

One Bromley Local Care Partnership Board

Date: Tuesday 16 May 2023

Time: 9.30am – 11.30am

Venue: Bromley Civic Centre, The Council Chamber or via Microsoft Teams

Chairmen: Dr Andrew Parson and Councillor Colin Smith

Members of the One Bromley Local Care Partnership are asked to report any conflict of interest, in respect of any of the following agenda items to Avril Baterip, Corporate Governance Lead, immediately upon receipt of this agenda.

AGENDA

No	Item	Enclosure	Presenter	Timing
Opening Business				
1.	Welcome, introductions to the One Bromley Local Care Partnership Board and apologies for absence	Verbal	Chairmen	9:30
2.	Declarations of interest	Enc. 1	Chairmen	9:32
3.	Public Questions received in advance of the meeting	Verbal	Chairmen	9:35
4.	Minutes of the meeting held on the 16 March 2023 For approval	Enc. 2	Chairmen	9:38
5.	Actions for the Board For approval	Enc. 3	Chairmen	9:40
For Information and Noting				
6.	Partnership Report For information	Enc. 4	Dr Angela Bhan	9:45
7.	Winter Review For information	Enc. 5	Jodie Adkin	9:55
8.	Hospital at Home – Update on the Service and Integration For information	Enc. 6	Elliott Ward	10:05

9.	One Bromley Communications and Engagement Annual Report for 2022/23 For information	Enc. 7	Paulette Coogan	10:15
10.	Finance Month 12 Update For information	Enc. 8	David Harris	10:25
For Approval				
11.	SEL Joint Forward Plan and One Bromley Strategy For approval	Enc. 9	Dr Angela Bhan	10:35
Reports from Key Sub-Committees for Noting				
12.	Primary Care Group Report For noting	Verbal	Harvey Guntrip	10:45
13.	Contracts and Procurement Group Report For noting	Enc. 10	Sean Rafferty	10:55
14.	Performance, Quality and Safeguarding Group Report For noting	Enc. 11	Harvey Guntrip	11:05
Closing Business				
15.	Any Other Business	Verbal	All	11:15
Appendices				
16.	Appendix 1: Glossary of terms	Enc. 12	For Information	
Next Meeting:				
17.	The next meeting of the One Bromley Local Care Partnership Board will be held on the 27 July 2023 and will start at 9:30am in Bromley Civic Centre, The Council Chamber or via Microsoft Teams.			

NHS South East London ICB One Bromley Local Care Partnership Board - Declared interests as of 02/05/2023

Name	Who do you currently work for	Position/ Relationship with ICB	Declared Interest	Nature of interest	Valid From	Valid To
Jonathan Lofthouse	Kings College Hospital NHS Foundation Trust	Site Chief Executive - Princess Royal University Hospital Chair of One Bromley Executive and Member of the One Bromley Local Care Partnership Board	Non-Financial Professional Interest	I am a retained Executive level Specialist Adviser to the Care quality Commission.	05/08/2022	
				SEL SRO for CDC Programme SEL SRO for Theatre Productivity Programme.		
Dr Hasib Ur Rub	Bromley GP Alliance	Chair, Bromley GP Alliance Member of SEL ICB Committees	Non-Financial Professional Interest	Programme Director for GP Training in Bromley, Health Education England.	01/01/2007	
			Non-Financial Personal Interest	Trustee of World War Muslim Memorial Trust Charity	12/02/2021	
			Financial Interest	Bromley GP Alliance is a provider of some health care services across Bromley.	28/01/2015	
			Financial Interest	Self-employed General Practitioner.	01/01/2020	
Dr Angela Bhan	South East London ICB	Place Executive Lead for Bromley	Non-Financial Professional Interest	Undertake professional appraisals for UKHSA consultants in public health.	01/07/2022	
			Financial Interest	Very occasional assessor for Faculty of Public Health CESR applications for GMC, on behalf of Faculty of Public Health.	01/07/2022	
Andrew Bland	South East London ICB	Chief Executive Officer	Indirect Interest	Partner is a Primary Care Improvement Manager in North West London ICB (Ealing Place).	01/11/2011	
Dr Andrew Parson	South East London ICB	One Bromley Clinical Lead and Co-Chair of One Bromley Local Care Partnership Board	Financial Interest	The Chislehurst Partnership - This is the business partnership which currently includes the contract holders for Chislehurst medical practice and The woodlands practice both in Chislehurst and currently going through a merger process. Both contracts are for PMS General Practice. Both Practices are members of the MDC PCN in Bromley . Both Practices hold contracts from Bromley Health care for delivery of the Advanced Practitioner Care Practice in Diabetes.	01/07/2022	
				Chislehurst Medical Practice – Lead partner, CQC registered manager and contract holder for PMS medical practice. Practice is a member of the MDC PCN in Bromley.	01/07/2022	
			Financial Interest	Bromley GP Alliance (BGPA) The Chislehurst medical practice is a member and shareholder of BGPA .	01/07/2022	
			Financial Interest	The Woodlands Medical Practice I am a contract holder for this PMS practice which is going through a merger process as mentioned above.	01/07/2022	

NHS South East London ICB One Bromley Local Care Partnership Board - Declared interests as of 02/05/2023

Dr Andrew Parson	South East London ICB	One Bromley Clinical Lead and Co-Chair of One Bromley Local Care Partnership Board	Financial Interest	The practice is a member of the MDC PCN in Bromley.		
			Indirect Interest	Former spouse is employee of Bromley Y which provides tier 2 CAMHS in Bromley.	01/07/2022	
Avril Baterip	South East London ICB	Corporate Governance Lead- Bromley	No interests declared			
Paulette Coogan	South East London ICB	Director of People and Systems Development, Bromley	No interests declared			
Mark Cheung	South East London ICB	One Bromley Programme Director	No interests declared			
David Harris	South East London ICB	Associate Director of Finance - Bromley	No interests declared			
Iain Dimond	Oxleas NHS Foundation Trust	Mental Health Lead, South East London ICB Executive	No interests declared			
Kim Carey	London Borough of Bromley	Director of Adult Services	No interests declared			
Dr Nada Lemic	London Borough of Bromley	Director of Public Health	No interests declared			
David Walker	Bromley Third Sector Enterprise	Chief Executive Officer Committee Member representing voluntary sector	Non-Financial Professional Interest	Wife is Business Manager of a medical software company that supplies PROMs to NHS.	03/01/2023	
Jacqui Scott	Bromley Healthcare	Chief Executive Officer	No interests declared			
Sean Rafferty	London Borough of Bromley	Joint Appointee between ICS and LBB; Chair of Bromley Contracts and Procurement Group	No interests declared			
Helen Simmons	St Christopher's Hospice	Chief Executive Member of One Bromley Local Care Partnership Board	Indirect Interest	Husband is a Councillor in Southwark and works for Helen Hayes MP.		
Harvey Guntrip	South East London ICB	Lay Member for Bromley	No interests declared			
Helen Norris	Healthwatch	Healthwatch Bromley representative	No interests declared			
Charlotte Bradford	Healthwatch	Healthwatch Bromley representative	No interests declared			
Gemma Alborough	South East London ICB	Business Support Lead – Bromley	No interests declared			
Dr Claire Riley	Orpington PCN	Orpington PCN Clinical Director and GP	Financial Interest	GP Partner at Green Street Green Medical Centre, practice is member of Orpington PCN.	01/01/2013	
			Non-financial professional interest	Clinical Director Orpington PCN.	01/11/2022	
			Indirect Interest	Spouse is Associate Director of Wilkinson Eyre Architecture firm who occasionally tender for public building design in the healthcare sector.	04/10/2009	

**One Bromley Local Care Partnership Board
Minutes of the meeting on 16 March 2023
Held in The Council Chamber,
Bromley Civic Centre**

Name	Title and organisation	[Initials]
Members (Voting):		
Cllr Colin Smith	Leader of the Council (Co-Chairman), London Borough of Bromley	CS
Harvey Guntrip	Bromley Borough Lay Member (Co-Chairman), NHS South East London	HG
Dr Angela Bhan	Bromley Place Executive Director, NHS South East London	AB
Iain Dimond	Chief Operating Officer, Oxleas NHS Foundation Trust	ID
Cllr Diane Smith	Portfolio Holder for Adult Care & Health, London Borough of Bromley	DS
Jacqui Scott	Chief Executive Officer, Bromley Healthcare	JS
Kim Carey	Interim Director of Adult Services, London Borough of Bromley	KC
Dr Claire Riley	Clinical Director, Orpington Primary Care Network	CR
David Walker	Chief Executive Officer, Bromley Third Sector Enterprise	DW
Helen Simmons	Chief Executive, St Christopher's Hospice	HS
Richard Baldwin	Director of Children's Services, London Borough of Bromley	RB
Members (Non-voting):		
Mark Cheung	One Bromley Integrated Care Programme Director, NHS South East London	MC
Sean Rafferty	Joint Assistant Director of Integrated Commissioning, NHS South East London and London Borough of Bromley	SR
Paulette Coogan	One Bromley People and System Development Director, NHS South East London	PC
Helen Norris	Healthwatch	HN
Dr Maysa Noori	Co-Chair, London wide LMCs and London wide Enterprise Ltd	MN
In Attendance:		
Sophie Michael	General Services Manager, Bromley GP Alliance	SM
David Harris	Associate Director of Finance, NHS South East London	DH
Cheryl Rehal	Associate Director of Primary & Community Care, Bromley, NHS South East London	CR
Gemma Alborough	Business Support Lead – Bromley, NHS South East London	GA
Avril Baterip	Corporate Governance Lead – Bromley, NHS South East London	ABa
Members of the public (2)		

Apologies:

Name	Title and organisation	[Initials]
------	------------------------	------------

Members (Voting):

Dr Andrew Parson	Senior Clinical Lead, NHS South East London	AP
Jonathan Lofthouse	Site Chief Executive – Princess Royal University Hospital, King's College NHS Foundation Trust	JL
Dr Nada Lemic	Director of Public Health, London Borough of Bromley	NL
Dr Hasib Ur-Rub	Chair, Bromley GP Alliance	HU-R

Members (Non-voting):

Charlotte Bradford	Healthwatch	CB
Dr Ruth Tinson	Co-Chair, London wide LMCs and London wide Enterprise Ltd	RT

Actioned by

1.	Welcome, Introductions to the One Bromley Local Care Partnership Board & Apologies for Absence	
1.1	Councillor Colin Smith welcomed members and attendees to the One Bromley Local Care Partnership Board noting that Dr Andrew Parson was on leave. Councillor Smith welcomed Harvey Guntrip, who will be co-chairing the meeting today. Members and attendees of the Committee introduced themselves.	
1.2	Apologies for absence were noted as recorded above.	
2.	Declarations of Interest	
2.1	Harvey Guntrip invited members to declare any interests in respect to the items on the agenda. No interests were declared.	
3.	Public Questions	
3.1	No questions had been received in advance of today's meeting. Two members of the public attended the meeting.	
4.	Minutes of the One Bromley Local Care Partnership Board Meeting 26 January 2023	
4.1	The minutes were taken as an accurate record of the previous meeting subject to the following corrections: <ul style="list-style-type: none"> Page 1 – Dr Claire Riley to be listed as a voting member of the LCP Board Page 1 – Healthwatch representative and apologies received for the previous meeting held in January to be recorded in the minutes Page 4 – BTSE update on CENSUS figures to be amended to make the wording clearer Page 5 – St. Christopher's update to be amended to include palliative and end of life care workforce. 	ABa

5.	Actions for the Board	
5.1	The action log was reviewed. One action in relation to finance remains open, an update on this will be brought back to the LCP Board in September 2023.	DH
5.2	The Committee NOTED the action log.	
6.	Partnership Report	
6.1	Dr Angela Bhan introduced the Partnership report noting that this was a substantial report. The report was taken as read, and partners were asked to comment by exception only.	
6.2	The Committee NOTED the report.	
7.	End of year celebration of achievements	
7.1	<p>A celebration of achievements and improvements made in Bromley during 2022-23 were jointly presented to the Board, the following points were noted:</p> <p>Winter update, presented by Kim Carey:</p> <ul style="list-style-type: none"> • Successful winter due to partnership working and learning from previous years, which was incorporated into the planning for winter, sense of One Bromley collaboration. • There were significant pressures over winter, data for the period between 23 December to 4 January shows there were 4,497 A&E attendees treated at the PRUH, 591 more than the same period last year. There were 697 ambulance arrivals, 173 fewer than the same period last winter. • There was a drop in urgent treatment centre attendances. • Additional 754 GP appointments were made available over bank holiday and weekends via the BGPA hub at the PRUH. • Community capacity met demand, although there were fewer patients well enough to be discharged. • Staff sickness absence from COVID-19 and other viral infections, as well as the knock on effects of industrial action in the weeks running up to the holiday period added to the challenges but overall the system done well. <p>Hospital at Home, presented by Jacqui Scott:</p> <ul style="list-style-type: none"> • This initiative is a partnership collaboration including KCH, BGPA, Bromley Healthcare and BTSE. The ambition is to provide acute care and monitoring in patient's homes, there is a planned trajectory of 100-125 beds by the end of September. • Occupancy levels and recurrent funding has been agreed. Patients are being stepped up into the service. Remote monitoring is fully operable with EMIS. If this proves successful, then there is the potential to roll out to people with long term conditions. • Good patient feedback received on the team. • A case study has been included in the presentation on the Children's Hospital at Home service which it is estimated has saved over 1000 	

hospital bed days to the value of over £400,000k. The next step is to capture this data for adults service.

- Richard Baldwin expressed his interest in remote monitoring and wondered if the learning from this could be transferable to children with a learning disability. Mr Baldwin would make contact with Ms Scott on this.
- Councillor Colin Smith had a question on discharges within the borough of Bromley. In response to this, Dr Angela Bhan noted that Bromley was one of the best boroughs for discharges. This may impact on future funding as Bromley is not as challenged as other areas.

Caring for the Homeless, presented by Sophie Michael

- This is the 4th year running that weekly Winter Healthcare clinics have been set up for the homeless and rough sleeping population. To date 89 patients were seen this winter and directly prevented 7 A&E attendances.
- The clinics are run by volunteer clinicians including GPs, Oxleas and BDAS support.
- The Homeless Population programme was launched in February 2023, this is a new nurse-led clinic which will run for the next three years, supporting patients to seek access to healthcare services
- The patient group is small but has high levels of need.
- Dr Claire Riley is a volunteer at the clinic and noted the multi-agency working in place, the clinics are a real benefit to patients and a good model to use – BGPA are to be congratulated on this initiative
- Harvey Guntrip would welcome a future meeting on this, to have a more in-depth discussion

Winter vaccinations, presented by Cheryl Rehal

- One Bromley Health Hub in the Glades, Bromley, is an attractive and convenient service for many people – there has been a very good response to this.
- Extensive promotion has taken place by One Bromley partners including a Community Roadshow in the Glades and public messaging through other routes
- Vaccination uptake – proud to report that Bromley is the highest across SEL for delivering COVID-19 and flu vaccinations to the older populations, which is an achievement despite the challenges of maintaining uptake levels
- Pleased to see the excellent, joint working as an example of One Bromley system working

Primary care, presented by Cheryl Rehal

- Very high levels of demand for primary care services
- Great innovation and collaboration between practices, working at scale, to maximise services for patients
- New ways of working include remote monitoring of patients, offering clinical grade home tests and access to diagnostics in the community; and access remote advice and support
- Pleased to report that as part of a pilot project to increase levels testing for urine albumin to creatinine ratio (ACR), which helps to identify chronic kidney disease that can occur, for example, as a complication of

	<p>diabetes, nearly half of GP practices have successfully provided self-testing at home for appropriate patients</p> <ul style="list-style-type: none"> • Annual health checks – parents of young people with a learning disability now have a new guide explaining the benefits of annual health checks for their child to encourage families to come forward when their child is invited for an AHC • SMI annual health checks – additional resources have been made available to practices to help increase uptake • Developments include new electronic systems for GP practices to plan clinics based on patient need against the available capacity, and new practice websites to improve the patient experience and better provide online services • Noting the significant workforce challenges in primary care, the ICB is working collaboratively with One Bromley partners to attract people to work in Bromley primary care and bring new people into careers in primary care. <p>Mental Health, presented by Iain Dimond</p> <ul style="list-style-type: none"> • Celebration of co-operation, partnership working and system thinking. • Highlights include the development of Single Points of Access (SPA) for adults and children and young people to help navigate the system and better meet their needs as a system • In adults, focus on primary care includes the innovative work within PCNs to develop mental health capacity and capability and improve the linkages with different parts of the health and care system • Thanks was given to colleagues in One Bromley including Bromley Healthcare, for the delivery of Talking Therapies targets; and KCH and Oxleas for the joint working and positive outcomes in the delivery of mental health crisis support at the PRUH • Children and young people – bringing together the links between education, health and social care for prevention and improving wellbeing and access to services 	
7.2	<p>In considering the report, members raised the following points:</p> <ul style="list-style-type: none"> • Councillor Colin Smith had a question on mental health issues experienced post-Covid and whether there has been a surge in cases presenting. In response to this, Mr Dimond noted that there had anecdotally been an impact on the population's mental health from the pandemic as it exposed underlying social and financial pressures, some of which have continued. It was noted that there has not been a correlating increase in mental health referrals, but highlighted how we can continue to do more as a system to provide support and sign-post clients for health interventions, social or voluntary sector support and advice. Concurred that there had been an increase in need but not necessarily an increase in referrals to specialist health services. • Richard Baldwin attended a meeting last week on children's services and noted that CAMHS demand and waiting times are coming down, acuity is beginning to tail off. • Dr Claire Riley noted that there is a lot of pressure on primary care and mental health colleagues as there is increased demand for mental health services – primary care mental health practitioners for adults are a 	

	<p>valuable resource as they take the burden off GPs. We have to build in more support for children to relieve the pressure off CAMHS services</p> <ul style="list-style-type: none"> • Mr Dimond attended a meeting recently on how we work better with children and education providers to support children as early as possible, early intervention is key • Councillor Smith asked if there was a link with mental health and developmental issues in children, in light of the current cost of living crisis and housing issues. Richard Baldwin noted that there was a real link between children presenting and attendance at school – this was picked up at a recent Safeguarding Children's Board as there is a lot of children not going to school. Work continues to support children not in education and other drivers such as social media pressures, that could negatively impact on mental health • Harvey Guntrip noted that the best results is to involve the parents as in most cases, it is their stresses such as financial constraints that perpetuate the issues. There has also been an increase in demand for bereavement and pet bereavement services in schools – this is offered in some secondary schools along with peer mentoring and provides calming measures for children • Helen Simmons noted that St Christopher's had seen a high demand for their child bereavement services and a subsequent increase in waiting times. St Christopher's have therefore budgeted to increase the team by 2 FTE in response (these are unfunded posts – ie will need to be fundraised for). 	
7.3	The Committee NOTED the report.	
8.	Finance Report Month 10	
8.1	<p>David Harris reported to members, the report was taken as read. The following points were highlighted:</p> <ul style="list-style-type: none"> • SEL ICB Month 10 is forecasting a break-even position, the ICB has delivered the Better Payments Practice Code, Mental Health Investment Standard and the Month End Cash position within the target cash balance • Bromley's Month 10 financial position is £1,038k overspent and the forecast year end position is £1,237k. The year to date prescribing position is £1,883k overspent. • The key risk within the Bromley ICB/LCP financial position continues to be the prescribing position, the Month 11 position has recently been received and the year to date position has increased to £2,268k overspend. • Price pressures relate to No Cheaper Stock Obtainable (NCSO) drugs which have increased by £1,452k compared to the same period last year. • 2023/24 budget setting is progressing well and local sign off with budget managers has been achieved. • 2023/24 Contracts with external providers are expected to be agreed by the end of the month. 	
8.2	The Committee NOTED the report.	
9.	Community Anticoagulation Service	

9.1	<p>Mark Cheung reported to members. The following points were highlighted:</p> <ul style="list-style-type: none"> Chair's action was taken to endorse the recommendation to award, supported by four members of the LCP Board Bromley GP Alliance were awarded the contract by the Place Executive Lead on the 24th February 2023 No conflicted members of the LCP Board took part in any of the decision making around the procurement and papers were restricted to non-conflicted members only The mobilization process will commence on the 1st of June 2023 and work is underway to ensure there is a smooth transition between the incumbent provider and the new organisation The board is asked to note the Chair's action taken and ratify the decision to endorse the contract award recommendation 	
9.2	The Committee NOTED and ENDORSED the contract award recommendation.	
10.	Primary Care Group report	
10.1	<p>Harvey Guntrip reported to the committee. The following points were noted:</p> <ul style="list-style-type: none"> The Primary Care Group met in March and there was a good discussion on business intelligence and Quality dashboards The meeting was very effective with excellent help from colleagues The report was commended to the board. 	
10.2	No comments were received from members.	
10.3	The Committee NOTED the Primary Care Group report.	
11.	Contracts and Procurement Group Report	
11.1	<p>Sean Rafferty reported to the committee. The following points were noted:</p> <ul style="list-style-type: none"> Main area to highlight is the contract award recommendation for the Anticoagulation service The report was commended to the board. 	
11.2	No comments or queries were received from members.	
11.3	The Committee NOTED the Contracts and Procurement Group report.	
12.	Any Other Business	
12.1	Councillor Colin Smith thanked the group for their commitment, noting that this was a valuable team with strong emphasis and determination of partners to work collaboratively and make difficult decisions, even when faced with tough challenges.	
13.	Appendix 1: Glossary of Terms	
13.1	The glossary of terms was noted.	
14.	Date of Next Meeting: 16 th May 2023 at 09.30am	

One Bromley Local Care Partnership Board – Action Log

Log no.	Action point	Date raised	Responsible	Due Date	Status	Comments
20.	8: <i>Finance Month 8 and 23/24 Budget Setting</i> : Further discussion to take place at One Bromley Executive regarding formatting/presentation of data in future Finance reports for the One Bromley Local Care Partnership Board.	26.01.2023	David Harris/ One Bromley Executive Members	September 2023	Open	Review through One Bromley Executive and One Bromley finance leads, to take a more streamline approach covering programme spend. To report back to the LCP Board in September 2023.
22.	4.1: <i>Previous minutes from the 16/03/2023</i> to be corrected: <ul style="list-style-type: none"> Page 1 – Dr Claire Riley to be listed as a voting member of the LCP Board Page 1 – Healthwatch representative and apologies received for the January meeting to be recorded in the minutes Page 4 – BTSE update text on CENSUS figures to be amended Page 5 – St. Christopher's update to be amended to include palliative and end of life care workforce. 	16/03/2023	Avril Baterip	16/05/2023	Closed	Previous minutes from the 16/03/2023 corrected, action complete.

One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	Partnership Report	
This paper is for information .		
Executive Summary	The purpose of this report is to provide the Committee with an overview of key work, improvements and developments undertaken by partners within the One Bromley collaborative.	
Recommended action for the Committee	The Committee is asked to note the update.	
Potential Conflicts of Interest	None.	
Impacts of this proposal	Key risks & mitigations	Not Applicable
	Equality impact	Not Applicable
	Financial impact	Not Applicable
Wider support for this proposal	Public Engagement	Not Applicable
	Other Committee Discussion/ Internal Engagement	Not Applicable
Author:	Joint report from SEL ICB, the PRUH, Oxleas, St Christophers Hospice, Bromley Council Adult Social Care, Bromley Third Sector Enterprise (BTSE), Bromley Healthcare, Bromley GP Alliance (BGPA), Bromley Primary Care Networks, Bromley Public Health	
Clinical lead:	Not Applicable	
Executive sponsor:	Dr Angela Bhan, Place Executive Lead	

The winter flu campaign ran in parallel to the Covid booster campaign, with co-administration offered where possible. A One Bromley partnership approach maximised the coordination between partners to ensure vaccination administration was as efficient as possible and responsive to patient need. Promotion included messaging on buses around the borough, along with Bromley clinicians featured in local print and social media. Learnings from the winter flu campaign have been gathered and are being used to inform both the Spring Covid boosters and planning for the 2023/24 winter campaign.

The Spring Covid boosters campaign has now commenced by partners across One Bromley, with involvement by a number of GP practices, PCNs, Bromley GP Alliance and community pharmacies, as well as the KCH team at the One Bromley Health hub in the Glades. This campaign is being coordinated by the Bromley Primary Care team which continues to convene the One Bromley Vaccinations Taskforce.

Primary Care update

In anticipation of the future developments needed as part of implementing the Fuller stocktake report, primary care stakeholders came together to meet in a Summit earlier this year. The Summit was a culmination of engagement sessions held with individual practices, PCNs and with the federation to review the Primary Care Needs Assessment first conducted in 2018. At this event, GP leaders reflected on the considerable changes to GP access since the pandemic, the implications of the workforce gaps in general practice and the new models of primary care to introduce integrated neighbourhood teams.

The next stage of the PCNA review is focusing on engaging with the wider primary care workforce, in particular the new PCN roles (known as the ARRS roles), alongside an analysis of the current workload in general practice through the multiple access channels. This review and the engagement sessions held are informing the approach to transforming health and care services at a neighbourhood level, both as a primary care system and as a One Bromley partnership. The Bromley Fuller delivery plan has been built taking on board the discussions so far.

The Bromley Primary Care team in the ICB has recently been focusing on supporting practices and PCNs with interpreting and responding to the national GP contract changes for 2023/24, which will have considerable implications for GP access. These include significant revisions to the Quality & Outcomes Framework (QOF) and the Impact and Investment Fund (IIF) for this year. The ICB is working with PCNs to finalise and agree access improvement plans with each PCN in line with the new national 'Capacity and Access Payment' requirement.

Children's Integrated Health Hubs

In Bromley we are implementing a children and young people's integrated health model. This programme brings together Paediatrics, GP's and Children's Community Nursing to support children in their community.

Following a range of briefings with PCN's during November- December 22, we wrote to all PCN's in January 23; asking them to complete a readiness questionnaire to determine the support they may need and any infrastructure modifications required to deliver the programme. These responses informed the selection of which PCN's would be in the first phase of implementation. The two PCN areas which have been selected are: The Crays and Beckenham. These areas selected presents the opportunity to learn from different areas in terms of population and deprivation factors. The current phased implementation is:

Date	PCN's
April/May 23	2 (Crays and Beckenham)
Sept 23	Further 2/3 PCN's join
Jan- March 24	Further 2/3 PCN's join
April-June 24	Remaining PCN's join to complete borough wide coverage

Since February, we have been working The Crays and Beckenham PCN's on preparing for the launch on 2nd May 2023.

We have been carrying out some co-production with professionals and parent/carers on the name for the service. The name which has been selected is B-CHIP (Bromley Children's Health Integrated Partnership). We are working with communication colleagues on marketing and communication briefings including logos and publicity.

We have worked hard to ensure that the programme has sound foundations – both in terms of sustainability, infrastructure, resilience and the system factors to ensure its success. We have learnt from the experiences of other healthcare teams but have also innovated – both in our processes and structure. For example, a key enabler of integrated healthcare is seamless data sharing: this was a challenge and we have worked to ensure development of robust data sharing regulation compliance across multiple organisations.

Through collaboration with our Primary Care, Community Nursing and One Bromley colleagues we have developed customised templates to ensure this programme is:

- Locally optimised for Bromley
- Designed to facilitate continuous (live) evaluation and improvement
- Provides timely feedback to all members of the integrated care healthcare team and patients

We have engaged with all members of the healthcare community, endeavouring for clear communication, smoothing flow of information and aspiring to break silos to smooth our patient's healthcare journey. We have listened and made changes in response to local feedback to optimise the implementation of this partnership. We have and will continue to co-produce this programme and retain the flexibility for some further localised adaptation to each PCN.

As outlined in the Fuller Review – this is a keystone project in ensuring our patients get streamlined care, within their local communities, with personalised and more pro-active care and with an emphasis shift from current disease and ill health management to that of wellness and health promotion. This project will support focus on patients getting the right care, by the right clinician, in the right place, first time. We have shared our learning from this process in pan-borough fora to facilitate and support other integration work across Bromley.

We aim to continuously evaluate, adapt and optimise this programme – assuming our first stage implementation goes well, we aim to continue the phased rollout (as above) with full borough coverage expected by Q3 2024.

Mental Health Strategy Update

The Bromley Mental Health and Wellbeing Strategy (2020-25) sets out a joint vision to support communities and individuals to have improved mental health and wellbeing. The strategy has seen a number of significant improvements in Bromley including: the roll-out of three mental health support teams (MHSTs) to Bromley schools; the opening of the new Bromley Mental Health and Wellbeing Hub – an innovative NHS/voluntary sector partnership between Oxleas NHS Foundation Trust and Bromley Mind; and a large-scale transformation programme of mental health recovery services, enabling 80+ people to live more independently – taking on tenancies of their own. The strategy is now at its mid-point with work now commencing to deliver an All-Age Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA) which, in turn, will inform next steps as we come towards the end of the current strategy's lifespan.

2. Princess Royal University Hospital and South Sites

We continue to manage our waiting lists and reduce long waits, particularly for surgery and other planned interventions. Two patients are currently waiting 78 weeks; one on an admitted pathway and one on a non-admitted pathway (as at 24 April 2023). Additional capacity is critical to reducing the total waiting list further, aside from further strike action, and we continue to work with partners to reduce the 325 patients waiting over 52 weeks for either a procedure or outpatient appointment (as at 20 February 2023).

Inevitably, the junior doctors' strike action put pressure on existing services and has delayed planned care. Between 13 March and 7 April, 90 planned elective sessions were lost due to the junior doctors' strike. Between 13 and 15 March, 219 patients' operations were cancelled. In response, we have initiated a targeted response for example establishing over 25 sessions to date for bariatric patients. In addition, the Trust has offered mutual aid capacity to partners and in development is a tool to help teams schedule patients and cleanse our records ahead of our EPIC implementation.

In response to the future strikes by nurses and doctors, we will continue to enact our escalation plans with a heightened incident command and control structure. We will continue to increase staffing levels at critical locations, undertake more frequent and more widespread senior communications and repurpose areas to create more capacity to quickly turnaround ambulances. In balancing the risk to our patients under our care during these strikes, we have postponed reluctantly some non-urgent patient appointments but continued life-saving operations throughout. We also thank our additional volunteers that have supported our ED staff and patients during these strikes.

As previously reported, these strikes become increasingly concerning if the areas exempted diminishes (in addition to increased frequency and lengthening duration).

We also continue to outperform the national (DM01) threshold for diagnostic compliance, achieving 0.93% (well below the 1% threshold despite a slight deterioration from 0.69% in Jan-23). Breaches increased from 38 breaches in January to 56 in March with the main increase in Cystoscopy-Urology which rose to 49 cases.

Our link bridge, between our Day Surgery Unit and the main building, was handed over from the contractor and opened for use in March. This access increases the range of surgery available at the Unit as well as provide a higher quality environment for staff and patients journeying between. Its formal opening is planned for June 2023.

Our Trust Board signed off the latest business case for the new £15m Cancer Endoscopy Unit, due to commence its build in summer this year. Further work is now underway to ensure the workforce plan for its six rooms are robust and smooth. We will share our plans with our network partners.

3. Bromley Council Adult Social Care

Since the last meeting we have been extremely busy continuing to prioritise hospital discharge, particularly in the pressure times of Bank Holidays and during strikes by health colleagues. Despite the pressure we have continued to deliver good results with the majority of people being discharged very soon after referral.

A further major piece of work has been the completion of the Market Sustainability Plan which detailed how Bromley Council will work with care providers to deliver a sustainable provision and how this will be funded. The work with providers during covid provided an excellent base from which to have these discussions which were well received. We have now written to providers with a formal offer of fee levels for this financial year, which cover the inflationary uplift from Bromley Council and a short term uplift, due to no guarantee of ongoing funding from government, as part of the Market Sustainability work.

The Directorate continues to prepare for the introduction of the CQC Assurance Programme, which will see on-site visits from CQC at some point during the next couple of years. The Directorate is currently carrying out a self-assessment, which we will seek engagement from the ICB in completion.

The Bromley Care Awards event is now diarised in for June 22nd, which will see a celebration of work across the sector and recognition of individuals and teams nominated by colleagues, managers and partners.

4. St Christopher's Hospice

Education:

- Greater participation in learning with St Christopher's CARE- the teams have supported the development of courses and learning opportunities with St Christopher's CARE by encouraging staff to complete the Teach with CARE course and then participating in delivering sessions. We have seconded staff (IPU and community) into CARE to support with education which bridges the gap between expert practice and teaching.
- Supported one of our Aspiring Nurse Consultants to develop a bespoke training, education and support programme, underpinned by comprehensive competencies for associate clinical nurse specialists. The programme has been well received and will start showing its worth over the next few months.
- Aspiring Nurse Consultant Programme - this exciting programme has started in St Christopher's CARE to develop the Nurse Consultants of the future. There are 5 participants from St Christopher's and four external participants from a variety of hospices across the country. The course is being well received and is rightly challenging.
- Non-medical Prescribing Community of Practice - this course attracts external participants (approximately 60) including people from overseas. Restarting online in April 2023 with a modified format comprising journal reviews as well as formal educational sessions delivered by subject matter experts. This is led by one of our

Nurse Consultants and also one of our Aspiring Nurse Consultants. Speakers are booked for the whole year.

Recruitment:

- This year has seen a diversity of recruitment opportunities including considering and developing the role of the Physicians Associate in the Hospice. We have successfully recruited to two posts and the incumbents have started in role in quarter 4 of 2023. We were successful in recruiting a new Medical Consultant Lead who is having a significant impact on our clinical care delivery including bringing the out of hours prescribing agenda to the fore and working with stakeholders to improve medicine availability to people requiring medication at the end of life.
- Early in 2022 we recruited two GP's to our medical workforce. Their appointments have proved beneficial in making strong links across the palliative care workforce and primary care. They are enjoying their roles and the different skill set they bring enhances our care provision. As the role has been positive the medical team have added a further 0.2 WTE GP to provide a focus on care across care homes and to support the Virtual Ward roll out in Bromley.
- There has been increased investment into the community teams with the addition of at least 5 more nursing posts to support the increasing complexity of the people we offer care and support to in addition to the continually increasing numbers of referrals we are receiving.
- Psychological and Spiritual Care Lead – following the Spiritual Care Review in the summer of 2022 and further consideration about our psychological care provision, we have recruited to a lead for this combined offer whose priority is to review our care provision. This role will also look at developing a service to support our staff in their roles.

Ward Refurbishment:

Work continues on developing the specification for the ward refurbishment working in partnership with the charity CRASH. Regular meetings with the architect supporting the refurbishment plans have been convened and are in the late stages of agreement. We have also been granted a significant donation from CRASH to support the current work. St Christopher's is actively looking to write bids to apply for charitable support.

Additional updates:

- The implementation of the recording of calls at the beginning of December 2022 has been instrumental in supporting the investigation of complaints and supporting care provision.
- At the end of March, the Care Director, Director of Quality and Innovation and also the Lead for St Christopher's CARE visited HMP Brixton to understand how end of life care provision is enabled within a prison environment and what support we could offer. It is clear that there was interest in developing an educational package for the health teams across prisons in the UK in addition to educating prison officers. This

will be work in progress over the coming months but aligns closely to the emerging Strategy for the next 3 years.

- We have introduced a welcome pack for all people being admitted to the inpatient unit in addition to a basic food parcel for people discharged home from the unit. This has been well received.



New Projects and Innovation:

Reaching the [Bromley homelessness population](#) St Christopher's was successful in achieving external funding to build on previous work undertaken in Croydon to introduce a sustainable model for embedding multidisciplinary, person-centred care for homeless people who have end-of-life or palliative care needs. We will do this by identifying and then training St Christopher's staff to become 'Bromley Homelessness Champions (BHCs)'. These champions will then liaise with hostels and other organisations across Bromley and provide their staff with training and support around recognition of how to support homeless people dying and to improve their experience of end of life. This will improve their knowledge of how to identify palliative care needs, improving access and health outcomes for the homeless people they work with. Our BHCs will work to integrate multidisciplinary teams (MDTs) into hostels, consisting of St Christopher's staff, hostel staff, social workers, general practitioners, health practitioners and local authority housing workers.

[Heart Failure Project supported by the Burdett Foundation](#) - following the successful application to the Burdett Foundation for funds to create and test an integrated model of community support for people living with, and dying from, advanced heart failure in Bromley and Croydon to enhance our existing provision, we have successfully recruited a nurse to deliver this exciting project. She started in post at the beginning of April 2023. The project aims to improve people's quality of life, reach patients who may currently struggle to access the support they need, reduce hospital admissions, and we hope it will be an innovative model of care to enhance our existing provision and support patients with advanced heart failure that is both scalable and replicable. A Steering Group is being set up with an inaugural meeting before the end of April 2023.

St Christopher's Community Teams have started work in our boroughs within the emerging [Virtual wards](#). Virtual wards allow patients to get the care they need at home safely and conveniently, rather than being in hospital. There has been additional investment from the NHS across the country to support people at the place they call home, including care homes. We are heavily involved in the Virtual Ward implementation in Bromley where we have received additional funding for two more nursing staff and some Consultant time. Our involvement in other boroughs is less well developed around End of Life Care.

[Choose Home](#) continues to grow in its offer and we continue supporting people discharged to both Care Homes and also back into their own homes by undertaking a next day visit to ensure they are settled back into their place of residence. The team have supported 439 people between April 2022 and the end of March 2023 exceeding the internal KPI of 400. The team are actively supporting all people discharged from the IPU home on the day after discharge. This metaphorically holds the persons hand as they leave the IPU and settle back at home and is being well received.

[Community Action](#)

We had our biggest quarter ever with numbers of attendees and volunteers:

- In Q4 we had 2458 attendees at sessions and activities we run, 541 of those being new to us
- We delivered 430 hours of activities (including, learning, training, support and activity workshops)
- Volunteers working with projects we run donated 2510 hours of their time to help people and each other in the community (this is an estimate based on the role we ask people to perform)
- Matches this quarter 48
- Total number of volunteer-community matches 168
- Total conversations with patients/ carers/ public 393; networking hours 130.

Bereavement Services

Background - until 2023, St Christopher's Adult and Child Bereavement (known as Candle) services have worked as two separate teams. In February 2023, Fiona Walkingshaw was appointed (0.83 FTE) as Head of Adult and Child Bereavement to work collaboratively and creatively with the Adult and Child Bereavement Co-ordinators and their teams and to engage with leaders across all the hospice services in order to ensure the continuous development, and sustainability of our bereavement services.

The Adult Bereavement Service (ABS) run three services; St Christopher's Bereavement (STCH), Bromley Bereavement Service (BBS), Lewisham Bereavement Counselling Service (LBC).

Due to new investment in the ABS we are pleased to inform the committee that the waiting time to begin a therapeutic intervention has reduced from 6 months to under 15 weeks.

The Early Intervention approach for those cared for by St Christopher's is readjusting to the fact that patient/family facing colleagues are now returning to undertaking the Condolence calls in the immediate aftermath of death. To support them in this task, awareness raising sessions will take place over the next quarter aimed at informing them of the next stage of the bereavement support offer. In the meantime, Early Intervention colleagues are taking care to ensure that their initial call takes place no sooner than seven days post Condolence call out of respect to the grieving family and the demands on their time.

To meet the demand for facilitated groupwork support, arrangements were made for three Learning from Loss Groups to start their 7-week programme in the first quarter of 2023.

Support to bereaved people from the Community Action team include:

- Bereavement Help Points (BHPs)
- Healthy Walks
- Bereavement Buddies continues to be a popular role for volunteers with 50 people signing up, and 30 trained to date. 8 matches were made in Q4.

Candle Child Bereavement

The Children and Young Person's Service known as Candle provides receives referrals for both the children of patients who die under the care of St Christopher's as well as from parents/carers, schools, social and family workers and children's services for children who are bereaved under any circumstance across St Christopher's five-borough catchment area.

A new Candle Co-ordinator, Emma Lupton, took up post in January 2023.

Since the return to working in person this year Candle supported by a volunteer has reintroduced its groupwork offer. There are currently three regular groups:

- Parent/Carers Drop-In group once a month on a Wednesday morning
- Young People's Group on the early evening of the 3rd Thursday each month - there is always a theme and creative activity with a focus on giving young people a regular space to meet
- Helping Your Bereaved Child Information sessions running twice a month – an initiative that we are piloting for any parent/carer whose child has been referred to Candle as the first point of support and a means of information-sharing and asking questions about how children and young people grieve, guidance on what is 'normal' and when to be worried about your child, what bereaved children and young people need including useful information and resources for children and adults.

External activity

Three Candle colleagues were involved in a local community initiative to support bereaved families with their babies, toddlers' and young children through a half day gathering at which there was the opportunity to talk to someone at length from Candle. Their presence was appreciated by both organisers and attendees.

5. Bromley Healthcare

Our strategy: Community First

Bromley Healthcare is launching its new organisational Strategy and Values over April and May. Our new strategy renews our focus on what matters, and draws our attention to working with colleagues, our partners and communities to bring people the best healthcare and experience.

The launch has commenced with our internal team, where we will focus on embedding our vision, goals and values into our day-to-day work. Additionally, we are conducting strategic reviews to ensure that all our team priorities align with our new strategy and values. Following our internal launch, we look forward to formally launching our strategy and values with stakeholders, local people and communities. We recognize that the focus needs to be on embedding our goals and landing outcomes effectively to make a lasting change.



Our vision for community healthcare: We want to empower people to live their fullest lives in the heart of their communities.

How we will achieve our vision -

Goal 1: Building a culture of growth and opportunity for our people

The experience of the people who work for Bromley Healthcare - our colleagues - is vital. We will make it our priority to build and develop our identity as an organisation. We will grow stronger collaborative relationships as teams and colleagues. We will provide support, development and training that focuses on clinical excellence and fostering a culture of belonging and inclusivity. We will create high quality, meaningful and rewarding jobs which fit around our people's lives and responsibilities.

Goal 2: Becoming a leader in integrated care, driven by the population's needs

We have a deep knowledge of the needs and shape of our population. We will take a "listening lead" in developing genuinely integrated care for our communities – leading where we are best placed to do so, and supporting where that makes most sense to. We will focus on taking a community-centred approach to addressing ill health and vulnerability early. We will be part of neighbourhood teams, utilise innovative data and tools, listen to people to understand their needs, and develop new service models that meet people's needs.

Goal 3: Investing in our communities

We will invest in children and young people and their families by building on our work with partners in children and family centres and education across our communities. We will reimagine the way we offer our services to minimise their negative impact on the environment. We will continue to invest our profits to improve services, through our charity, through research and through development of our own work.

New Children and Young People's Bladder and Bowel Service

Bromley Healthcare launched a new specialist nurse-led service to support children and young people aged 5-18 with bladder and bowel conditions in Bromley in March 2023. The new Children and Young People's Bladder and Bowel service will replace the Nocturnal Enuresis and Continence Containment Products services.

Through this service, our specialist nurses will provide assessments, advice, support and education to children and young people, their families and other professionals. This includes support for toilet training for children with additional needs, constipation, day-time wetting and night-time wetting.

Case Management in Orpington

The Community Matron team is working with Orpington PCN providing ongoing support to designated patients following the Multi-disciplinary team decision; this will involve supporting patients where they need a longer period of input than just a one-off visit. This builds on a single practice pilot done at the Stock Hill Medical Practice.

6. Oxleas NHS Foundation Trust

Oxleas Developments: Adult Autism Partnership Programme



NHS Chief Executive Amanda Pritchard visited south east London in April to learn more about developments in services for autistic people. Together with Tom Cahill, National Director for Learning Disability and Autism, she met with colleagues at Queen Mary's Hospital, Sidcup. Amanda and Tom found out more about the Oxleas Adult Autism Partnership Programme and South London and Maudsley's Transforming Care in Autism team.

Led by the South East London Integrated Care System following a pilot with the two trusts in 2019/20, these services have been co-designed by parents and carers working with the trusts' health professionals. The services aim to ensure that autistic people are only admitted to hospital when absolutely necessary and that they are discharged more quickly when they are. The new services have had a positive impact.

Dr Ify Okocha, Chief Executive of Oxleas, said: "The visit from Amanda and Tom was a great opportunity to showcase the progress already made and to talk through plans to develop services further."

SEL ICB's Associate Director for Learning Disability and Autism, Carol-Ann Murray, said: "We were pleased that NHS leaders were able to see how our clinicians and managers have worked alongside autistic people and their parents and carers to change services over the last three years."

"They met with the parent of a young adult who was involved in co-producing the service and heard how being listened to and her involvement had benefitted her son and other autistic people.

"Coproduced services have already had a real impact on reducing the numbers of local autistic people in long stay hospitals – a key challenge set for us by NHS England and the Department of Health and Social Care."

The South East London Integrated Care System has signed up to Mencap's 'Treat Me Well' pledge. This aims to ensure NHS staff make reasonable adjustments for people with a learning disability so that the right care and treatment is given and avoidable deaths are reduced. [Learn more about the campaign here.](#)

Developments in Child and Adolescent Mental Health Services:

Waiting Times

Bromley CAMHS are continuing to work on reducing waiting times for children and young people referred for assessment by the service and we have made positive progress across all teams in the past three months.

However, the service continues to be impacted by challenges in recruiting suitable trained clinicians and so continue to operate with a vacancy rate that is higher than we'd like. There are several initiatives in place to address this on both a short- and long-term basis.

Partnership Working

Bromley CAMHS also continues to work actively with system partners to improve the service offer for children and young people in the borough. Work is progressing to design an integrated single point of access in partnership with Bromley Y, with a view to phase one implementation in September 2023. As part of this work, we are also exploring opportunities to integrate parts of the service with the Children and Families Hub (formerly MASH) as part of a later phase of this project. There remains a focus on aligning pathways to the national recognised THRIVE framework. There is an upcoming system mapping session on 27 April which will aim to map current provision and identify opportunities for further development in line with principles of THRIVE.

Community mental health services

The transformation work of how we provide mental health services began during 2021 with the aim to develop a new service which would be easier to access and less complex to navigate for service users and professionals. The plan was for the service to operate

as a front-door to mental health support and provide step-down support for people ready for discharge from secondary care. We would offer a holistic approach, with a focus on the wider determinants of mental health including employment, housing, and finances. There was to be a greater emphasis on a partnership approach to care planning with service users, carers and primary and secondary care colleagues and the third sector working together to deliver the care pathway more effectively.

Since those early days, much work has been undertaken with us (Oxleas) and Bromley, Greenwich and Lewisham Mind and we now have in place a team of staff working together to offer holistic assessments using a new framework 'DIALOG' which is a set of 11 questions where service users are asked to rate their satisfaction and needs for care across different parts of their life and treatment. It helps to guide a structured conversation between a health professional and service user that is patient-centred with a focus on change. We have undertaken several Service User Focus Groups to review accessibility and inclusivity, the use of Dialog and the offer of interventions, and the development of the website.

During year 3, we are focused on completing our recruitment, increasing our group programme offer, introducing self-referrals, launching our website, completing the work to have new premises, and are planning a stakeholder event for the summer.

Bromley Memory Service

We previously reported that Bromley Memory Service had received their MSNAP accreditation (Memory Service National Accreditation Programme). MSNAP is a quality improvement and accreditation network for services that assess, diagnose, and treat dementia in the UK which was established in 2009 and Bromley have maintained this since their first review 10 years ago. The standards have been developed from key documents and expert consensus and have been subject to extensive consultation with professional groups involved in the provision of memory services, and with people who have used these services and their families/carers. Since then, we have heard that alongside accreditation the team have also won a sustainability award. This recognises that the team met 90% or more of the 'Sustainability Principles' including prioritising prevention, empowering individuals, and communities, improving value, considering carbon and staff sustainability.

Feedback from the panel: Congratulations! In addition to your MSNAP accreditation, we have studied your recent MSNAP review and found that your service has met the criteria for receiving a Sustainable Mental Health Service Commendation. We congratulate you on your high impact work and hope that your service continues to provide high quality sustainable care in future.

7. Bromley Third Sector Enterprise (BTSE)

BTSE (Bromley Well) Partnership Report

This is the second quarter for the Bromley Well service under the 2012-27 PSIS contract. The Bromley Well Service has continued to deliver high quality and consistent services.

Cost of Living Issues

Cost of Living continues to be a significant concern across all services - the top 5 issues in this quarter were as follows: Charitable banks and Foodbanks up 69% for the same period last year, Personal Independent Payments up 33% for the same period last year, Council Tax Reduction up 39% for the same period last year, Financial Capability up 133% for the same period last year, Energy enquiries up 186% for the same period last year. This has significantly increased the number of SPA and Information & Advice queries on cost of living, added pressure to Forms Completion Service and impacted on all services. To this end BTSE has produced a Cost of Living Guide available on the Bromley Well website, which we are updating to include digital social tariffs, link is below:

<https://www.bromleywell.org.uk/our-services/cost-of-living/>

Citizens Advice Bromley have been awarded grant funding to employ an energy advice worker to which they will refer Bromley Well energy cases as appropriate, adding value and capacity to the service. Age UK Bromley and Greenwich are also funding a Cost of Living support post.

We are progressing discussions for a SPA presence at the new Health hub in The Glades, funded by One Bromley, to provide further accessible outreach to local residents.

Service Delivery

Other notable service developments for the quarter ending March 2023 demonstrate increased service demand: SPA received over 4000 referrals from all sources and 1462 direct calls and 2600 emails from unique clients. We are looking at ways to offer alternative ways to contact SPA including emails, which are increasing significantly. An online form which has been tested with professionals including social services and social prescribers has now gone live and we are encouraging use wherever possible.

Our Information and Advice service has helped residents claim support of £642,517 since the start of the new contract. Forms Completion Service (FCS) achieved total income of £119,844 this quarter. Following discussions with Age UK Bromley and Greenwich colleagues the FCS has effectively been integrated into Elderly Frail Information and Advice service which provides additional capacity and flexibility. This service saw a 44% increase in referrals in Q4 and have self-funded a cost-of-living advisor which Bromley Well clients will be referred to where needed, adding additional capacity.

Elderly Frail Services continue to experience significant demand, particularly those supporting hospital discharge. Take Home and Settle have supported 160 clients in the last quarter to transition from hospital to home safely and efficiently. New sitting service staff recruited and transition is underway. Our Handy Person Service completed 244 jobs, comparable to previous quarter. We installed 162 key safes & 76 grab rails.

We continue to support the transition of mental health services into the new Wellbeing Hub in particular via triage from the Bromley Well SPA.

Carers

Carers continues to be a significant area of work with BTSE. We are delighted that Bromley Well has been awarded the Carers Trust of their 'Excellence for Carers' Award - their quality standard and that this received publicity in recent One Bromley and SEL ICS updates. Our Young Carers App soft launched at Young Carers Action Day on 15 March. This has been codesigned with young carers from the outset. We were awarded a Carers Trust Grant for Young Carers Action Day and are producing materials in the form of information for stakeholders including schools, social prescribers and others to raise awareness of young carers and support available.

We have continued to engage with One Bromley and LBB on the Carers Agenda including the forthcoming carers strategy. Adult carers and mental health carers engaged in LBB Carers Strategy Consultation through an adult carers team led engagement event and we engaged with a number of our associate members. One Bromley Executive has agreed to support an all-age Carers Charter, which BTSE is leading. A steering group on a Carers Charter has taken place and next steps are in progress for wider consultation.

Raising Awareness and Campaigns

Bromley Well produced a warm centre map launched in late November. We are aware that a number of these are continuing as community hubs so we will keep the map updated.

We have launched a new online referral form for partner organisations which will simplify admin and lead to better data collection. We are developing/refreshing the website home page to make it easier to navigate and make direct referrals to the service.

8. Primary Care Networks

New GP Contract 2023/24

The publication of the new GP 2023/24 Contract introduced significant changes to the way PCNs are incentivised to provide health care services. The PCN payment incentive scheme – the Investment and Impact Fund - has been streamlined to focus on a smaller number of priorities - namely flu vaccinations, health checks for patients with learning disabilities, early cancer diagnosis and appointments offered within two weeks. The remainder is entirely focussed on making improvements to patient access and managing demand, to include measures such as making better use of cloud telephony, acting on patient feedback and increasing online consultations.

PCN Learning Disabilities Health Check Co-ordinator

A Bromley-wide Learning Disabilities Health Check Co-ordinator will be recruited as a pilot scheme across SE London. The provision of health checks to patients with learning disabilities is effective in identifying previously unrecognised health needs, including those associated with life-threatening illness. As recalling patients with learning disabilities can be challenging, the Co-ordinator will help get the health checks completed by arranging the appointments, completing the Pre-Health Check Questionnaire and enabling any required reasonable adjustments. Expected outcomes will be to reduce morbidity and preventable deaths, improve health and wellbeing, reduce avoidable admissions to inpatient settings, reduce preventable admission and improve the quality of care.

Enhanced Access revision plans

The first quarterly Enhanced Access reports demonstrated that Bromley PCNs successfully delivered over 17,000 appointments across more than 4,000 hours between October and December 2022, well above the minimum required hours in the borough. PCNs have worked hard to provide a range of appointment types offering a mix of clinical professionals. PCNs are now undergoing a review of their Enhanced Access services looking at improving utilisation of appointments, workforce capacity and assessing potential steps for improvements.

Further data will be available in due course measuring outcomes at 1 year. Feedback from Primary Care was that residents were very pleased with their referral to a weight management programme which was easily accessible across the borough. From a commissioning perspective the programme was best value for money. Unfortunately, the funding from OHID was not repeated for this financial year so this programme ceased in December 2022.

Bromley Homeless Health Project

Phase one of a Needs Assessment into Homeless Health (September 2022) identified three areas for recommendation: data collection, increased partnership, and tailored support. Experience gained from the past three years' of the Winter Clinic at Bromley Homeless Shelter (BHS) has informed a new project that began on the 1st March 2023 with the commencement of a Nurse Practitioner and Care Co-ordinator (collectively the Bromley Homeless Health Team - BHHT).

The project aims to improve the health of single persons experiencing homelessness in Bromley through close working both clinically and strategically across health and care partners; enable homeless persons to understand their own health status; and empower them to access mainstream services. The BHHT, working under Bromley GP Alliance, has already set up clinics at BHS to address clinical needs. These clinics will also facilitate greater, and more accurate, data collection for the single homeless cohort.

The comprehensive representation of stakeholders on the Steering Group will support the BHHT to strengthen pathways to primary and community services to reduce burden on A&E admissions and emergency responses from mental health, social care and housing teams. The stakeholders represent Primary and Secondary Care, Housing, Safeguarding, Adult Social Care, Drugs and Alcohol Services, Mental Health, Public Health and the Voluntary Sector. It is recognised that the agreed cohort is more likely to have complex needs that are best addressed collaboratively with strong partnerships across the local system. Early success on partnerships is evidenced the BHHT and Homeless Health Lead at the PRUH collaborating on support for patients with Mental Health complaints presenting at A&E. The project has been funded for three years with a robust set of KPIs and Outcome Measures for evaluation and to assess impact.

10. Bromley GP Alliance (BGPA)

Community Phlebotomy Service

BGPA continues to offer the service to residents across ten sites in Bromley. Appointments are bookable on line as well as via telephone. Urgent appointments are available on the day with waits for routine appointments available within 5 days.

Covid Spring Booster

BGPA is supporting the service for patients over 75 or immunosuppressed from April to June 2023. Patients are invited to book appointments via the National Booking System. The service is available at the Orpington Health & Well Being Centre. The vaccinations for patients residing in care homes is due to complete by the 28th May.

Community Anticoagulation Service

BGPA will be taking over the running of the service from 1st June 2023 from Boots. The service will operate from a number of sites including Beckenham Clinic, Orpington Health & Well Being Centre, Stockhill Practice in Biggin Hill, central Bromley and West Wickham sites (soon to be announced). The service will operate 7 days a week and offer a housebound service. Patients are referred by their GP.

Homeless Service

This nurse led service started in March 2023 based at the Bromley Homeless Shelter in central Bromley working with colleagues (Care Coordinator, Bromley Alcohol and Drug Services, Oxleas Mental Health, PRUH Homeless team) providing dedicated support to the homeless. The service will provide experienced health and care professionals who are able to support and signpost accordingly.

Services will include a full health examination upon entry to the service. Diagnosis, advice, treatment and support to manage acute and chronic health conditions.

The aim of the service is to promote lasting independence in the homeless population in accessing health and well-being services.

Hospital at Home Service

BGPA is working with Bromley Healthcare and key partners by providing GPs to work within the service which is currently available weekdays to support patients in their own home and to facilitate hospital discharge. The plan is to expand to a 7 day service with full out of hours cover.

Clinical Assessment Service

BGPA continues to provide GP appointments to Urgent Care and NHS 111 for patients needing urgent same day review. This service is available on Sundays and Bank holidays with additional adhoc clinics as necessary.



One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	Winter Review 2022-23 and Next Steps
This paper is for information/discussion	
Executive Summary	<p>1. Summary</p> <p>1.1. A Winter 2022/23 Review workshop, led by the A&E Delivery Board, took place on 23rd March 2023. The workshop, attended by all health and care organisations from across Bromley, considered the impact and success of the Joint Winter Plan and associated activity. A range of lessons learnt and recommendations were identified by the workshop that will inform both summer transformation work to prepare for next winter as well as inform the 2023/24 winter planning.</p> <p>1.2. The Local Authority has also undertaken a full appraisal of adult social care winter activity including an evaluation, alongside the ICB, of the Discharge Funding investment. The additional funding enabled enhancements of already planned winter activity as well as an opportunity to test a range of different models of care.</p> <p>1.3. This year, the A&E Delivery Board are keen to engage with front line staff to receive direct feedback to understand and inform future winter planning. This is being planned for throughout June 2023 and will pick up on some of the themes emerging from the initial winter evaluation activity.</p> <p>1.4. All winter review action will be brought together into a final set of system recommendations. The report provides early recommendations and an opportunity for the Local Care Partnership (LCP) to comment ahead of final publication.</p> <p>2. Winter Performance</p> <p>2.1. Whilst a similar picture was seen nationally and across SEL, this winter has seen extraordinary pressure on the local health and care system. Activity returned to pre-pandemic levels not only in the acute settings, but for 111/999, LAS, community, primary care, social care and the voluntary sector. Combined with increased staff sickness linked to large viral outbreaks and substantial industrial action the system has had to work hard to ensure residents receive the care they need.</p>



2.2. Activity and performance data for Winter 2022/23 shows an increase of 6.3% in attendances to A&E against the same period last year. Less people however were admitted, but for those who were, they remained in hospital, on average, for longer with an increase in patients remaining in hospital for 21 days plus. Clinicians cite the increase in acuity as the main driver for increase in length of stay (LOS) for admitted patients. Further work to understand what is driving this increase is recommended, to inform system development.

2.3. Data suggests that primary and community care continue to support people with long term conditions to be cared for in the community with Bromley continuing to perform considerably better than SEL neighbours and the national average for rate of admissions of people with ambulatory sensitive conditions.

2.4. There was however a noticeable 16% increase in A&E attendances for respiratory conditions this winter with a sharp increase in paediatric attendance during the end of 2023 following the predicted Strep A outbreak.

2.5. With less patients admitted, there was also a drop in overall discharges from 5,002 in 2022/23 to 4,468 discharges in 2023/24. Discharge performance continues to be excellent with the PRUH being the only hospital in SEL to continuously hit the target for the discharging of patients who no longer meet the Criteria to Reside (CTR) since 16 January. In line with the rest of the year, weekend discharges were a lot less than midweek throughout winter.

3. Winter funding and investment

3.1. There were over 63 winter schemes of varying size to support the system with a total budget of £6.5m. Much of the funding was nationally resourced, either ring-fenced for specific programmes i.e. virtual ward development or Extended GP access capacity or released late and at various stages throughout the winter i.e. £500m and £200m national Discharge monies allocation received in December 2022 and January 2023.

3.2. Although challenging to manage when announced late, the pre-winter planning ensured monies were able to be invested quickly and flexibly to meet presenting need, enabled the majority of the money to be fully spent. The funding provided an opportunity to pilot a range of different ways of working, models of care and pathway developments to strengthen admission avoidance and discharge. Part of the winter evaluation includes a robust evaluation of the winter investment to provide an evidence base for future commissioning and seasonal planning.



4. Winter review

4.1. The initial Winter Review Workshop gathered quantitative and qualitative evidence to understand the impact of each element of the 2022/23 Winter Plan, which were:

- Increased System Capacity
- Meeting Seasonal Demands
- Information sharing and Escalation.

4.2. Increased System Capacity

4.3. The ICB commissioned BGPA to provide a 111 primary care support service which added over 3000 appointments to the system. The hub was based at the PRUH and also supported the redirection of patients from UTC back to primary care.

4.4. The system continues to strengthen out of hospital services to prevent the need for people to attend and avoid admissions wherever possible. The hospital @home service continued to grow with 75 patients treated by the service in February 2023, up from 19 in December 2022. Initially the service has focused on supporting patients to step-down from hospital however a more recent focus on providing treatment to patients in the community before they go to hospital is showing improved outcomes for patients. Despite a strong admission avoidance offer, the PRUH A&E Department still saw an 8% increase in patients attending who were coded as needing no significant intervention and discharged, with a 16% increase in acute respiratory presentations highlighting further opportunity in this area.

4.5. Investment in hospital discharge pathway, which was further enhanced by additional Discharge Monies, provided consistent capacity that met demand. 2195 residents with care and support needs were successfully discharged this winter.

4.6. A robust domiciliary care offer again provided a strong safety net to support the system throughout winter. The brokerage and delivery of domiciliary care in Bromley ensures social care and the ICB under the continuing Health Care Framework, meet their statutory responsibilities to support eligible clients to remain at home and importantly, enabling patients with care and support needs, to be discharged home in a timely way, something patient feedback consistently tells us is important to patients and their families. The Bromley SPA also continued to function effectively ensuring residents needs were met at the point of discharge and throughout their recovery journey with an ongoing focus on rehabilitation and regaining independence.



4.7. This resilient discharge offer resulted in the PRUH consistently achieving the NHSE target for the number of people discharge who no longer meet the criteria to reside (CTR) from the middle on January onwards. The PRUH is the only hospital to achieve this in SEL.

4.8. The national Discharge monies enabled the full mobilisation of a Home First pathway (HF). The HF pathway offered enhanced and live in care at home delivered through an MDT approach with follow up community reviews of clients within their own home. From Dec-Feb, 70% of patients who would have been discharged to care homes were able to go home instead through this pathway.

4.9. Much of the pre-planned Winter Activity included an increase in statutory workforce. Although significant early planning took place, recruitment to temporary posts continues to be reported as a significant challenge. More success was found in a mutual aid approach or commissioning specific activity from partner organisations e.g brokerage capacity from CHS.

4.10. Meeting Seasonal Demand

4.11. A comprehensive, clinically led system response to the Strep A outbreak in December was quickly mobilised which effectively managed the issues around medication availability, mobilised additional PCN Hubs to increase capacity for paediatric primary care demand and provided rapid education and training to GPs in line with national guidance changes. Despite this, the PRUH Urgent Treatment Centre saw a significant increase of 36% of paediatric presentations in December 2022 compared to December 2021. The specialist paediatric capacity within UTC to respond to this demand, was never successfully mobilised due to ongoing challenges in enabling clinicians to work across organisational boundaries. Further work to assist cross boundary working will further support the flexibility needed to respond to winter pressures. Specific plans around managing paediatric pressure also require further strengthening in future Winter Planning.

4.12. Additional capacity was commissioned in the community respiratory team to support patients to get quicker access to clinics and high-risk patients to be identified and proactively supported i.e. review, rescue packs. Despite the capacity increase and proactive care, PRUH A&E still saw an increase in A&E attendances with respiratory HRG code by 16%.

4.13. Both seasonal demand areas although on the whole were responsive and ensured good care for residents within these groups, require further work to ensure there is a robust plan and clearly articulated offer for patients at high risk of seasonal illness exacerbation with a focus on providing this care in the community.

4.14. Information Sharing and Escalation

4.15. The mobilised infrastructure to manage demand and capacity, which replicated the success of previous years, continued to work very well. The central data and intelligence Hub monitored system wide activity to initiate support where required, with daily operational teams ensuring resident safety and system risk was effectively managed. The Weekly, LA run demand and Capacity meeting monitored and took action to address 55 emerging issues throughout the period effectively using data to monitor discharge pathway performance. During the top level of system escalation, where OPEL 4 was declared, full capacity protocols were enacted by all partners with system escalation calls chaired by the A&E Delivery Board chair providing a rapid and co-ordinated system response.

4.16. There continues to be a challenge in the volume of activity generated by discharge escalations with early winter review recommendations suggesting more work is needed on defined Action Cards to provide a more managed and strategic approach to operational escalation. This is a key area of focus in the workforce engagement activity planned, to ensure all actions support front line teams and do not unintentionally provide unnecessary increased scrutiny and pressure.

4.17. In line with previous year a successful communications and engagement campaign was delivered during winter with proactive communication to residents on using the right services as well as to encourage preventative measures including Covid and flu vaccinations. Regular information to front line staff was also provided to ensure they remained informed on all winter activity and received key information to help them do their job. Understanding the impact of the resident and staff communication campaign will also be a key focus of the winter review workforce engagement activity.

5. Emerging themes and recommendations from Winter 2022/23 Review.

5.1. Initial themes emerging from the Local Authority winter review and the A&E Delivery Board Winter Wash up Workshop include:

- ✓ Ensure future winter plans provide a coherent but flexible core offer that can adapt to presenting need around:
 - Primary Care demand
 - Admission Avoidance
 - Hospital Discharge
- ✓ Ensure a clear offer is provided for seasonal conditions including respiratory and paediatric viruses with a focus on out of hospital care

ONE BROMLEY

	<ul style="list-style-type: none"> ✓ Mainstream the Home First pathway. ✓ Agreed Escalation Cards to better manage the response to system escalation. ✓ Undertake a deep dive into 21 day+ LOS patients to better understand what is driving the increase in this area ✓ Agreed processes across all ONE Bromley organisations to enable staff to work flexibly across organisational boundaries and sites. ✓ Undertake engagement with front line staff to inform future winter planning and ensure the system are supporting them in the best way possible to do their jobs and provide excellent care and support to Bromley residents. 	
Recommended action for the Committee	<ul style="list-style-type: none"> • Note and support the methodology for reviewing winter 2022/2023 including: <ul style="list-style-type: none"> ○ Local Authority review of winter (complete) ○ A&E Delivery Board Winter Wash-up Workshop (complete) ○ One Bromley Executive review of early recommendations (complete) ○ Evaluation of winter spend (complete) ○ Engagement with the workforce (planned for June 2023) • Note and comment on the early findings emerging from the review activity undertaken so far (see section 5) <p><u>Next steps</u> The learning from Winter is being incorporated into next years' planning process as well as the ICB and wider system Urgent and Emergency Care workplan for 23/24.</p> <p>Concurrently, the 2023/2024 Winter Planning process will be initiated imminently to ensure early agreement of the Plan.</p>	
Potential Conflicts of Interest	N/A	
Impacts of this proposal	Key risks & mitigations	<ol style="list-style-type: none"> 1. Pressure in the system continues beyond winter –Mitigation: Many winter schemes have been carried forward into the spring and summer whilst wider system transformation takes place 2. Impact of non-recurrent discharge monies on cost and occupancy rates in the care home market potentially increasing market cost with significant implications on LA finances – Mitigated through work to maintain Home First offer to reduce demand on care homes from hospital with wider work through the Market Sustainability Plan to stabilise the market.



	Equality impact	
	Financial impact	
Wider support for this proposal	Public Engagement	Public communication was provided throughout the winter period to encourage self care, the use of the right services and to undertake preventative measures including covid and flu vaccinations
	Other Committee Discussion / Internal Engagement	ONE Bromley Executive A&E Delivery Board Also planned for Health and Wellbeing Board and Health Scrutiny Sub-committee
Author:	Jodie Adkin, AD – Urgent Care, Hospital Discharge and Transfer of Care Bureau	
Clinical lead:	Dr Lucia Anthonypillai, Clinical Lead for UEC & Discharge	
Executive sponsor:	Dr Angela Bhan, Place Executive Lead, NHS SEL ICB (Bromley Borough)	



One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	Bromley Hospital at Home – Update on the Service and blueprint for working together
This paper is for information and discussion	
Executive Summary	<ul style="list-style-type: none">• This presentation outlines the current delivery position of Bromley Hospital at Home, flags current challenges and how the contracting approach could be used in developing future collaborative services in Bromley. <p>Service update</p> <ul style="list-style-type: none">• Since last coming to One Bromley Local Care Partnership (LCP) in November, the service has seen over 250 patients with over 2,500 patient contacts. Referral quality and appropriateness continue to improve and the service has taken step-up patients through Rapid Response where the service has monitored and then avoided a hospital visit. It has also received exceptional service user feedback.• The service is currently constrained by a lack of detailed access to patient records, recruitment challenges and delays in implementing remote monitoring technology. To mitigate these:<ul style="list-style-type: none">○ The service head contract is signed. One Bromley Executive has agreed to a meeting in May where all contracted parties in the service meet to agree and sign the relevant documentation to put the wider service on a contractual footing. This will be followed by enabler teams (HR, ICT) meeting to put in place the agreed access for staff to operate seamlessly across the service.○ Nursing recruitment continues and is supported through strong stable bank uptake, consultant posts are about to go advert through PRUH, and the Clinical Director has been appointed.○ Remote technology monitoring contract is currently for signature and service is in launch planning in parallel.• Additionally, the service has worked with service users across four co-design sessions, with forward work planned on patient information and



	<p>staff training. The service continues to develop and refine its teaching course with London South East Colleges.</p> <p>Contracting approach and blue-print for collaborative services</p> <ul style="list-style-type: none">• The service is being contracted through a lead provider model with a Collaboration Agreement between the providers to ensure each provider is aligned with the overall service goal and can contribute to it through common governance.• The Collaboration Agreement incorporates an adjusted London Staff Movement Agreement to support staff working cross organisationally, a data-sharing agreement and agreement on how liabilities would be shared across the providers in the event of a successful claim.• This approach could be adopted for individual services in future.• An alternative which is in use in at least one other LCP is to agree and over-arching Collaboration Agreement between LCP partners, under which individual services are appended as schedules. This option would use the work done on Hospital at Home and broadening it. This would provide a clear regularised approach, moving collaborative services under a common governance.• One Bromley Executive has asked that further work be undertaken to understand this second option.	
Recommended action for the Committee	<p>The Board is asked to note and provide comments on the:</p> <ul style="list-style-type: none">• service update• proposal to further investigate an overarching Collaboration Agreement for One Bromley collaborative services	
Potential Conflicts of Interest	No specific potential conflicts of interest.	
Impacts of this proposal	Key risks & mitigations	<p>Risk: There is a risk that the Hospital at Home service is unable to agree a contractual form between partners meaning the full benefits of the service are lost. Mitigation: Legal advice sought and executive level support through One Bromley Executive to agree and sign contractual documents.</p> <p>Risk: There is a risk that the legal advice secured for Hospital at Home is repeatedly taken in future for other services with a collaborative model. Mitigation: One Bromley agrees a blue-print approach which is applied to future collaborations through utilising the</p>

ONE BROMLEY

		same method as Hospital at Home or an over-arching approach.
	Equality impact	Hospital at Home: while these services are associating with improving patient access there are risks around digital exclusion (mitigated through low technology and no technology solutions) and unintended impacts on informal carers (mitigated through appropriate referral)
	Financial impact	Hospital at Home: the service is currently operating on signed head contract and implied sub-contracts increasing financial risk to all organisations. One Bromley Executive has agreed to partners meeting in May to jointly agree and sign sub-contracts and Collaboration Agreement for the service.
Wider support for this proposal	Public Engagement	<ul style="list-style-type: none"> Hospital at Home undertook surveys in 2022 and has a co-design group actively supporting delivery at present Nil on contracting specifically
	Other Committee Discussion/ Internal Engagement	<ul style="list-style-type: none"> Discussion at One Bromley Executive Discussion at Bromley Hospital at Home Board including contracting leads Discussion at Clinical and Professional Advisory Group
Author:	Elliott Ward, Bromley Hospital at Home	
Clinical lead:	Lynette Linkson, Bromley Hospital at Home / Princess Royal University Hospital	
Executive sponsor:	Jacqui Scott, Chief Executive Bromley Healthcare and One Bromley Senior Responsible Officer for Bromley Hospital at Home	



Hospital at Home Update

16 May 2023

Virtual Wards in Bromley

*A virtual ward is a safe and efficient alternative to NHS bedded care that is enabled by technology. Virtual wards support patients who would otherwise be in hospital to receive the **acute care, monitoring and treatment** they need in their own home. This includes either preventing avoidable admissions into hospital or supporting early discharge out of hospital.*

The following services are reported nationally for Bromley:

Children's Hospital at Home

Partnership of PRUH and BHC

Adult's Hospital at Home

Partnership of One Bromley –
current providers PRUH, BHC,
BGPA and St Christopher's



Adult Hospital at Home

- **Consultant led multi-disciplinary team** delivered through collaboration of One Bromley partners
- Started with opportunities presented in **PRUH data**
- Based in BHC Urgent Community Response – **built on EMIS**
- **Acute level assessment, treatment and monitoring** in a patient's own home/nursing home/care home – to prevent or shorten a hospital admission
- Working with patient in their own environment, with their informal carers and others to confirm **treatment plans**
- Developing use of **remote monitoring (Doccla) and point of care testing**
- **Patient co-design** supporting development
- **Course** for clinicians and informal carers



Key updates on the adult service

Feedback	<ul style="list-style-type: none"> Highly positive patient feedback on face to face service; plaudits from PRUH staff referring to service
Delivery	<ul style="list-style-type: none"> Remote monitoring (manual), IVAB, frailty, respiratory and surgical early supported discharge pathways live, alongside Children's Hospital at Home service Under bed trajectory challenged due to staffing and initial complexity of caseload – occasional capacity challenges Improvement in suitable patients entering service – linked to service in-reach to PRUH and rapid response
Recruitment	<ul style="list-style-type: none"> Clinical Director appointed. Nursing continuous recruitment; GPs started in February; St Christopher's nursing recruited x 1, PRUH posts to advert
Remote monitoring	<ul style="list-style-type: none"> Currently manual with step-up cohort from Rapid Response – based on audit data In final discussions with Doccla with aim to soft launch in May.
Governance	<ul style="list-style-type: none"> Standard operating procedure signed off by 4 current delivery partners Confirmed and recurrent funding envelop provided through SEL processes Head contract signed Sub-contracts and Collaboration Agreement incorporating, tweaked London Staff Movement Agreement, Data Sharing Agreement, Liabilities split, governance arrangements to contracting parties w/c 01/05/23 for agreement in May
Reporting	<ul style="list-style-type: none"> Reporting to national after initial challenges. New national target is 80% occupancy from September 2023. Planning submission amended downwards from 2023/24 in light of funding settlement: remains stretching ambition. Operational and service impact dashboards in development for access through QlikSense
Co-design	<ul style="list-style-type: none"> Service-user group met across Q4 22/23. Key outcomes include joint work on patient information and staff training.
Course	<ul style="list-style-type: none"> Course for staff and informal carers in outline development stage – aim for accreditation in Q1 2023/24

Latest progress and challenges

Positives

- Continued improvement in appropriateness of referrals – supported by PRUH in-reach, developing relationships with front end wards and PDSA of community referral from Rapid Response
- Recruitment to more senior and specialist posts under way - clinical director appointed; PRUH frailty consultant post to advert; St Christopher's nursing post appointed 1/2
- Technology supported remote monitoring – into launch planning with Doccla

Challenges

- Contracting – further legal advice on human resources matters taken to support collaboration agreement
- Recruiting – internal governance has slowed recruitment for some posts; challenging market for other posts
- Practically delivering on the data sharing agreements once signed – access to electronic patient record systems and sufficient reporting data to determine service impact

Service Activity Summary (see annex for detail)

Virtual Wards in Bromley

- Based on national reporting (all virtual ward services in Bromley): March 2023 capacity and fill are above plan. Utilisation is below plan at 51% vs 53%. Plan target is 80% utilisation from September 2023.
- Surgical early supported discharge remains unreportable from PRUH.

Adult Hospital at Home

- Proportion of hospital vs community referrals is varying month to month (Feb 39% hospital, April month to date 90%)
- Average length of stay increasing to over 7 days as the % hospital derived referrals increase
- No significant change in daily case load since February despite the above. Contacts per month continue to rise.
- Service utilisation (Foundry, Snapshot) at 46% end March. Target 80% from September 2023
- IV patients no longer majority of the service

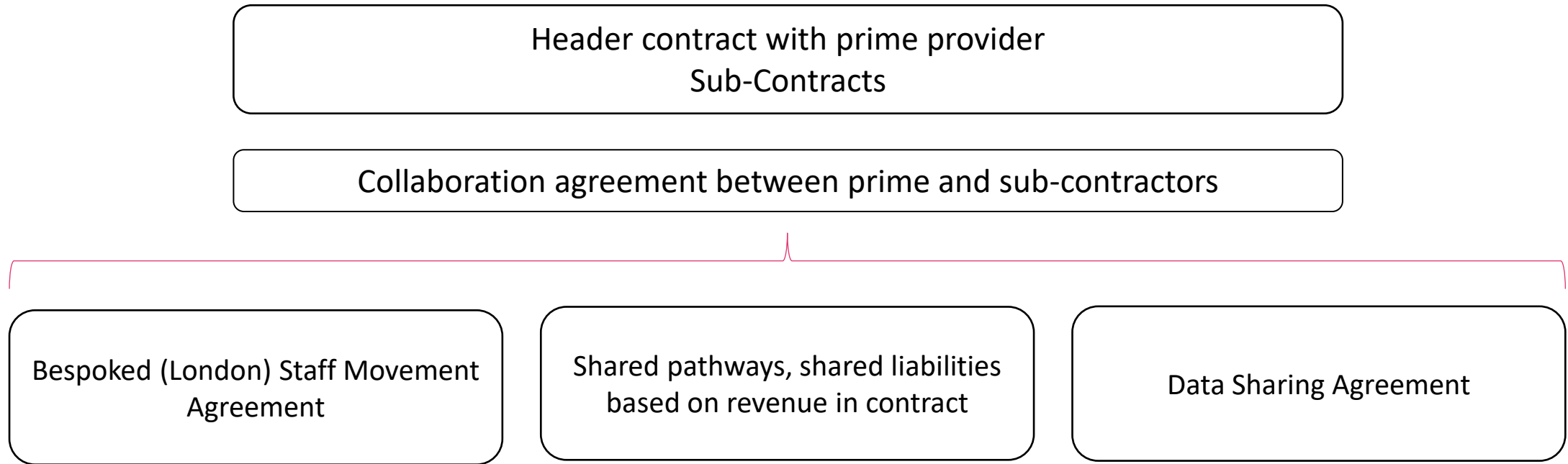
Contracting approach for Hospital at Home

- There are two main ways in which Hospital at Home could be contracted. Either the commissioner enters into a contract with each of the providers and requires that they collaborate with each other; or the commissioner enters into a contract with a “prime” or “head” provider, who in turn sub-contracts elements of the services and has a collaboration arrangement in place between the group of providers.
- **We have opted for a Prime provider arrangement with sub-contracts and collaboration agreement alongside as it emphasises providers, who are closer to the patient, working together in shaping and delivering the service and shares liabilities.**
- **Sub-contracts allow the transfer of liabilities through the sub-contracts.** Whilst the prime provider remains liable to the commissioner for the delivery of the services under the prime contract, the sub-contractor will be liable to the prime provider for i.e. any negligent acts or omissions under the sub-contact – effectively flowing down the liability from the prime contract to the sub-contractor in the sub-contract.
- **Where there are multiple sub-contractors to the prime contract a collaboration agreement is put into place to deal with the arrangements between the sub-contractors which supports the working of all the parties in the collaboration.**
- The collaboration agreement incorporates **data sharing agreement, agreement on splitting liabilities for shared pathways based on contract value and a bespoke version of the London Staff Movement Agreement.**

Enacted through:

- Head contract (ICB-BHC)
- Sub-contracts (BHC-KCH/STC/BGPA)
- Collaboration Agreement (BHC-KCH-STC-BGPA)

Contracting approach for Hospital at Home



Principles:

- Organisations responsible for own staff (pre-employment checks, negligence)
- Human Resources validate to partners that pre-employment checks / stat-man training undertaken unlocking staff access others' EPR systems and patients

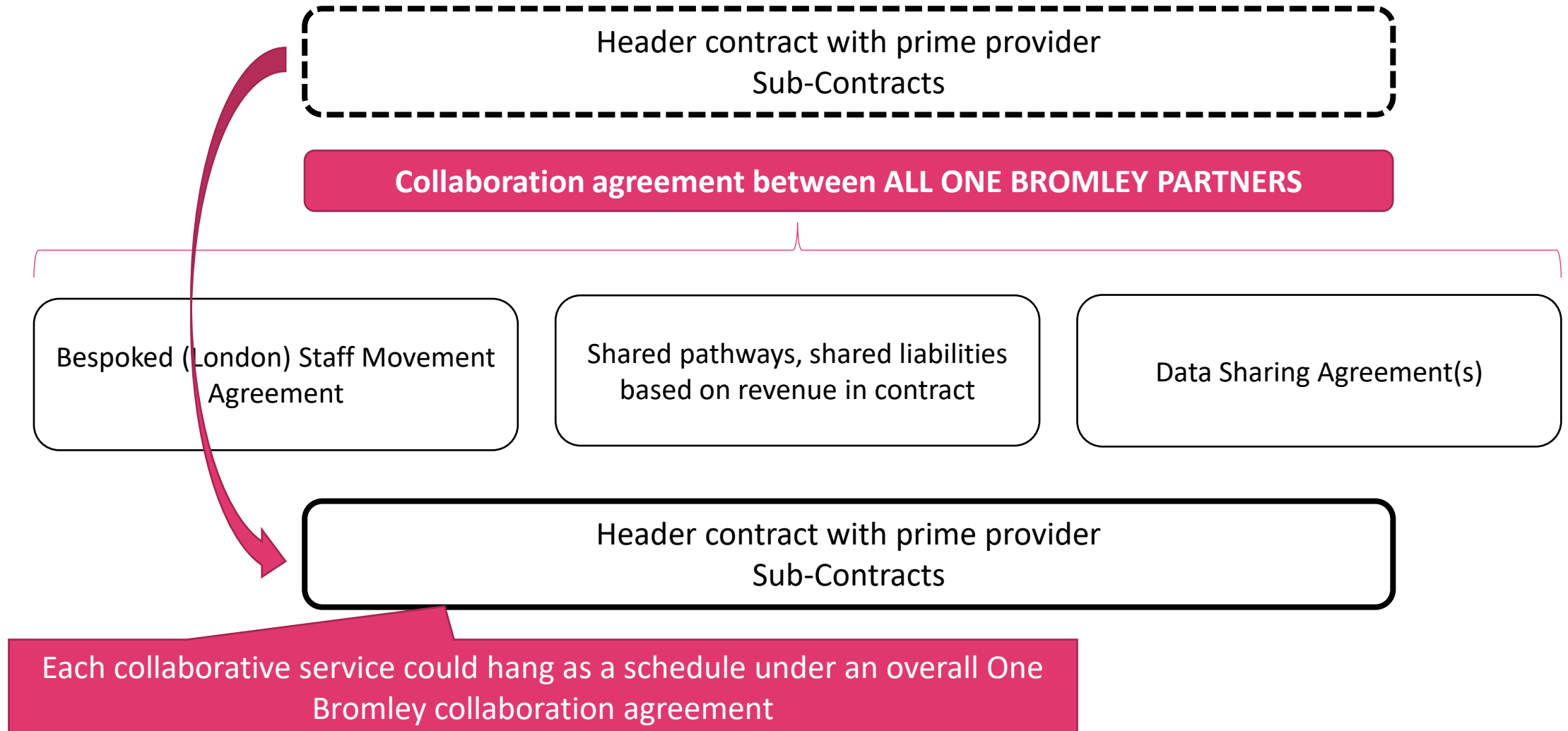
Blueprint for One Bromley collaborative services

Hospital at Home offers learning to be shared for other One Bromley collaborative services. There are two main options :

- 1) Use documents created for Hospital at Home for other collaborative services among partners in future
- 2) Adapt the documents created for Hospital at Home to create an overall collaboration agreement between all One Bromley partners. Under this Agreement a schedule related to each service/collaboration could be appended.

One Bromley Executive has asked that further investigation be undertaken into option two – including speaking to other local care partnerships where this is in place.

Blueprint for One Bromley collaborative services



Annex – Service Activity

Service Activity - Virtual wards in Bromley

Bromley Virtual Wards Adult, Children, Surgical Early Supported Discharge					Plan Basis March outturn	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Virtual ward capacity PLAN	Numerator	The number of patients on the virtual ward		end of period position	17	21	25	32	37	39	47	55	64	68	75	81	81
	Denominator	The number of patients that the virtual ward is able to simultaneously manage		end of period position	32	43	45	50	57	58	58	68	78	84	90	99	99
	Percentage	Virtual ward occupancy		end of period position	53%	49%	56%	64%	65%	67%	81%	81%	82%	81%	83%	82%	82%

Virtual ward capacity ACTUALS	Numerator	The number of patients on the virtual ward		end of period position	21*
	Denominator	The number of patients that the virtual ward is able to simultaneously manage	Foundry declared	end of period position	41*
	Percentage	Virtual ward occupancy		end of period position	51%*

*No reporting for surgical early supported discharge

- Above is the submitted plan for 2023/24 for all virtual services in Bromley.
- The national operating plan requirement for virtual wards is 80% occupancy from September 2023
- Left actuals March outturn show bed capacity and number of patients higher than submitted plan, but occupancy marginally lower than submitted plan.
- This would likely be corrected if PRUH surgical early supported discharge data could be reported.

Service Activity – Adult Hospital at Home

Adult Virtual Wards Operational Dashboard 18 April 2023

Note: April includes entires up to and including 12th April 2023

	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	Spark Oct - Mar
All Adult Virtual Wards								
Referrals Received	15	11	9	33	80	56	10	
Inappropriate Referrals	0	0	0	1	3	3	0	
Referrals Accepted	15	11	9	32	77	53	10	
Hospital as % of total referrals	80%	100%	89%	76%	39%	54%	90%	
Inappropriate Referrals as % of total referrals	0%	0%	0%	3%	4%	5%	0%	
Source Of Referral (All Referrals)								
Princess Royal Hospital	12	11	8	24	31	30	9	
Kings College Hospital	0	0	0	1	0	0	0	
University Hospital Lewisham	0	0	0	0	0	0	0	
Community Health Service	3	0	1	7	46	25	1	
Other	0	0	0	1	2	1	0	
Average Age Of Patient (At Point Of Referral)	78.0	74.0	61.7	74.7	83.6	76.3	83.2	
Discharges	13	12	12	28	66	53	12	
Length Of Stay	11.0	15.6	10.0	8.6	4.2	7.2	8.5	
Caseload (At End of Month)	5.00	5.00	2.00	4.00	15.00	16.00	13.83333	
Average caseload per day	4.90	5.77	3.74	7.74	12.39	13.77	16.27778	
Winter ambition capacity	12	12	25	33	50	52	52	
Snapshot occupancy vs Winter Ambiton %	42%	42%	8%	12%	30%	31%	27%	
Average occupancy vs Winter Ambiton %	41%	48%	15%	23%	25%	26%	31%	
Foundry declared capacity	12	12	25	25	35	35	35	
Snapshot occupancy vs Foundry % [80% Sept 2023]	42%	42%	8%	16%	43%	46%	40%	
Average occupancy vs Foundry % [80% Sept 2023]	41%	48%	15%	31%	35%	39%	47%	
Total Contacts	207	220	163	353	597	839	367	
Face to Face	171	169	117	255	355	474	208	
Non Face To Face	6	7	8	17	84	96	12	
Patient Related Activity	30	43	37	57	145	255	140	
Average F2F contacts per day	5.71	5.87	4.03	8.77	15.68	18.39	18.33	
Unique Patients Seen	18	17	15	33	75	69	27	

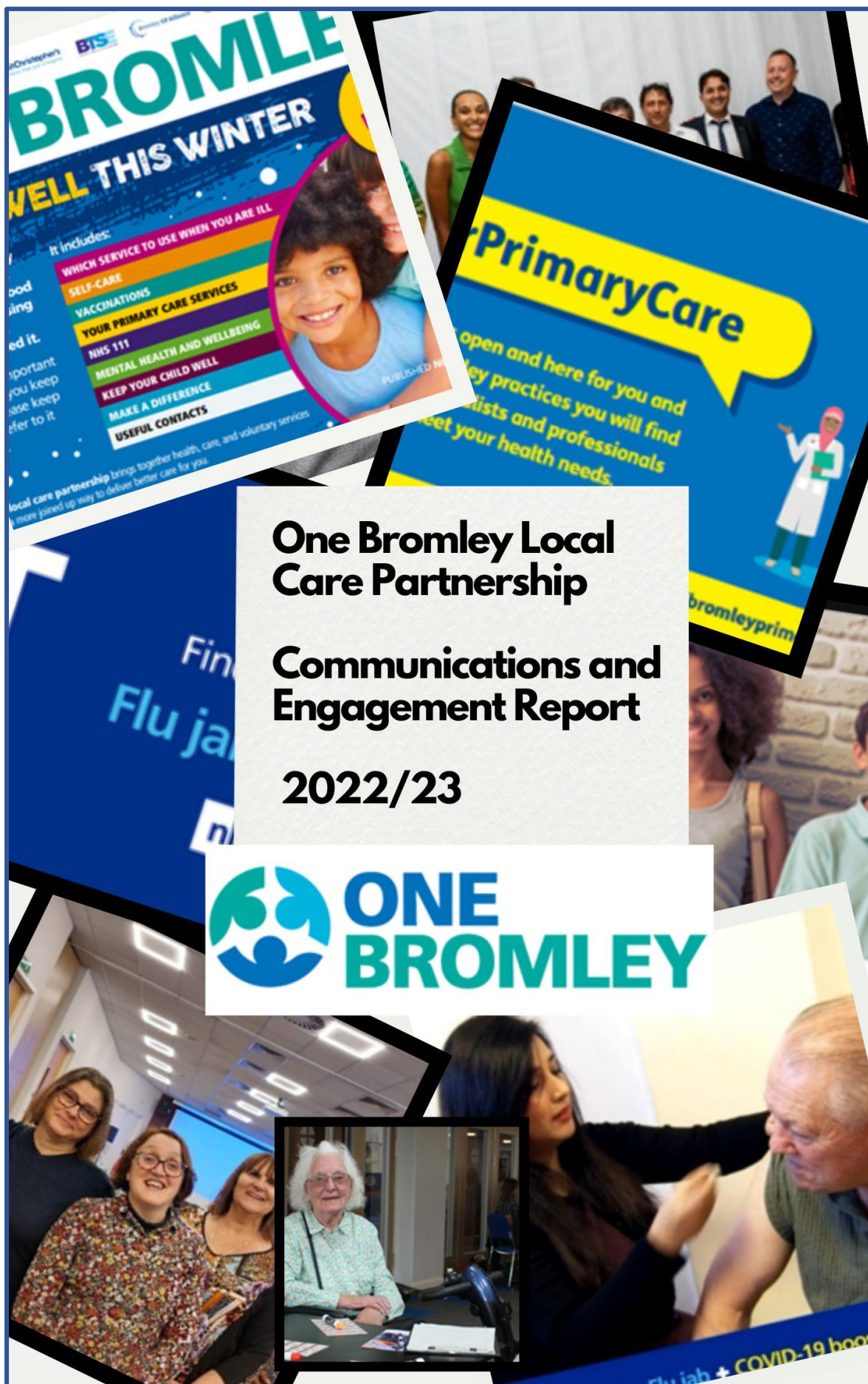
One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	One Bromley Communications and Engagement Activity Report 2022/23
This paper is for information	
Executive Summary	<p>Communications and engagement is one of a number of enabling functions within the One Bromley Local Care Partnership that support the successful delivery of proactive, personalised, and integrated care. Working with Bromley people and communities in a timely and meaningful way will create a much better chance of ensuring our services meet their needs, improve their experience and health outcomes.</p> <p>The annual Communications and Engagement Report for 2022/23 describes how Bromley health and care services are working with people and communities in the borough to inform and engage them in their care and our services. It includes:</p> <ul style="list-style-type: none">• One Bromley Integrated Programmes.• Bromley services working together.• Individual organisational activity. <p>The One Bromley Communications and Engagement Workstream reports directly into the One Bromley Executive. Made up of One Bromley partners plus Healthwatch Bromley, the workstream is responsible for supporting the delivery of One Bromley programmes, advising the One Bromley Executive on the messaging and approach to communicating with internal and external stakeholders and the engagement of key partners, particularly the public so they can meaningfully influence integrated care. The workstream also supports system working and produces a regular staff briefing as well as urgent communications relating to service and system pressures and escalations.</p>
Recommended action for the Committee	<p>The Committee is asked to note the activity covered in the report.</p> <p>The report will be posted on the website pages for One Bromley (www.selondonics.org/OneBromley) and promoted to our patient and service user networks.</p>

ONE BROMLEY

Potential Conflicts of Interest	None	
Impacts of this proposal	Key risks & mitigations	<p>Risk: Ensure we take a transparent approach to how we engage with Bromley people and communities, by involving them in a meaningful and timely way and ensuring we provide feedback on how their involvement has made a difference.</p> <p>Mitigation: Processes are in place as part of our programme office to ensure communications and engagement is planned early and that outcomes from all engagement activity is captured and fed back into the system.</p>
	Equality impact	The One Bromley engagement and engagement approach takes account of protected characteristics set out in the Equality duty and many programmes of work are informed by equality impact assessments and audits.
	Financial impact	N/A
Wider support for this proposal	Public Engagement	This report reflects on the One Bromley public engagement for 2023-24
	Other Committee Discussion/Internal Engagement	One Bromley Communications and Engagement Workstream
Author:	Kelly Scanlon, Assistant Director for Communications and Engagement, South East London Integrated Care Board (Bromley borough)	
Clinical lead:	Dr Andrew Parson	
Executive sponsor:	Paulette Coogan, People and System Development Director	





One Bromley Local Care Partnership Communications and Engagement Activity Report 2022/2023

Published May 2023

TABLE OF CONTENTS

1. INTRODUCTION	3
2. ONE BROMLEY LOCAL CARE PARTNERSHIP.....	4
3. WORKING TOGETHER	5
4. ACTIVITY.....	6
4.1 One Bromley Integrated Programmes	6
4.2 Other Bromley Partnership Work.....	16
4.3 Organisational Engagement	22
5. GETTING INVOLVED.....	34
5.1 One Bromley Patient Network.....	34
5.2 One Bromley Community Champions.....	34
6. LOOKING AHEAD	35
7. FURTHER INFORMATION	35

Benefits of public engagement

- Services designed with people will better meet their needs and are a better use of resources.
- Insight from residents improves decision making.
- Personalised care, designed to meet needs helps to improve safety and quality.
- Supports transparency in decision making and accountability.
- Empowers those sharing their views.
- Reduces health inequalities.

1. INTRODUCTION

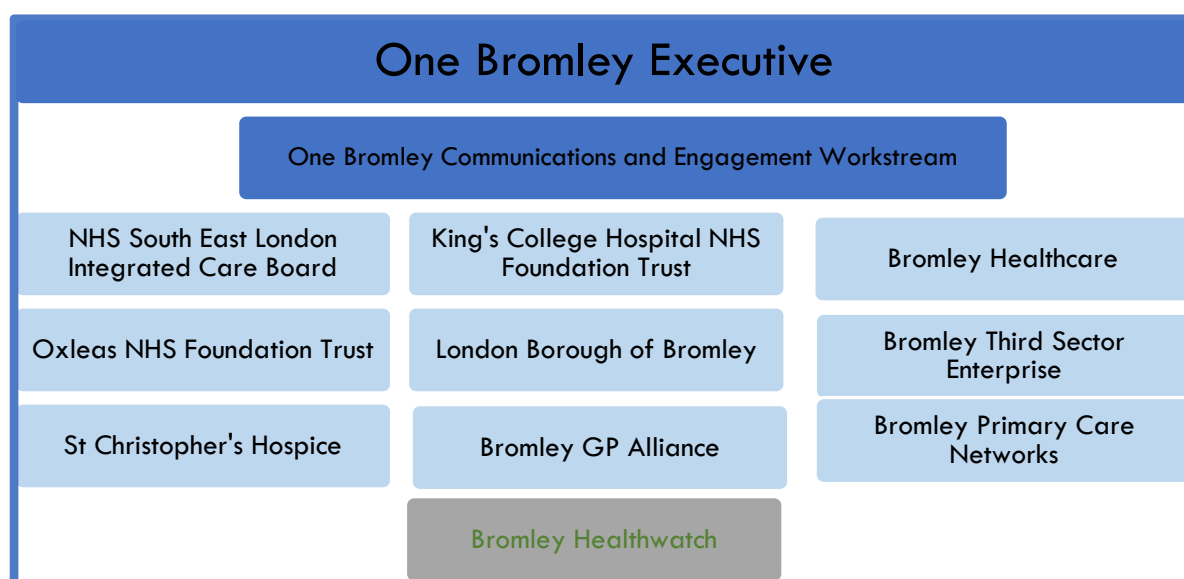
Welcome to the 2022/23 communications and engagement activity report for the One Bromley Local Care Partnership. This report describes how Bromley health and care services are working with people and communities in the borough to inform and engage them in their care and our services. It includes:

- One Bromley Integrated Programmes.
- Bromley services working together.
- Individual organisational activity.

Communications and engagement is one of a number of enabling functions that support the successful delivery of proactive, personalised, and integrated care. Working with Bromley people and communities in a timely and meaningful way will create a much better chance of ensuring our services meet their needs, improve their experience and health outcomes.

To support this work in Bromley, the One Bromley Communications and Engagement Workstream reports directly into the One Bromley Executive. Made up of One Bromley partners plus Healthwatch Bromley, the workstream is responsible for supporting the delivery of One Bromley programmes, advising the One Bromley Executive on the messaging and approach to communicating with internal and external stakeholders and the engagement of key partners, particularly the public so they can meaningfully influence integrated care. The workstream also supports system working and produces a regular staff briefing as well as urgent communications relating to service and system pressures and escalations.

Membership of the One Bromley C&E Workstream, which reports into the One Bromley Executive



2. ONE BROMLEY LOCAL CARE PARTNERSHIP

The One Bromley Local Care Partnership is part of the South East London Integrated Care System (SEL ICS) which covers Bexley, Bromley, Greenwich, Lambeth, Lewisham, and Southwark. The SEL ICS has developed its people and communities strategic framework which outlines the ambition and approach for working with people and communities. This framework informs our approach in Bromley and is based on the following foundations:

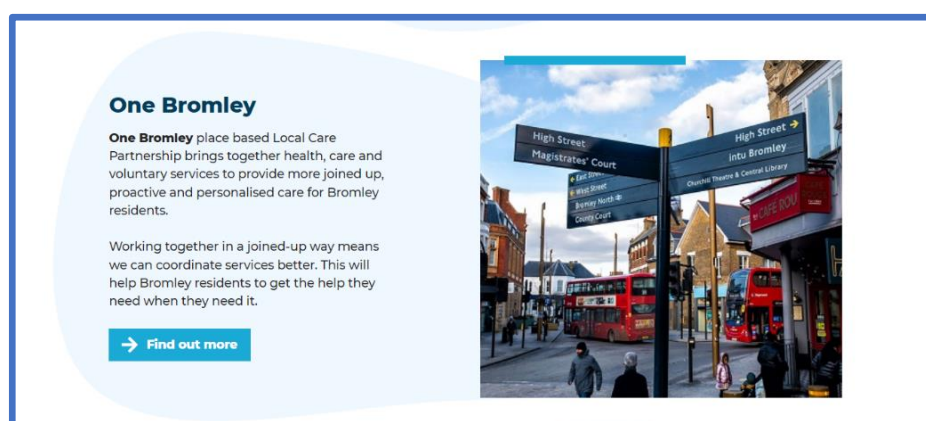
- Being accountable to local people and ensuring we are transparent.
- Making decisions, setting direction and priorities in partnership with people and communities.
- Working with people and communities in new ways to transform health and care and support health and wellbeing.

SEL ICS has also established a new 'Let's Talk Health and Care' platform for people and communities to share their ideas, discuss important topics, provide feedback and get involved in conversations about health in south east London.



The One Bromley Local Care Partnership brings together local NHS health providers, the council, commissioners, and voluntary sector to work together more formally to deliver better care for all. Working together in this way means services can be better coordinated and help residents get the help they need when they need it.

In 2022, the new One Bromley web pages were created as part of the South East London Integrated Care Partnership. These pages provide information on a



range of initiatives undertaken by One Bromley, including a description of partners, our developments, how to get involved and keeping well. Find out more at www.selondonics.org/OneBromley



The One Bromley twitter account is used to promote partnership working and programme initiatives. Our twitter handle is @OneBromley We rely on partners amplifying our social media activity on their various platforms to ensure we have more reach to our communities.

3. WORKING TOGETHER

Bromley has a long and successful history of working collaboratively together to communicate and engage with people and communities. The One Bromley communications and engagement workstream meets monthly and this report covers the areas that have been supported, and the activities undertaken during 2022/23. In addition to One Bromley organisations, our strong and collaborative relationships with Community Links Bromley and Healthwatch Bromley enable us to reach and interact with many more voluntary and community groups.

Effective communications and engagement, clear and sound messaging, good co-working, engagement with staff, partners and the public are essential to delivering the aims and priorities of One Bromley Local Care Partnership. Working collaboratively on shared priorities enables us to have greater reach across all stakeholder groups and communities by using all the various networks available to all partners.

In addition to routine feedback on services, we also engage and involve the public and other stakeholders in a variety of ways, based on how much influence they can have and what would be proportionate to the change or improvement we are considering. We always look at the intelligence we already have which has either been captured through previous engagement or through patient experience data. This provides us with a good starting point to plan what else we need to find out and who we need to reach and hear from.

We have a One Bromley Patient Network with over 200 members and a Community Champion programme. Both enable us to gather views from Bromley people and communities and contribute to the delivery of high-quality care. Other ways in which we engage include:

- Targeted work with those people and communities most likely to be impacted by any service changes and improvements.
- Invites to the general public and those with lived experience to take part in surveys, focus groups and events to share their experiences and inform our plans.
- Patient/service user led groups working with our Bromley organisations.

Our engagement must be meaningful and evidence how people and communities have shaped, informed, or challenged our thinking.

4. ACTIVITY

4.1 One Bromley Integrated Programmes

This section describes how we have communicated and engaged with Bromley people and communities to develop and deliver **One Bromley programmes of integrated care** during 2022/23. Some of these programmes have involved working with other multi-disciplinary teams and programme leads across the Bromley system.

WINTER PLANNING

Communications and engagement is a key pillar for delivery of the One Bromley Winter Plan and is critical to supporting delivery of important system messages around service provision, pressures, resilience and escalation and public messages on keeping well self-care and using the right service. A One Bromley C&E winter sub-group was established to manage winter activity. This work won the One Bromley Enabler Award at the 2022 One Bromley Staff Awards



WHAT WE DID

System:

- Regular comms through the One Bromley E-Bulletin.
- Identifiable winter branding.
- One Bromley system event to launch winter efforts and share a range of service videos promoting winter schemes and services.
- Winter service directories explaining what was available and how to refer.

Public:

- Localisation of national, regional and SEL campaigns and information on vaccinations, using the right service at the right time, keep warm, keep well and self-care for local residents.
- Winter health booklet distributed to every household.
 - Regular winter health advertorials in the local newspaper and online.
 - Information shared through partners and outreach through Community Champions and the One Bromley Health Hub.

- Continuing advice to care homes and care settings throughout the winter period.

SPEAKERS INCLUDE:



Dr Andrew Parson
Bromley GP and clinical lead for South East London Integrated Care System (Bromley)



Dr Angela Bhan
Executive Director for the South East London Integrated Care System (Bromley)



Dr Lucia Anthonypillai
Bromley GP and Clinical Lead for Urgent and Emergency Care

Keeping Health and Social Care Staff Well in South East London

TOGETHER THROUGH Winter in Bromley

KEEP WELL THIS WINTER

Bromley residents are urged to take good care of themselves this winter and seek medical help early when they need it.

To help them, the new One Bromley Keep Well This Winter guide will be delivered to every Bromley home during November. It provides tips for staying well and where to go when you need help. It is available online and in other languages on request.

ONE BROMLEY KEEPING WELL THIS WINTER

Dr Angela Bhan, Executive Director for the South East London Integrated Care System (Bromley)

Dr Lucia Anthonypillai, Bromley GP and Clinical Lead for Urgent and Emergency Care

Dr Andrew Parson, Bromley GP and Clinical Lead for Primary Care

The guide also signposts residents to where they get more information if they are worried about the rising cost of living, especially heating their homes in the colder months approach. Advice and information is available from Bromley Well at www.bromleywell.org advice-and-support or 0800 275 7999. Advice and support is also available on the Bromley Council website at www.bromley.gov.uk/supportingresidents.

OUTCOMES

Positive feedback on the Guide. *“Clear, easy to understand and provided me with lots of information I didn’t know about”.*

NEXT STEPS

Learning from this winter to be used to inform future winter planning.

URGENT CARE REDIRECTION

To support individuals to get the right care in the right place, a more formalised approach to redirecting people away from urgent and emergency care services was put in place. Information was shared with the public to encourage them to use the right service at the right time and not to use emergency and urgent care services for primary care needs.

South East London Integrated Care System **NHS**

Get the right medical care in the right place from the right service

If you go to Bromley urgent and emergency services with minor ailments that can be treated by your GP or pharmacist, you will be redirected back to those services. This is so emergency staff can focus on treating people with serious conditions.

WHAT WE DID

- A letter (tested with patients) is given to those attending Bromley urgent care treatment centres with a need that can be better dealt with by primary care services. The letter explains that they are being redirected back to the appropriate primary care service for their treatment.
- Online and print media was used to explain the process and encourage people not to attend urgent and emergency care with primary care needs. Focus was on enabling urgent and emergency staff to have the time to treat those with serious and life-threatening conditions.
- Senior clinicians in A&E and primary care featured in the communications to drive home the important information about using the right service.
- Posters displayed in waiting and reception areas.

South East London
Integrated Care System

NHS

Get the right medical care in the right place from the right service

Bromley urgent and emergency care services are extremely busy. Only use those services when you have a serious health emergency or have been asked to attend by NHS 111.

If you attend urgent and emergency services with a minor ailment or ongoing health condition that can be treated by your GP, pharmacist, optician or other community service, you will be redirected back to those services for your care.

This is so urgent care and emergency service staff can focus on treating those with more serious conditions such as heart attacks, strokes, child health emergencies, major injuries and broken bones.

SELF-CARE: Treat minor illnesses such as headaches, cuts and bruises, coughs, and colds at home. Use over the counter medicines, drink plenty of water and get some rest. If the symptoms persist please see your pharmacist or GP.

NHS 111: Check out your symptoms and seek further advice at 111 online. If you can't get online, then call 111. If you have an urgent medical problem or your GP is closed, NHS 111 will provide advice and if necessary, make an appointment for you at a local service.

PHARMACY: Qualified staff can advise on medicines and the treatment of minor ailments and injuries. No appointment is needed.

URGENT TREATMENT CENTRES: For urgent needs only. Use an urgent treatment centre when you are referred to by NHS 111. These are urgent treatment centres at the Princess Royal University Hospital and at Beckenham Busway.

GP PRACTICE: If you are feeling unwell and it's not an emergency. Appointments are also available on weekday evenings and Saturdays.

999/A&E: Only use this service if you or someone else is seriously ill and their life is in danger.

Dr Lucia Anthonypillai, Bromley GP and Clinical Lead for Urgent and Emergency Care in the borough said, "We are urging our residents to always consider if going to A&E or an urgent treatment centre is the best option for them. Many times, it is better to see your pharmacist or GP services. If you use emergency services for minor conditions, you will be redirected to another service. Please help your NHS by using the right service and keep urgent and emergency services for those who really need them."

"When you feel ill, please think self-care, pharmacy, GP or NHS 111 first. GP practices in Bromley are open five days a week with additional appointments available in the evening and on Saturdays".

OUTCOMES

- Reduction in attendances at urgent treatment centres seen shortly after campaign launch.
- Other south east London boroughs are looking at the communications approach we have taken to inform their redirection activity.

NEXT STEPS

- Review impact over longer period and consider further communications to enable longer term behaviour change.
- New signing in arrangements on arrival at the urgent care treatment centres will assist with redirection.

AUTUMN VACCINATION PROGRAMME

To encourage individuals to have their vaccinations to protect them from flu and COVID-19. Partners from across Bromley were actively involved in either providing and/or promoting the vaccination offer and encouraging people to come forward and get protected. During the Autumn, we also promoted the London campaign to offer all children a polio vaccination booster following the discovery of poliovirus in sewage samples in North London.

BOOST YOUR IMMUNITY
WITH THE FLU VACCINE + COVID-19 BOOSTER
People aged 75 and over can now book their autumn COVID-19 booster.

Protect your child from polio.
Children aged 1 to 9 years old in London are being offered a dose of polio vaccine.

WHAT WE DID

- Promoted the availability and importance of flu and COVID-19 vaccinations through a range of online, printed, telephone messages and face to face communications. This involved partners across Bromley promoting localised national messaging to encourage uptake.
- Established a Bromley sub-group to deliver a comprehensive and robust campaign, alongside the work undertaken by the Bromley Vaccine Hesitancy Inequalities Group.
- Two day community roadshow held in the Glades shopping centre.
- Range of promotional videos also made available in GP practices and on social media.
- Targeted outreach via faith groups, community champions and other community networks to reach seldom heard population.
- Promoted pop up clinics and the vaccination service at the One Bromley Health Hub.
- Outreach and bespoke materials provided to seldom heard communities, facilitated through the vaccination inequalities group.
- Information on vaccination included with delivery of food parcels via the Food Banks.
- Promoted the importance of polio vaccination and other routine childhood vaccinations.
- Promoted the additional Polio booster clinics.



OUTCOMES

- Bromley has the highest number of vaccinated residents in south east London.
- Positive feedback on accessibility of vaccinations.
- Relationships developed with groups that work with communities more likely to be vaccine hesitant.
- Information on why people are not having their vaccinations captured and continues to inform future planning.

NEXT STEPS

- Review what worked well to consider for further vaccination promotions. This includes new work undertaken during the early part of 2023 to encourage uptake of childhood vaccinations.
- Foster relationships developed throughout the campaign with community networks for further support in reaching seldom heard communities.
- Continue to work through 'trusted voices' and community leaders to reach those groups not having their vaccinations.
- C&E task and finish group developed as sub-group of the Bromley Immunisation Board.

MENTAL HEALTH SUPPORT AND ACCOMMODATION

As part of the Bromley Mental Health transformation plan, capture views from current and former mental health service users on the support provided by adult mental health recovery and rehabilitation services to inform improvements. Work with users to co-design a service specification for the new Support@Home service.

WHAT WE DID

Bromley Experts by Experience were commissioned by the NHS Integrated Care Board and Bromley Council to undertake a peer-led engagement exercise to capture views (including from those receiving accommodation based support) on the rehabilitation and supported housing services available to those with serious and ongoing mental health conditions. Engagement was undertaken in two stages.

Stage one

- Online and printed survey shared with 210 individuals.
- Range of engagement events in accessible locations (including in the park, drop ins and joining established events) to talk to individuals and get their views.
- Feedback report provided to commissioners to inform improvements and the next stage.

Stage two was focused on codesigning a service specification for the new Support@Home Service.

- Seven individuals worked with staff to codesign the service specification.
- Shared views on what is good support, what is possible and how to measure impact and success.

OUTCOMES

- 70 individuals shared their views, stories, and experiences of current services which are being used to make improvements.
- Mixed experiences of using services and supported housing.
- Improvements highlighted include better communication between services; more support for healthy living; improve staff knowledge of opportunities and activities happening in the wider community; support to reduce digital exclusion and more choice when being placed in supported accommodation.
- The codesign group is directly informing the Support@Home service specification which will support people wherever they live and performance indicators to measure successful delivery.

NEXT STEPS

Individuals with lived experience will be involved in the tender evaluation for the new Support@Home service.

YOUNG PEOPLE'S AREA LOCAL OFFER

Improve communication with children and young people and their parents/carers through development of the Local Offer¹. To include the development of an area on the children and young people's online hub to enable views and stories to be shared, demonstrating lived experience and outcomes.

WHAT WE DID	
<ul style="list-style-type: none">• Met with Bromley students from a range of local schools to discuss their educational health care plans and how to have more involvement and play an active part in their reviews.• Engaged with students from primary, secondary and college education.	
OUTCOMES CYP hub to be made more accessible with relevant and engaging content. Use a mixture of words, symbols, cartoons, pictures, and films.	NEXT STEPS <ul style="list-style-type: none">• Work with other professionals across Education, Health and Social Care with regards to content, linking to their websites / local offer pages where possible.• Establish a steering group to oversee this work made up of young people, parents, and professionals from each of the key areas.

ORPINGTON WELLBEING CAFÉ

July 2022 saw the opening of the new Orpington Wellbeing Café at Orpington Methodist Church. Developed by Bromley Healthcare and Orpington Primary Care Network, it provides a fortnightly drop in to help connect local residents to each other and to local services. As well as refreshments and activities, there are regular health related talks and discussions.

WHAT WE DID	
<ul style="list-style-type: none">• Established the new Orpington Wellbeing Café and widely promoted this in the local area.• Targeted at vulnerable residents, who are asked what kind of health talks would be useful to them when they attend the café.• Attendance has included staff from various services explaining how they can help. This has included Bladder and Bowel service, Talk Together Bromley, Community Matrons, Podiatry and Falls Team.• Workshops are available including digital skills and love to move fitness sessions.	
OUTCOMES <ul style="list-style-type: none">• Reducing loneliness and isolation.• Supporting older and more vulnerable residents to stay healthy and well.	NEXT STEPS To be used as a framework for setting up further

¹ A Local Offer gives children and young people with special educational needs or disabilities, and their families, information about what support services the local authority think will be available in their local area.

<ul style="list-style-type: none"> • Providing a warm space and support during the cost of living challenges. • Very positive feedback from participants. <p><i>"I phoned up the doctor as I was a bit worried about an elderly relative, and he said to bring him to the Café. The Matrons were here that day and I asked them for their help. It's reassuring to know there is something there that can help you if you need it – even if it's just reassurance". Bridget, Orpington resident</i></p>	<p>wellbeing cafes in primary care network areas. This includes the new Penge Wellbeing Café which opened this year and the Beckenham Café. Development of an integrated health hub in the Orpington/Crays area will be linked to the Orpington Wellbeing Café.</p>
---	---

CHILDREN AND YOUNG PEOPLE INTEGRATED THERAPIES

To work with children, families, parents, and carers to develop a new online resource about the range of integrated therapy services available. Website available at www.bromleytherapyhub.org.uk/



WHAT WE DID

We engaged with parents, families, and professionals to develop a new website focused on providing information on therapy services for children and young people in Bromley.

A working group with user representatives had been set up to manage production of the website. Two engagement events with parents and professionals were held to capture views on what was needed and to inform any improvements to the website.

OUTCOMES

Engagement events ensured those primarily using the website (parents) could directly inform what was available. Feedback received informed changes including accessibility.

Parents told us that the website should be shared with all mainstream schools so that all children could benefit from the information shared on the website. The website has been promoted through school bulletins and at all ongoing engagement events with schools and pre-schools.

NEXT STEPS

The website continues to be promoted through Bromley services and feedback is being monitored. So far this has been positive. "I think it is a positive and useful website. It is easy to read".

BROMLEY HOSPITAL AT HOME

To ensure that adults were able to influence the development of the hospital at home service and co-design the pathways of care. This service aims to provide intensive, hospital-level care for people with conditions that would normally require a hospital bed or regular visits to a hospital, in their own home. A major focus in developing this new service is to ensure that it meets people's needs and the care is holistic and person-centred. The adult programme follows on the successful delivery of the children's hospital at home service. Hear from [Daisy](#), a young Bromley resident who is benefiting from the children's service.



WHAT WE DID

- Engaged with the public on our approach to delivering hospital at home services through a survey which captured their experiences and views on the proposed pathways of care. Over 200 people responded, and their views shaped the four pathways of care identified as suitable for delivering care at home rather than in hospital.
- Established a co-design group made up of individuals with lived experience, clinicians, and other professionals to focus on people's experience and journey through the pathway. The group has focused on:
 - Workshop 1 – Creating a vision – what we would like to see happen
 - Workshop 2 – Designing the journey – what are people's needs and giving everyone a good experience.
 - Workshop 3 – What have we learnt and what actions do we take forward.
 - Workshop 4 – Checking in and reassessing.
- Measures put in place to ensure people can take part in a meaningful way including supporting the housebound to take part through volunteers.

OUTCOMES

- Four pathways of care for hospital at home identified (respiratory, frailty, intravenous antibiotics, and end of life care).
- Co-design group has held four workshops with outputs used to shape service delivery.

NEXT STEPS

The co-design work continues and a full engagement report on activity and outcomes will be published later this year on completion of the work.

BROMLEY ALL AGE AUTISM STRATEGY

The [Bromley All Age Autism five-year Strategy](#) was launched in 2022, informed by the views of individuals with Autism, their families, carers, and friends. It aims to “enable people with Autism to live their lives as they choose as part of their community, with the right support at the right time”.



The Bromley All Age Autism Partnership (BAAP) has representatives from education, health and care and voluntary services and is committed to hearing from those with lived experience. It strives to deliver outcomes across the five priorities of the Bromley all-age Autism strategy. These include providing an equality of access to services for people with Autism.

WHAT WE DID	
<ul style="list-style-type: none"> Autism sub-groups were created to hear from parents, carers, and people with Autism of their lived experience and outline areas of collective need. The priorities of the Autism strategy and the sub-groups are: <ul style="list-style-type: none"> Increase awareness and understanding of Autism. Build sustainable education placements. Support independence and skills to employment. Reduce health and care inequalities. Provide the right support at the right time. <p>These groups run quarterly, a month prior to each board meeting so that outcomes can be fed into discussions. The parent and carers sub-group meets face to face and the young people and adults sub-group meets online.</p>	
OUTCOMES <p>There is now two way dialogue between the Bromley All Age Autism Board (BAAB) and those with lived experience to enable issues to be quickly raised and responded to.</p> <ul style="list-style-type: none"> Outcomes from the sub-group discussions are shared at each BAAB meeting. This includes raising any needs which are not being met. These are discussed and actions put in place to address them. Actions taken by the BAAB are then fed back to the Autism sub-groups to inform and reassure what is being put in place to respond to their feedback. 	NEXT STEPS <p>A new Autism sub-group is being created to hear from school age pupils around their experience.</p> <p>All sub-groups will run four times a year for the five year lifespan of the strategy. This ensures we continue to respond quickly to meet needs and understand ongoing lived experiences.</p>

ONE BROMLEY HEALTH HUB

The One Bromley Health Hub is a space in the Glades Shopping Centre set up to deliver proactive and joined up services from One Bromley partners. It provides an accessible venue to receive a range of healthcare interventions for Bromley residents. The aim was to raise the profile of the hub and the services available there. This has primarily focused on provision of vaccination services for now.



WHAT WE DID

- Organised a formal launch of the One Bromley Health Hub including photographs and interviews with staff and volunteers.
- Arranged online and newspaper advertising about the hub.
- In response to feedback that some people were not aware of the vaccination service delivered at the hub, additional advertising was undertaken including virtual advertising boards in the Glades and on the high street, flyers and posters in shops and further newspaper advertising.
- Promoted the hub through a two day FLU/COVID community engagement event in January 2023 – signposting people to where they could get a walk in vaccination.
- The venue is also available on national COVID booking pages as an option.

OUTCOMES

- Coverage in the local paper of the opening.
- More people aware of the facility (evidenced by walk in vaccinations).

NEXT STEPS

- Further promotion will be undertaken as use of the Hub is developed to offer proactive and preventative health care services.

ONE BROMLEY CELEBRATION EVENT

The event was arranged to recognise and celebrate One Bromley staff and the wide range of integrated services and programmes of care they deliver to Bromley people and communities.



WHAT WE DID

A small sub-group from the C&E and workforce workstreams managed the delivery of a celebration event for staff working across One Bromley services. There were a range of award categories and teams were encouraged to apply. Winners and runners up were agreed by an integrated judging panel and over 200 staff attended the celebration event in May 2022. Branding was developed for the awards and local sponsorship used to provide staff refreshments and printing.

OUTCOMES

- Opportunity to bring staff working across One Bromley organisations together and promote understanding of the excellent work being undertaken.
- Positive coverage of the awards in the local newspaper.
- Examples of integrated care suggested for national awards. The Bromley Homeless Health Clinics which won the Mary Cooke Award for Reducing Health Inequalities went onto win the [national Innovate award for reducing inequalities](#).

NEXT STEPS

Review how we continue to reward and recognise the efforts made by staff working as an integrated care system.

4.2 Other Bromley Partnership Work

This section provides examples of how Bromley organisations have worked together in partnership to help promote campaigns, health programmes and initiatives to support local people.

CHILDHOOD VACCINATIONS

To promote the importance of childhood vaccinations, encourage uptake, provide information and signposting and answer questions.

Childhood Immunisations Advice Drop-In

Blenheim Children & Family Centre
Monday 20 March / 9:30am - 11:30am

Community Vision Children & Family Centre
Tuesday 28 March / 10:30am - 12:30pm

Cotmandene Children & Family Centre
Thursday 30 March / 11:00am - 1:00pm

Castlecombe Children & Family Centre
Thursday 6 April / 10:00am - 12:00



South East London
Inspired Care

Calling all parents – Protect your child with the MMR Vaccine

Bromley doctors are calling on parents and carers to ensure their children are up to date with their free measles, mumps, and rubella (MMR) vaccine, and all other routine childhood immunisations. These vaccinations are crucial in protecting children against preventable diseases. If you haven't had the vaccine, you are more likely to catch these diseases.

The MMR vaccine is safe, quick, and free as part of the NHS routine immunisation schedule. In the UK, millions of MMR doses have been given since it was introduced in 1988.

Before vaccines can be used, they are thoroughly tested for safety and approved by the UK's independent regulator.

At the end of 2022, 92% of Bromley children had their first MMR and 87% had their second. We need to be at 95% to avoid outbreaks of these dangerous diseases.

Measles, Mumps and Rubella are all viruses. They are spread to those not vaccinated by being close to others who are infected. Measles in particular is very infectious.


Measles	Mumps	Rubella
Measles is very infectious. Nearly everyone who catches measles will have a high fever, a rash and generally be unwell. Children often have to spend about five days in bed and could be off school for ten days. Complications from measles effects around one in every 15 children and include chest infections, the infection of the brain and brain damage. Measles can kill.	Mumps can lead to fever, headache, and painful, swollen glands in the face, neck, and jaw. It can result in permanent deafness, and meningitis. Infection of the lining of the brain and meninges. Mumps lasts about seven to ten days. Before the MMR vaccine was introduced, mumps was the most common cause of viral meningitis in children under 15. Measles can kill.	Rubella (German measles) in children is usually mild and can go unnoticed. It causes a short-lived rash, swollen glands and a sore throat. Rubella is very serious for unborn babies. It can seriously damage their sight, hearing, heart, and brain. In the first three months of pregnancy it causes damage to the unborn baby in or to nine out of ten cases. In many of the cases, pregnant women caught rubella from their own, or their family, children.

Not sure if your child is up to date with their vaccination? Check your Red Book or talk to your GP practice.

You need two doses of the MMR vaccine. In Bromley these are given at 1 year and at 18 months old.

If you have missed one or both, you can still be vaccinated.

To find out more about the MMR vaccine, please visit www.seelondonics.org/childhoodvaccinations for more information.



Activity	Outcome
<ul style="list-style-type: none"> Advice drop-in sessions at various Children and Family centres. Promoted across social media and through the Council's resident e-newsletter with 70k subscribers. At some drop ins, facepainting and other activities were available. Promotion of the important of childhood vaccinations incorporated into the winter vaccine programme. Newspaper adverts on the importance of MMR, using trusted clinical voices was promoted in the local newspaper and online. Series of GIFs, images and videos were created to support a social media campaign which featured Public Health and GP. Targeted work with the Gypsy Romany Traveller community with drop ins, videos and Whatsapp messages disseminated by community leaders. South east London wide childhood immunisation campaign widely promoted including useful cards for parents with timetables of vaccinations which were handed out at events and in public places. 	<p>Opportunity to learn, ask questions and emphasise the importance and safety.</p> <p>Trust between clinicians and parents.</p> <p>Increased awareness and parents given tools to enable them to keep up to date with childhood vaccinations.</p>

GROUP A STREP

Winter 2022 saw an increase in children with Group A Strep which can cause many different infections, ranging from minor illnesses to very serious and deadly diseases. The impact on local services was considerable. System communications were put in place to manage the increased demand and parents were encouraged to ensure their child is up to date with all their vaccinations.

South East London Integrated Care System **NHS**

The nasal flu vaccine may help reduce cases of group A strep

Bromley parents are urged to have their children vaccinated against flu to help reduce group A strep infections

The flu nasal spray vaccine which offers protection to children against flu may also help reduce the risk of group A strep infections*

Flu is a common and infectious disease caused by a virus. It is more severe than a cold. The children's nasal spray flu vaccine is safe, effective and is offered every year to children to help protect them against flu. It is complementary to other flu vaccines and reduces the spread of infection to other children and adults. It will protect your child and prevent them getting sick with flu and missing time off school or nursery.

Even healthy children can become seriously ill from flu. In some cases, flu can lead to complications. These can include bronchitis, pneumonia, painful middle-ear infection, vomiting and diarrhoea.

Children who catch flu are at greater risk from subsequent infections, including group A strep infection. This is another reason for children to have their vaccine at a time when there are unusually high rates of group A strep infection across the population.

Dr Bhramika Mittal is a Bromley GP and mother to two young children. Both have had their flu nasal spray.

"The best thing any parent can do for their child is to make sure they are up to date with all their childhood vaccinations, including the yearly flu vaccine. Young children catch and spread the flu easily. But if they are vaccinated, they are less likely to be really ill and less susceptible to other infections like group A strep."

Flu is circulating in Bromley, and we are seeing many more cases than in previous years. It can be really unpleasant for children, especially those with long-term health conditions. Children may be super contagious but can easily give the virus on to other family members and the wider community. It is never too late to have your child vaccinated and protect them and other vulnerable people."

Helen Poulak, from Orpington has vaccinated her children. "I protect my children every year with the flu nasal spray. It's quick, easy to have and painless. It gives the great peace of mind that they have the best protection. It's better to have the vaccine than have the flu."

When should my child have the flu vaccine?

Child's age	Where to have the flu vaccine
From 6 months until 2 years (both long-term conditions)	GP surgery
From 2 years until child starts primary school	GP surgery
All children at primary school	School
Year 7 to year 11 secondary school children	School
Children in reception to year 11 (both long-term conditions)	School or GP surgery
Home-schooled children (same age as reception to year 11)	Community clinic

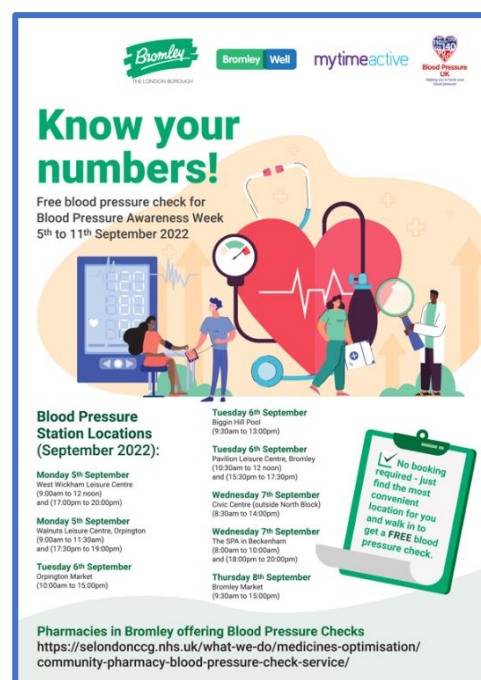
The Bromley primary school vaccination programme has finished for 2022/23.
If your child has missed their vaccine, please contact your GP for an appointment.
For more information about the children's flu vaccine, visit www.seilondonics.org/childhoodvaccinations. You can also watch our short video at <https://tinyurl.com/prufw59>

*Report from the UK Health Security Agency

Activity	Outcome
<p>Inform parents and carers and Group A Strep and how to act if you are concerned about your child. Information was included on websites and promoted through social media. Webinar sessions with clinicians were hosted by the South East London Integrated Care System and these were promoted locally.</p> <p>Parents were encouraged to ensure their child has their flu vaccine, as this could reduce the risk of Group A Strep. This was promoted on the website and through social media and local newspaper advertising.</p>	<p>Opportunity to learn, ask questions from an expert panel.</p>

KNOW YOUR NUMBERS

The national 'know your numbers' campaign to promote the importance of blood pressure checks was widely promoted across Bromley, led by the Public Health Team. The aim was to provide residents with blood pressure advice, promote home monitoring and signpost to locations offering free blood pressure tests.



Activity	Outcome
Public Health, Bromley Well and MyTime Active set up a number of blood pressure stations at locations across the borough. Other Bromley partners and the One Bromley Community Champions helped to promote the stations.	Good attendance at the blood pressure stations during the awareness week. Opportunity to engage with residents on the importance of knowing your numbers and how to get to a healthier level.
Blood pressure information was on the council's website, promoted online and locations providing free blood pressure checks to residents for Blood Pressure Awareness Week appeared in national press release.	

PRINCESS ROYAL UNIVERSITY HOSPITAL MATERNITY VOICES PARTNERSHIP


The PRUH Maternity Voices Partnership (MVP) is a user led group, aiming to improve the experiences of those using maternity services, and review and contribute to the development of maternity care in Bromley. The MVP committee is made up of current and previous service users, maternity staff, and commissioners. More information on the MVP is [available on their website](#). A small group of enthusiastic and active volunteer service user members of the committee have been involved in various projects working in partnership with the Princess Royal University Hospital and King's College Hospital. Members attend various maternity meetings to provide a user voice.



Activity	Outcome
<ul style="list-style-type: none"> Built up a profile for the MVP by establishing a website, social media (including Facebook and Instagram), newsletter and recruiting more service users to the committee. Instagram live session has taken place, and more are planned to cover topics such as home birth, gestational diabetes, and the Oasis suite. <p>Active involvement in various projects such as:</p> <ul style="list-style-type: none"> 15 Step visits. This involved visiting the maternity units and providing feedback on what could be improved. Induced labour experiences. A survey captured experiences from 70 service users. Feedback sessions were held to find out more and improvements will be made to information about induction. Involvement in scheduled visits and meetings as a result of the Ockenden review. Ran an online poll to capture views on having access to a birthing pool. Capturing feedback each month on the postnatal ward. Collaboration with local community groups such as Mindful Mums. Launch of a 'NICU little library' providing books for parents to read to babies in special care. Creating and sharing a poll for renaming the 'birth without fear' sessions. Ongoing process to review and co-produce a range of maternity information leaflets, including surveying service users on their preferred format for accessing maternity information. 	<p>Enables more women to provide feedback on their care and understand the work being done to improve maternity services.</p> <p>More welcoming atmosphere on the maternity units, reduced clutter and birth friendly lighting introduced.</p> <p>The induction of labour leaflet is being reproduced and a new induction education session introduced for maternity staff.</p> <p>Service user feedback fed into the Ockenden review process.</p> <p>Data collected will form part of a proposal to bid for a birthing pool.</p> <p>New water coolers installed to provide easy access to water.</p> <p>Launch of a regular 'Jolly Trolley' mocktail hour – providing an opportunity for those on the ward to talk about mental health and available community support.</p> <p>Helps with bonding and outcomes of babies on the ward.</p>

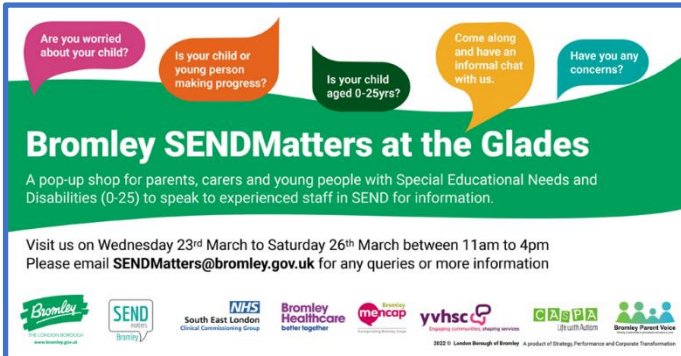
BROMLEY TRANSITION DAY

The Bromley Transition day in April 2022 enabled parents, carers and young people with special education needs and disabilities (SEND) to meet with a range of Bromley's service providers to learn about the support on offer as they develop independence and prepare for adulthood.

Activity	Outcome
<p>Working in collaboration with Bromley Healthcare and Oxleas NHS staff, alongside some 35 service providers, the Transition Day allowed the 70+ young people and their families who attended to meet and chat directly with staff about the options available to them as they prepare for adulthood at an informal setting.</p> 	<p>Attendees left the event informed on pathways and support services available to support children and young people with SEND, including health and wellbeing as they transition into adulthood.</p>

SEND MATTERS

In 2022, the SEND Matters Learning Space hosted in the Glades Shopping Centre, was widely promoted. Health and SEND staff met with parents, carers, families, and other residents at the Glades Learning Space to provide guidance and resources to help individuals better understand disabilities and additional needs and support children, young people and families access the necessary services.



Activity	Outcome
<p>The learning space was widely promoted online and on high street advertising boards and to those who receive the SEND Matters newsletter.</p>	<p>Increased awareness of SEND. Families who use SEND related services were able to learn more and speak directly with SEND and health staff.</p>

SAFEGUARDING

The [Bromley Safeguarding Children Partnership](#) brings together many agencies and organisations working together in partnership to keep children safe. Over the last year, Children Looked After and those leaving care have fed their views and experiences into Safeguarding training and practice.



Activity	Outcome
Six care leavers joined an online Health and Primary Care academic half day Level 3 Safeguarding Training session, to share their experiences of being in and leaving care. This face to face event is for Bromley practice staff.	Experiences shared by young people at the event was used to inform safeguarding training for health professionals. Feedback from the event was shared with the Corporate Parenting Board.
In May 2022, the new monthly 'Come Dine with us' initiative commenced. Care leavers wanted to meet with health professionals in a non-clinical environment, improve their health and wellbeing, reduce their isolation, and improve independent skills by learning to cook. A range of partners are involved including Bromley Y (children's emotional and mental wellbeing service) and sexual health services. Come Dine with us originated from care leavers who contribute to the Corporate Parenting Board. The Board captures the voice of children and is chaired by an independent Councillor. This is one of the Board's Health and Wellbeing initiatives.	Six to 15 young people take part each month and use the sessions to engage in cooking and discuss health and wellbeing issues of their choice each month. They plan to create a cook book in the future.

OTHER

- Support to the One Bromley Workforce workstream to promote the work being undertaken to widen participation and encourage young people to consider a career in health and care in Bromley.
- Preparations for the new One Bromley Careers campaign (due to roll out in May 2023). This has included new website content, a




Bromley staff survey, and a communications toolkit to promote the campaign and encourage people to live and work in Bromley.

- Localisation of national campaigns and initiatives as relevant for Bromley communities. This included promoting carers week and self-care week with a range of events led by Bromley Third Sector Enterprise.
- Promote surveys to capture views on cancer care, cervical cancer screening uptake, carers strategy and other initiatives.

4.3 Organisational Engagement

This section shares examples of how One Bromley organisations have engaged with people and communities in Bromley to shape, inform and influence their own services. We routinely capture outcomes from community engagement undertaken by our individual organisations and share this across the Bromley system so that we understand what we are hearing from our residents and avoid duplication.

Purpose	Activity	Outcome
NHS SOUTH EAST LONDON INTEGRATED CARE BOARD (BROMLEY)		
To inform a new contract for the Bromley Urgent Treatment Centres	<ul style="list-style-type: none"> • Survey of people using the two Bromley urgent treatment centres to gather views on the service. • Patient focus group established to review the service specification. • Two patient representatives recruited to be on the procurement panel for the new provider. • Patient representatives supported the review of new patient materials about the service provider and new registration details on arrival at the urgent treatment centre (posters and leaflets) 	<p>New service was launched in April 2023.</p> <p>Comprehensive report on the engagement activity undertaken is available on the One Bromley webpages.</p>
To update on plans for a new Bromley Health and Wellbeing Centre	<ul style="list-style-type: none"> • An online meeting was held with residents and stakeholders to update on the plans for the new Bromley Health and Wellbeing Centre, proposed for Bromley town centre. • Presentation slides and Q&A were shared with all those who attended. 	<p>Well attended meeting, with useful feedback which was incorporated into the plans (including planning proposals) by the project team. New webpages created to provide ongoing</p>

Purpose	Activity	Outcome
		updates and collect feedback on the plans for the centre.
To inform a new contract for anticoagulation services.	<ul style="list-style-type: none"> Two patient representatives recruited to be on the procurement panel for the service. A new provider was commissioned, and a communications plan developed to inform and promote the new arrangements. 	New service launched in April 2023.
To inform and educate the public on the way general practice and other primary care services are working.	<p>A local campaign was developed at the request of Bromley primary care services following feedback from patients. This focused on five key messages:</p> <ul style="list-style-type: none"> How is primary care working (who is who in your GP team). How to get an appointment (use of online and apps as well as the phone) Role of social prescribers (to take the pressure off GPs from managing non-medical issues) How to self-refer to some services and save an appointment with your GP Role of community pharmacists in supporting your health and wellbeing. <p>A campaign brand was developed and used to promote the messages above. Use of 'trusted voices' to deliver the messages. Task and finish group to steer and inform the campaign was set up to meet each week and included membership from primary care services. The campaign launched in the summer of 2022. Promoted through social media, print media, through newsletters, videos in primary care reception areas, posters, and a brand hashtag to share messages and promote visibility. The core messages were also included in the One Bromley Guide to</p>	<p>Comprehensive web presence addressing many of the issues raised by patients. Shared on practice websites.</p> <p>Ongoing signposting to the campaign materials.</p> <p>Positive feedback from print materials and online information.</p> <p>Evaluation to take place in 2023 through practice visits.</p> <p>Campaign picked up by other areas of the country who are adapting it for their use.</p> 



Purpose	Activity	Outcome
	Keeping Well over winter which was distributed to all households.	
BROMLEY HEALTHCARE		
Inform improvements at the Hollybank Respite Centre.	In order to provide an opportunity for parents, carers and families of young people with special educational needs and disabilities (SEND) to meet up and, speak with staff about the Hollybank Respite centre and their child's care, bi-monthly drop-in coffee mornings were set up. These enable people to get together, ask questions and capture views on the facility and care provided.	<p>Parents and carers felt more supported and confident about their child's care. There was an improved understanding of the system and care their child received. Good opportunity to build networks with other parents.</p> <p>Contributed to the Healthwatch observation report. Hollybank Centre receives glowing Healthwatch Observation Report - Bromley Healthcare</p>
Ensure therapy service information is informed by users.	Two workshops were held with parents, carers, and guardians, hosted in partnership with the council's SEND team and Your Voice in Health & Social Care to capture feedback on web based information and ensure what is offered is clear, empowering, and outcomes focussed.	<p>Reviewed and redeveloped our webpages based on insight and feedback provided by parents, including additional videos and resources, and changing the layout to make it more accessible.</p> <p>Occupational Therapy - children</p>
Ensure the needs of local people are fed into plans for an integrated health hub.	<p>Joint initiative with the Orpington and Cray primary care networks to develop an integrated health hub linked to the Orpington Wellbeing Café. Ensure it meets the needs of local people, particularly those who are vulnerable, and that it supports the reduction of health inequalities.</p> <p>Co-design workshops and outreach with seldom heard and underserved communities. This included:</p>	A mix of 45 health and care professionals, local people and colleagues from the voluntary and community sector joined a workshop, which helped programme leads to understand people's needs and provide steer on what the hub will offer.

Purpose	Activity	Outcome
	<ul style="list-style-type: none"> Traveller population in Orpington and the Crays People over 65 experiencing homelessness People with physical and learning disabilities over 65 and their carers. 	
OXLEAS NHS FOUNDATION TRUST (BROMLEY ACTIVITY)		
Delivery and future updating of the Oxleas strategy and sharing of upcoming plans and priorities.	<p>Events held with Oxleas members, (both virtual and face to face). Members were asked:</p> <ul style="list-style-type: none"> Do our strategic priorities remain the right areas to focus on? What other areas do you think have become important since we developed our strategy? 	Feedback will inform the current strategic priorities and the updating of the strategy for 2024 onwards.
Seek views to inform estate and sustainability strategies	Survey to capture views on environmental issues relating to Trust sites. 153 people responded.	Responses to be reviewed by the Estates team and Membership Committee and consider how these will influence the estate and sustainability strategies.
The Co-Production Sharing Day Event in March 2023	The day provided an opportunity to bring together Oxleas staff and people with lived experience from various adult and learning disability groups and projects to learn about each other and the work they are doing. This included contributions from the Oxleas ResearchNet groups.	Successful event which provided an opportunity to learn about the various service user led groups operating across Oxleas and the work they do. Further events are planned.
Service user voice in Trust programmes, and committees	<p>Service users are included in a very wide range of committees across Oxleas as well as those programmes focused on delivery the Trust's priorities. Examples include:</p> <ul style="list-style-type: none"> Patient experience groups, community transformation and transition from children to adult mental health services. Programmes are many and varied and include Zero delays, acute care programme, Dementia improvement project, children and young people steering group, Great out of hospital 	Ensures those with lived experience are able to contribute and share their valuable insight and views to help shape service improvement and delivery.

Purpose	Activity	Outcome
	<p>care, improving lives programme, perinatal mental health steering group and NHS 111 mental health delivery team.</p> <p>The Trust's Council of Governors has Bromley representation including members of the public and those who use services. It holds the non-executive directors to account for the performance of the Board and represent the views of members and the wider public.</p>	
<p>Bromley ResearchNet group is made up of people with lived experience, volunteers and staff members who have an interest in working together to improve the experience of patients and carers. There is also a ResearchNet group in Bexley and Greenwich.</p> <p>Over the reporting year the group has worked on a number of projects. The group is also undertaking a staff service evaluation to measure the effect they have on staff. Interviews</p>	<p>Anti-Bullying Project</p> <p>Adults with learning disabilities were struggling to attend appointments during school transport hours with many reporting bullying or harassment using transport during these hours.</p> <p>Bromley and Greenwich ResearchNets developed the 'anti-bullying project which was launched during Learning Disabilities Awareness Week. Members met with school children in the two boroughs and held an anti-bullying awareness session.</p> <p>Park Project</p> <p>Group members recognised that public toilets were closed in some of the parks which makes it difficult for people with learning disabilities to enjoy the park. They focused on Norman Park and approached local places near the park to ask if toilets could be opened up to those with learning disabilities.</p>	<p>These sessions involved getting to know each other and build relationships through ice breakers and fun activities together, talking about the history of bullying and harassment of people with learning disabilities in the UK, showing a video of a role play and holding discussions about the role play and ways of managing it.</p> <p>Members identified that Norman Park Community Sports centre has toilets that are open to everyone. Crystal Palace Park has particularly good facilities. The next stage is to produce an information sheet to let people know about these facilities so they can continue to enjoy the parks.</p>

Purpose	Activity	Outcome
and surveys will be undertaken.		
KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST (BROMLEY SITES)		
To co-design patient information and literature	King's Patient Reading Group was established in May 2022 to coproduce patient information leaflets and ensure consistency of information across our sites. The areas of focus were identified via the National Patient Survey Programme.	This year the group has developed, amongst others, the following leaflets: Welcome to King's, A Guide to Leaving Hospital, A Patient Discharge Checklist, an Emergency Department Leaflet.
To ensure the patient voice is used to improve cancer care and delivery across the Trust.	<p>The King's Voices Advisory Group continues to meet regularly, made up of previous and current patients, to be a critical friend to King's and to challenge us to improve the aspects of cancer care they feel most need action. They also provide a central point of feedback for patients involved in the workstreams.</p> <p>Highlights this year include:</p> <ul style="list-style-type: none"> • Listening to patients through a series of events and workshops • A cancer patient experience survey has been introduced to provide real time feedback from patients in some specialties. This has informed the work of the programme and allows us to track changes in patient experience as a result of improvement activity. • A dedicated national cancer collaborative project with NHS England allowed King's to focus engagement with women with English as a second language experiencing breast cancer to 	<p>People with cancer have been recruited to support the Cancer Board and all the workstreams that are part of the cancer patient experience programme.</p> <p>In partnership with Macmillan, King's has been supported to create a network of patient representatives and to showcase their work across London and nationally. This led to being shortlisted for a Penna award for patient engagement in 2022.</p> <p>King's supported the development of an independent charity for LGBTQ+ people living with cancer, led by a King's cancer patient. Work has also taken place with a charity run for black communities experiencing cancer care.</p>

Purpose	Activity	Outcome
	<p>improve communication at the point of initial diagnosis.</p> <ul style="list-style-type: none"> • Work to develop a cancer information and support service in Bromley centre, provided an opportunity to hear from members of Bromley Mencap about what information is important to them about cancer, and the formats they would like to receive this information in. 	
PLACE – National Audit	<p>King's took part in the national Patient Led Assessment of the Care Environment. 47 patient representatives took part in these audits over a week-long period.</p> <p>Working with staff they reviewed and scored our hospital site, looking at the cleanliness and standard of facilities provided for patients.</p>	<p>The scores of the audit have now been published nationally and we are working with our patient reps to develop and deliver a clear action plan for improvements.</p>
King's Young People's Forum	<p>King's Young People's Forum (KYPs) is a new group of 11-16 year olds that meets online monthly to provide a forum for discussion around improvement projects. The following areas have been discussed:</p> <ul style="list-style-type: none"> • Staying in hospital • Outpatient improvements • Youth room refurbishment • Ward 'chill out' areas • Staff interview questions • Psychology services • Blood testing and rooms • Discharge information/support • A&E experience • Admissions information and booklet • Parents rooms and ward bathrooms • Therapy activities 	<p>A new Children and Young Person's Admissions Booklet was developed in partnership with the group.</p> <p>In December 2022, members of the group visited King's (Denmark Hill site) and discussed their feedback with senior operational colleagues. They had their photos taken for the new admissions booklet and visited our security team and the helipad.</p>

Purpose	Activity	Outcome
BROMLEY COUNCIL (INCLUDING PUBLIC HEALTH)		
Promote Healthy Start to new parents and eligible residents in the borough.	<p>Shared Healthy Start leaflets as part of a pack given to all parents who register a birth in Bromley. This is typically around 4,000 births a year.</p> <p>Promoted Healthy Start to 70k subscribers via our Update e-newsletter.</p>	Parents are signposted to a service they may not have been aware of, that can provide health benefits without incurring an additional cost to families.
Early Years Event Signpost parents/carers to Early Years drop in session at Blenheim Children and Family Centre.	<p>Promoted the drop-in session on social media, website and 70k subscribers via e-newsletter. The event provided an opportunity to meet with health staff to discuss the support on offer to help with childhood development.</p> 	Parents/Carers were able to meet with health staff in person to be signposted to support services and received advice on childhood development.
A Calendar of Bugs 2023 Increase awareness of seasonal bugs, symptoms, and preventative advice as part of Public Health initiative to promote infection control.	<p>Collaborated with health staff on creating a calendar that details seasonal bugs, their symptoms and how to treat them. Tips on preventing contracting these illnesses were also detailed in the calendar. The calendar was sent to many health and educational settings and can be downloaded from the council website to print at home.</p> 	An engaging calendar was created to encourage all ages to learn more about seasonal bugs, when they typically come around in the year, what symptoms to look out for and what to do if you have caught one.

Purpose	Activity	Outcome
BROMLEY GP ALLIANCE (BGPA)		
Promote, gather feedback, and build relationships between the Bromleag Care Practice and Bromley Care Homes.	Bromleag Care Practice management team went to each home to re-engage with care homes management team to gain feedback as to how the practice can improve and develop their working practice.	Personalised care provided to each home depending on the demand and needs. Stronger and more collaborative working between care homes and the practice. For example, support provided on medication changes and structured medication reviews. A template was created to capture relevant and appropriate details prior to practice visits.
To understand the need of the homeless population and enable them to receive a range of healthcare services in an easy-to-access and safe environment	BGPA and Bromley Homeless Shelter ran a clinic each winter which was staffed with volunteer clinicians from other health organisations. The clinic was well received by the homeless shelter and the homeless population. Feedback on the clinic was fed into the service provision. The service won the One Bromley Mary Cooke Award for Reducing Health Inequalities in May 2022.	Impact of the winter scheme led to the service being commissioned for three years with a nurse-led clinic being run every day.
BROMLEY PRIMARY CARE NETWORKS		
To engage with practice populations on the new Enhanced Access Services, a national agreement on extended hours for primary care.	GP practices engaged with their practice participation group members and in many cases the wide practice population to capture their views on the new Enhanced Access Contract which all GP practices had to implement. The new contract would ensure that additional appointments were available in the evening and at weekends to meet the needs of registered patients. Face to face and virtual meetings took place as well as surveys to capture views.	Feedback from patient engagement was used to inform out of hours provision. In some cases, the additional out of hours appointments were used to provide better access and flexibility for those who work, and for routine screening appointments.

Purpose	Activity	Outcome
ST CHRISTOPHER'S HOSPICE		
<p>Facilitate peer to peer support for those who are carers, bereaved or socially isolated for any reason.</p> <p>Provides an opportunity to hear about people's experiences for the continuous improvement of clinical services.</p>	<p>Individuals are matched with a trained volunteer who provides support and, in most cases, has similar lived experience. The following groups are available in the community.</p> <p><u>Compassionate Neighbours</u></p> <p>Funded by the City Bridge Trust, Compassionate Neighbours is a community-led initiative for people living with or caring for a person with a long term, life limiting or terminal illness, or people who are older and socially isolated.</p> <p>It's a network of people who offer their time, companionship, and support to people living in their local area by:</p> <ul style="list-style-type: none"> • Building a relationship to offer emotional support and a listening ear. • Helping others to stay connected to their friends and the community. • Directing to important support services • Providing practical support, such as making a cup of tea <p>Bereavement Buddies (pilot project)</p> <p>Funded by The Mercer Trust, this new initiative provides early intervention bereavement support. Individuals are matched with a bereavement buddy usually before the bereavement occurs.</p> <p>Born out of work with people who had lived experience of bereavement, we designed every element in collaboration, including the training which every Bereavement Buddy</p>	<p>This initiative is extremely popular, and we've had another great year supporting many people across the community who would otherwise have no one to turn to.</p> <p>In just two months since launch, more than 50 people have volunteered to become Bereavement Buddies. There is such a need for this peer to peer support both before and immediately following the death of someone close when it can be confusing,</p>

Purpose	Activity	Outcome
	<p>volunteer receives before they can be matched.</p> <p>Carer Champions</p> <p>Funded by the Women in Fellowship, this project sees volunteers who have been carers themselves partnered up with those who are currently caring for someone with a long term, life limiting or terminal illness.</p> <p>The volunteers offer companionship and collaboration to those who could otherwise feel quite isolated.</p>	<p>overwhelming and frightening.</p> <p>St Christopher's Hospice supports carers in many ways. This one-to-one connection with someone who is able to understand the daily challenges and obstacles which face carers is invaluable.</p>
<p>Generate a safe space for people in the community to gather, talk and create together. Provides an opportunity to capture feedback for the continuous improvement of clinical services.</p>	<p>Create and chat – weekly drop-in group where people can learn new art skills, meet other art group members, and have a chat about anything.</p>	<p>This group is well attended by a range of participants, including:</p> <ul style="list-style-type: none"> • Patients. • Family members of patients. • Friends of patients. • Those who are bereaved. • Those who are socially isolated.
BROMLEY THIRD SECTOR ENTERPRISE		
<p>Ensure ongoing feedback from unpaid carers</p>	<p>Quarterly forums are held with unpaid adult carers to gather feedback on support and service requirements and use. Events are also arranged to consider specific challenges for unpaid carers.</p> <p>One example was the Bromley Well Mental Carers Service event in February 2023. This online event enabled carers of people with serious mental illness to feedback about the barriers those they care for face when accessing routine health checks through their</p>	<p>Ongoing input to how and what support Bromley Well provides for unpaid carers.</p> <p>Recommendations included increasing awareness of eligibility for SMI health checks, more flexibility around appointments (especially where there are</p>

5. GETTING INVOLVED

There are many ways in which Bromley residents can get involved in their health and care services.

Many of our individual organisations have user led/people with lived experience groups where people can actively participate by sharing their experiences and help to develop and shape service provision. Both King's and Oxleas as NHS Foundation Trusts have a large membership who are part of their governance arrangements.



One Bromley has a patient network and a community champions programme. For more information and to get involved please email Patientquery@selondonics.nhs.uk

5.1 One Bromley Patient Network

The One Bromley Patient Network is made up of over 200 residents who are interested in our work and want to get involved and make a difference. They support our work through sharing their views, joining meetings, focus groups, providing feedback on our plans and take part in decision making panels on procurements and new contracts. Individuals can get involved as much or as little as they like and receive regular updates on opportunities to have their say.

COMMUNITY OUTREACH

We work together to reach local communities through established events and other opportunities. This includes attending the Penge Festival, Health and Wellbeing Event in Anerley and the community celebration event organised by Churches together in Orpington. This provides excellent opportunities to talk to residents and share important health and signposting.



5.2 One Bromley Community Champions

In 2022, we launched a new One Bromley Community Champions programme.

Champions are rooted in their community and bring local people and services together to improve health and wellbeing, transfer knowledge, and help reduce health inequalities across different groups. Their role helps to foster improved community engagement. They will have an important role in helping us to reach the seldom heard and co-design information and resources, so they meet the needs of different communities.

To date 40 champions have been recruited from a wide range of age, genre, ethnicity, religion and a variety of languages and connections. Effective information and support systems are in place to keep them informed about Bromley priorities. Contributions over the last year include:

- Supported our vaccination programmes by sharing information and talking to people in their communities about the importance of protection and how/where to get their vaccine.
- Promoted the One Bromley Health Hub by sharing information across social media and community connections.
- Advised on public facing materials to ensure they are accessible. This is wide and varied and has included Bromley Hospital at Home, Urgent Treatment Centre redirection, Winter Health guide, Primary Care Campaign, Bromley Child Health Integrated Partnership and GP website redesign.
- Supported various public health campaigns and service improvement surveys by attending events and promotion through their contacts.



Recruiting Champions at various events

Some of our Champions have participated in the south east London 'Spread and Scale Academy'² which provided an opportunity to reflect on the current status of our champion programme and future improvement goals.

A more detailed report on the One Bromley Community Champions will be published in May 2023 at www.selondonics.org/OneBromley

6. LOOKING AHEAD

In June 2023, One Bromley Local Care Partnership will publish a five year strategy setting out the priority areas for improvement and development. Our communications and engagement work will focus on supporting delivery of these priority areas and ensuring Bromley people and communities are able to inform, influence and shape high quality, proactive and integrated care.

7. FURTHER INFORMATION

For more information on the One Bromley Local Care Partnership and the organisations that make up the partnership, please visit www.selondonics.org/OneBromley

² The South East London Spread and Scale Academy is a training event designed to give people the tools and skills needed to spread improvements and innovations at scale across their organisations and beyond.

If you would like to join either the Community Champion programme or our One Bromley Patient Network to get involved and share your views, please email patientquery@selondonics.nhs.uk

Please follow us on Twitter: @OneBromley



Author: Kelly Scanlon, Assistant Director of Communications and Engagement, NHS South East London Integrated Care Board (written on behalf of the One Bromley Communications and Engagement Workstream)



One Bromley Local Care Partnership Board

DATE: 16th May 2023

Title	March 2022/23 SEL ICB Finance Report and 2023/24 budget update	
This paper is for information .		
Executive Summary	<p>The report sets out the financial position, the key highlights are as follows:</p> <ul style="list-style-type: none">• SEL ICB Month 12 financial position. As at Month 12, the ICB delivered a £16k surplus against its total allocation. In reporting this Month 12 position, the ICB has delivered all of its financial duties:<ul style="list-style-type: none">• Surplus positions against its overall Resource Limit (£16k) and Running Cost Allowance (£748k);• Delivering all targets under the Better Practice Payments code;• Subject to the usual annual review, delivered its commitments under the Mental Health Investment Standard; and• Delivered the month-end cash position, well within the target cash balance.• Bromley ICB/LCP Month 12 financial Position. As at Month 12 the year end position was £1,911k overspent. The significant variances relate to: prescribing £2,980k overspent, continuing healthcare £804k underspent and corporate budgets £330k underspent.• 2023/24 budget setting process has been completed and the Bromley place start budget for the year is £233,570k.	
Recommended action for the Committee	The Board is asked to NOTE the financial position.	
Potential Conflicts of Interest	N/A	
Impacts of this proposal	Key risks & mitigations	N/A



	Equality impact	N/A
	Financial impact	N/A
Wider support for this proposal	Public Engagement	N/A
	Other Committee Discussion/ Internal Engagement	N/A
Author:	David Harris, Associate Director of Finance (Bromley), NHS South East London ICB	
Clinical lead:	N/A	
Executive sponsor:	David Maloney, Director of Corporate Finance, NHS South East London ICB	

One Bromley Local Care Partnership Board

16 May 2023

**Month 12 2022/23, SEL ICB Finance Report
and 2023/24 Bromley ICB/LCP start budget**

1. Key highlights
2. SEL ICB Month 12 Financial Summary
3. Bromley ICB/LCP - Month 12 Year End Financial Position
4. Bromley ICB/LCP - 2023/24 start budget

Appendix 1 – M12 SEL ICB Finance Report

- SEL ICB Month 12 financial position. As at Month 12, the ICB delivered a **£16k surplus** against its total allocation. In reporting this Month 12 position, the ICB has **delivered all of its financial duties**:
 - Surplus positions against its overall Resource Limit (**£16k**) and Running Cost Allowance (**£748k**);
 - Delivering all targets under the **Better Practice Payments code**;
 - Subject to the usual annual review, delivered its commitments under the **Mental Health Investment Standard**; and
 - Delivered the **month-end cash position**, well within the target cash balance.
- Bromley ICB/LCP Month 12 financial Position. As at Month 12 the year end position was **£1,911k overspent**. The significant variances relate to: prescribing £2,980k overspent, continuing healthcare £804k underspent and corporate budgets £330k underspent.
- 2023/24 budget setting process has been completed and the Bromley place start budget for the year is £233,570k.
- The key risk in 2023/24 relates to prescribing as the pressures experienced during 2022/23 have not been fully funded as part of the budget setting process. Boroughs are expected to manage this risk locally and make savings where required to manage the position.

2. South East London Integrated Care Board (SEL ICB) Month 12 Financial Position

- This slide sets out the Month 12 financial position of the SEL Integrated Care Board (ICB).
- The ICB submitted its draft annual accounts and supporting documentation by the deadline of 9am on 27 April. This high-level report summarises the overall ICB financial position for the 9 months ending 31 March 2023. The draft ICB accounts are now subject to the usual external audit process. Deadline for submitting the audited accounts is 30 June.
- The final ICB financial allocation for the Month 4 to 12 period was **£3,121,225k**. As at Month 12, the ICB delivered a **£16k surplus** against its total allocation.
- In reporting this Month 12 position, the ICB has **delivered all of its financial duties**, as set out in the table below:

	Month 12			Rating
	Target	Actual	Under/(Over)	
			Spend	
	£'000s	£'000s	£'000	
Expenditure not to exceed income	3,157,551	3,157,535	16	
Operating Under Resource Revenue Limit	3,121,225	3,121,209	16	
Not to exceed Running Cost Allowance	30,569	29,821	748	
Month End Cash Position	4,338	281		
Operating under Capital Resource Limit	0	0		
95% of NHS creditor payments within 30 days	95.00%	99.97%		
95% of non-NHS creditor payments within 30 days	95.00%	98.10%		
Mental Health Investment Standard (Annual)	404,710	405,460		

- The Month 12 SEL ICB Finance Report is set out at appendix 1.

3. Month 12 Bromley ICB/LCP Financial Position

M12 year-end position

Directorate	Budget £'000	Actual £'000	Variance £'000
Acute Services	4,908	4,860	48
Community Health Services	60,566	60,606	(40)
Mental Health Services	10,030	10,157	(127)
Continuing Care Services	18,303	17,499	804
Prescribing	33,939	36,919	(2,980)
Other Primary Care Services	2,517	2,456	61
Other Programme Services	27	34	(7)
Delegated Primary Care Services	41,218	41,218	0
Corporate Budgets	3,517	3,188	330
Total	175,026	176,938	(1,911)

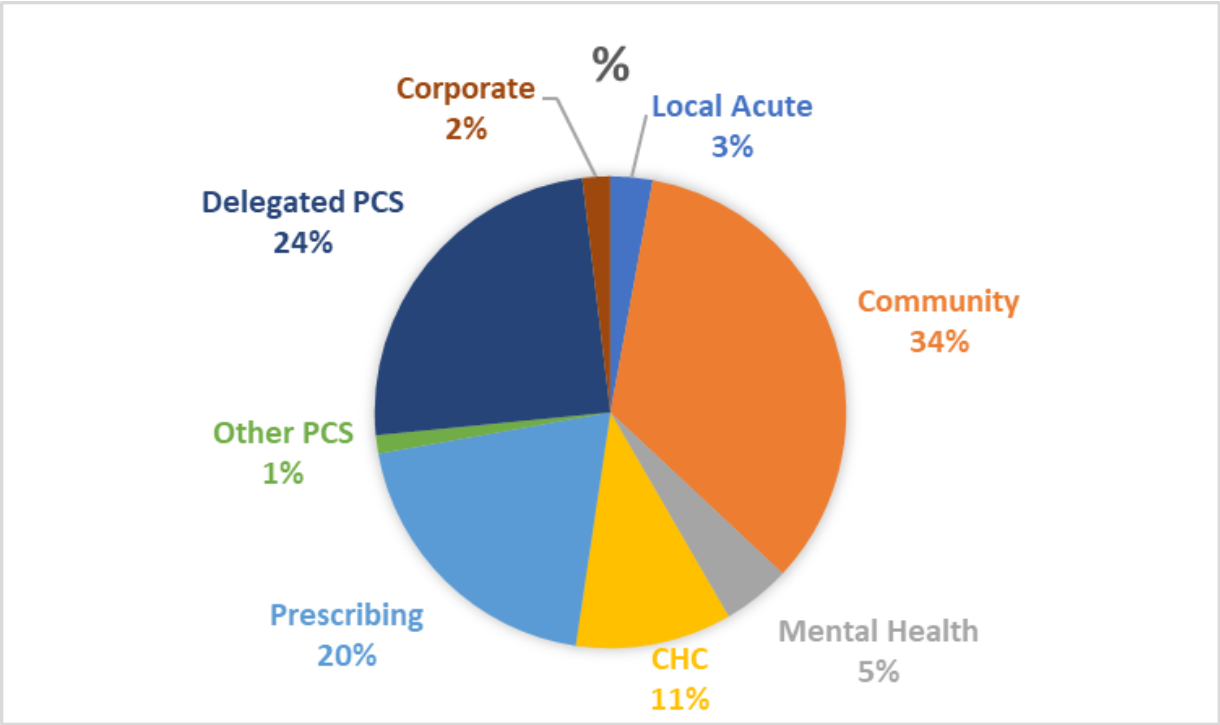
- The borough is reporting an overspend of £1,911k at Month 12. The position includes a £2,980k overspend on prescribing. This is partially offset by underspends in Continuing Healthcare and Corporate budgets.
- The Prescribing position is £2,980k overspent is based on the Month 10 PPA data. Within this position the cost of Cat M & NCSO drugs is £2,128k, compared to £449k in the previous year which represents an increase of £1,679k. There has also been an increase in activity during the year of approximately 4%.
- Within the Community budget the AQP contract for hearing overspent by £539k due to an increase in activity, this was offset by non-recurrent underspends within other community budgets.
- The Mental Health position is overspent by £127k due to an increase in s117 cost per case activity during the year.
- Corporate budgets underspent by £330k due to vacancies.
- The 2022/23 borough savings requirement is £3,841k. The savings schemes have been identified and at Month 12 all schemes are on target except for prescribing which is reporting an overspend of £383k.

4. 2023/24 Bromley ICB/LCP start budget

2023/24 SEL ICB Budget setting

- The Bromley ICB/LCP place budget is £233,570k. A summary by directorate is set out in the tables below.

Bromley	23/24 Start Budget
Directorate	£'000s
Local Acute Services (inc. UTCs)	6,715
Community Health Services (inc. BCF)	79,612
Mental Health Services	10,919
Continuing Care Services	25,042
Prescribing	46,343
Other Primary Care Services	2,922
Delegated Primary Care Services	57,559
Corporate Budgets	4,458
Total	233,570



- The 2023/24 savings target is 4%, totalling £6.2m which has been built into the budget. In building these budgets with the savings plans factored in there are significant risks in relation to in year overspends, particularly in prescribing. Therefore it is likely that further savings will needed to mitigate against this.

SEL ICB Finance Report

Month 12 2022/23

Contents



South East London

1. Executive Summary

2. Key Financial Performance Indicators

3. Cash Position

Mental Health Investment Standard (MHIS) Update

❖ Summary and Risks

❖ Position by Budget Area

- As per the national NHS year-end timetable, the ICB was required to submit its draft annual accounts and supporting documentation by 9am on 27 April. This high-level report summarises the overall ICB financial position for the 9 months ending 31 March 2023. The financial position of the Places will be reported through their local governance.
- The final ICB financial allocation for the Month 4 to 12 period was **£3,121,225k**. As at Month 12, the ICB delivered a **£16k surplus** against its total allocation.
- As previously reported, the key financial pressure within the ICB financial position related to the **prescribing** budget, which was **£12,687k** overspent. Prescribing data is received two months in arrears, so the latest information we have relates to January 2023. An estimate for prescribing expenditure for February and March has been accrued into the ICB financial position. The overspend is driven by both activity and price pressures. Activity (based upon the number of items prescribed) for the first 10 months of 2022/23 compared to the same period for last year, **has increased by circa 3.4%**. The ICB has also been impacted by increases in price driven by issues outside of its direct control – including the short supply of specific drugs and the price of Category M drugs which are nationally set. All ICBs have been similarly impacted.
- In reporting this Month 12 position, we are pleased to report that the ICB has **delivered all of its financial duties**:
 - Surplus positions against its overall Resource Limit (**£16k**) and Running Cost Allowance (**£748k**);
 - Delivering all targets under the **Better Practice Payments code**;
 - Subject to the usual annual review, delivered its commitments under the **Mental Health Investment Standard**; and
 - Delivered the **month-end cash position**, well within the target cash balance.
- The draft ICB accounts are now subject to the usual external audit process. Deadline for submitting the audited accounts is 30 June.

2. Key Financial Performance Indicators

Month 12		
Target	Actual	Under/(Over)
		Spend
£'000s	£'000s	£'000

Rating

Expenditure not to exceed income	3,157,551	3,157,535	16
Operating Under Resource Revenue Limit	3,121,225	3,121,209	16
Not to exceed Running Cost Allowance	30,569	29,821	748
Month End Cash Position	4,338	281	
Operating under Capital Resource Limit	0	0	
95% of NHS creditor payments within 30 days	95.00%	99.97%	
95% of non-NHS creditor payments within 30 days	95.00%	98.10%	
Mental Health Investment Standard (Annual)	404,710	405,460	

- The above table sets out the ICB's performance against its key financial duties as at Month 12. We are pleased to confirm that all financial duties have been delivered for the 9 month period to 31 March 2023.
- The ICB delivered a **£16k** surplus against its total Revenue Resource Limit (£3,121.2m) and a **£748k** surplus against its Running Cost Allowance (£30.5m).
- As reported in previous finance reports, the key area of financial pressure related to the prescribing budget. Year-end prescribing expenditure was £179.2m, generating an overspend of £12.7m. This overspend was mitigated by underspends in other ICB service areas – including acute, community, mental health and corporate budgets.
- The ICB has delivered its financial duties with respect to its cash limit (final cash balance was **£281k**, well within the target), paying invoices in a timely manner (both for NHS and Non-NHS creditors, the actual performance exceeded the **95%** target) and expenditure against the Mental Health Investment Standard (MHIS) exceeded the target by **£750k** – as set out in Appendix 1.

3. Cash Position

- The Maximum Cash Drawdown (MCD) as at Month 12, after accounting for payments made on behalf of the ICB by the NHS Business Authority (largely relating to prescribing expenditure) was **£3,854.9m**.
- As at month 12, the ICB had drawn down 99.6% of the available cash for the year. In March, there was a £62,140k supplementary draw down that the ICB utilised. The cash key performance indicator (KPI) was achieved in all months for this year, showing continued successful management of the cash position by the ICB's Finance team to achieve the target cash balance. The final cash balance at the end of Month 12 was **£281k**, well within the target set by NHSE.

Annual Cash Drawdown Requirement for 2022/23	2022/23 AP12 - MAR 23	2022/23 AP11 - FEB 23	2022/23 Month on month movement
	£000s	£000s	£000s
ICB ACDR (M4-12)	3,120,178	3,071,213	48,965
CCG ACDR (M1-3)	964,003	964,003	0
Capital allocation			
Less:			
Prescription Pricing Authority	(225,909)	(206,713)	(19,196)
Other Central / BSA payments-HOT	(2,504)	(2,268)	(236)
Pension uplift 6.3%	(2,038)	(2,038)	0
PCSE POD charges adjustments	1,246	1,041	205
Remaining Cash limit	3,854,976	3,825,237	29,739

Cash Drawdown	Monthly Main Draw down £000s	Supplementary Draw down £000s	Cumulative Draw down £000s	Proportion of CCG cash requirement %	KPI - 1.25% or less of main drawdown £000s	Month end bank balance £000s	Percentage of cash balance to main draw
CCG							
Apr-22	290,000	27,000	317,000	34.93%	3,625	2,830	0.98%
May-22	292,000	0	609,000	67.10%	3,650	1,254	0.43%
Jun-22	287,000	0	896,000	98.72%	3,588	856	0.30%
ICB							
Jul-22	295,000	15,000	310,000	10.48%	3,688	253	0.09%
Aug-22	310,000	0	620,000	20.95%	3,875	197	0.06%
Sep-22	335,000	0	955,000	32.27%	4,188	690	0.21%
Oct-22	305,000	12,000	1,272,000	44.10%	3,813	1,918	0.63%
Nov-22	317,000	0	1,589,000	99.62%	3,963	919	0.29%
Dec-22	302,000	0	1,891,000	65.70%	3,775	185	0.06%
Jan-23	320,000	0	2,211,000	76.50%	4,000	509	0.16%
Feb-23	327,000	0	2,538,000	87.30%	4,088	1,761	0.54%
Mar-23	347,000	62,140	2,947,140	99.60%	4,338	281	0.08%
	3,727,000	116,140					

Mental Health Investment Standard (MHIS) – Month 12 update

28 April 2023

Summary

- SEL ICB is required to deliver the Mental Health Investment Standard (MHIS) by increasing spend over 21/22 outturn by a **minimum of the growth uplift of 5.52%**. This spend is subject to annual independent review.
- MHIS excludes:
 - Spending on Learning Disabilities and Autism (LDA) and Dementia (Non MHIS eligible).
 - Out of scope areas include ADHD and the physical health elements of continuing healthcare/S117 placements
 - Spend on SDF and other non recurrent allocations
- The MHIS target is measured for the financial year 2022/23 and therefore brings together the Q1 CCG 22/23 and the SEL ICB Q2-Q4 22/23 reported position
- The table on the next page summarises the SEL ICB reported month 12 position for the delivery of the Mental Health Investment Standard (MHIS). The ICB is reporting that it will deliver the target value of **£404,710k** with a forecast of **£405,460k (£750k over delivery)**. Within this position, mental health prescribing is overspent by £1,609k (17.2%) with Cat M and No Cheaper Stock Obtainable (NCSO) drugs continuing to have a significant impact.

Ongoing risks to delivery

- We continue to see an increase in spend in some boroughs on mental health, for example on S117 placements and LD placements which are not included in the MHIS definition.
- For ADHD, although it is outside the MHIS definition and is therefore excluded from this reported position, we are seeing a significant cost pressure resulting from increasing demand of approximately £1.6m. This cost is managed within the overall mental health budgets. Work is underway to understand and manage the drivers for this demand.
- Prescribing spend is volatile within and across years – in 21/22 we saw a reduction in spend on Sertraline of approximately £2m on a total plan of approximately £11.7m (17%). In 22/23, spend is increasing as described above.

SUMMARY MHIS POSITION M12 – position by budgetary area

Mental Health Investment Standard (MHIS) position by budgetary area

		Month 12 Outturn position for the financial year ended 31 March 2023					
	Category number	Annual Plan	SEL Wide Spend	Borough Spend	All Other	Total	Variance (over)/under
		£000s	£000s	£000s	£000s	£000s	£000s
Mental Health Investment Standard Categories:							
Children & Young People's Mental Health (excluding LD)	1	£38,119	£34,830	£3,572	£0	£38,402	-£283
Children & Young People's Eating Disorders	2	£2,773	£2,784	£0	£0	£2,784	-£11
Perinatal Mental Health (Community)	3	£8,790	£8,814	£0	£0	£8,814	-£24
Improved access to psychological therapies (adult and older adult)	4	£31,824	£25,438	£6,262	£0	£31,700	£124
A and E and Ward Liaison mental health services (adult and older adult)	5	£15,786	£16,084	£0	£0	£16,084	-£298
Early intervention in psychosis 'EIP' team (14 - 65yrs)	6	£12,035	£12,072	£0	£0	£12,072	-£37
Adult community-based mental health crisis care (adult and older adult)	7	£30,014	£29,620	£328	£0	£29,948	£66
Ambulance response services	8	£942	£943	£0	£0	£943	-£1
Community A – community services that are not bed-based / not placements	9a	£108,044	£96,228	£11,463	£0	£107,691	£353
Community B – supported housing services that fit in the community model, that are not delivered in hospitals	9b	£21,850	£12,069	£8,820	£205	£21,095	£755
Mental Health Placements in Hospitals	20	£6,331	£5,830	£688	£0	£6,518	-£187
Mental Health Act	10	£6,341	-£235	£6,062	£0	£5,826	£515
SMI Physical health checks	11	£743	£798	£26	£0	£824	-£81
Suicide Prevention	12	£0	£0	£0	£0	£0	£0
Local NHS commissioned acute mental health and rehabilitation inpatient services (adult and older adult)	13	£107,601	£107,860	£0	£0	£107,860	-£259
Adult and older adult acute mental health out of area placements	14	£3,631	£2,828	£653	£0	£3,481	£150
Sub-total MHIS (exc. CHC, prescribing, LD & dementia)		£394,824	£355,963	£37,874	£205	£394,042	£782
Other Mental Health Services:							
Mental health prescribing	16	£9,345	£0	£0	£10,954	£10,954	-£1,609
Mental health continuing health care (CHC)	17	£541	£0	£0	£464	£464	£77
Sub-total - MHIS (inc. CHC and prescribing)		£404,710	£355,963	£37,874	£11,623	£405,460	-£750
Learning Disability	18a	£0	£0	£0	£0	£0	£0
Autism	18b	£0	£0	£0	£0	£0	£0
Learning Disability & Autism - not separately identified	18c	£27,701	£11,335	£13,395	£3,277	£28,006	-£305
Learning Disability & Autism (LD&A) (not included in MHIS) - total	i	£27,701	£11,335	£13,395	£3,277	£28,006	-£305
Dementia	19	£13,852	£12,080	£1,119	£439	£13,638	£215
Sub-total - LD&A & Dementia (not included in MHIS)		£41,554	£23,415	£14,513	£3,716	£41,644	-£90
Total Mental Health Spend - excludes ADHD		£446,264	£379,377	£52,388	£15,339	£447,104	-£840

- Approximately 85% of MHIS spend is delivered through SEL wide contracts, the majority of which is with Oxleas and SLaM
- Borough based budgets include voluntary sector contracts and cost per case placements spend
- Other spend includes mental health prescribing and a smaller element of continuing health care



One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	South East London Joint Forward Plan and One Bromley 5 Year Strategy
This paper is for decision .	
Executive Summary	<p>ICB 5 Year Joint Forward Plan</p> <ul style="list-style-type: none"> ICBs were asked to produce a 5 year Joint Forward Plan (JFP) in this year's planning guidance. National guidance set a range of expectations for the plans, including a medium term focus across the key areas of ICB responsibilities, emphasising the need for links back to borough based Health and Well Being Plans, ICP integrated care strategies, national planning guidance and other ICB responsibilities for arranging services to meet population needs and delivery statutory responsibilities. South East London has taken a 'bottom up' approach to development of the SEL JFP, including: <ul style="list-style-type: none"> SEL integrated care strategy priorities LCP borough-based JFPs (<i>adopted as the One Bromley 5 Year Strategy</i>) ICB care pathway programme board plans ICB enabler programme plans Medium Term Financial Strategy ICB statutory responsibilities <p>The SEL plan is in draft for engagement including from members of the public and governance bodies across SEL. Key points on which SEL are seeking views are:</p> <ul style="list-style-type: none"> Does the level of medium term ambition and the vision feel right given our core purpose as an ICB? Do we need to think further about relative and overall priorities/prioritisation, especially of short term actions? How should the ICB better equip and support our enabler programmes to deliver the supporting actions identified? How do we ensure we are progressing the ways of working, culture and behaviour change, necessary to support the delivery of our plans?

- Is there key learning from the year 1 JFP outputs to inform our annual refresh, the first of which will take place in 2023/24 for end March 2024?

The plan amounts to about 250 slides and can be viewed and relatively simply navigated here: [Joint Forward Plan - South East London ICS \(selondonics.org\)](https://selondonics.org) Note the One Bromley slides in the SEL JFP will be updated once we have approved our One Bromley 5 Year Strategy.

Your comments are welcomed on the above questions. The plan will be submitted to the Health and Wellbeing Board who are required to provide a statement on the plan ahead of its publication in July.

One Bromley 5 Year Strategy

- Building on our work with the King’s Fund and through One Bromley Executive and LCP Board seminars we have developed our own One Bromley 5 Year Strategy. This incorporates the SEL ask for a borough-based Joint Forward Plan.
- The strategy is structured around our population and health outcomes, priorities, programmes and projects to deliver these, a set of enablers, and overarching principles of how we will deliver together.
- Our ambition is to improve the wellness of the people of Bromley. We will achieve this by shifting the focus of our work to prevention, focussing on people living with long term conditions, frailty, Core 20Plus5 health inequalities and those at risk of emergency admission for physical or mental health. Our plan therefore takes a population health management approach to focus on prevention at scale, continuity of care and more holistic approach to people’s needs.
- The strategy sets out three key priorities on this:
 - Improving population health and wellbeing through prevention and personalised care
 - High quality care closer to home delivered through neighbourhoods
 - Good access to urgent and unscheduled care and support to meet people’s needs
- The most significant structural change to support the delivery of the ambitions is the development of neighbourhood teams. We have been implementing different neighbourhood models for different goals across Bromley for several years. We also have other successful experience of working collaboratively across agencies, such as in transfer of care, where we bring colleagues together and share information.
- The Fuller review has prompted us to take this further: defining across our borough neighbourhoods for the organisation and delivery of health and care services to meet the specific needs of the local

ONE BROMLEY

	<p>population. The aim is to deliver more co-ordinated and proactive services relevant to the local population to mitigate demand on the health and care system, develop community resilience, and support staff recruitment and retention through new models of care.</p> <ul style="list-style-type: none"> The strategy has been iterated through feedback across the last three months, and now includes a stronger emphasis on frailty, children and young people, mental health, third sector and securing resources for the people of Bromley. Once approved the strategy and 2023/24 delivery plan will be reformatted to support delivery tracking and translate the 5 year intended outcomes into measurable indicators. Your approval of the strategy on behalf of One Bromley is welcomed. The strategy will then be submitted to the Health and Wellbeing Board alongside the SEL JFP. 	
Recommended action for the Committee	<ul style="list-style-type: none"> ICB 5 Year Joint Forward Plan: provide comments for SEL colleagues based on the questions outlined above. One Bromley 5 Year Strategy: approval of the One Bromley 5 Year Strategy 	
Potential Conflicts of Interest	All partners were asked to work in the interests of the population of Bromley in supporting the development of the One Bromley Five Year Strategy.	
Impacts of this proposal	Key risks & mitigations	<p>Risk: There is a risk that the plans require too much change simultaneously resulting in fatigue, a lack of focus on top priorities and partial delivery of the plans.</p> <p>Mitigation: Utilise business as usual avenues where possible to facilitate delivery. Operating plan includes a mix of business as usual and change initiatives. Change initiatives monitored in year through One Bromley Executive for decision making on continued delivery or plan amendment.</p>
	Equality impact	Reducing health inequalities is threaded through the plans, with particular focus on health inequalities through neighbourhood working and anticipatory care.
	Financial impact	The plans themselves are not costed, but are to be delivered within agreed financial envelopes and transformational funding in line with the SEL medium term financial strategy.
Wider support for this proposal	Public Engagement	<ul style="list-style-type: none"> Public engagement in Bromley across the preceding two – three years has been taken into

ONE BROMLEY

		<p>account in the drafting of the One Bromley Strategy.</p> <ul style="list-style-type: none"> A public engagement event is planned in Bromley in May 2023 – focussing on sharing the plans and discussing how best to work with local communities in achieving our ambitions. SEL colleagues have arranged two online events to promote the SEL JFP.
	Other Committee Discussion/ Internal Engagement	<ul style="list-style-type: none"> 2022-23 King's Fund Workshops with One Bromley Executive 05/07/22 Local Care Partnership Board 25/07/22 and 06/10/22 One Bromley Executive 28/02/23 One Bromley Executive strategy workshop 23/03/23 One Bromley CPAG 18/04/23 One Bromley LCP Seminar Session 11/05/23 Bromley Primary Care Group 11/05/23 One Bromley Executive
Author:	Elliott Ward, Resilience Programmes Lead, One Bromley Sean Rafferty, Assistant Director for Integrated Commissioning, London Borough of Bromley	
Clinical lead:	Dr Andrew Parson, GP Clinical Lead - Bromley, South East London Integrated Care Board	
Executive sponsor:	Dr Angela Bhan, Bromley Executive Lead, South East London Integrated Care Board	



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

May 2023

Two 5 year plans

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 and Joint Forward Plan (draft) published in April 2023. 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. The SEL JFP requires a statement from each Health and Wellbeing Board.

South East London ICS Strategy

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

South East London Joint Forward Plan

The Integrated Care Board Joint Forward Plan sets out our medium term objectives and plans, at both a borough level and from the perspective of our key care pathways and enablers, to ensure that we are developing a service offer to residents that:

- Meets the needs of our population.
- Demonstrates and makes tangible progress in addressing the core purpose of our wider integrated care system – improving outcomes in health and healthcare, tackling inequalities in outcomes, experience and access, enhancing productivity and value for money and helping the NHS support broader social and economic development.
- Delivers national Long Term Plan and wider priorities, all of which resonate from a SEL population health perspective.
- Meets the statutory requirements of our Integrated Care Board.

Note: Once at Place we have approved our One Bromley Strategy the Bromley ‘Place’ slides in the SEL JFP will be updated with our Bromley approved slides

South East London ICB Joint Forward Plan

The Joint Forward Plan provides the following:

- A strategic overview of our key priorities and objectives for the medium term.
- A high level summary of the short term actions that we will take, working with partners, to ensure the key milestones that support us in meeting these medium term objectives are secured, with further underpinning detail included in our 2023/24 and subsequent operational plans.

This is the first Joint Forward Plan and it will be refreshed annually to:

- Take account of implementation and outcomes over the previous year, including any learning to be applied to our future plans.
- Reflect any changes required due to new or emerging issues or requirements, be they related to population health, feedback from our communities and service users or service delivery issues and opportunities.

One Bromley Strategy

For approval



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
- Principles of how we will deliver together
- Programmes
- Projects
- Enablers

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.
- 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.**
- 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%.**

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
- Maintaining and securing resources for the needs of children and adults in Bromley
- Workforce, estate, digital tools (including analysis and artificial intelligence) and finance in place to deliver our priorities

How will things be different in 5 years' time?



Overarching principles

What are the values-based principles we need to achieve this ambition?

We will...

- **Embed One Bromley priorities** into our own organisations' priorities
- **Engage within our organisations** on our priorities at all levels
- **Work together as one team across organisations** by empowering our staff to work together for the benefits of patients and service users
- **Pool our insight and expertise** to develop creative ways of delivering care and support
- **Harness the power of our communities** so residents are empowered in their personal care and health decisions, in shaping services to meet local needs and being part of resilient communities
- **Allocate resources differently** shifting resources in Bromley on an agreed basis to areas where they could have greatest effect and reducing duplication

Our strategy in detail

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.
- Meeting the needs of Bromley's elderly population as well as children and young people.
- 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 foot-prints 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.
- Monitor and maximise the health and care resources for our population

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.
- Services meet the needs of the population and support people into non-urgent care once their urgent needs are met.

Our strategy in detail

1 Improve population health and wellbeing through prevention & personalised care

2 High quality care closer to home delivered through our neighbourhoods

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

Priority Programmes

1) Evidence driven prevention and population health

2) Neighbourhood teams on geographic footprints

3) Implement care closer to home programmes

4) Primary care sustainability

5) Integrated urgent care



Programme 1: Evidence driven prevention and population health

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

Establish the evidence and analysis requirements, means of delivery and support to planning and operational teams for evidence driven population health analysis. This will enable population segmentation into actionable groups at Place and Neighbourhood level, with an initial focus on our areas of greatest population health opportunity: living with long term conditions, frailty, experiencing health inequalities (Core 20Plus5) and those at risk of emergency admission. Alongside Programme 2 focussed on developing Neighbourhoods this will enable us to work with identified groups, understand the drivers of inequalities and co-design of solutions for healthier lives, including the wider determinants of health.

How we will secure delivery

Actions
for
23/24

- Population health analysis plus local intelligence held by health, care, third sector and SAFER Bromley partners to identify those living with long term conditions, frailty, experiencing health inequalities (Core 20Plus5) and at risk of emergency admission.
- Utilise care closer to home initiatives (see Programme 3) to help identify and support those we could help the most – e.g. Children's hubs relationships with schools; development of Bromley Mental Health Hub and single point of access; CAMHS and Bromley Y single point of access offering tailored offer to service users
- Case management approach for complex and vulnerable individuals to provide more holistic, anticipatory and coordinated care, using a plan-do-study-act approach
- Build further understanding of who individuals in communities trust and engage with.
- One Bromley taskforce and strategic board to plan and deliver improved vaccinations uptake, including through a Health 'one stop shop' in central Bromley.

Actions
for
24/25

- Engagement through neighbourhoods with communities about the root cause of current levels of utilisation of prevention and screening services and self care.
- Delivery of a new Bromley Mental Health and Wellbeing Strategy by 2025
- Linked to above, explore need for Place-based prevention service supporting health checks & management of chronic conditions at scale, embedded in neighbourhoods.
- Evidence analysis support - support for staff at all levels and across providers to interrogate, manipulate and interpret service and populations data.
- Expansion of use of care closer to home initiatives for more complex areas requiring greater cross boundary working – e.g. Children's hubs: LGBTQ+ and young carers.
- Influencing partners beyond health and care with evidence from engagement

Intended outcomes in 5 years time

- System partners working together to identify and support the needs identified
- Patients identified through population health management analysis have more holistic, anticipatory and co-ordinated care, delivering better health outcomes and managing the growth demand on GPs, mitigating hospital admissions and impacting social care costs.
- Population health management analysis platform in place
- Place and neighbourhood teams utilising population health management analysis platform to support identifying and engaging populations with higher health opportunity, then monitoring the impact of our actions
- Neighbourhoods have clear understanding of, and work hand-in-hand with, their communities
- Increased screening for diabetes, cancer
- Services amended to better meet needs of our population living with long term conditions, frailty, experiencing health inequalities (Core 20Plus5) and those at risk of emergency admission
- Earlier support for children and adults requiring mental health support.

Programme 2: Neighbourhood teams on geographic footprints

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

Partners have a joint understanding of the purpose, function and geographies of neighbourhood teams, and the roles different providers play within them, to target prevention, tackle inequalities and provide appropriate focus for patients with more complex needs. Neighbourhood teams will make the best use of time – that of patients, health and care professionals, voluntary and third sector partners – to deliver patient-led outcomes. Combined with Programme 3 on moving resources out of hospitals to the community we will support the sustainability of our health and care system in the long term.

How we will secure delivery

Actions
for
23/24

- Grow early initiatives, including CYP hubs, wellbeing café, diabetes outcomes improvement programme to gain and share learning of this joint working
- Deliver a programme of engagement with providers, local authority and third sector to establish core principles and geographic footprints of INTs, and to develop local leadership groups at neighbourhood level
- Agree with PCNs, secondary care and mental health providers, local authority and third sector roadmap of services, staffing and structures commitment to INTs
- Start conversations with local populations on our plans
- Baseline the existing organisational capacity and capability change, across system, place and neighbourhood levels, to ensure systems can undertake their core operational and transformation functions.
- Workforce and skills gap analysis and plan development
- Commence needs analysis and scoping for improved community access to diagnostics and wider primary care services (dentistry, pharmacy and optometry)

Actions
for
24/25

- Establish neighbourhood forums of providers for ongoing conversations about shaping services offered and dock in enablers, e.g. population health management
- Commence shift of organisations' structures to neighbourhood footprints – including translations of acute and mental health consultant capacity from outpatients to neighbourhood MDTs for target clinical specialties
- Co-production skills development with neighbourhood teams to set selves up for future development work

Intended outcomes in 5 years time

- Neighbourhood structures and governance established to a common minimum standard
- Workforce, finance, data analysis, organisational development, co-design skills and other enablers to support success of neighbourhood teams in their work is established
- Target clinical specialties acute and mental health consultant job plans embed neighbourhood working as a means to delivery of secondary care services - aligning services to core teams at different geographical levels as appropriate for the patients' needs.
- Care and health services operating as part of high-trust integrated neighbourhood teams reducing duplication between services
- A sustainable, accessible and responsive model of integrated primary care operating across all neighbourhoods in Bromley.
- Initial commissioning of services on neighbourhood geographic footprints
- Reduce need for hospital referral through greater use of community point of care testing, community diagnostics and primary care/consultant MDTs.

Programme 3: Implement moving care closer to home

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

Where it is safe and effective to do so, Bromley will move more care into communities and people’s homes. This will mean that acute hospitals are better able to target their resources for patients needing care in those settings, while improving equity of access to care and outcomes for Bromley residents. These Place-level programmes to move resources into the community will be delivered alongside neighbourhood teams. This will involve sharing workforce and developing new ways of working among professional teams and with patients, carers and families to support people using services more effectively, with self care and remote monitoring and support, including third sector partners. These programmes will interface with and support the Bromley delivery of SEL programmes where relevant. Working with

How we will secure delivery

Actions
for
23/24

- Continue to work with communities co-develop our care closer to home programmes to support equitable access and improved outcomes
- Continue building clinical confidence in pathways – e.g. Hospital at Home pull models and weekend service offer
- Children’s Integrated Health Teams develop and go-live across all PCNs
- Expand adult Hospital at Home to include remote monitoring and part of a holistic community urgent response service
- Development of the Bromley Mental Health Hub, a joint Oxleas/VCS service.
- Work to integrate the Bromley Mental Health Hub with other community mental health wellbeing services around a Single Point of Access (SPA).
- Join-up Bromley Mental Health Hub with Bromley Talking Therapy Services
- Deliver an integrated Single Point of Access (SPA) across CAMHS/Bromley Y to deliver a tailored offer across services

Actions
for
24/25

- Commence linking working of care closer to home services with neighbourhood teams
- CYP transformation embedded following contract specification updates
- Delivery of new Bromley Mental Health and Wellbeing Strategy by 2025
- Continued work across all programmes with communities to refine the service offer.

Intended outcomes in 5 years time

- Reduction in waiting times for children’s health services
- Improved access to adult wellbeing early intervention and prevention
- Reduced need for adults to access secondary mental health services
- Reduced need for adults to attend hospital for acute care
- Reallocation of resources to reflect change in where patients are treated
- Improvement in Bromley ranking in London for recorded depression
- Improved outcomes for users of all care closer to home programmes
- Communities feel that they own the services they have supported build through co-design

Programme 4: Primary care sustainability

Establish and deliver development plan to support primary care sustainability

Bromley has a well developed model of collaborative working across the local health, voluntary and social care system, under the umbrella of One Bromley. We will continue to develop models to enable enhanced primary care resilience, develop sustainable operating models and work together with other local health and care services through neighbourhood teams. This will support primary care focussed reduction in inequalities and ensure a sustainable, accessible and responsive primary care offer for Bromley residents.

How we will secure delivery

Actions
for
23/24

- Continued delivery of primary care events to collaborate on transformation of general practice and the local system
- Second phase of the primary care needs analysis to evaluate the developments to date and agree future model(s) in general practice
- Share insights and benchmarked outcomes on delivery of primary care across clinical care and patient outcomes at practice and PCN level, e.g. Clinical Effectiveness, QOF, and other data sources for long term condition outcomes.
- Identify where additional investment or services may be required to ensure equitable access and suitable provision for our patient populations
- Continue clinical quality improvement plan: 1) quality improvement methodologies, 2) reviewing demand and capacity, 3) digital transformation - online consultations, clinical monitoring and patient-led management of health needs
- Maximise use of existing estate – focus on fit for purpose and appropriate scale
- One Bromley Strategic Workforce programme, Training Hub and partners collaborate on attracting people to work in primary care in Bromley and new routes into primary care. Develop Portfolio working model for Bromley practices to attract Portfolio GPs.

Actions
for
24/25

- Continue delivery of primary care development programme
- Delivery of identified responses to support health inequalities – e.g. catch-up clinics for screening
- Plans for fit for purpose estates to enable integrated neighbourhood working
- Deployment of resources to support equitable access
- Commence training for staff on how to work cross organisationally as part of joined-up primary care and neighbourhood teams

Intended outcomes in 5 years time

- Primary care on a more sustainable footing and practices more resilient
- Optometry, pharmacy and dentistry part of One Bromley partnership
- Improvement in equality of primary care access
- Improvement in health inequalities outcomes
- General practice working with partner practices and as part of integrated neighbourhood teams

Programme 5: Integrated urgent care

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

We will co-develop an urgent health and social care plan across our partnership and with our communities to simplify same day access to physical, mental health, social support and third sector care when it is needed. Our ambition is people receive the right care, in the right place, at the right time - reducing escalation of need and hospital admission, particularly for our frail, elderly and higher users of services. This will mitigate growth in costs to the Bromley health and care budget while supporting the sustainability of our urgent care providers. It will build on, and augment, our current provision to form a highly integrated and responsive model meeting the population needs using resources available.

How we will secure delivery		Intended outcomes in 5 years time
Actions for 23/24	<ul style="list-style-type: none">• Develop borough-wide pathway to meet same-day care needs for patients, regardless of access channel, clarifying role of general practice and meeting seasonal demand• Admission avoidance: Urgent Community Response, including Hospital at Home, fully supporting all 9 national clinical conditions and aligned with general practice.• Admission avoidance: front door ED streaming, SDEC services with embedded speciality capacity, mandated heralding of professional referrals to ED.• Expanded High Intensity User Programme focused on most frequent ED attenders and supported by population health management segmentation analysis as available• Clarified primary care access to urgent mental health care and support• Mainstream Home First and Discharge to Assess (D2A) and commence work on integrated D2A pathways for clients with more complex health and care needs• Transfer of Care Bureau / Single Point of Access pathways – expand current supported discharge process to a broader offer of proactive support to prevent readmissions• Children’s hubs across borough to support community response (see Programme 3)	<ul style="list-style-type: none">• Services refocussed on avoiding hospital admission, particularly frail elderly• Where necessary, after urgent episode of care urgent services refer patients onto robust community and third sector services• Single Community Urgent Response Service in place which avoids hospital for more complex, frail and elderly patients• Residents have better understanding of how to best use same day and emergency care• Residents, particularly informal carers, more confident in self care, support available to them and when and how best to escalate acute exacerbations• Implementation of guaranteed same-day care for patients where identified need• Clarified role of general practice in urgent care• Clear, timely, accurate handover of patients from hospital to neighbourhood teams• Greater utilisation of step-up same day social and third sector care• Reduction in ED attendance as part of urgent mental health pathway• Providers and commissioners financially more sustainable in delivery of urgent care• Reduced need for hospital referral through greater use of community point of care testing and community diagnostics• At any ‘point of access’ health professional access other help rather than re-refer
	<ul style="list-style-type: none">• Agree between partners and with our communities an improved integrated urgent care model which enhances sustainability – working with developing neighbourhood teams to calibrate activities at Place and Neighbourhood level• Needs analysis and scoping for improved community access to diagnostics and wider primary care services to avoid hospital attendances• Utilise emerging neighbourhood teams to support delivery of self care messaging – with supporting collateral e.g. ‘when to escalate’ booklets for parents, training course for informal carers of people with long term conditions.	

Enablers

Workforce

- **Workforce plan to support each of the priorities** – including Integrated Neighbourhood Teams workforce planning tool and resource
- **Recruitment** (current and future workforce)
 - One Bromley recruitment campaign; One Bromley ‘come and work with us’ website page on ICS website; Local Recruitment fairs for health and care roles
- **Retention** (innovative roles, shared roles, wellbeing and skills development)
 - Building staff agreement for joint services; Joint training and wellbeing programmes
- **System working** (OD to support wider understanding of the system, working across silos, development of teams employed across the system, system leadership)
- **Widening participation and understanding of careers**
 - One Bromley Springpod, One Bromley Cadet programme
- **Business intelligence on workforce** – location, roles, contracts

Estates

- **Local estates planning** with all local partners through the Local Estates Forum, developing the local and primary care estates strategy
- **Utilisation of estate across Bromley** beyond existing NHS properties, including shared accommodation and hub working
- **Levering investment** into the Borough to support estates development
- **Progress the development** of the Bromley Health and Well Being Centre and other capital schemes
- **Delegations** to support decision making
- **Improve the quality** of existing estate and ensuring robust contractual arrangements in place to provide stability for future use.

Digital

- **Aligning and integrating systems** used by delivery staff over the medium-long term – to enable effective joined up delivery at neighbourhood level, but requiring action at Place and ICB level to realise this ambition.
- **Securing new tools for clinical staff** – supporting specification development and interdependencies for remote monitoring platform(s) and real-time integrated clinical systems and tools.
- **Clarity on future of non-recurrently funded tools**, e.g. Ardens, Accurex (SMS), e-consult, practice websites.
- **Business Intelligence and shared data** tools made available to local teams to support population health management and clinical decision making
- **Enable mobile workforce**

Finance

- **ICB supported analysis** - Post-code based analysis and data on NHS and care utilisation, with either Place based staff to interrogate, or simple access to SEL based analysis with analytical time for Bromley.
- **Service and programme level reporting** across the system, across providers to support service transformation
- **Financial support to diagnostics** - Support for greater diagnostic capacity/modality access to community/primary care
- **Financial support to estates** - Support with capital investment once estates plans reviewed at Place
- **Shared financial reporting** across health and social care providers in Bromley to understand the impact of change initiatives on the Bromley pound.

Enabler requirements

One Bromley Culture

- Governance for cross organisational working
 - **Streamlined governance** which supports the building of trust and assurance amongst and between senior leadership teams
 - **Broaden range of cross One Bromley functional groups** – e.g. Comms and engagement, business intelligence, contracting, strategy leads
 - **Review what decisions and risk can be held jointly** between partners rather than by each organisation individually
 - **Review the operational groups** required to enable joined up delivery at place and neighbourhood level, including community voice
 - **Embedding of One Bromley strategic priorities into organisational priorities**
- Working with SEL partners
 - **Alignment of Place delegations and resources and decision making authority at Place**

Communication and engagement

- Communication and engagement **skills training for neighbourhood teams and SEL programme leads** – building asset based community approach
- **Direct support** to neighbourhood teams community engagement
- Support building and skilling network of **community champions**
- **Agreed One Bromley identity and usage requirements**
- Agreed approach to **internal communication and engagement on One Bromley** and its work programmes



One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	Bromley Procurement & Contracts Group – 17 th April 2023 update
This paper is for information .	
Executive Summary	<p>The Bromley Procurement & Contracts group is established to support the management and oversight of delegated budgets in terms of compliance with procurement and contract management. The following items were discussed and agreed at the January meeting. The next meeting will take place on 15th May 2023.</p> <p><u>Contract Award</u></p> <ul style="list-style-type: none">• Community Anti-coagulation – Following the tender process undertaken, SEL ICB (Bromley) has awarded the Community Anti-coagulation contract to Bromley GP Alliance (BGPA) for a contract term of 3 years with the option of a 2-year extension commencing on 1st June 2023. <p><u>Contract Extensions</u></p> <ul style="list-style-type: none">• No contracts were noted for extension under the contractual terms of the NHS Standard contract at the April group.• Enhanced Medical Support to Care Homes - contract is due to expire March 2024, there is an option to extend and following a soft market testing exercise, the ICB is in discussion with the current provider in relation to the contract extension. <p><u>Procurements</u></p> <p>The following updates were noted: -</p> <ul style="list-style-type: none">• Continuing Health Care (CHC) - The tender opportunity is now live and due to close mid-May. <p><u>Potential Future Procurements</u></p> <p>The group reviewed the Procurement Pipeline and discussion took place on the following contracts: -</p> <ul style="list-style-type: none">• Identification and Referral to Improve Safety (IRIS) – following the tender opportunity closing with no bids received, the ICB has undertaken some soft market testing and following this it is likely that the opportunity will be re-published.• Community Cardiology Diagnostics Service – contract is due to expire October 2023. An options paper was presented to the group, who endorsed a competitive tendering exercise, this is yet to be published.



	<ul style="list-style-type: none">• Mental Health Joint Strategic Needs Assessment (JSNA) - Preliminary discussions have taken place regarding the process to identify an organisation to undertake the mental health JSNA, with the likelihood of utilising a Framework option for this.• CMHS Prevention and Early Intervention – The following contracts are due to expire 31st March 24; IAPT, Recovery Works individual placement support, Mindful Mums & Bromley Mental Health Hub. Initial scoping exercise took place in relation to a short-term contract of 1 – 2 years, whilst the JSNA was completed. Although there was interest in the market in relation to these services, the overall feedback was that a longer-term contract would be required for resources and financial stability and sustainability. The ICB is currently reviewing options in relation to the contracts.	
Recommended action for the Committee	The Committee is asked to note the work undertaken by the Procurement and Contracts group.	
Potential Conflicts of Interest	<p>Some of the organisations represented on the One Bromley Local Care Partnership are also providers working to the Integrated Care Board (ICB) and will have current contracts with the ICB and will also be bidding for future contracts with the ICB.</p> <p>Care will need to be taken by both the Procurement and Contracts Group and this committee to identify and manage potential conflicts of interest in the procurement, award and monitoring of contracts.</p>	
Impacts of this proposal	Key risks & mitigations	The Procurement and Contracts Group has an important role in identifying and managing risks on procurement and contracting issues on behalf of the One Bromley Local Care Partnership.
	Equality impact	The Procurement and Contracts Group has a role to play in supporting the delivery of One Bromley equality, diversity and inclusion objectives
	Financial impact	The costs of running the Procurement and Contracts Group will be met within existing ICB budgets
Wider support for this proposal	Public Engagement	N/A
	Other Committee Discussion/ Internal Engagement	N/A
Author:	Sean Rafferty, Director of Integrated Commissioning, SEL ICB / Asst Director for Integrated Commissioning, LBB	
Clinical lead:	Dr Andrew Parson, Senior Clinical Lead and Co-Chair One Bromley Local Care Partnership	
Executive sponsor:	Dr Angela Bhan, Place Executive Lead	

One Bromley Local Care Partnership Board

DATE: 16 May 2023

Title	One Bromley Performance, Quality and Safeguarding Group: April 2023 Report
This paper is for information	
Executive Summary	<p>The first One Bromley Performance, Quality and Safeguarding Group was held on 13 April 2023, chaired by the Bromley Borough Lay member and attended by leads from across the One Bromley Partnership Organisations.</p> <p>The role of the group is to bring together LCP partners to undertake assurance and oversight on behalf of One Bromley Local Care Partnership for the identification, monitoring and escalation of quality, safeguarding and operational performance issues and concerns across Bromley alongside the identification and sharing of best practice.</p> <p>The group provides One Bromley Local Care Partnership with assurance that it is delivering its functions in a way that secures continuous improvement in the quality of services.</p> <p>The group will work in a collaborative way across all One Bromley partners to provide support for each other in enabling the delivery of quality services for the Borough.</p> <p>Terms of Reference</p> <p>The group noted that this was the first meeting of the group. The role and purpose of the meeting will continue to develop and evolve over time. It was important that this group did not duplicate existing arrangements within organisations and across the Integrated Care System but should add value with opportunities for working collaboratively across the One Bromley partnership on system wide issues.</p> <p>The terms of reference were adopted with a review to take place later in the year as the group and work plan develop.</p> <p>Bromley Performance Report</p> <p>The report produced by the SEL ICB assurance team for delegated targets was discussed by the group. The continued improvement in SMI</p>



Health checks uptake rates were noted, with a reported position of 56.8% against the 60% target.

LD Health checks had also seen an improvement, meeting the target for in Q4.

The Group undertook to investigate the impact for those patients not seen outside the target.

It was recognised the set of measure were limited and there were many other local targets and indicators that are being monitored and could be included in the report going forward. This included indicators and measures monitored by local partners directly. This should be informed by the Borough strategy and priorities. This report will continue to develop as the group meets, with specific focus on the data that is available to the partnership.

One Bromley Quality Report

This report produced by the ICB Quality Team set out an overview of the current quality monitoring arrangements in the ICB, which included the SEL Quality and Performance Committee, a multi-agency meeting, which included acute services. It would be important to this group to draw out specific any Bromley issues. The report also provided information on quality alerts and any serious incidents raised across South East London and Bromley, setting out the key themes arising out of these alerts.

It was noted that as this meeting was six times a year, the focus should be decision making in the medium to long term looking at system wide issues. The use of deep dives to address specific areas and developments would be used.

There was a discussion introducing the new Patient Safety Incident Framework (PSIF)

Safeguarding

The child and adult safeguarding leads from the ICB presented key issues and a snapshot of work undertaken by the team across Bromley. Information was provided on the roles of the designates and leads working with the wider system structure and providers. Key challenges faced by the system were highlighted, using this meeting as an opportunity to share these and wider information with One Bromley partners.

	Bromley Risk Register <p>The latest Bromley Borough Risk register was presented to the group, which is part of the wider SEL ICB risk management framework. The three key risks identified were discussed, with the risk in relation to the Virtual ward closed with the confirmation of funding for the coming years. The risks in relation to the Continuing Care team capacity and Borough financial risk were reviewed and retained. With the start of the new financial year, the register would be reviewed to include any further risks that may require inclusion in the register.</p> Future Work Schedule <p>This will be reviewed for future meetings, ensuring that these are relevant to the discussions and the committed and supported by the relevant information and datasets.</p>	
Recommended action for the Committee	The One Bromley LCP are asked to note this update	
Potential Conflicts of Interest	None	
Impacts of this proposal	Key risks & mitigations	Key risks are identified in all areas covered by the group and reviewed through the Bromley Borough risk management framework and risk register
	Equality impact	These are considered through the areas reported to the group with equality impact assessments completed where required
	Financial impact	Not applicable
Wider support for this proposal	Public Engagement	Not applicable
	Other Committee Discussion/ Internal Engagement	Not applicable
Author:	Mark Cheung, One Bromley Programme Director	
Clinical lead:	Dr Andrew Parson, Co-Chair, One Bromley Local Care Partnership & GP Clinical Lead	
Executive sponsor:	Harvey Guntrip, Bromley Lay Member, NHS SEL ICB	

Appendix 1: Glossary of Terms

Glossary			
Acronyms and abbreviations	Term	Acronyms and abbreviations	Term
ACSC	Ambulatory Care Sensitive Conditions	ICP	Integrated Care Partnership
AHP	Allied Health Professional	ICS	Integrated Care System
AHSN	Academic Health Science Network	ILAG	Information, Advice and Guidance
BCF	Better Care Fund	IPU	Inpatient Unit
BGPA	Bromley General Practice Alliance	ITT	Invitation to Tender
BLG	Bromley, Lewisham and Greenwich (Mind)	KCH	Kings College Hospital
BTSE	Bromley Third Sector Enterprise	KPI	Key Performance Indicator
CAB	Citizens Advice Bromley	LAS	London Ambulance Service
CAMHS	Child & Adolescent Mental Health Service	LBB	London Borough of Bromley
CAS	Clinical Assessment Service	LCP	Local Care Partnership
CC	Continuing Care	LGT	Lewisham & Greenwich (NHS) Trust
CHC	Continuing Healthcare	LMC	Local Medical Committees
COPD	Chronic Obstructive Pulmonary Disease	LPC	Local Pharmaceutical Committee
CPAG	Clinical & Professional Advisory Group	MDI	Metered Dose Inhalers
CRM	Customer Relationship Management (system)	MDT	Multi Disciplinary Team
DAWBA	Development and Well-Being Assessment	MHP	Mental Health Practioners
DTA	Discharge To Assess	NCSO	No Cheaper Stock Obtainable
ECH	Extra Care Housing	NWCSP	National Wound Care Strategy Programme
ED	Emergency Department	PCG	Primary Care Group (Bromley)
EHC	Education, Health and Care (plans)	PCN	Primary Care Network
FY	Financial Year	PIP	Personal Independent Payment
GP	General Practice	PPA	Prescription Pricing Authority
GSTT	Guys and St Thomas' Hospital	PRUH	Princess Royal University Hospital
H1	Half 1 (first 6 months of the financial year, April - September)	PSIS	Primary and Secondary Intervention Service
H2	Half 2 (last 6 months of the financial year, October - March)	SEL	South East London
HWBC	Health & Wellbeing Centre	SLAM	South London and Maudsley
IAPT	Improving Access to Psychological Therapies (Programme)	SPA	Single Point of Access
ICB	Integrated Care Board	RCN	Royal College of Nursing

Acronyms and abbreviations	Term	Acronyms and abbreviations	Term
VCSE	Voluntary, Community & Social Enterprise		