024)

The Chairman advised Board Members that representatives from Mytime Active would attend the meeting on 8<sup>th</sup> February 2024 to deliver a presentation regarding their work on health prevention.

With regards to a question on the matters outstanding, the Director of Public Health advised that partners had been trying to source the data relating to falls. There was data available, however it was collected in different ways and efforts would need to be undertaken to extract and analyse it. It was noted that an extract from the Better Care Fund report regarding falls data had been circulated.

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

### **37 ANY OTHER BUSINESS**

There was no other business.

### **38 DATE OF NEXT MEETING**

The next meetings of the Health and Wellbeing Board would be held on:

1.30pm, Thursday 8<sup>th</sup> February 2024  
1.30pm, Thursday 18<sup>th</sup> April 2024

The Meeting ended at 11.12 am

Chairman

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## HEALTH AND WELLBEING BOARD

16<sup>th</sup> November 2023

### WRITTEN QUESTIONS TO THE CHAIRMAN OF THE HEALTH AND WELLBEING BOARD

**Written Question to the Chairman of the Health and Wellbeing Board received from the Sue Sullis, Community Care Protection Group:**

1. Please list the Government Guidance documents covering Flooding and Health which the Health and Wellbeing Board considers in relation to Bromley Borough.

***Reply:***

***The Health and Wellbeing Board has not considered any Government guidance documents on flooding and health. The responsibility for these matters lies with the Environment and Environmental Health Departments.***

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