

 	<p align="center">Health and Wellbeing Board 6 April 2021</p>
	<p align="center">Report from Strategic Director of Community Wellbeing</p>
<p align="center">Covid-19: Summary of partner responses to the pandemic</p>	

Wards Affected:	All
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:	None
Background Papers:	None
Contact Officer(s): <small>(Name, Title, Contact Details)</small>	Angela d’Urso, Strategic Partnerships Manager, angela.d’urso@brent.gov.uk

1.0 Purpose of the Report

- 1.1 To summarise the responses of some of the Brent Health and Wellbeing Board partners to the Covid-19 pandemic. Verbal updates will also be provided from partners at the next Board meeting.
- 1.2 This report should be considered alongside the Brent Local Outbreak Control Plan.

2.0 Recommendation(s)

- 2.1 The Board notes the information in this paper as basis for further discussion.

3.0 Detail

3.1 *CNWL Foundation Trust update*

The pandemic response from mental health services in Brent was based on a series of principles to support communities, partners and staff in the face of Covid-19. Some of these critical areas and actions:

- Ensured proactive work for patients in the community to reduce crisis with an emphasis on face-to-face contact supported by IPC and risk assessment. This included proactive work with higher intensity users or those with high risk of relapse

- Focused support to acute colleagues enabling their bed capacity and A&E avoidance – this included setting up a Brent assessment lounge at Park Royal and running 7-days a week bed capacity calls
- All services remained operational, however a limited number slightly reduced capacity, for example some reduced capacity in memory services without compromising core functions, to divert staff to priority areas and cover absence where required
- Continued focus on staff wellbeing and providing a range of offers to support staff resilience and wellbeing
- Check in and chat joined the teams - OPHA and CMHT
- Targeted partnership work with communities significantly impacted by Covid in Church End and Alperton has started and will continue, including:
 - Developed culturally appropriate communication material to raise awareness of Covid and mental health service available to support
 - Co-developed 'community connector' roles to work as positive role models raising awareness and sharing key information that will enable the community to make positive choices. Roles recruited from the local community, raised awareness of roles – 2 people in post – all posts now offered
 - Donated 500 masks to the community. Sourced material for face covering and partnered with local tailors to make the face coverings. Community leader led on the distribution
 - Exec and other staff had various meetings and engagement events with Faith leaders and congregations where they discussed challenges faced by the community, raised awareness of services offered
 - Delivered IPC (Infection, prevention and control) training sessions/ workshops to educate on infection control within Covid context
 - Good Thinking podcast on Friday 12 March; aim to discuss young people in Brent, anxiety/worry, sleep, easing of lockdown etc. This will be shared using various routes.
 - Partnered with SAAFI (Somali Advice and Forum of Information) to support people who have been affected by Covid with non-medical issues to access a range of community-based services, through signposting and one to one support, voluntary sector organisations, Council, carers and community leaders.
 - Linked with Crisis (homeless charity) around mental health and wellbeing delivery
 - Community Mapping – focussed collecting information on community make-up (demographics, assets) to tailor recruitment to meet local needs
 - Evaluated Co-producing courses with Recovery College

3.2 *London NW University Healthcare Trust update*

The evolution of the pandemic and significant milestones in our journey so far.

- Lessons learned from the first wave have been incorporated into both our approach to the recovery of services and our response to Covid. Areas that have proved particularly important in this regard include: digital working, use of the independent sector and the new governance arrangements that were introduced. In particular our internal Gold Command structure and the corresponding mutual aid arrangements put in place by the sector.
- Wave two reversed the substantial progress made, returning services to pre-Covid capacity. Although, in contrast to the first wave, we were able to maintain access to planned care for urgent cases on our waiting lists.
- The spring recovery plan is still being finalised. A significant challenge facing the organisation is to balance a rapid recovery with both the requirement to maintain a greater reserve level of critical care capacity, and to ensure we enable staff to rest and recuperate after an extremely demanding year.
- We anticipate that the high levels of collaboration established so successfully across NW London will continue. Joint working will very much dominate the future and we expect LNWH to continue to play a significant role both at the sector level – for example as the host of one of the main High Volume Low Complexity surgical hubs at Central Middlesex Hospital – and locally. For example, working with our local partners to establish post-Covid services and develop other innovations services, such as using the remote monitoring model to redesign the support available to patients with long-term conditions.

3.3. Verbal updates will be provided at the meeting, and the following report offers the council's update.

4.0 Financial Implications

4.1 None arising

5.0 Legal Implications

5.1 None arising

Report sign-off:

Phil Porter
Strategic Director Community Wellbeing