



Brent



Brent
Clinical Commissioning Group

Health and Wellbeing Board – supplementary agenda

Monday 15 July 2019 at 6.00 pm

Boardrooms 7&8 - Brent Civic Centre, Engineers Way,
Wembley HA9 0FJ

Membership:

Councillor Farah (Chair)	Brent Council
Dr MC Patel (Vice-Chair)	Brent CCG
Councillor Hirani	Brent Council
Councillor McLennan	Brent Council
Councillor M Patel	Brent Council
Councillor Kansagra	Brent Council
Mark Easton	North West London CCG
Sheik Auladin	Brent CCG
Dr Ketana Halai	Brent CCG
Jonathan Turner	Brent CCG
Julie Pal	Healthwatch Brent
Carolyn Downs	Brent Council - Non Voting
Phil Porter	Brent Council - Non Voting
Dr Melanie Smith	Brent Council - Non-Voting
Gail Tolley	Brent Council - Non-Voting
Simon Crawford	London North West Healthcare NHS Trust
Mark Bird	Brent Nursing and Residential Care Sector

Substitute Members (Brent Councillors)

Councillors:

Agha, Miller, Krupa Sheth and Tatler

Councillors:

Colwill and Maurice

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Tel: 020 8937 1355; Email: bryony.gibbs@brent.gov.uk

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The press and public are welcome to attend this meeting

Notes for Members - Declarations of Interest:

If a Member is aware they have a Disclosable Pecuniary Interest* in an item of business, they must declare its existence and nature at the start of the meeting or when it becomes apparent and must leave the room without participating in discussion of the item.

If a Member is aware they have a Personal Interest** in an item of business, they must declare its existence and nature at the start of the meeting or when it becomes apparent.

If the Personal Interest is also significant enough to affect your judgement of a public interest and either it affects a financial position or relates to a regulatory matter then after disclosing the interest to the meeting the Member must leave the room without participating in discussion of the item, except that they may first make representations, answer questions or give evidence relating to the matter, provided that the public are allowed to attend the meeting for those purposes.

***Disclosable Pecuniary Interests:**

- (a) **Employment, etc.** - Any employment, office, trade, profession or vocation carried on for profit gain.
- (b) **Sponsorship** - Any payment or other financial benefit in respect of expenses in carrying out duties as a member, or of election; including from a trade union.
- (c) **Contracts** - Any current contract for goods, services or works, between the Councillors or their partner (or a body in which one has a beneficial interest) and the council.
- (d) **Land** - Any beneficial interest in land which is within the council's area.
- (e) **Licences**- Any licence to occupy land in the council's area for a month or longer.
- (f) **Corporate tenancies** - Any tenancy between the council and a body in which the Councillor or their partner have a beneficial interest.
- (g) **Securities** - Any beneficial interest in securities of a body which has a place of business or land in the council's area, if the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body or of any one class of its issued share capital.

****Personal Interests:**

The business relates to or affects:

- (a) Anybody of which you are a member or in a position of general control or management, and:
 - To which you are appointed by the council;
 - which exercises functions of a public nature;
 - which is directed is to charitable purposes;
 - whose principal purposes include the influence of public opinion or policy (including a political party or trade union).
- (b) The interests a of a person from whom you have received gifts or hospitality of at least £50 as a member in the municipal year;

or

A decision in relation to that business might reasonably be regarded as affecting the well-being or financial position of:

- You yourself;
- a member of your family or your friend or any person with whom you have a close association or any person or body who is the subject of a registrable personal interest.
-

Agenda

Introductions, if appropriate.


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7 Health and Wellbeing Board - joint health and wellbeing strategy	1 - 20

Paper setting out proposed approaches for producing Brent's next Joint Health and Wellbeing Strategy.

Date of the next meeting: Monday 7 October 2019



- Please remember to **SWITCH OFF** your mobile phone during the meeting.
- The meeting room is accessible by lift and seats are provided for members of the public on a first come first served basis.

	<p align="center">Health and Wellbeing Board 15 July 2019</p>
	<p align="center">Report from the Strategic Director Community Wellbeing</p>
<p align="center">Brent Joint Health and Wellbeing Strategy - 2020 onwards</p>	

Wards Affected:	All
Key or Non-Key Decision:	-
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
No. of Appendices:	1
Background Papers:	0
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Meenara Islam Strategic Partnerships Manager Meenara.islam@brent.gov.uk 020 8937 1479

1.0 Purpose of the Report

- 1.1 To seek the views of the Brent Health and Wellbeing Board on the approach to take to producing a joint health and wellbeing strategy for Brent in light of local and national changes.

2.0 Recommendation(s)

- 2.1 The Health and Wellbeing Board (HWB) is asked to:
- consider the case for and agree to either produce a new joint health and wellbeing strategy or to refresh the Brent Health and Care Plan 2017 – 2021
 - agree how the work required for either option will be resourced
 - agree the length of time the final plan or strategy should cover.

3.0 Detail

- 3.1 The Health and Social Care Act 2012 places a statutory duty on Health and Wellbeing Boards to produce a joint health and wellbeing strategy setting out partnership priorities. The form of a strategy is for local determination.
- 3.2 The priorities usually respond to local health and wellbeing challenges identified in joint strategic needs assessments (JSNAs) and focus the local health and wellbeing system on key issues that are best tackled through partnership working. They are not intended to replace or limit services and work delivered outside of the strategy.
- 3.3 The joint health and wellbeing strategy should be used to inform commissioning decisions and be updated when the HWB considers it necessary to ensure the priorities contained remain relevant.

Background

3.4 The Brent HWB published its first three-year joint health and wellbeing strategy was published in 2014, setting out five priorities:

- Giving every child the best start in life
- Helping vulnerable families
- Empowering communities to take better care of themselves
- Improving mental wellbeing throughout life
- Working together to support the most vulnerable adults in the community.

3.5 The five year Brent Sustainability and Transformation Plan (STP) was adapted for local implementation from the North West London STP in 2016. At the HWB meeting on 6 October 2016 the Brent STP (becoming the Brent Health and Care Plan (BHCP) from Spring 2017) was accepted as the overarching strategic plan for Brent. It set out six 'Big Ticket Items' focused on delivering preventative outcomes and new models of care (appendix 1):

- Joined-up services helping residents get well and stay well-prevention
- New Models of Care - greater access to more effective services
- Joining up Older People's services
- Improving outcomes for people with mental health illness
- Transforming Care – Supporting People with learning disability
- Central Middlesex Hospital (CMH) a centre of excellence.

3.6 The HWB established the STP Delivery Board to oversee the delivery of the Big Ticket Items relating to adults' services. The Brent Children's Trust (BCT) continues to drive local delivery of the strategic and operational health and wellbeing priorities for children and young people. Both seek steers from and report progress to the HWB.

The changing context

3.7 The last two years has seen a number of local and national developments prompting this proposal to the HWB to either refresh the current BHCP or produce a new joint health and wellbeing strategy. Either will allow the HWB to assure itself that its priorities remain current and evidence-based. Developments include:

- the refresh of the Brent Joint Strategic Needs Assessment (JSNA), will be completed shortly. This presents an opportunity to update the HWB's priorities in the light of demographic change and emerging health and care needs. The JSNA will identify issues (new and continued) that a refreshed plan or new strategy will respond to
- work on the six big ticket items in the BHCP 2017 – 2021 have evolved through individual reports to the Board (please see paragraph 3.9 for a summary of progress) including successful delivery of programmes. This means the plan is out of date in places
- the HWB Chair and Vice Chair have changed since the BHCP was published. The Chair also appointed a new co-opted member¹ representing the nursing and care home sector
- the changing policy landscape nationally and locally with impending structural changes with the creation of a North West London CCG and the move to Integrated Care Systems, Partnerships and Primary Care Homes

¹ Non-voting

- local reviews such as the Council's recent and current outcomes based reviews (OBRs) and other partner organisation reviews have provided more information on local health and wellbeing challenges.

Brent Health and Care Plan 2017 – 2021

- 3.8 The first of two options the HWB is asked to consider is refreshing the Brent Health and Care Plan and continuing to use it as the joint health and wellbeing strategy. In practice this would mean broadly retaining, in whole or part, similar priorities and consulting the public on progress in addressing these and any revisions needed for future work.
- 3.9 The BHCP set out six big ticket items which addressed local health and wellbeing needs and aligned with the North West London STP. Achievements in these areas have been reported to the HWB over the last two years. Progress in these areas can be briefly summarised as follows:
- **Big ticket item 1 – Joined-up services helping residents get well and stay well-prevention**
Action has been taken to identify and address social isolation through the SIBI (social isolation in Brent initiative) service. Although resource constraints meant it was not possible to introduce alcohol care teams in acute hospital settings, the benefits of this model have been recognised in the NHS Long Term Plan and funding may be made available in future years. The National Diabetes Prevention Programme, which offers intensive support to residents at higher risk of diabetes, has been successfully introduced in Brent. There is a wide ranging action plan to address childhood obesity, although this has not had the desired impact and a Scrutiny Task Group is currently considering the issue.
 - **Big ticket item 2 – New Models of Care - greater access to more effective services**
This work stream continues to be a focus for the system. Integrated Care Partnerships are being developed across North West London complemented by local work to develop a system of primary care homes and the NWL Integrated Care System.
 - **Big ticket item 3 – Joining up Older People's services**
Progress has been made in particular in improving timely and safe discharges from hospital, including the development of new integrated discharge pathways in addition to the expansion of Home First, ensuring more people are discharged home or to their usual place of care in a timelier manner. Progress has also been made in the support provided to care homes, including the establishment of the Care Home Forum, which has strengthened the partnership working between providers and commissioners. These areas remain a priority, in addition to a small number of other transformation priorities previously agreed and reported through the Health and Wellbeing Board over the last couple of years.
 - **Big ticket item 4 – Improving outcomes for people with mental health illness**
Brent Council, Central North West London NHS Foundation Trust, Brent CCG and partners have worked to improve outcomes for people living with mental illness. An Outcome Based Review on mental health and employment has concluded its Discovery phase and has been reporting regularly to the HWB. "Are we ok, Brent?" has promoted the 5+1 ways to wellbeing and will run a second campaign later this year. The HWB approved the Brent Public Mental Health Strategy and Suicide Prevention Action Plan at its April 2019 meeting and work is now underway with Harrow to implement the action plan.

- Big ticket item 5 – **Transforming Care – Supporting People with learning disability**

This remains a priority for the partnership and the HWB received a comprehensive update at its meeting on 22 January 2019. Progress continues at both local and North West London level with challenges such as appropriate workforce skills being highlighted to the HWB.

- Big ticket item 6 - **Central Middlesex Hospital (CMH) a centre of excellence**
An initial study for a building and community hub have been completed.

3.10 The priorities remain relevant for Brent but requires re-focusing given the changing context and the successful delivery of some of the items over the last two years.

A new Joint Health and Wellbeing Strategy

3.11 Alternatively, the HWB may wish to consider producing a new joint health and wellbeing strategy. This would involve constructing brand new priorities informed by a public engagement exercise and guided by any health and wellbeing gaps identified by the JSNA (2019) and recent reviews such as OBRs.

3.12 Producing a new strategy would allow for the HWB to take stock, review its purpose and set a fresh joint ambition for Brent’s health and wellbeing. It would also be a chance to reflect on potential new ways of working and strengthening partnership working in light of the impending restructure of North West London CCGs.

3.13 Producing a new strategy could be a valuable opportunity to re-engage with the public by asking them how we should be tackling problems in partnership and working with them to co-produce priorities.

Summary of options

Producing a new joint health and wellbeing strategy	Refreshing the Brent Health and Care Plan
Introducing brand new priorities	Broadly retaining the six big ticket items as priority areas with some revisions to ensure the plan is aligned with current and impending developments
Extensive public engagement and co-production for up to 12 weeks	Public consultation on revisions for a shorter period of time, perhaps 6-8 weeks
Takes account of revised membership of the HWB and is an opportunity to state fresh joint purpose and ambition	Priorities based on previously set direction
Longer end-to-end process – possibly up to eight months	Could be undertaken in a shorter period of time – potentially within six months
Requiring greater resources (officer time and funding for engagement activities)	Consultation period will be shorter and requiring less resources.

3.14 The HWB is also asked to consider the length of time the refreshed BHCP or new strategy should be in place for. Short term plans (e.g. two to three years) could allow for priorities to be refreshed periodically remaining responsive to local and national changes, while driving progress at pace. Conversely, a longer term plan/strategy allows for planning for multiple years, particularly for those priorities requiring substantial work.

- 3.15 We will ensure that the final product, whether a refreshed Brent Health and Care Plan or a new Joint Health and Wellbeing Strategy, will:
- genuinely add value for local partners by setting out an ambitious blueprint for Brent's future health and wellbeing
 - support the HWB to hold partners to account for delivering tangible outcomes for local people
 - ensure priorities are grounded in evidence and have been developed in partnership with the local community

Process and resourcing

- 3.16 Both options will require extensive work to be undertaken by both Council and CCG officers, and for senior leadership to be available to oversee and approve key milestones. The following are the required activities for either option:
- Nomination of senior accountable sponsors and lead officers
 - Desktop research and analysis of data (JSNA and findings of other qualitative and quantitative reviews)
 - Running a public consultation or co-production process
 - Undertaking engagement with board members and key local organisations
 - Drafting and securing agreement on a document, long or short, which meets the requires of the HWB and key partners
 - Taking the refreshed plan or new strategy through the governance processes of both the CCG and Council
 - Publication and dissemination
 - Producing an agreed partnership action plan which will require ongoing monitoring and updating.

- 3.17 The option to produce a new three-year joint health and wellbeing strategy is recommended. The difference in time and resource pressures between the two options are not significant. The benefits of the opportunity to co-produce priorities with the community and revitalise the HWB's work programme with a new strategy in line with local developments will be potentially greater compared to refreshing Brent Health and Care Plan.

4.0 Financial Implications

- 4.1 There are resource implications for both Brent Council and Brent NHS CCG in terms of officer time and funding of engagement work with the public. The latter is unlikely to be significant and can depend on getting support from partners in kind. Following the HWB's decision a detailed costing can be developed on request.

5.0 Legal Implications

- 5.1 The duty in respect of Joint Health and Wellbeing Strategies is set out in s116A of the Local Government and Public Involvement in Health Act 2007, as amended. In addition, the Health and Social Care Act 2012 places a duty on local authorities and Clinical Commissioning Groups (CCG) to develop a Health and Wellbeing Strategy to take account of, and address the, challenges identified in the Joint Strategic Needs

Assessment (JSNA); and pursuant to the Care Act 2014, the Council has a duty to ensure a clear framework is developed to meet its wellbeing and prevention obligations under the Care Act.

- 5.2 The Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies (Statutory Guidance) 2013 states “*Health and Wellbeing boards will need to decide for themselves when to update or refresh JSNA’s and JHWS’s or undertake a fresh process to ensure that they are able to inform local commissioning plans over time. They do not need to be undertaken from scratch every year; however, boards will need to assure themselves that their evidence-based priorities are up to date to inform the local commissioning plans*”.

6.0 Equality Implications

- 6.1 Health and Wellbeing Boards must also meet the Public Sector Equality Duty under the Equality Act 2010. S149 of the Equality Act 2019 provides that the Health and Wellbeing Board must, in the exercise of its functions, have due regard to the need to:
- a) eliminate discrimination, harassment and victimisation
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 6.2 The Public Sector Equality Duty covers the following nine protected characteristics: age, disability, marriage and civil partnership, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 6.3 The Statutory Guidance states “*this is not just about how the community is involved but includes consideration of the experiences and the needs of people with relevant protected equality characteristics (as well as considering other groups identified as vulnerable in JSNA’s) and the effects decisions have, or are likely to have on their health and wellbeing*”.

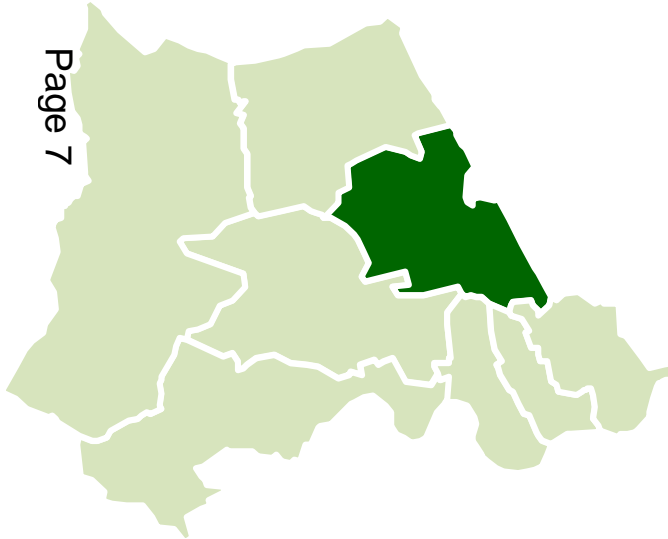
Report sign off:

Phil Porter

Strategic Director, Community Wellbeing

Brent Health and Care Plan

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**Our five year plan for
Brent residents to be well and live
well**

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4. What to expect by 2021 for Brent

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5. What we are doing this year and from 2017/18 onwards in light of North West London priorities

Summary of how we will link our activities in Brent to the North West London STP

6. The Brent Health and Care Plan 2017/18 Big Ticket items

Summary of the 'Big Ticket' items in the Brent Health and Care Plan, the initiatives we will build on or develop in Brent and the impact these will have for Brent patients, carers and residents

Introduction

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NHS England has published the Five Year Forward View (FYFV) setting out a vision for the future of the NHS. Local areas have been asked to develop a Sustainability and Transformation Plan (STP). This plan will help local organisations to deliver better health and care that will improve people's health and wellbeing and the quality of care which people receive. It will also help local areas to reduce the gap between available funding and actual cost of meeting demand. **This is a new approach across health and social care to ensure that over the next five years the focus is on the needs of the place where people live, rather than individual organisations.**

Brent is part of the North West London STP, which has nine priority areas. In Brent we have also developed our own proposals called the Brent Health and Care plan, which takes into account the priority areas of North West London, but also takes into account the needs of Brent residents. The Brent plan offers a five year action plan that will address the **triple aims of:**

1. Improving health and wellbeing
2. Improving quality of services
3. Meeting financial challenges

The local picture in Brent



The Brent Health and Care plan aims to bring together providers and commissioners of care (both Council and NHS), our vibrant voluntary and community sector, private sector to deliver a genuine plan for Brent through ongoing engagement with our residents.

328,500 Brent residents¹

369,666 GP-registered population²

£405,569k - 2016/17 CCG allocation³

66 GP Practices

14 Nursing Homes

Key Provider Trusts:

- London Northwest Healthcare NHS Trust
- Central and North West London NHS Foundation Trust
- Brent Community and Voluntary Sector

¹: GLA Population Estimate 2016

²: HSCIC, April 2016

³: Excludes running costs and carry forward surplus from 15/16

BRENT Health and Care Plan builds on evidence and expertise set out in the following plans

- NWL STP
- Brent Health Wellbeing Strategy (2015-2017)
- Brent Better Care Fund Plan (2016/17)
- Brent Joint Strategic Needs Assessment
- Brent CCG Portfolio Roadmap (16/17 – 18/19)
- Public Health Service Plans
- Brent Children & Young People Mental Health Transformation Plan
- Brent Children's Trust programme
- Brent Council Outcomes-Based Reviews (Employment and Housing)

Our residents deserve health and care services that are designed to meet their needs. Engagement with Brent residents and partners has been central to the development of the Health and Care Plan. We will continue to engage with local people on how services are commissioned and delivered.

The financial situation in Brent

Approximately **£12m** of net savings are required **each year** to close the CCG financial gap over the next five years.

Council will have a **£17m gap by 2020** without applying the Council tax precept and **£9m** if Brent applied the precept year on year up to 2020.

London North West Healthcare Trust (LNWHT) provides services to three key CCGs, and therefore only a proportion of its 'gap' is directly associated with Brent; similarly with CNWL (Central & North West London Trust).

Brent's financial gap by NHS organisation

Organisation	'Do nothing' (including no 16/17 savings) by 2020/21	16/17 savings plans (CIP/QIPP)	Remaining financial challenge
LNWHT	£191.8m	£34.4m	£157.4m
CNWL	£52.9m	£14m	£38.9m
Brent CCG	£58.6m	£9.3m	£49.3m

Understanding our population – the health and wellbeing of Brent

A Health and Wellbeing Strategy only works if it is based on a proper understanding of people's needs. Thanks to an effective partnership between Brent Council and Clinical Commissioning Group and a comprehensive needs assessment, we know for example, that:

- Pressures relating to housing or employment have a negative impact on mental health
- Level of childhood obesity in Brent is higher than the national average
- Less than half of our residents are getting enough exercise
- Use of tobacco is still too high despite many people being aware of the risks

- Age-related mental illness is increasing
- People with long term and serious mental health conditions have lower life expectancies, than they should be
- Social isolation and loneliness is having a detrimental effect on health and wellbeing
- Too many people feel isolated
- Type 2 diabetes is on the rise
- Lack of widespread and enough support for people to manage Long-Term Conditions.

Improve Mental Well-Being



- The percentage of people with depression, learning difficulties, mental health issues or other nervous disorders in employment is **23%** - lower than the England rate (36%)

Address Childhood Obesity



- **38%** of children aged 10-11 are classified as overweight or obese

Reduce Smoking Prevalence



- The estimated smoking prevalence in Brent is **17%** or **14%** smoking prevalence amongst 18+

Increase Physical Activity



- Over half the adult population in Brent (53%) take part in no moderate intensity sport or physical activity for at least 30 minutes duration a week

Help Improve People's Mental Health



- The prevalence of severe and enduring mental illness in Brent is **1.1%** of the population
- In 2014, an estimated 33,959 people aged 18 to 64 years were thought to have a common mental health disorder

Reduce Social Isolation



- In 2013/14, only **39%** of adult social care users in Brent reported that they have as much social contact as they would like

Address Incidence of Diabetes



- By 2030, it is estimated that nearly **15%** of people aged 16 or over in Brent will have diabetes compared to the predicted England average of about 9%

Support to Manage LTCs



- Only **56%** of people with a long-term condition feel supported to manage their condition

What to expect by 2021 for Brent

Over the next five years we will ensure:

Health & Wellbeing

- Wellbeing is seen in its widest sense. It is not just about healthcare but wider factors such as employment, housing, and lifestyle. Brent will be a Dementia-Friendly Borough
- Mental and physical health are given equal importance and will be considered holistically at the point of care
- Early intervention and prevention are central to everything we do
- People are better able to self-care and make decisions for themselves concerning their health and wellbeing
- Services people need are as joined up as possible.

Care & Quality

- There is a highly skilled workforce that continues to promote local employment. The workforce is joined up across health and care. Our staff will have the tools and support they need to deliver the coordinated care that people deserve
- Providers are jointly accountable for quality and outcomes of care. The quality and outcomes of care for people with multiple long term conditions will improve
- Higher clinical standards and more efficient delivery of care are being achieved. Central Middlesex Hospital for example has huge potential and we propose to redesign it as a centre of acute care excellence
- Provision of early interventions is prioritised for people with mental health problems and reliance on inpatient care is reduced
- An increasingly integrated approach is being taken to commissioning (and providing) services locally, including nursing care homes, which will improve quality
- The services older residents depend on are harmonised and unified. They will get high quality of care and support as and when they need it and will help them to remain active and independent as long as possible.

Finance & Efficiency

- Providers will be working more efficiently and effectively to meet the growing demand on services. National and international best practice is used to reduce the financial gap
- Reduced demand for acute and residential care through a range of initiatives. We will do this through early intervention and prevention; effective case management of people with complex needs; reduced variation in the management of Long Term Conditions (including [Right Care](#)); enhanced care in Nursing Homes; implementation of 'discharge to assess' models; and achieving a unified Frailty and Older People's Care model
- Providers will achieve and maintain financial balance by implementing internal financial recovery plans, including the redesign of Central Middlesex Hospital, reductions in length of stay and reduced reliance on agency staff
- A strong delivery focus to implement the Brent annual priorities on time.

What we are doing this year (2016/17) and in 2017/18 onwards for the NW London priorities

Conversations are ongoing about post 2016/17 plans against the nine priorities – plans are currently being developed with partners

Prevention	1. Helping people STAY well, in mind and body.	We're helping people take better care of themselves. We're making sure that every encounter residents have with healthcare services is a positive and effective experience. We're also getting serious about prevention – this includes tackling social isolation; reducing the number of people taking up smoking; helping those who already smoke to quit; and, encouraging people to drink less alcohol.
	2. Helping those disproportionately affected by cancer, heart disease and respiratory illness	We're working with partners across the capital to take forward the London-wide five year commissioning strategy and the 2016/17 North West London improvement plan for cancer services. We're also helping residents get active and are working with partners to develop an air quality action plan.
	3. Making the management of long term conditions far more consistent	We're working to get more people on to Personal Health Budgets. We're giving people with conditions such as diabetes, muscular skeletal disorders, cancer, and respiratory problems, confidence that they have access to consistently high quality services.
Integration	4. Making sure residents can access the services they need at a place and time that best suits them	We're transforming Central Middlesex Hospital into a 21st century centre of excellence. We're making sure that triage and assessments are clinician-led, and are getting to work implementing agreed plans to improve primary care facilities.
	5. Helping those in the latter stages of their lives live with dignity	We're putting 'lead providers' in place and have them taking responsibility for the delivery of all services across the care pathway. We're providing a far better standard of care and quality of service for people approaching the end of their lives.
	6. Improve life expectancy for those with serious and long term mental health needs	We're getting proactive and are making sure that those in need have the care and support necessary for a full and swift recovery. We're completing the implementation of our mental health road map, as well as the North West London 'Like Minded' strategy. We need to do much better for people with mental health illness. We have to reduce reliance on inpatient care. We have to improve support for older people with serious mental health illnesses. And we're working to include mental health needs in the Individual Funding Request Process.
	7. Protect the mental and physical health and wellbeing of children and young people across the borough	We're implementing our Child Obesity Strategy. And we'll continue to implement the Brent Children's Trust transformation programme.
Technology & Innovation	8. Universal access to a consistently high standard of care	We're working toward government plans for a nation-wide seven day hospital service . We're carrying out a proper evaluation of our social care provision. And are designing and implementation a single discharge process across health and social care services for the whole of the West London Alliance (WLA). We're also trying to ensure far better coordination with local police and provide them with 24/7 access to essential services such as those for mental health.
	9. Improve consistency in patient outcomes and experience regardless of the day of the week that services are accessed.	<ul style="list-style-type: none"> • Achieve seven day hospital services with the same standards of care, seven days a week over the next two years • Evaluate the impact of existing seven day social care provision across the WLA and across health and social care • Design single discharge process across the WLA and across health and social care • Improve 24/7 single point of access and rapid response for Mental Health through new links to police.

Brent Health and Care Plan Big Ticket Items 2016/17 and 17/18

Agreed by the Health and Wellbeing Board.

There are six Big Ticket Items that will have the biggest impact locally on the triple aims.

The Big Ticket Items can only be achieved as a partnership among all agencies responsible for health in Brent working together.

Big Ticket Item 1	Description	Impact
<p>Joined-up services helping residents get well and stay well-prevention</p> <p>Page 14</p>	<p>We will help people get well and stay well. We will also offer advice on staying well in the first place. We need to make sure that these services are working together and on the same page. That way, we can offer the high quality that residents expect and deserve, and get even better value for money, which is increasingly essential in the face of on going government cuts.</p>	<ul style="list-style-type: none">• Improve outcomes by developing and targeting services that prevent identified ill-health issues in Brent• Reducing alcohol-related admissions• Supporting people to maintain and improve their health and wellbeing through social isolation initiative, reducing admissions and ambulance call outs• Offer those at high risk of diabetes intensive support to reduce their modifiable risk (primarily through increased physical activity and improved nutrition).• The above initiatives have demonstrable savings and can evidence improved wellbeing, the details of which will be developed through the prevention work stream

Big Ticket Item 2	Description	Impact
<p>New Models of Care- Greater access to more effective services</p> <p>Page 15</p>	<p>We're going to make it easier for people to get an appointment with their GP. This will mean that the patient and their GP can focus on working together to get well and stay well. To make this work, we'll need to help our GP practices build better partnerships with one another.</p> <p>We'll also need to support this kind of coordinated cooperation across the spectrum of healthcare service providers. By supporting this kind of enhanced integration, patients can expect far better continuity of care and will find that the services they need are better equipped to properly understand and address their needs. As well as reducing unnecessary hospital visits and admissions this will greatly improve the 'resident's experience' and, most importantly, help make people feel genuinely better.</p>	<ul style="list-style-type: none"> • Proactive care through planning, prevention and integrated care • Continuity of care through relationships between the patient their carers and their own GP • Care at appropriate time and in the appropriate setting - out of hospital where possible • Reduce inappropriate hospital admissions for people with long term conditions • Improved wellbeing and service user satisfaction.

Brent Big Ticket Items – 2016/17 and 2017/18

Big Ticket Item 3	Description	Impact
<p>Joining up Older People's services</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 16</p>	<p>We're going to help our older residents live more active, engaged, and independent lives, with dignity guaranteed.</p> <p>As we get older, we need more support to stay healthy. We want to make sure that the whole of Brent's healthcare system is geared up to provide the best possible care as soon as a need arises. We want to give our residents the peace of mind of knowing that Brent's hospitals and clinics are the best in the world. But we also want to help people stay healthy in order to keep visits or admissions to an absolute minimum.</p> <p>As well as reducing pressure on services such as A&E, this approach will help keep many of our elderly residents happier and healthier for longer.</p>	<ul style="list-style-type: none"> • Reduction in A&E conversion rate (Emergency admission/A&E attendance) • Reduction in hospital admissions >48 hours length of stay (LoS) for people over 65 • Reduced LoS for people over 65 in hospitals • Reduction in readmissions to hospital for people over 65 • Reduction in A&E attendances for people over 65 • Reduction in delayed transfers of care (DTOCs) • A reduction in adult social care and CHC spend on care packages • Increased staff satisfaction • Improved experience of people over 65 using non elective services.

Brent Big Ticket Items – 2016/17 and 2017/18

Big Ticket Item 4	Description	Impact
<p>Improve outcomes for people with mental health illness</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 17</p>	<p>We need to better support the needs of children, young people and adults in Brent who are struggling with their mental health and wellbeing and do better for those of our older residents who are at risk of, or suffering with, degenerative conditions such as dementia. We also need to promote a far higher societal understanding and awareness of mental health issues, challenging stigma and confronting prejudicial behaviour.</p> <p>We have to transform all of these services. We have to get better at identifying needs sooner and then be ready to intervene as quickly as possible. As well as being unfair on the patient, relying on inpatient or crisis-related care is nowhere near as effective as early intervention.</p> <p>This is an area where we can and must do better. It'll take a team effort, pulling together every resource at the disposal of everyone involved which, in addition to the council and healthcare providers, also includes our schools, local police teams, and the wealth of community groups that we're fortunate to have in Brent.</p>	<ul style="list-style-type: none"> • Reduction in inpatient and residential care placements • Reduce length of stay for acute mental health beds • Increase provision of health checks • Increased independent living and people with mental health needs supported into education and employment • Reduction in tier 4 placements • Wider access to peer support and self referral services by children and young people.

Big Ticket Item 5	Description	Impact
<p>Transforming Care – Supporting People with learning disability</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 18</p>	<p>We're going to make sure that the services and support that people with learning disabilities rely upon are better coordinated, more fully integrated with one another and with other health and social care services, and of a higher, more consistent quality across the borough.</p> <p>We will continue to implement the recommendations of the Transforming Care and Commissioning Steering Group's 2014 report on the Winterbourne View scandal.</p> <p>We'll help more people get the most out of Personal Health Budgets and direct payments. And we'll help reduce the need for acute and inpatient care and make sure that they can get as much of the support they need from their GP and in the community.</p> <p>This will result in a better standard of care, greater opportunities for more independent living, including increased access to employment and educational opportunities, and reduced pressure on more complex and expensive services.</p>	<ul style="list-style-type: none"> • Reduce the number of people in inpatient units and move people into supported living and or mainstream housing as appropriate • Reducing care management budget through supporting people in community settings • Enhanced take up of personal budgets • Increase access to employment and education opportunities • Improved quality of care and wellbeing.

Brent Big Ticket Items – 2016/17 and 2017/18

Big Ticket Item 6	Description	Impact
<p>Central Middlesex Hospital (CMH) a centre of excellence</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 19</p>	<p>We're going to transform Central Middlesex Hospital into a 21st century centre of excellence, dedicated to improving the health and wellbeing of Brent's residents.</p> <p>The CMH of the future will focus on early intervention and prevention. It will take a holistic view as the best course of care and support, giving contributory factors such as employment and housing the consideration they deserve.</p> <p>We also want to make sure that local people have the chance to build and develop the skills and experience needed to secure good quality jobs in Brent's health and care economy.</p>	<ul style="list-style-type: none"> • To improve wider determinants of health and wellbeing, including employment • To increase dementia-friendliness of sites, services and support • To enable holistic approaches to care and support • To have a significant impact on health prevention, health promotion, self-care and the beneficial effect of the not-for-profit sector • To encourage flexible skills development and deployment, with a focus on local Brent residents • To develop a centre of excellence • To expand provision of early interventions for people with mental health problems • To support unified frailty and older people's car • To reduce acute and residential care demand.

Conclusion

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The Brent Health and Care Plan is our plan for Brent residents to be well and live well.

It represents Brent's overarching five year strategy and implementation plans to improve the health and wellbeing of Brent residents, the quality of services and care provided, and to address financial challenges to meet the growing demand.

The Brent Health and Care Plan builds on existing plans, plus new initiatives where gaps in existing plans have been identified. New initiatives will be subject to further engagement with Brent residents.

The Brent Health and Care Plan provides:

- A clear shared view of the big priorities for the next five years, particularly the Brent 'big ticket' items
- A mechanism for the CCG and Council to track the delivery of Brent's key programmes
- A foundation for developing plans for future years beyond 2017/18